

**Prisons &
Probation**

Ombudsman
Independent Investigations

Independent investigation into the death of Mr Raymond Batchelor, a prisoner at HMP Dartmoor, on 22 December 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 Raymond Batchelor died from COVID-19 on 22 December 2020 at HMP Dartmoor. He was 76 years old. I offer my condolences to Mr Batchelor's family and friends.
4. The clinical reviewer concluded that the clinical care Mr Batchelor received at Dartmoor was equivalent to that he could have expected to receive in the community. We share his concern that positive COVID-19 test results were only recorded centrally and not in prisoners' medical records.
5. Mr Batchelor died eight days after he tested positive for COVID-19. It is likely that he contracted the infection at Dartmoor, as he had not left the prison within the accepted incubation period. He had been dead for some time before he was found and there is no evidence of a welfare check that morning.

Recommendations

- The Head of Healthcare should ensure that the results of positive COVID-19 tests are recorded in prisoners' medical records.
- The Governor should ensure that staff check the welfare of every prisoner each morning.

The Investigation Process

6. NHS England commissioned an independent clinical reviewer to review Mr Batchelor's clinical care at HMP Dartmoor.
7. The PPO investigator investigated the non-clinical issues, including aspects of the prison's response to COVID-19 and shielding prisoners; Mr Batchelor's location; the security arrangements for his journey and admission to hospital; liaison with his family; and whether early release was considered.
8. The PPO family liaison officer wrote to a friend of Mr Batchelor, who had agreed to act as next of kin, to explain the investigation. She did not reply.
9. We shared our initial report with HM Prison and Probation Service (HMPPS). They found a factual inaccuracy, which has been amended. HMPPS provided an action plan which is annexed to this report.

Previous deaths at HMP Dartmoor

10. Mr Batchelor was the ninth prisoner at Dartmoor, to die since December 2018. Of the previous deaths, five were from natural causes and three were self-inflicted. There has since been a further death. There are no similarities between the findings in this investigation and those previously investigated. There have been no other COVID-19 related deaths at Dartmoor.

COVID-19 (coronavirus)

11. 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.
12. 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 are having 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; 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.)
13. In response to the initial pandemic outbreak, HM Prison and Probation Service (HMPPS) introduced several measures to try and contain the outbreak - to be implemented at local level, depending on the needs of individual prisons. (An outbreak is defined as two or more prisoners, or staff, who are clinically suspected, or have tested positive for COVID-19 within 14 days.) A key strategy is 'compartmentalisation' to cohort and protect prisoners at high and moderate risk; isolate those who are symptomatic; and separate newly-arrived prisoners from the main population. Other measures include social distancing and the use of personal protective equipment (PPE).

Key Events

14. Mr Raymond Batchelor was convicted of sexual offences. On 5 May 2017, he was sentenced to four years imprisonment and sent to HMP Exeter. On 9 June, he transferred to HMP Dartmoor.
15. At a health screen, Mr Batchelor reported bowel issues, but was otherwise fit and well. He later developed high blood pressure and high cholesterol, for which he was prescribed medication.
16. On 8 May 2020, Mr Batchelor was advised that he was at moderate risk of complications if he contracted COVID-19, mainly due to his age.
17. Following an outbreak of COVID-19 at Dartmoor, there was mass screening of prisoners. On 14 December, it was noted that Mr Batchelor had tested positive and he was placed in protective isolation. Although this was recorded in NOMIS (his personal prison records), there was no reference to it in his medical records, as the test results were only held centrally at that time. (The dates subsequently reported by healthcare staff conflict with the NOMIS entry, stating a swab was taken on 15 December, with a positive result on 17 December.) Mr Batchelor did not show any symptoms of COVID-19, so no welfare checks were conducted in line with healthcare policy at that time.
18. Just before 11.30am on 22 December, an officer opened Mr Batchelor's door to deliver his lunch. He saw Mr Batchelor lying on his bed, unresponsive. The officer radioed a code blue (a medical emergency code which indicates a prisoner has breathing difficulties or is unconscious) and a nurse attended. They did not attempt cardiopulmonary resuscitation, as there were signs of rigor mortis and it was clear that Mr Batchelor was dead. A prison GP certified the death at 12.02pm.
19. Shortly afterwards, the prison's family liaison officer tried to contact Mr Batchelor's listed next of kin and was told that she had died three weeks earlier. She then checked Mr Batchelor's phone call history and informed the last person he had called, a family friend. Mr Batchelor's friend agreed to act as next of kin and the family liaison officer kept in touch with her over the following weeks.
20. A prison manager debriefed the prison officer and nurse involved in the emergency response and offered support. Notices were issued to prisoners and staff to inform them of Mr Batchelor's death and remind them of the avenues of support.
21. In line with national policy, the prison arranged and paid for Mr Batchelor's funeral, which was held on 10 May.

Post-mortem examination

22. A post-mortem examination took place of Mr Batchelor's outer body only. The pathologist concluded that, on the balance of probabilities, Mr Batchelor's death was due to COVID-19, as there was no apparent trauma.

Findings

Clinical Findings

Management of Mr Batchelor's risk and monitoring his COVID-19 infection

23. As Mr Batchelor was at moderate risk of complications from COVID-19, he was not in the category of prisoners expected to shield in the early months of the pandemic. During the outbreak at Dartmoor in December 2020, around 150 prisoners were positive, so there was a restricted regime and the prison was effectively in lockdown.
24. When Mr Batchelor contracted COVID-19, he was asymptomatic. The local healthcare policy at the time was that only those prisoners with symptoms routinely received wellbeing checks. This has since changed and staff now calculate a COVID-19 age for prisoners who test positive, taking account of risk factors such as chronological age, gender, ethnicity and health conditions. Under the new policy, Mr Batchelor would have received twice daily clinical observations. The clinical reviewer considers that the former policy did not impact adversely on Mr Batchelor.
25. The clinical reviewer concluded that Mr Batchelor's care was equivalent to that he could have expected to receive in the community. However, he was concerned that the results of COVID-19 tests were recorded centrally but not in prisoners' medical records. We understand there has been a recent change in policy. However, we recommend:

The Head of Healthcare should ensure that the results of positive COVID-19 tests are recorded in prisoners' medical records.

26. It is likely that Mr Batchelor contracted COVID-19 in Dartmoor, as he had not left the prison during the pandemic.

Welfare checks

27. Prison Service Instruction (PSI) 75/2011, *Residential Services*, says:

“The appropriate arrangements will depend on the local regime, but there need to be clearly understood systems in place for staff to assure themselves of the well-being of prisoners during or shortly after unlock. For example, if a prisoner is expected to leave their cell for an activity shortly after being unlocked, then it will be sufficient for there to be a check on any prisoner who does not do so. Where prisoners are not necessarily expected to leave their cell, staff will need to check on their well-being, for example by obtaining a response during the unlock process.”
28. Mr Batchelor was last seen alive during the early morning roll check at around 5.40am. He had been dead for some time when he was found at 11.28am.
29. Due to the COVID-19 outbreak, prisoners were not unlocked for regime activities and breakfast items had been delivered to cells the previous evening. Wing staff were supposed to carry out welfare checks of prisoners at around 8.00 to 8.30am,

but there is no evidence that Mr Batchelor was checked. A prison manager told the investigator they have since implemented a new process in which wing staff sign the wing diary to confirm that the welfare checks have been completed and the outcome is reported to the control room. We recommend:

The Governor should ensure that staff check the welfare of every prisoner each morning.

**Sue McAllister CB
Prisons and Probation Ombudsman**

August 2021

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