

**Prisons &
Probation**

Ombudsman
Independent Investigations

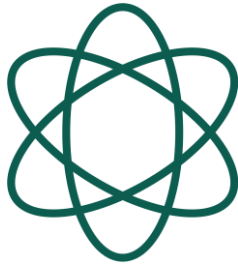
Independent investigation into the death of Mr Andrew Priestley, on 3 April 2022, following his release from HMP Hindley

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

OGI

© Crown copyright, 2023

This report is licensed under the terms of the Open Government Licence v3.0. To view this licence, visit nationalarchives.gov.uk/doc/open-government-licence/version/3

Where we have identified any third-party copyright information you will need to obtain permission from the copyright holders concerned.

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. Since 6 September 2021, the PPO has been investigating post-release deaths that occur within 14 days of a person's release from prison.
3. We carry out investigations to understand what happened and identify how the organisations whose actions we oversee can improve their work in the future.
4. Mr Andrew Priestley died from cardiorespiratory failure (a failure in his breathing and heart function) caused by heart disease and the toxic effects of methadone, morphine, pregabalin and cocaine on 3 April 2022, following his release from HMP Hindley on 24 March. He was 39 years old. I offer my condolences to those who knew him.
5. Mr Priestley was prescribed methadone (a heroin substitute) but was not prescribed morphine (an opioid painkiller) or pregabalin (used to treat epilepsy, nerve pain and anxiety but widely abused as it can increase the euphoric effects of opioid drugs). He must have obtained the morphine, pregabalin and cocaine illicitly.
6. We found that the Resettlement Team at Hindley and the Probation Service planned well for Mr Priestley's release, and that they made appropriate referrals to the community substance misuse service to provide support to Mr Priestley when he was released.
7. We make no recommendations.

The Investigation Process

8. The PPO investigator obtained copies of relevant extracts from Mr Priestley's prison and probation records.
9. We informed HM Coroner for Cheshire of the investigation. They gave us the results of the post-mortem examination. We have sent the Coroner a copy of this report.
10. The Ombudsman's family liaison officer contacted Mr Priestley's next of kin, his grandfather, to explain the investigation and to ask if he had any matters he wanted us to consider. He had no questions but asked for a copy of the report.
11. The initial report was shared with Mr Priestley's family. They found no factual inaccuracies.
12. The initial report was shared with Prison Service and the Probation Service. They found no factual inaccuracies.

Background Information

HMP/YOI Hindley

13. HMP/YOI Hindley is a Category C training and resettlement prison holding up to 590 men, including over 100 young adults. Healthcare was provided by Greater Manchester Mental Health NHS Foundation Trust until April 2022, when Spectrum Community Health took over.

Probation Service

14. The Probation Service work with all individuals subject to custodial and community sentences. During a person's imprisonment, they oversee their sentence plan to assist in rehabilitation, as well as prepare reports to advise the Parole Board and have links with local partnerships to whom, where appropriate, they refer people for resettlement services. Post-release, the Probation Service supervises people throughout their licence period and post-sentence supervision.

Key Events

15. Mr Andrew Priestley was remanded in prison custody on 9 September 2021. On 12 October, he was sentenced to 15 months imprisonment for assault, criminal damage, and breaching a restraining order.
16. Mr Priestley had a history of drug use, including crack cocaine and heroin, and was prescribed methadone (a heroin substitute used to treat people with opioid dependency). He was also prescribed an antidepressant (mirtazapine).
17. On 1 November, Mr Priestley was sent to HMP Hindley.
18. On 6 December, Mr Priestley's community offender manager (COM) visited him in prison to discuss his resettlement when he left prison. At that point, she decided that he was not ready for home detention curfew (HDC, an alternative to custody with movement restrictions monitored by an electronic tag), and that an approved premises (a probation hostel) would be a more suitable release address than his existing tenancy.
19. On 20 January 2022, a member of staff from the substance misuse service (SMS) at Hindley, met Mr Priestley and gave him advice on the dangers of overdose as a result of a loss of tolerance to drugs while in prison. They also discussed naloxone with Mr Priestley. A prison officer followed this up on 25 January, and also warned him about the reduction in drug tolerance levels while in prison.
20. In February, the Probation Service decided that Mr Priestley would be suitable for release on HDC. They reassessed his existing tenancy and decided that the risks could be managed if he lived at that address. They thought the accommodation would help provide stability and were satisfied that the subject of the restraining order did not live nearby.
21. On 2 March, Hindley allocated Mr Priestley a resettlement officer, who liaised with his COM about his release from prison. On 15 March, Hindley gave him a discharge pack, with information on support and training in the community.
22. On 23 March, Hindley made appointments for Mr Priestley with a community SMS, Change Grow Live (CGL).
23. On 24 March, Mr Priestley was released from prison. He was given a supply of mirtazapine, and a letter to take to CGL to obtain his methadone prescription. He refused the offer of naloxone as he said that he would no longer use drugs.

Post-release

24. On 24 March, Mr Priestley attended both appointments with CGL and his COM. He then went to his accommodation as arranged for the HDC contractors to fit his tag.
25. Mr Priestley's next appointment with his COM was scheduled for 28 March. However, he failed to attend, and she sent him a warning letter, notifying him that he had breached his licence and that he should return to the probation office for a meeting on Monday 4 April.

26. On 29 March, Mr Priestley telephoned his COM and apologised for missing his appointment the day before. However, he failed to attend his appointment with CGL that day for his personalised assessment. The next day, he had a prearranged medical assessment at CGL. He arrived early and his missed personalised assessment was completed then. As part of his medical assessment, he was screened for drugs and only tested positive for methadone, which he was prescribed. Mr Priestley had a follow-up appointment with his personal CGL worker on 1 April, but he failed to attend.

Circumstances of Mr Priestley's death

27. On 3 April, Mr Priestley's family became concerned when he did not answer his telephone. They went to his address but could not get a response or gain entry to his flat. They called the police, who made a forcible entry as his door was locked from the inside. They found Mr Priestley slumped on his sofa. He was already dead, and resuscitation was not attempted. There was drug paraphernalia in the room, but no illicit drugs were found.

Post-mortem report

28. The post-mortem report concluded that Mr Priestley died of cardiorespiratory failure (a failure in his breathing and heart function), which had been caused by ischaemic heart disease due to coronary artery atheroma (a restriction in the blood supply to the heart due to blockages in the arteries from a build-up of fatty deposits), resolving pneumonia (a lung infection no longer in its active stage) and combined toxicity of methadone, morphine, pregabalin and cocaine.

Findings

29. Mr Priestley was prescribed methadone but was not prescribed morphine (an opiate painkiller) or pregabalin (used to treat epilepsy, nerve pain and anxiety but also widely abused as it can increase the euphoric effects of other drugs such as opiates). He must have obtained these illicitly, along with the cocaine.
30. We are satisfied that there was appropriate planning for Mr Priestley's release and that the relevant referrals were made to services that could support him. He had accommodation on release, and he was referred to a community substance misuse service. He was also offered naloxone, but he declined it.
31. We make no recommendations.

Kimberley Bingham
Acting Prisons and Probation Ombudsman

October 2022

**Prisons &
Probation**

Ombudsman
Independent Investigations

Third Floor, 10 South Colonnade
Canary Wharf, London E14 4PU

Email: mail@ppo.gov.uk
Web: www.ppo.gov.uk

T | 020 7633 4100