

**Prisons &
Probation**

Ombudsman
Independent Investigations

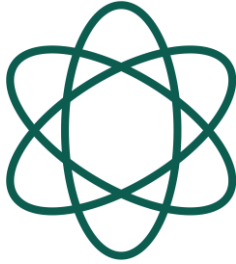
Independent investigation into the death of Mr Graham Sawyer, a prisoner at HMP Bure, on 26 September 2022

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 Graham Sawyer died of respiratory failure in hospital on 26 September 2022, while a prisoner at HMP Bure. He was 75 years old. We offer our condolences to Mr Sawyer's family and friends.
4. The clinical reviewer concluded that the clinical care Mr Sawyer received at Bure was equivalent to that which he could have expected to receive in the community. She makes four recommendations for the Head of Healthcare, to improve areas of clinical practice. The learning is not linked to Mr Sawyer's cause of death but should be addressed to improve future care.
5. When Mr Sawyer was breathless and requiring emergency care, the prison manager did not call a code blue emergency code. He made a direct request for an ambulance, to the control room. This did not impact on the response to Mr Sawyer, but failure to follow the procedure might have an impact on future care. We encourage the Governor to remind staff of their responsibilities to use medical codes in the event of an emergency.

The Investigation Process

6. NHS England commissioned an independent clinical reviewer to review Mr Sawyer's clinical care at Bure.
7. The PPO investigator investigated the non-clinical issues relating to Mr Sawyer's care, including his location, the security arrangements for his hospital escorts and liaison with his next of kin.
8. The PPO family liaison officer wrote to Mr Sawyer's next of kin, to explain the investigation and to ask if they had any matters they wanted us to consider. They did not respond.
9. The initial report was shared with HM Prison and Probation Service (HMPPS). HMPPS pointed out a factual inaccuracy and this report has been amended accordingly.

Previous deaths at HMP Bure

10. Mr Sawyer was the eighth prisoner to die at Bure since September 2020. All of the previous deaths were from natural causes. There are no similarities between our findings in the investigation into Mr Sawyer's death and our investigation findings for the previous deaths.

Key Events

11. On 27 January, Mr Sawyer was sentenced to 22 years imprisonment for sexual offences. On 12 April 2019, Mr Sawyer transferred to HMP Bure.
12. At Mr Sawyer's initial healthcare screenings, healthcare staff recorded several long-term medical conditions including reduced mobility, asthma, and chronic obstructive pulmonary disease (COPD). They also recorded that the GP at Highdown was investigating Mr Sawyer's recent unexplained weight loss and breathing difficulties. Mr Sawyer's health needs were managed based on individual care plans.
13. On 17 August 2022, healthcare staff recorded concerns about Mr Sawyer's breathing and low blood pressure and asked the prison GP to complete an assessment. The GP recorded that Mr Sawyer had anxiety in addition to his existing breathing problems. He changed Mr Sawyer's blood pressure medication and gave him a spacer (a piece of equipment which makes it easier to inhale asthma medication).
14. On 18 August, Mr Sawyer attended an asthma clinic. He reported that he was experiencing breathlessness on a daily basis. The asthma nurse noted that Mr Sawyer had an appointment with the respiratory department in less than four weeks.
15. On 26 August, healthcare staff took Mr Sawyer's blood pressure. Mr Sawyer reported that he was "feeling rubbish". His oxygen saturation levels (the amount of oxygen in the blood) were low but after five minutes of sitting, recovered to a normal level for someone with COPD. Healthcare staff gave Mr Sawyer a pulse oximeter to enable him to take his own oxygen saturation levels and asked him to report to staff if they became too low. By the afternoon, Mr Sawyer's oxygen saturation levels were not improving, and the GP requested that Mr Sawyer be taken to A&E in a taxi. He was treated in hospital until 16 September, when he returned to Bure.
16. On 21 September, a GP took Mr Sawyer's observations and recorded that his oxygen saturation levels were low but recovered to normal for someone with COPD after gentle movement. The GP advised Mr Sawyer to make gentle movements when his oxygen saturation levels were low and referred him to an occupational therapist (a healthcare professional who helps patients manage practical tasks).

Events of 26 September

17. At 3.18am on 26 September, Mr Sawyer rang his cell bell and an Operational Support Grade (OSG) answered. Mr Sawyer told the OSG that he needed an ambulance. The OSG radioed the Custodial Manager (CM) to let him know about Mr Sawyer's request. He asked Mr Sawyer what was wrong and noticed that he was very breathless.
18. Soon after, the CM arrived at Mr Sawyer's cell door and asked the control room to call an ambulance.

19. The control room reported that an ambulance would not be available for several hours. The CM arranged for officers to monitor Mr Sawyer until either the ambulance arrived, or healthcare started their shift in the morning.
20. At 7.30am, the pharmacy technician started their shift and went to Mr Sawyer's cell. She recorded that Mr Sawyer was short of breath and that his oxygen saturation levels were extremely low. She gave him oxygen and his saturation levels improved but were still low. She asked the control room to update the ambulance service on the severity of Mr Sawyer's condition.
21. At 7.50am, a senior nurse started her shift and went to Mr Sawyer's cell. She recorded that Mr Sawyer was sweating, that his blood sugar was high, and that he possibly had sepsis (an extreme response to an infection, which is a life-threatening medical emergency). She asked the control room to update the ambulance service with the observation results.
22. At 8.39am, paramedics arrived and took Mr Sawyer to hospital.
23. At 1.42pm, Mr Sawyer died. Bure assigned a family liaison officer, who informed Mr Sawyer's next of kin.

Post-mortem report

24. The coroner accepted the cause of death provided by a hospital doctor and no post-mortem examination was carried out. The doctor gave Mr Sawyer's cause of death as acute type II respiratory failure caused by severe emphysema (a lung condition caused by lung damage). Bronchiectasis (build up of excess mucus in the lungs), idiopathic pulmonary fibrosis (scarring of the lungs) and frailty were listed as contributing factors.

Findings

25. When Mr Sawyer was found breathless and requiring emergency care on 26 September, the CM did not call a code blue (a call over the radio which communicates that a prisoner is having breathing difficulties and an ambulance is required) in line with PSI 03/2013: Medical emergency response codes. He did make contact with the prison control room and asked them to request an ambulance, which they did. We are satisfied that there was no impact on Mr Sawyer's care. However, it is important that procedures are followed in order to prevent an impact on future care. We bring this learning to the Governor's attention and suggest that staff are reminded of how to use medical response codes in the event of an emergency.

Inquest

26. The Inquest into the death of Mr Sawyer concluded on 20 June 2023. The Coroner concluded that Mr Sawyer died of natural causes.

**Tallulah Frankland
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March 2023

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