





Independent Advisory Panel on Deaths in Custody Minutes of IAPDC meeting: 26 May 2022

Attendees:

Juliet Lyon - Chair Jenny Talbot Seena Fazel Kish Hyde Piers Barber

Apologies:

Deborah Coles Jenny Shaw Adrian Blake

For item 6:

Marisa Mason, Chief Executive, National Confidential Enquiry into Patient Outcome and Death (NCEPOD)

Neil Smith, Clinical Researcher, NCEPOD

Mark Juniper, Consultant and Clinical Coordinator, NCEPOD

Item 1: Panel only meeting

Item 2: Feedback from panel only session, minutes and actions

- 1. In the panel-only time Juliet, Jenny T and Seena had discussed:
 - a. Changes within the secretariat team.
 - b. The panel's oversight of how race and disproportionality relate to deaths in custody. This is particularly relevant to the panel's work on, and interest in, data, policing, and reforms to the Mental Health Act. Mechanisms to consider this will be discussed further in future meetings.
 - c. Plans to meet with family members, potentially facilitated by INQUEST, in the autumn.
 - d. Inviting people with lived experience to panel meetings to discuss particular issues. Jenny T was aware that NHS England have devised a mechanism for paying for this.
 - e. Arrangements for a full day meeting on 4 July, which Seena is unable to attend.
 - f. A forthcoming User Voice report on the impact of COVID-19. Report will be shared and the panel could invite Mark Johnson to update on at a future IAPDC meeting.
- 2. Seena commented that academic journals typically no longer seem to be accepting COVID-related studies. He updated on 'Long COVID' research, which includes initial findings indicating serious neurological effects for those over 60. Seena will alert the panel to emerging studies and consensus on this issue.
- 3. Piers explained changes to the secretariat team. Adrian will be leaving on 17 June and plans are in place to arrange a replacement, as well as interim cover. Sam Hawke will be joining the team on 4 July.

- 4. The panel discussed open actions. The secretariat will arrange Seena's discussion with relevant teams on risk assessment following the MoJ Safety team's update to the panel to review information sharing in prisons.
- 5. The panel discussed site visits. Juliet and Jenny T would like to visit a women's prison with Ministers Gillian Keegan MP and Victoria Atkins MP. Juliet, Jece and Victoria Atkins MP visited HMP Wormwood Scrubs, where the Samaritan Listeners scheme is still functioning well, though there are ongoing issues with delays to required transfers under the Mental Health Act.
- 6. Seena raised concerns around proposals to set time limits for transfers under the Mental Health Act. A timing target should begin from when all relevant parties agree a transfer is the right solution, not just when the prison makes a referral, the quality of which can sometimes vary. In the discussion:
 - a. Juliet raised concerns highlighted by the NAO on this issue, and said that part of the panel's role is to identify barriers faced by prisons in preventing the deaths of those detained.
 - b. Jenny T updated on a visit to HMP Bronzefield, where a number of particularly vulnerable women were waiting for a transfer. Some had been remanded into custody for assessment by the courts. Prisons are the only setting that cannot say 'no', and the proposed timelines are designed as a mechanism to put pressure on the system to identify a more appropriate solution.
 - c. Juliet suggested that RCGP Secure Environments Group and NHS England could provide data on particular establishments where transfers have been possible and those where there have been unacceptable delays. An IMB Chair has also raised concerns about repeat recommendations to particular NHS Trusts and failure to learn from deaths in custody. He is proposing improved ways to maintain an effective overview.

Action 1: Secretariat to seek women's prison visit for Juliet and Jenny T with a particular focus on women's health. Plan is for IAPDC to accompany Prisons and Health Ministers, Victoria Atkins MP and Gillian Keegan MP. Secretariat will liaise with their offices.

Action 2: Juliet to provide contact details of IMB Chair concerned about deaths in custody and repeat recommendations being made to NHS Trusts. Secretariat to set up a meeting with interested panel members on this issue.

<u>Item 3: Tracking recommendations – next steps</u>

- 7. Juliet discussed the need for a standardised way of checking on progress against recommendations put forward by the panel. Although the IAPDC does not have enforcement powers, the panel's focus always needs to be on outcomes.
- 8. The panel agreed there was a need to identify a mechanism to prompt systematic review of where progress against IAPDC recommendations has been made. In the discussion panel members raised:
 - a. How examples exist of where this has worked well previously, for example when working closely with HMPPS on tracking the implementation of the IAPDC's women's report.
 - b. That a similar approach should also be applied to formal advice offered/recommendations made in ministerial correspondence.
 - c. How enhanced tracking of recommendations and impact will also focus the panel on ensuring the recommendations they make are clear and concise, and also prompt reflections on the panel's effectiveness in landing its advice.

- d. The idea of using relationships with partners to support this monitoring, for example exploring how HM Inspectorate of Prisons can monitor implementation of the IAPDC's immigration guidelines on suicide prevention.
- e. How the panel should identify key areas of follow-up when producing reports and other forms of advice.
- f. The importance of identifying how pieces of work will be taken forward with relevant target audiences during the initial stages of project scoping.

Action 3: Secretariat to refine the Recommendations Log and explore a mechanism to review the implementation of IAPDC recommendations.

Item 4: IAPDC budget

- 9. Kish has discussed with MoJ Finance colleagues the feasibility of various proposals put forward by the panel in previous discussions. The relevant teams have requested specific proposals, including intended amounts and individual names, ahead of providing firm advice. The secretariat agreed that any proposals for spend should be aligned with the IAPDC's workplan agreed at the start of each 12-month cycle. One outstanding item, for example, is the panel's project on assessing how different services interact with bereaved families.
- 10. In the discussion the panel agreed:
 - a. Research should be designated as a section of the budget, for example to fund specific literature reviews or the delivery of consultations.
 - b. Consultation with bereaved families should be designated as a category in the budget. There are a range of options available for how to achieve this, including through an INQUEST Family Listening Day.
 - c. Conferences can be good use of funding which lead to impactful findings and
 - d. That spend may be required at the forthcoming event on deaths during and following police contact.
- 11. Going forward the panel will be updated on the budget by the secretariat at each panel meeting.
- 12. Kish updated on a revised format for making panel payments which mean that the panel will be paid for one month in July, with payments then reverting back to every two months going forward. There will be no net impact on total payment.

Action 4: Juliet to discuss funding of work with bereaved families, particularly expenses for the policing event and the project on how services interact with families, with Deborah.

Item 5: AOB

- 13. Juliet said a number of voluntary organisations have raised concerns that asylum seekers are not categorised specifically in the recording of deaths by the Home Office or Office of National Statistics.
- 14. Following the Ministerial Board on Deaths in Custody meeting on 23 May, Seena raised concerns that the role of treatment was not more central to plans outlined to reduce deaths in hospital settings, and that reforming the Mental Health Act will not necessarily reduce deaths. Arrangement of a series of meetings on this issue are in progress.

15. Juliet, Adrian and Jece had visited the Manston short-term holding facility in Kent and reflected that the site felt temporary (marquee/tented accommodation). It was clean with washing facilities and on-site canteen. Many staff were employed by a wide range of contractors and lines of communication and accountability were not clear. The process applied to select people to be processed in Rwanda appeared arbitrary other than apparent exemptions for vulnerable groups. Three different healthcare contractors were involved in delivering healthcare.

Action 5: Adrian and Jece to circulate notes on visit to Manston short-term holding facility.

<u>Item 6: National Confidential Enquiry into Patient Outcome and Death (NCEPOD)</u>

- 16. Juliet welcomed Marisa, Neil and Mark, and highlighted potential links with their work to the IAPDC's report on natural deaths in prisons and ongoing work with the Chief Coroner on prevention of future deaths reports issued by coroners.
- 17. Marisa introduced the work of NCEPOD, which was established around 35 years ago to look into the quality of care in hospitals, with an initial focus on surgery. Their work has since expanded to cover medicine, children's health, mental health, and primary and community care, and covers a full range of outcomes (i.e. not just deaths).
- 18. This new study on prison healthcare is funded by the Health Foundation and includes a study advisory group and a wider stakeholder group. Its methodology involves collecting a data sample and examining clinical case notes, as well as conducting organisational surveys and feedback from staff and people in prison to ensure a narrative approach complements data analysis. The project is aiming to report in spring / summer 2023 and will involve close working with other relevant stakeholders in the area, including prisons.

19. In the discussion:

- a. Seena asked about control groups. In this case NCEPOD are using deaths as a marker and assessing the care provided in each case.
- b. Juliet asked about post-death reports by the Prisons and Probation Ombudsman and coroners, as there has been some criticism of the quality of clinical reviews. PPO reports have been used to identify 409 cases, 79 of which are from non-natural causes. NHS England will be providing all clinical reviews and SystmOne data relating to these deaths to facilitate further analysis.
- c. Jenny T referenced the qualitative data gathered by the HMPPS and NHSE/I National Women's Prison Health and Social Care Review Group and indicated that this can be shared with NCEPOD once the review reports later in the year.
- d. Seena raised the issues of limitations to SystmOne entries. NCEPOD outlined the structured approach applied for case reviews, which includes training, consultation with practitioners to identify key factors, and the use of a questionnaire to ensure specific information is identified in each case. There is also an internal quality control peer review process to ensure a consistent approach.
- 20. NCEPOD will continue to keep the panel informed on the progress of their review. Juliet suggested a follow-up discussion in the autumn with other relevant panel members. Meanwhile IAPDC will share any relevant information/reports with NCEPOD colleagues.

Action 6: Panel members to indicate to NCEPOD colleagues any specific questions the group should put to prisons through their forthcoming questionnaires on natural cause deaths in prisons.

Date of next meeting: 4 July 2022

Actions:

- Secretariat to seek women's prison visit for Juliet and Jenny T with a particular focus on women's health. Plan is for IAPDC to accompany Prisons and Health Ministers, Victoria Atkins MP and Gillian Keegan MP. Secretariat will liaise with their offices
- 2. Juliet to provide contact details of IMB Chair concerned about deaths in custody and repeat recommendations being made to NHS Trusts. Secretariat to set up a meeting with interested panel members on this issue.
- 3. Secretariat to refine the Recommendations Log and explore a mechanism to review the implementation of IAPDC recommendations.
- 4. Juliet to discuss funding of work with bereaved families, particularly expenses for the policing event and the project on how services interact with families, with Deborah
- 5. Adrian and Jece to circulate notes on visit to Manston short-term holding facility.
- 6. Panel members to indicate to NCEPOD colleagues any specific questions the group should put to prisons through their forthcoming questionnaires on natural cause deaths in prisons.