

# Independent investigation into the death of Mr Ashleigh Pell a prisoner at HMP Leeds on 26 May 2019

**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. This office carries out investigations to understand what happened and identify how the organisations whose actions we oversee can improve their work in the future.
3. Mr Ashleigh Pell, who was 67 years old, died of metastatic adenocarcinoma of the lung (lung cancer) on 26 May 2019 at HMP Leeds. We offer our condolences to Mr Pell's family and friends.
4. The clinical reviewer concluded that the clinical care that Mr Pell received was of a reasonable standard and at least equivalent to that he could have expected to receive in the wider community. However, she found that Mr Pell did not receive care of that expected in the community regarding his medication. She has made two recommendations about clinical issues.
5. There is one non-clinical finding.

## Recommendations

- **The Head of Healthcare and Lead Pharmacist at HMP Leeds must ensure that all prescriptions are reviewed and maintained where appropriate.**
- **The Head of Healthcare should ensure that an effective process is used to ensure that learning from investigations are put into practice.**
- **The Governor and Head of Healthcare at HMP Leeds should ensure that staff respond promptly to requests for information about early compassionate release from the Public Protection Casework Section so that applications can be considered as soon as possible.**

## Investigation Process

6. NHS England commissioned an independent clinical reviewer to review Mr Pell's clinical care at HMP Leeds. The clinical review is annexed to this report.
7. The PPO has investigated non-clinical issues including Mr Pell's location, the security arrangements for his hospital escorts, liaison with his family and whether compassionate release was considered.
8. Mr Pell's partner contacted our family liaison officer with matters she wanted the investigator to consider. These matters included Mr Pell's dosage of medication, prescribing and receiving his medication on time, whether his dignity was maintained and why he was not taken to a hospice. The clinical reviewer has addressed these matters in her report.
9. Mr Pell's partner received a copy of the initial report. She pointed out a factual inaccuracy and this report has been amended accordingly.

10. The initial report was shared with HM Prison and Probation Service (HMPPS). HMPPS did not find any factual inaccuracies and their action plan is annexed to this report.

## **Previous Deaths at Leeds**

11. There have been six deaths from natural causes at HMP Leeds in the last two years. Of these, one also related to applications for early release on compassionate grounds. Since Mr Pell died, there have been two more deaths from natural causes.

## Key Events

12. In January 2017, before Mr Pell went to prison, he was diagnosed with lung cancer and underwent chemotherapy and radiotherapy. In January 2019, he was informed that he had between six to twelve months to live.
13. On 21 January 2019, Mr Pell was sentenced to 18 years in prison for sexual offences and transferred to HMP Leeds. It was noted that he had cancer and he was referred to the healthcare team to continue his treatment and care under the oncology department at Airedale NHS Foundation Trust.
14. In March, while Mr Pell was in hospital, he was given a prognosis of weeks to live. Plans were made for Mr Pell to die in a hospice but his health deteriorated quickly and unexpectedly and he was too unwell to be moved from the prison healthcare unit.
15. On 9 April, an application for Mr Pell's early release on compassionate grounds was submitted to the PPCS. The PPCS requested further information but Leeds did not provide all of the information before Mr Pell died.
16. Mr Pell died on 26 May 2019 at 10.35am, with his partner present.
17. There was no post-mortem examination but the Coroner accepted the medical cause of death as metastatic adenocarcinoma of the lung (lung cancer).

## Clinical Findings

18. The independent clinical reviewer found the care that Mr Pell received was of a reasonable standard and at least equivalent to that he could have expected to receive in the wider community. However, she found that Mr Pell did not receive care of that expected in the community regarding his medication. The clinical reviewer identified that from 23 May to 25 May 2019, Mr Pell went without his Dexamethasone (steroid) medication, and on 26 June 2019, Leeds did not have any medication to help reduce his respiratory secretions.
19. The clinical reviewer's full findings are set out in her report at Annex 1.

## Non-clinical Findings

### Early Release on Compassionate Grounds

20. Release on compassionate grounds is a means by which prisoners who are seriously ill, usually with a life expectancy of less than three months, can be permanently released from custody before their sentence has expired. A clear medical opinion of life expectancy is required. The criteria for early release for determinate sentenced prisoners are set out in Prison Service Order (PSO) 6000. The criteria include that the risk of re-offending is expected to be minimal, further imprisonment would reduce life expectancy, there are adequate arrangements for the prisoner's care and treatment outside prison, and release would benefit the prisoner and his family. An application for early release on compassionate grounds must be submitted to the Public Protection Casework Section (PPCS) of Her Majesty's Prisons and Probation Service (HMPPS).

21. On 9 April 2019, an application for Mr Pell's early release on compassionate grounds was submitted to the PPCS. The application was not complete and the PPCS requested further information from Leeds on three occasions. Mr Pell died before Leeds provided the PPCS with all of the information they had requested. Therefore, his application was not considered.
22. Mr Pell was terminally ill and nearing the end of his life. We consider that prison staff at Leeds should have acted more quickly in responding to the requests for more information by the PPCS. While we cannot say whether Mr Pell would have been granted compassionate release, he should have had the opportunity to have an application considered before he died. We make the following recommendation:

**The Governor and Head of Healthcare at HMP Leeds should ensure that staff respond promptly to requests for information about early compassionate release from the Public Protection Casework Section so that applications can be considered as soon as possible.**

**Caroline Mills**

**January 2020**

**Assistant Ombudsman**