

**Investigation into the circumstances surrounding the
death of a man
at Peterborough Probation and Bail Hostel, in
Cambridgeshire Probation Area,
in September 2006**

**Report by the Prisons and Probation Ombudsman for
England and Wales**

May 2007

This is the report of an investigation into the death of a man who died in a bedroom at Peterborough Probation and Bail Hostel whilst on bail. It appears that he died after drinking alcohol and taking heroin.

Many of my investigations into the deaths of people who die from using drugs reveal a long history of drug use. This was not the case with the man. Although he had a history of alcohol abuse, he had successfully overcome an addiction to amphetamines. However, in the hostel he was mixing with other residents who used Class A drugs and could readily obtain them. The man had many hours to fill each day and was grieving for his father, who had died very recently. The drugs were supplied by another resident, who was about to be reported to the Police. Whether an earlier report would have restricted the man's supply, and saved his life, cannot be known. Ultimately, he alone decided to use the heroin, and hostel staff should not be critical of their slightly delayed report.

I offer my sincere sympathy and condolences to the man's family and friends for their loss, especially so soon after the death of the man's father.

My office investigates the deaths of all prisoners in custody and residents in Approved Premises. In this case the investigation was carried out by one of my investigators. I am grateful to the Assistant Chief Officer and the manager of the hostel for their assistance during the investigation.

I make no recommendations, and am pleased to commend hostel staff for their prompt response, and the Probation area for providing first aid training and equipment.

Emma Bradley
Deputy Prisons and Probation Ombudsman

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SUMMARY

The man was born in December 1956 and died in September 2006, at the age of 49. He had a history of alcohol abuse and had criminal convictions spanning four decades.

On 13 May 2006, the man was charged with a number of offences. After a short time on bail, he was remanded into custody at HMP Norwich. He was bailed again on 4 August, with the conditions that he made no contact with the witnesses in the case, resided at the Peterborough Probation and Bail Hostel, did not enter Norfolk and did not drink alcohol.

The man settled into the hostel routine well, and fully participated in the activities, including an Open Day and sport competition. A warning letter was issued after he talked about a new resident's offences, and he took it to heart. The man told staff that he was surprised how relaxed the atmosphere was in the hostel.

In September, the conditions of the man's bail were altered to allow him to visit his father in hospital in Norfolk. Sadly, his father died, and staff and residents noted how badly affected the man was by his loss. Again his bail was amended to allow him to attend the funeral, and spend the nights of 19 and 20 September at his mother's home.

The following week staff were informed that the man was apparently using cannabis and that his next door neighbour was supplying drugs to residents. The neighbour's room was searched, but nothing was found. The deputy manager told staff to monitor the situation and carry out more room searches if necessary.

On 29 September, staff received new information about the neighbour and searched his room again. No drugs or drugs paraphernalia were found, but there were alcohol containers in the bin. As this was against the hostel rules, the procedure to breach him was started. In the meantime, the neighbour, the man and a third resident walked to the local shop to buy some cider. After drinking the cider, the man accepted his neighbour's suggestion that they should buy some drugs. They returned to the neighbour's room and smoked the heroin they had bought.

The Probation Service Officer (PSO) on duty that day was alerted by the sound of the smoke alarm. He went to the room where he found the man slumped against the wall. He had no pulse and was not breathing, so the PSO attempted cardio pulmonary resuscitation, until the arrival of the paramedics. Sadly, in spite of all their efforts, the man was pronounced dead. The police notified his family, and the assistant chief probation officer contacted them to offer support and assistance. At a later date, he arranged for the family to visit the hostel.

THE INVESTIGATION PROCESS

1. My office was notified of the man's death on Monday 2 October. The investigator opened the investigation on Thursday 5 October, when she visited Peterborough Probation and Bail Hostel. She met the Assistant Chief Officer for Cambridgeshire Probation Area, responsible for the approved premises and the hostel manager. The investigator was shown round the approved premises, and saw the man's room and the neighbouring room where he died. She was also given copies of all documents relating to the man. In the afternoon, she met the detective sergeant of Cambridgeshire Constabulary who was leading the police investigation and agreed to conduct the separate investigations concurrently. The police investigation concluded that the man's death was not caused by a third party.
2. On 28 November, my investigator returned to the hostel and interviewed two members of staff and spoke briefly to a third.
3. One of my Family Liaison Officers contacted the man's family to ask if they had any concerns to be included in the investigation. They said that they had no concerns about his stay at the hostel, and praised the staff for their care and concern.

PETERBOROUGH PROBATION AND BAIL HOSTEL

4. Peterborough Probation and Bail Hostel is on the edge of a well established housing estate, and is the only hostel in the Cambridgeshire Probation area. It is a single storey building whose design was copied from an old people's home, and it provides accommodation for 29 male residents. Most bedrooms are single rooms along two corridors, named Nene and Cavell. An office has been set aside for the use of the local police when working in the neighbourhood, which ensures that they have a high profile in the hostel.
5. The hostel's occupancy rate is always above 90% and is usually 100%. Most of the residents live there as a requirement of their licence, but recently there has been an increase in the number of residents on bail.
6. The manager is a senior probation officer and the deputy is a probation officer. There are five full time probation service officers (PSOs) who each supervise a shift and engage in key work with residents. There are four full time and one part time approved premises supervisors, who work under the supervision of the PSOs.
7. Staff carry key fobs, which give quick access to all the rooms, alarm fobs to alert colleagues that they need assistance, and first aid equipment pouches.
8. The approved premises operates a curfew from 11:00pm until 6:00am. Staff carry out checks to ensure that all residents are in their own rooms between those times, and a closed circuit television (CCTV) system monitors movement in the hostel 24 hours a day. Random drug tests are carried out and all residents know that they can be tested at any time. Staff also search residents' rooms if they suspect that they have brought drugs or alcohol into the premises.
9. At the induction meeting, each new resident is given a copy of the hostel rules, which are explained. The resident then signs to say that he agrees to observe the rules and keeps a copy. The rules cover the behaviour expected of the men and are aimed at providing a safe and calm atmosphere in the hostel. The possession and use of unprescribed drugs and drugs paraphernalia in the hostel is banned, as is alcohol.
10. Residents who break the rules are given warnings, depending on the seriousness of the breach. A written warning may be issued, followed by a final warning letter. If a resident does not heed the warnings, their place in the hostel may be withdrawn. If a breach of the rules is serious enough, staff may issue a final warning letter rather than going through all the stages of the warning process. If a resident is found with drugs or drug paraphernalia, depending on the circumstances, a final warning letter may be issued or the person's licence breached immediately.
11. The hostel staff have developed good links with the community. The approved premises advisory committee provides a forum where people from the local community can raise issues of concern. The head teacher of the local school and a general practitioner who serves the neighbourhood sit on the board, as do

local residents' representatives. In the summer of 2006, the approved premises held an open day and hosted people from the surrounding area. Photographs of the day were prominently displayed on a notice board when my investigator visited. The residents of the approved premises publish a newsletter and participate in a residents' forum.

KEY FINDINGS

12. On 13 May 2006, the man was arrested and charged with a number of offences. He appeared in court on 15 May, and was given bail with the requirement that he live at his parents' address. However, a week later, he was remanded into custody at HMP Norwich. The records do not show why his bail was withdrawn. On 4 August, he was again granted bail subject to the conditions that he made no contact with the witnesses in the case, resided at the hostel, did not enter Norfolk and did not drink alcohol. During his stay at the hostel, the man settled in well and his likeable character made him popular with the residents. He was said to be good at supporting and encouraging those with problems. He also played an active role in the Open Day that was held whilst he was a resident.
13. The man arrived at Peterborough Probation and Bail Hostel at 7:15pm on 4 August 2006. He had his induction that evening, which included being shown round the hostel and introduced to staff and residents. The hostel rules were explained to him, and he signed a copy which was placed on his file. He was allocated Room 14, which is one of three rooms in an L shape at the end of a corridor. The residents of the other two rooms (13 and 15) were also on bail.
14. Over the next few days the man appeared to settle in well. However on 7 August, a warning letter was issued to him because he broke one of the hostel rules. He had recognised a new resident as having been in HMP Norwich and had discussed the new arrival with other residents. His key worker explained to the man that this was not allowed, as talking about other residents' offences did not promote a calm atmosphere. The man apologised, and added that he was pleasantly surprised at the very relaxed atmosphere and how well the residents got on with each other.
15. After this shaky start, the man was careful to behave in a way that contributed to the relaxed atmosphere. He often sat outside at one of the picnic tables, taking part in lively conversations. Over the next few weeks, the man and the new resident became friends and the other resident was greatly upset at the man's death.
16. When the man arrived at the hostel he had told staff that his father was seriously ill. One of the conditions of his bail was that he must not enter Norfolk, except for court appearances or appointments with his solicitor and probation staff. The condition was altered to allow him to visit his father in hospital. In the middle of September, his father died. His bail conditions were again altered to allow him to spend the nights of 19 and 20 September at his mother's house, and attend the funeral. Several members of staff told my investigator that his father's death hit the man very hard, and they noticed that he kept himself to himself more and grieved for his father.
17. A week later, a resident told staff that the men in rooms 13, 14 and 15 were using drugs in the hostel. The resident said that the resident from room 15 was supplying drugs to other residents, and the man who died was smoking cannabis. As a result of the information the deputy manager of the hostel told staff to search Room 15. However, nothing was found and the deputy manager emailed staff to

advise them to keep a close eye on the situation and carry out further room searches if necessary.

18. According to the deputy manager, the man's records showed that he had a problem with alcohol, but this was the first indication that he was currently using drugs. When the man arrived at the hostel, he told staff that he had used amphetamines ten years earlier, and had been dependant for about ten years.
19. On 29 September, the resident in room 13 talked to the man at breakfast. After breakfast, the resident from room 13 told his key worker that the resident in room 15 was offering drugs to other residents. The key worker, who was the duty PSO, and another member of staff searched room 15 for drugs and drug paraphernalia. They did not find any drugs but they did find empty alcohol containers in the bin, which was a breach of the hostel rules.
20. Shortly before 9.00am, the deputy manager arrived for work and saw the man sitting alone outside, having a cup of tea and a cigarette. The deputy manager said good morning to the man, who replied. The deputy manager said that the man appeared to be deep in thought, and that since his father's death, he had been more reserved and less cheerful, which was how he looked that morning. The deputy manager was the acting manager of the hostel as the manager was on annual leave. The PSO consulted the deputy manager about the alcohol bottles in the room of the man's neighbour, and as it was not the first time he had broken the rules, they decided to breach him. This meant that the PSO would complete the necessary forms explaining how the man's neighbour had broken the conditions of his bail. He would then inform the police who would come and remove the neighbour from the hostel. The PSO completed the paperwork before going for lunch.
21. At about 11.30am, the man walked to the shops with his neighbour and the resident from room 13 and bought some cider. The man's neighbour asked him if he wanted to buy some drugs. The man agreed and the neighbour contacted a woman, who joined them briefly and had a discussion with the man. The woman left, after arranging to meet the man and his neighbour later. The three men sat on a park bench and drank the cider. The resident from room 13 later told the PSO that the man had also been drinking vodka, but he did not repeat this when he spoke to the police. At that point, the resident from room 13 returned to the hostel, intending to pass on the latest information, but unfortunately, the PSO was at lunch.
22. By about 12.30pm, the man and his neighbour had returned to the hostel and gone to the neighbour's room. Sometime between then and 1:00pm, the resident from room 13 knocked on the neighbour's door and asked what was happening. The man shouted through the door, "We're doing some gear (the colloquial term for heroin). Come back later on." The resident from room 13 returned to his room without passing on this information to staff.
23. After lunch, the three staff on duty were very busy as, amongst other things, two new residents arrived. The PSO did not realise that the neighbour had come back from the shops, and did not telephone the police about breaching him.

Instead, as he worked, The PSO looked out for the neighbour as he intended to call him into the office and tell him what was going to happen.

24. At about 3.00pm, the PSO heard the smoke alarm make a few quiet bleeps, as if it was about to ring fully. Although the alarm did not sound fully, the PSO saw from the control panel that it had been triggered in Room 15. The PSO went to the room, knocked briefly on the door and then used his key fob to enter the room. He immediately saw that the room was full of dense, acrid smoke, which was not from cigarettes.
25. The man's neighbour got up from the bed, looking very disorientated. The man was lying slumped on the bed, and the PSO realised that something was wrong. (he has been qualified in first aid for a number of years and his latest refresher training was earlier in 2006.) He checked the man's pulse but could not find one, and there was no sign of breathing. The PSO briefly asked the neighbour what they had taken, but he denied they had taken anything.
26. The PSO was carrying the cordless telephone from the office, and dialled 999 but his call was not connected. (He later realised that he had not dialled 9 for an outside line before dialling 999.) Rather than try again, he used the alarm fob on his belt to alert his colleague that he needed assistance.

I commend the issue of the alarm fob to all staff as an example of good practice. It allows a member of staff to summon assistance in an instant and his or her location can immediately be seen from the alarm board.

27. The PSO laid the man on the floor and began cardio-pulmonary resuscitation (CPR). CPR is the process of giving mouth to mouth resuscitation, interspersed with chest compressions, in an attempt to get the person breathing again. The PSO did not have a face mask to hand and so had to improvise one to put over the man's mouth and nose. He tore a piece of a plastic shopping bag to make a hole in the middle, through which he breathed into the man. Unfortunately, while the PSO was breathing into the man, some fluid passed through the mask. Despite this, he carried on with CPR, demonstrating a high level of care and dedication.
28. The other member of staff ran to the room, and the PSO told him to call an ambulance. The other member of staff then returned to the office and called an ambulance, before going back to the room to allow the operator to talk to the PSO. The operator gave some advice, but the PSO was already carrying out CPR to the operator's satisfaction. The other member of staff then went to the main door of the hostel to wait for the paramedics' arrival. Meanwhile, one of the office staff alerted the deputy manager to the emergency and he also went to room 15. The PSO asked him to fetch the first aid kit which contained a face mask with a tube to insert into the patient's throat. The PSO attempted to fit the tube into the man's throat, but without success and so he continued the CPR.
29. The paramedics arrived and were shown to room 15. They took over administering CPR and continued to try to resuscitate the man. The ambulance went round the back of the hostel to outside the fire door next to the man's room.

Unfortunately, the paramedics could not revive the man. They told the deputy manager that the man had died, and added that the PSO had done everything possible to save him.

30. The deputy manager implemented the procedures for responding to a death in the hostel. He notified the police and telephoned the senior probation manager on call that day. The residents who were in the hostel were aware that something was wrong, but were sensitive and kept away from all the activity. The other member of staff gathered them in the lounge and broke the news of the man's death. He also told them of the support that was available as they came to terms with his death. A senior manager and the Assistant Chief Officer responsible for the hostel arrived and worked with the staff for the rest of the day. They also gave support to the staff, particularly the three most closely involved. The Assistant Chief Officer stayed until he had spoken to all the staff as they left as well as the new staff coming on duty that night. He returned on Saturday and Sunday to speak to the staff who were on duty on those days.
31. The police informed the man's family of his death and the Assistant Chief Officer spoke to members of his family over the weekend. In the following weeks, he acted as the point of contact for the man's family. The following week, a debrief meeting was held for all the staff involved in the attempt to resuscitate the man. Each member of staff had the opportunity to discuss what happened and how they felt about it. At the meeting, the PSO told staff how much support he had received from the residents when he returned to duty after the weekend. Each resident who saw him asked how he was and praised him for his actions. He asked that the manager thank the residents for their consideration at the next residents' meeting.
32. The Assistant Chief Officer and the manager agreed that, if the family gave permission, a representative from the hostel would attend the man's funeral. The PSO told my investigator that he would have liked to have represented the hostel. However, by the time the hostel staff learned of the funeral, it had already taken place. The Assistant Chief Officer and the manager later arranged for family members to visit the hostel to see the man's room, which had been kept out of use until they visited. They also meet staff and residents. The family met the PSO, who was very moved when they spoke to him about the man when he was young. The man's sister later told my family liaison officer that she greatly appreciated the manager's kindness and sensitivity to the family.
33. At their next meeting, the residents proposed to name a sports trophy as a memorial to the man, and this was agreed after consultation with the family. The residents also wrote contributions to an 'in memoriam' page in the next edition of the hostel newsletter.

ISSUES

First aid provision

34. The PSO has been a fully trained first aider for a number of years. When he discovered the man, he was immediately able to assess the situation and begin CPR. He summoned help to call an ambulance and obtain the first aid kit. His administration of CPR was focussed and determined, even when there was the transfer of fluid into his mouth. The paramedics said that the PSO had done everything that was possible to save the man.

The PSO should be commended for his attempt to resuscitate the man.

35. Hostel managers had previously decided not to include masks in the first aid equipment pouches carried by staff, and so the PSO did not have one when he began to administer CPR. He improvised with a plastic bag, which did not prevent the transfer of fluids.

36. Instead masks were contained within first aid kits. The masks had a tube designed to go partially down the throat, but the PSO could not fit it into the man's mouth and throat. The PSO thought that the difficulty could have been because the man had several front teeth missing. The other masks in the hostel were subsequently checked, and found to be working properly. In addition, more first aid boxes are to be provided in the bedroom corridors.

37. Probation Circular 35/2006 reminds managers that the requirement is that all supervisory staff must be trained, as a minimum, in basic first aid. Managers have decided that first aid training will be a priority during the current year, and propose to arrange two courses which would mean that eight of the staff team would be qualified. Managers may wish to advise staff attending the courses to pay particular attention to the fitting and use of face masks.

Drugs in the hostel

38. Three of the hostel rules refer to the possession and use of drugs and alcohol. They ban the possession and use of drugs, drug paraphernalia, alcohol and alcohol containers and make residents responsible for any of these items found in a room that they are using. Staff are expected to be vigilant for signs that residents may be using drugs in the hostel. They are also aware of former residents who live locally and prevent them from loitering in the hostel grounds in case they are supplying drugs. The staff also liaise closely with the residents' offender managers (probation officers) and drug workers from the local drug treatment agencies. There are, therefore, aware of residents who use drugs and/or alcohol.

39. Random drug tests are carried out when staff suspect that a resident is using drugs. Both urine tests and swab tests are used, although urine tests are more common as they test for a wider range of drugs. Staff are aware of the ways that residents may try to cheat during a test and work hard to ensure that they stay

one step ahead of the residents. Residents have told staff that the possibility of being tested acts as an incentive in deciding not to take drugs.

40. However, staff are aware that some residents use drugs and may supply them to others. Room searches are carried out when staff suspect a particular resident and they look for paraphernalia as well as drugs. The public areas in the hostel are also regularly searched, particularly the toilets which have many places to secrete drugs. The relationships between staff and residents are sometimes strong enough for residents to inform them of others who are using or supplying drugs.

41. GOOD PRACTICE

The PSO should be commended for his attempt to resuscitate the man.

I commend the issue of the alarm fob to all staff as an example of good practice. It allows a member of staff to summon assistance in an instant and his or her location can immediately be seen from the alarm board.

ANNEXES

1. Documents considered during the investigation

Probation hostel file

Family liaison log from the Assistant Chief Officer

Post Mortem and toxicology report