

**Investigation into the Deliberate Self Harm of [REDACTED] D [REDACTED]  
at HMP Pentonville on 27 December 2001**

**Case Number :**  
**Date of Interview :** 7 March 2002  
**Name of Interviewer/s :** Carole Draper, Senior Investigating Officer  
**Name of Interviewee :** Officer Murray  
**Also present :**

Carole Draper : This is an interview being conducted in HMP Pentonville on the 7 March. Present is Carole Draper, Senior Investigating Officer and with me is Officer Murray, a discipline officer who actually works on the Health Care Centre at Pentonville. Mr Murray can I just ask you to confirm for the record that I have issued you with the Notice of General Investigation 1 which explains the purposes of the investigation and that you are aware that you can be accompanied by a Trade Union Representative or work colleague throughout the course of the interview?

Officer Murray : Yes you have.

Carole Draper : And that you are happy to proceed without that representation.

Officer Murray : Yes.

[Tape first of all deals with the death of [REDACTED]]

Carole Draper : Resumption of interview with Mr Murray who has now been issued with an NGI 1 to cover the serious Incident of Self Harm by Mr D [REDACTED] which happened the day before that of [REDACTED] on 27 December 2001 and I'm sorry to actually cover both of them in one interview but it's easier in that sense. You've made brief mention already of the incident with [REDACTED] D [REDACTED] but I wonder if again you could tell me in your own mind what you remember of Mr D [REDACTED] prior to the actual incident. I mean he had been in Health Care for a couple of weeks at that stage.

Officer Murray : I had been away. I had been on leave so I didn't really know him as such, as well as, you know a lot of the other patients but what I can remember about D [REDACTED] was he

was quiet, he kept himself to himself and no problem to staff, that's what I can remember about D█████.

Carole Draper : He was on a 2052 for all the time that he was actually in Health Care, were you aware of that?

Officer Murray : Yes.

Carole Draper : What was his interaction like normally with either staff or prisoners?

Officer Murray : I can't really say because he was like ██████. You never saw him, you never heard him, he was as good as gold, went with the regime, no problem.

Carole Draper : So not one that would cause concern to you in a sense of being a problem for you.

Officer Murray : No, that's why it stood out when he walked passed the Wendy House crying.

Carole Draper : That's the actual day, the 27<sup>th</sup>?

Officer Murray : Yes. I think, I was on clinics, I was on clinics on the 3s you see.

Carole Draper : Right so you were slightly off the main landing, you weren't on the main?

Officer Murray : I wasn't on the 1s that day, I was on the 3s, so obviously I didn't see it but apparently, listening from a third person but I heard that, told me he was crying. They gave him a phone call, but that's the only thing I knew about him. He was quiet.

Carole Draper : He hadn't come to your attention at all?

Officer Murray : No not at all.

Carole Draper : How did you actually get involved in the incident when it actually came about?

Officer Murray : Well, as I said I was on the 4s and 5s, the VP wings with Mr Clark dealing with something else. When we'd dealt with that situation we were coming downstairs and we got to the 3s and Mr Clark said, "There's something happening on the 1s". So I went downstairs to the 1s and saw Mr Hayward going to what I now know is D█████ cell. I went in and Mr Leane was on the bed, standing on the bed trying to get the ligature off. Mr Richards ...

Carole Draper : Can you remember what he had used as the ligature?

Officer Murray : Yes, it was a bloody good attempt, it was the end of the sheet, you know where it's doubled over and stitched he used that. He put it through the light and used that, so it wasn't a cry for help, it was a proper attempt, which was successful. Went in and Mr Richards was holding him up. I went in, helped Mr Richards, put D■■■■'s weight on my shoulder and then the bag came in. We cut the ligature off and put him down half standing and carried out CPR. When we first checked his vitals, he had no pulse but then we carried out CPR and brought him back, that was it. Then the HEMS doctors came in, we'd brought him back to life and we were carrying on CPR helping him out, bagging him, giving him air and one hundred percent oxygen and the HEMS doctors took over and that's when ...

Carole Draper : Did he go out by land ambulance or HEMS?

Officer Murray : They were going to go by heli but they didn't have any room and the security wouldn't have been that good and the HEMS doctor was quite happy going out in the ambulance so he went in the ambulance.

Carole Draper : So he went out by land ambulance.

Officer Murray : Took about the same amount of time to be honest, by the time he had got to the helicopter - it was minutes when we got to the hospital.

Carole Draper : And you went to the Royal Free at that stage?

Officer Murray : Was it the Royal Free? Yes it was.

Carole Draper : Yes you went to the Royal Free. How long were you out there with him? It was yourself and Mr Leane, both of you.

Officer Murray : I think it was about an hour, I don't really know. I don't know. I just know that we came back and made to finish our ED which is about an hour.

Carole Draper : And again, not only were you involved in working on Mr D■■■■ and indeed actually getting him back at that stage but you were then asked or told to go out to the escort. Was there any consideration given to either getting you relieved or sending somebody else out because you must have been fairly, you may be trained and everything but

it's still not easy to go through that and then immediately go back into a discipline officer role and do an escort.

Officer Murray :

Absolutely.

Carole Draper :

You are fairly traumatised when you go through that anyway.

Officer Murray :

We were carrying out CPR, Dave had just come out, we put a c-spine control on him, the collar on the stretcher, we are bringing him out and Dave handed me my coat. He said, "We are going out on escort, taking D■■■■ out". I was confused but happy that I was going out because I was on a high anyway because ...

Carole Draper :

You brought him back.

Officer Murray :

He was dead and we brought him back.

Carole Draper :

So you are trying to see it through, it's a way of seeing it through.

Officer Murray :

It's nice to see it through but when I came back nobody spoke to us and that was it.

Carole Draper :

So nobody gave you, when you actually came back, nobody gave you any follow-up at all on that one either.

Officer Murray :

It was a phone call, it wasn't even face to face, it was a phone call saying, by the Duty Governor saying, "Can you fill those forms out and leave them on the Centre".

Carole Draper :

No, "Thank you very much indeed you did a brilliant job and how are you and sorry we had to send you out but".

Officer Murray :

Absolutely nothing. I just can't get, I was a manager when I was in the army and it takes, how long does it take to get from his office to the wards? Minutes. "Thanks for that guys. Can you fill out form B and put it on the Centre? Are you all okay?"

Carole Draper :

That bit first, "Are you all right"? Do you need to go off after that sort of thing?'

Officer Murray :

Well we went in and even the, well the Gate said, "Are you going back in?" We said, "Yes, we haven't been told anything different". Went back in and it's like we've just had a coffee break.

Carole Draper :

Straight back onto the landings?

Officer Murray : Yes, it was straight down to the Health Care. In fact Dave went to Ward 3 that shift but yes we went back onto the landing.

Carole Draper : Well that is something that I will actually pick up with, not on your behaviour as an individual but in principal for the simple fact that there is a duty of care and there is actually a provision for Post Incident Care Team, Post Incident debriefs, Critical Incident debriefs and they should actually be laid down in things like Contingency Plans for the establishment for them to be done and with the number of incidents I've got on the go at the moment at Pentonville I must say that this is not the first time that I've heard that, so that will be something that does feature, I must admit in terms of the post incident care. Because Mr D [REDACTED] was on a live 2052, can I just ask how the interaction works in Health Care for instance, with the 2052s alongside the medical documentation. Do you have access to the medical documentation?

Officer Murray : Yes we do.

Carole Draper : You do so you are signed up to have access to medical documentation.

Officer Murray : All the discipline officers.

Carole Draper : All the discipline staff on Health Care are signed up for that. So you don't have any difficulty in terms of seeing the interaction between the two documents obviously. What about staff that haven't got access to medical documentation, I'm thinking about specialist staff, Probation, Education, Chaplains etc. How does that sort of work if you've got a 2052 live in Health Care?

Officer Murray : Well they can read the 2052 and if they want to read the IMRs then they speak to the doctors.

Carole Draper : Okay so in certain circumstances they can actually ...

Officer Murray : Me personally and I think I speak for the rest of the Health Care officers, discipline officers, we wouldn't give an IMR to a person that's not entitled to it.

Carole Draper : No, I wouldn't either.

Officer Murray : But we just, we would refer them to doctors.

Carole Draper : And as discipline staff in Health Care Centre, how much knowledge do you have of the sort of ongoing medical treatment or medical condition of the prisoners?

Officer Murray : We get a brief every morning.

Carole Draper : You are part of the team briefing every morning are you?

Officer Murray : Absolutely. We get a brief every morning, in fact we get two briefs. We get a brief off the night staff obviously - what's happened during the night and after that we go to the Wendy house, the little bubble in the Health Care, and the F Grade gives us a brief on all the, well he might not have been on for 3 or 4 days so we have a brief.

Carole Draper : On every individual patient and whoever is in the best position to give that information.

Officer Murray : A good briefing.

Carole Draper : It's a team briefing but it's all the staff that work in the ...

Officer Murray : On the 1s because obviously the 2s different but everybody knows what's up with every individual.

Carole Draper : So the information sharing is very good, the fact that it's the complete team that works down there. Are the discipline staff on a regular basis get involved with the reviews of the 2052's in Health Care?

Officer Murray : It's done on a, yes not just discipline staff, it's done on, I think it's a Thursday.

Carole Draper : It's done at the weekly clinical round isn't it, normally, chaired by Dr Yisa and a number of other people.

Officer Murray : Yes, the weekly clinical round. All the IMRs and the 2052s go up and they review them. They are reviewed every week.

Carole Draper : But you yourself don't get involved in that as such.

Officer Murray : No, because predominantly the Agency Nurses/Nurses within the Health Care deal with the 2052s. However, when we are walking around the landing we don't just go and check whoever is on a 2052, we check everybody, so we know anyway and there is no reason for us not to read the 2052s. I read them every morning, all the discipline staff read them every morning.

Carole Draper : To catch up with what's happening.

Officer Murray : Yes with the Observation Book you know, then you have the group meeting and you can realise who they are talking about and maybe you can jump in but it's predominantly done by Agency Nurses and Nurses, the 2052s.

Carole Draper : Okay but that's just the way it's worked out, it's not because that's the laid down policy - it's available to everybody.

Officer Murray : Well on the Health Care, the split on H1-1 H1-2, left hand side, right hand side and a nurse does the care plans for his side or her side and does the 2052s or sometimes one person does the 2052s.

Carole Draper : It depends on how many there are and what the workload is I suppose.

Officer Murray : It's not a them and us thing it's just we've got other jobs you know, exercise, cleaning officer.

Carole Draper : You've got the regime to run haven't you and give the regimes and association and things like that so that they can get on with the clinical stuff to a certain extent. But other than that you hadn't had that much contact with ██████ D█████ in the time he had been in Health Care at all.

Officer Murray : I might of, to be honest I might of but I can't remember him.

Carole Draper : Okay he was one of those people who just, if he had been there he was just there, but quiet and didn't draw attention to himself so that you would remember him in particular.

Officer Murray : Not at all.

Carole Draper : Is there anything else that you want to add in relation to the incident with Mr D█████ or any background to that that you would like to add at this stage?

Officer Murray : No not at all. No.

Carole Draper : Anything generally about either one that you think we have missed or that you would like to add? You don't have to if you don't want to?

Officer Murray : I'd rather not.

1. I agree that this is a true and accurate record of my interview with Carole Draper on 7 March 2002.

Signed : .....

NAME IN CAPITALS : .....

Date : .....

2. I have read the above transcript and have placed amendments in the margins as shown.

Signed : .....

NAME IN CAPITALS : .....

Date : .....