



HM Prison and Probation Service COVID-19 Official Statistics

Data to 31 October 2020

Ministry of Justice

Published 13 November 2020

Introduction

This official statistics release provides monthly data on the spread of COVID-19 in the prison and probation service in England and Wales and mitigating actions being taken to limit the spread of the virus and save lives. This release covers the period from Monday 16 March 2020 at the start of the COVID-19 outbreak to 31 October 2020.

It provides information on:

- Deaths where prisoners, children in custody or probation service users have died having tested positive for COVID-19 or where there was a clinical assessment that COVID-19 was a contributory factor in their death.
- Confirmed COVID-19 cases in prisoners and children in custody (i.e. positive tests).
- Narrative on capacity management data for prisons.

Key Findings

The key findings in this release are:

- **55** prisoners, children in custody and probation service users have died having tested positive for COVID-19 or where there was a clinical assessment that COVID-19 was a contributory factor in their deaths. Of whom **32** were prisoners and **23** were probation service users. **Five** deaths of prisoners occurred in October 2020, the first deaths of service users since June 2020.
- Of the **55** deaths, **50** were suspected or confirmed to be caused by COVID-19, **28** were prisoners and **22** probation service users.
- **1,529** prisoners or children tested positive for COVID-19 since the start of the pandemic, across **99** establishments, almost all of whom were adults. The number of

new monthly confirmed cases has increased by **883** since September 2020. **45** establishments had prisoners or children testing positive in October 2020.

Background

Since the start of the COVID-19 pandemic, there has been keen public and Parliamentary interest in how the Ministry of Justice (MOJ) and Her Majesty's Prison and Probation Service (HMPPS) are managing the running of prisons and the probation system to limit the spread of the virus while maintaining the core functions of these vital parts of the justice system. Publishing this data aims to bring transparency to the strategies HMPPS is employing to manage the prison and probation systems, as well as the impact of the virus on service users and staff.

The core tenet of HMPPS's prison strategy, building on Public Health England (PHE) and Public Health Wales (PHW) advice and learning developed in managing an early outbreak of the virus, is the implementation of effective isolation, reverse cohorting of new entrants to custody, and shielding of vulnerable prisoners. In addition, HMPPS have reduced the movement of prisoners and staff between prisons to prevent the "seeding and feeding" of infection, and have restricted regimes to prevent social contact in custody.

Using the latest modelling from PHE, HMPPS estimate that creating a headroom across the prison estate of 5,500 (5,000 in the adult male estate) would allow them to fully implement this strategy and could be effective in limiting the spread of the virus¹. HMPPS is seeking to achieve that headroom through a combination of reductions in operational capacity, new prison accommodation, releases from prison, and reduced receptions into prison. The management of HMPPS' actions has been informed by the advice of experts from public health authorities, and will be kept under constant review.

1. Capacity management

As at 30 October 2020, the prison population was 79,083, showing a reduction of 4,800 since 13 March 2020². This has primarily been driven by a reduction in inflows from the courts due to COVID-19 disruption, whilst outflows have continued as usual as prisoners reach their release dates

Measures were introduced in April 2020 to ease pressure on prisons in the short-term. This saw the early release of some low-risk offenders near to the end of their custodial sentence and some other risk-assessed vulnerable prisoners, including pregnant women and mothers with babies on compassionate grounds. The release of low-risk offenders near the end of their custodial sentence was paused at the end of August and the data is no longer reported in this publication. Numbers released on the scheme can be found in the September 2020 release.

HMPPS have also adopted a capacity management approach known as 'compartmentalisation'. This involves the isolation of all prisoners with symptoms, the shielding of vulnerable prisoners in the system and all new arrivals being quarantined for 14 days. These measures minimise the risk of infection spreading throughout prisons, but also impact prison capacity.

¹ The model on transmission of COVID-19 in prisons can be found at <https://www.gov.uk/government/publications/covid-19-population-management-strategy-for-prisons>

² <https://www.gov.uk/government/statistics/prison-population-figures-2020>

The strategy is being kept under ongoing review and regularly adapted in response to operational learning as well as evolving pandemic risks in the community. There is a balance between effective infection control and maintaining a commitment to support prisoners through their custodial sentence and help them access appropriate services.

2. Deaths

The service has taken the measures outlined to limit the spread of the virus and to protect staff and service users. However, prisons and probation, like all other sectors in the England in Wales have experienced deaths due to COVID-19.

Since the September publication, the counting of deaths in prisons and probation have been revised to align to the Public Health England definition. The publication now reports on deaths where the service user had tested positive for COVID-19 or where there was a clinical assessment that COVID-19 was a contributory factor in their death. This consists of:

- Deaths suspected or confirmed to be due to COVID-19
- Deaths believed to be due to other causes, but where the service users had tested positive for COVID-19.

From March 2020 to the end of October 2020, 55 HMPPS service users died having tested positive for COVID-19 or where there was a clinical assessment that COVID-19 was a contributory factor in their deaths. 32 were prisoners. There were no deaths of children in custody. Amongst the probation caseload, there were 23 deaths. Of these, 16 were under National Probation Service supervision and 7 under Community Rehabilitation Companies supervision. Figure 1 shows the monthly deaths of HMPPS service users since March 2020.

50 deaths occurred before July 2020 and 5 deaths have occurred since September 2020.

Of the 32 prisoner deaths, 28 are suspected or confirmed to be due to COVID-19. The remaining 4 deaths are believed to be due to other causes, although the individuals had tested positive for COVID-19. Of the 23 probation service users who have died, 22 are suspected or confirmed to be due to COVID-19 with the remaining 1 believed to be due to other causes, but where the service user has tested positive for COVID-19.

An additional prisoner case from April 2020 is included in this release following the coroner inquest which confirmed COVID-19 as cause of death. Each case is investigated by the Prison and Probation Ombudsman to determine the official cause of death and revisions to the data are to be expected as part of this process.

Data relating to the deaths of prison and probation officers to 31 July 2020 have been published in the [HMPPS Workforce Statistics³](#).

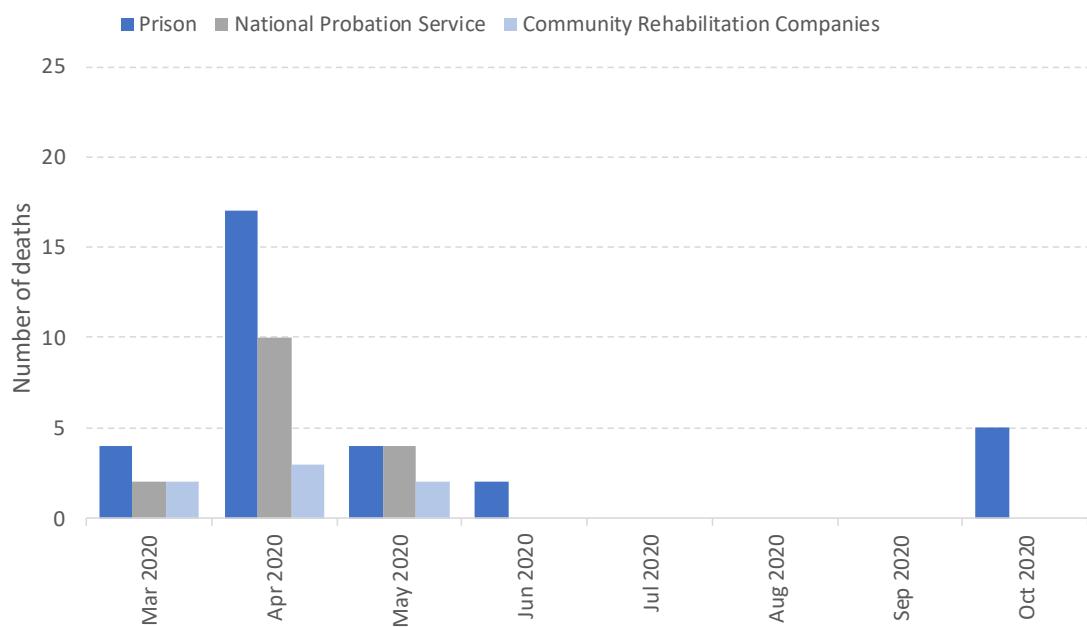
Data relating to the deaths of service users have been published in the National Statistics report [Safety in Custody⁴](#) and will be published in the official statistics report [Deaths of Offenders in the Community⁵](#).

³ <https://www.gov.uk/government/collections/national-offender-management-service-workforce-statistics>

⁴ <https://www.gov.uk/government/collections/safety-in-custody-statistics>

⁵ <https://www.gov.uk/government/collections/death-of-offenders-in-the-community>

Figure 1: Monthly number HMPPS service user who have died having tested positive for COVID-19 or where there was a clinical assessment that COVID-19 was a contributory factor in their death (Source: Summary Tables, Table 1)

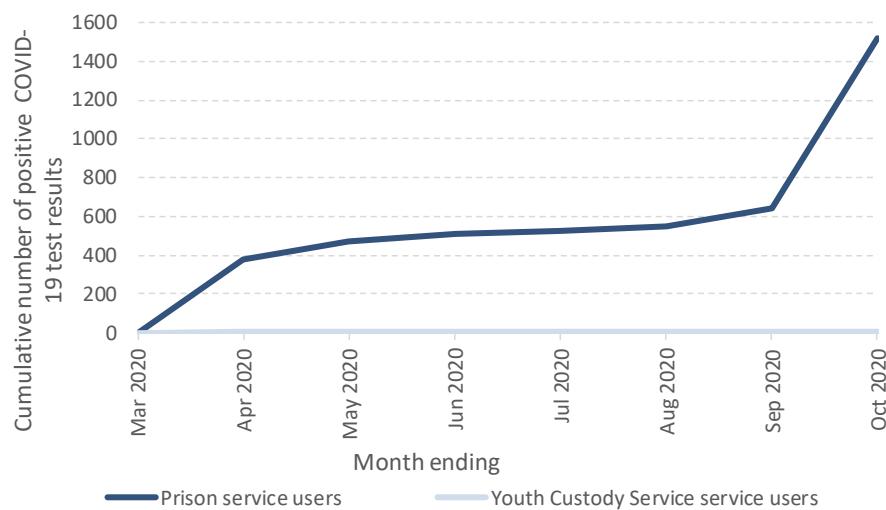


3. Testing

Testing practices in prisons and Youth Custody Service (YCS) sites have been determined locally. Initially, once a small sample of prisoners or children had tested positive in an establishment, no further tests were carried out on symptomatic individuals to preserve testing kits and on the assumption all further tests would be positive. This policy was changed on 15 April 2020 due to the increased availability of testing supplies meaning all symptomatic prisoners or children are now tested. As such data trends should be considered with caution and do not represent true like-for-like comparisons.

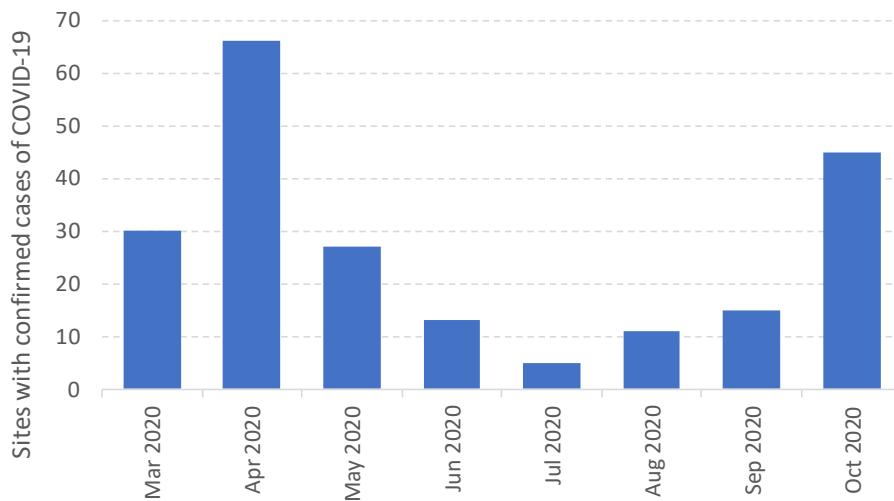
In the period to 30 October 2020, a cumulative total of 1,529 prisoners or children tested positive for COVID-19 across 99 establishments. 1,521 of these positive test results were for prisoners and 8 were children. The number of new monthly confirmed cases has increased by 883 since September 2020⁶. Figure 2 shows the cumulative monthly service users testing positive for COVID-19 to 30 October 2020.

Figure 2: Cumulative number of Prison and YCS service users testing positive for COVID-19, England and Wales, monthly from April 2020⁶ (Source: Summary Tables, Table 2)



Ten establishments had their first positive test results during October 2020. 45 establishments had prisoners testing positive during October 2020. Figure 3 shows the monthly number of establishments with prisoners testing positive since March 2020.

Figure 3: Monthly number of prison or Youth Custody Service establishments with prisoners or children testing positive for COVID-19, England and Wales, monthly from March 2020 (Source: Summary Tables, Table 2)



A testing programme to help understand the spread of COVID-19 in prisons and how it is transmitted through individual establishments and the wider estate began on the 20 July. The study, lasting up to 12 weeks is taking place in 28 prisons and is being carried out in

⁶ Due to the small number of YCS test results in March, the figures for March have been suppressed and excluded from this chart.

collaboration with the University of Southampton, PHE, and the Department of Health and Social Care.

Every one of the 20,000 prisoners and 10,000 staff at the 28 sites were invited to carry out an antigen test, consisting of mouth and nose swabs, to see if they currently have the virus. Participation is completely voluntary and confidential.

After the antigen tests, some staff will also be offered an antibody test to find out if they have previously had the virus (although future immunity if you have had the virus is still unclear).

As this testing programme is ongoing, it is not possible to confirm when the results of this programme are going to be published at this stage. Any service users who test positive through this programme are included in the data presented here.

Data Quality

Although care is taken when processing and analysing the returns, the detail collected is subject to the inaccuracies inherent in any large-scale recording system. Much of the data collected during the COVID-19 pandemic has been done at pace, with recording practices evolving as we understand more about the requirements and conditions we are facing. In order to present the timeliest information, the data presented in this report have not been subjected to the usual standard of quality assurance associated with official statistics.

Much of the data will undergo additional assurance in due course and be reported as official statistics in the following releases:

- [Safety in Custody](#)
- [Deaths of Offenders in the Community](#)

All deaths are phoned into MOJ headquarters on a daily basis. The cause of deaths in prison are classified as *apparent* until a police investigation and coroner's inquest have been concluded and the Prisons and Probation Ombudsman's office publish a detailed 'Fatal Incident Report'. Recording practices for COVID-19 related deaths have been updated since the start of the pandemic, meaning the exact cause is not always available or known. Furthermore, the cause of many deaths will be uncertain and awaiting an inquest; we have taken steps to reflect this uncertainty by reporting all cases in which COVID-19 was suspected to be a factor.

Contact points

Press enquiries should be directed to the Ministry of Justice press office:

Email: newsdesk@justice.gsi.gov.uk
Tel: 020 3334 3536

Other enquiries about these statistics should be directed to:

Kate Shaw
Email: statistics.enquiries@justice.gov.uk

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