

HM Prison and Probation Service COVID-19 Official Statistics

Data to 30 November 2020

Ministry of Justice

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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 30 November 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:

- 72 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 47 were prisoners and 25 were probation service users.
- Of the **72** deaths, **60** were suspected or confirmed to be caused by COVID-19, **37** were prisoners and **23** probation service users.
- 3,460 prisoners or children tested positive for COVID-19 since the start of the pandemic, across 110 establishments, almost all of whom were adults. The number of new monthly confirmed cases has increased by 1,825 since October 2020. 81 establishments had prisoners or children testing positive in November 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 27 November 2020, the prison population was 78,800, showing a reduction of 5,100 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-prisons² 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

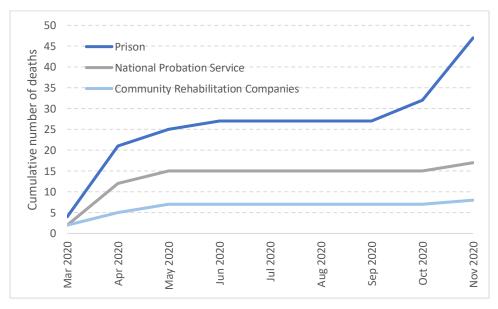
The service has taken the measures outlined to limit the spread of the virus and to protect staff and service users. However, prisons and probation, like all other sectors in the England in Wales have experienced deaths due to COVID-19.

The counting of deaths in prisons and probation are aligned to the Public Health England definition, and 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 November 2020, 72 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. 47 were prisoners. There were no deaths of children in custody. Amongst the probation caseload, there were 25 deaths. Of these, 17 were under National Probation Service supervision and 8 under Community Rehabilitation Companies supervision. Figure 1 shows the cumulative number of HMPPS service user deaths since March 2020.

Figure 1: Cumulative number of HMPPS service users 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)



49 deaths occurred before July 2020 and 23 deaths have occurred since September 2020.

Of the 47 prisoner deaths, 37 are suspected or confirmed to be due to COVID-19. The remaining 10 deaths are believed to be due to other causes, although the individuals had tested positive for COVID-19. Of the 25 probation service users who have died, 23 are suspected or confirmed to be due to COVID-19 with the remaining 2 believed to be due to other causes, but where the service user has tested positive for COVID-19.

The number of deaths has been revised in this publication, as a death of a former service user had previously been incorrectly included in the NPS data.

The cause of death in each case is provisional until the official cause of death has been determined by the coroner. As such revisions made be made to the data as part of this process.

Data relating to the deaths of prison and probation officers to 31 October 2020 have been published in the <u>HMPPS Workforce Statistics</u>³.

Data relating to the deaths of service users have been published in the National Statistics report <u>Safety in Custody</u>⁴ and will be published in the official statistics report <u>Deaths of</u> <u>Offenders in the Community</u>⁵.

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 November 2020, a cumulative total of 3,460 prisoners or children tested positive for COVID-19 across 110 establishments 3,429 of these positive test results were for prisoners and 31 were children. The number of new monthly confirmed cases has increased by 1,825 since October 2020. Figure 2 shows the cumulative monthly service users testing positive for COVID-19 to 30 November 2020.

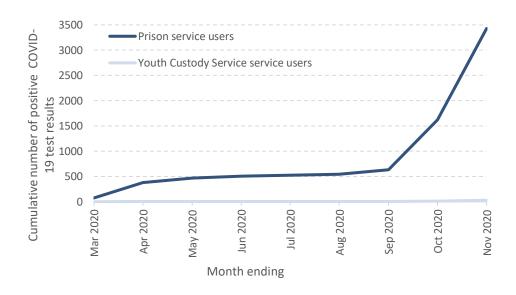
The calculation of testing figures has been amended in the November 2020 publication. Where prisoners or children in custody have multiple positive tests within a 90-day period, they are now assumed to be from the same infection and are therefore only counted once. This has resulted in a small number of positive tests being removed from the published figures.

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

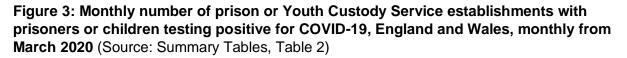
⁴ <u>https://www.gov.uk/government/collections/safety-in-custody-statistics</u>

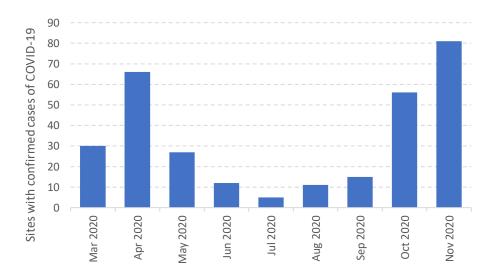
⁵ https://www.gov.uk/government/collections/death-of-offenders-in-the-community

Figure 2: Cumulative number of Prison and YCS service users testing positive for COVID-19, England and Wales, monthly from March 2020 (Source: Summary Tables, Table 2)



Seven establishments had their first positive test results during November 2020. 81 establishments had prisoners testing positive during November 2020. Figure 3 shows the monthly number of establishments with prisoners testing positive since March 2020.





Recognising the unique environment in prisons, HMPPS now routinely test staff and offenders to bolster defences against the virus – to identify and isolate cases earlier and move quickly to contain outbreaks and protect local NHS.

Alongside the measures HMPPS have put in place since March, regular testing will continue to limit the spread of the virus and save lives.

HMPPS has been working closely with the Department of Health and Social Care, the NHS, and health authority colleagues in England and Wales for a number of months on providing access to COVID-19 tests in a prison environment. Initially, this involved the testing of symptomatic prisoners; then during the summer the testing of all consenting prisoners commenced, along with HMPPS employees and non-directly-employed staff across 28 prisons in England.

More recently, additional testing capacity has been made available to limit the importation of infection into prisons. This includes the regular testing of staff across all prisons and carrying out the asymptomatic testing of new receptions to stop the virus spreading into and between prisons.

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. Any inaccuracies may result in revisions of previously published information in future releases. 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: <u>newsdesk@justice.gsi.gov.uk</u> Tel: 020 3334 3536

Other enquiries about these statistics should be directed to:

Kate Shaw Email: <u>PPRWS_Correspondence@justice.gov.uk</u>

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