

**A report by the Inspector of Prisons  
Judge Michael Reilly into the circumstances  
surrounding the death of Prisoner D  
on 6<sup>th</sup> May 2014  
while on temporary release**

**\*Please note that names have been removed to anonymise this Report**

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**A report by the Inspector of Prisons Judge Michael Reilly  
into the circumstances surrounding the death of Prisoner D  
on 6<sup>th</sup> May 2014 while on temporary release**

Presented to the Minister for Justice and Equality pursuant to  
Part 5 of the Prisons Act 2007

Judge Michael Reilly  
Inspector of Prisons

26<sup>th</sup> August 2014

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## **Preface**

The deceased was a 35 year old man at the date of his death.

As part of my investigation I met with the deceased's parents. I wish to express my sincere condolences to them and to his family on the sad death of the deceased.

I would like to point out that names have been removed to anonymise this Report

Judge Michael Reilly

Inspector of Prisons

26<sup>th</sup> August 2014

# **Inspector of Prisons Investigation report**

## **General information**

1. The deceased was a 35 year old male who came from the Leinster area. He is survived by two children, his parents and 5 siblings.
2. The deceased was committed to Mountjoy Prison on 23<sup>rd</sup> January 2014. His release date was to be 14<sup>th</sup> August 2014.
3. The deceased had a history of substance misuse.
4. The deceased was granted temporary release on 16<sup>th</sup> April 2014.
5. The remains of the deceased were discovered in the local river on 6<sup>th</sup> May 2014.
6. I met with the parents of the deceased. They expressed certain concerns. I have endeavoured, in this Report, to address such concerns.

## **Meeting with the deceased's parents**

7. I was informed that the deceased had a history of suffering from anxiety and depression. He had received treatment on numerous occasions for these both in the community and in hospital. In 2009 while serving a prison sentence in Mountjoy Prison he was transferred to the Central Mental Hospital.
8. The deceased started taking drugs at 15 years of age.
9. The deceased was first sentenced to prison in 1997 and served numbers of sentences between then and the date of his death.
10. Despite leaving school at an early age the deceased achieved a significant qualification which allowed him enter the work force.

11. In 2003 following a traumatic event in his personal life the deceased started taking heroin.
12. The deceased was greatly affected by the death of a person close to him and of the sudden death of two of his friends.
13. The family explained to me that when the deceased was committed to prison on 23<sup>rd</sup> January he was not well mentally. They ascribe this to the recent deaths referred to in paragraph 12 and his own illness.
14. The deceased was placed on protection at his own request in Mountjoy Prison. The family told me that he would telephone his mother or a friend everyday. They stated that he began to look healthier but his mental health did not improve.
15. On his mother's last visit he was so unwell that she cut the visit short. She stated that he was very anxious and disorientated.
16. Prior to his release his mother received a telephone call from Care After Prison enquiring if she would be happy for him to be released and enquiring if he could stay at home. She agreed to both.
17. The deceased's parents explained that when their son was released in the past he would telephone them from the prison to say that he would be released and his parents would then pick him up from the local train/bus station. On the day that he was released – 16<sup>th</sup> April 2014 he did not telephone his mother but telephoned at approximately 7.00pm from a friend's house. He stayed with his friend for two days and during this time would telephone his mother 4/5 times a day. He came to see his parents on the Friday. One of his parents stated – *“from the day he got out nothing made sense. He was not normal for me”*.
18. The deceased's parents raised the following concerns:-
  - (a) What was done in relation to his illness while in prison?

- (b) The prison knew that he was anxious and vulnerable. He had drugs in prison on at least 5 occasions that the family are aware of. Is there a programme to educate people about prescription drugs, heroin and methadone?
- (c) What can be done in the line of psychiatry for people like their son?  
From what they can see of prisoners they cannot see people in prison getting better from alcohol and drugs.
- (d) Where is the help for people that want to stay clean?
- (e) What is done to prevent drugs in prison?
- (f) Why did he find it difficult to get medical attention?
- (g) He did get addiction counselling but to what degree?

### **Deceased's contact with medical and psychiatric services**

19. The deceased's first recorded contact with the medical/psychiatric service in prison was in May 2008. I should point out that I only asked for access to the computerised records. There are records in manual form which pre-date 2008. Since 2008 it is clear from the medical notes that he had significant contact with these services as he presented as a person with depression and addiction problems.
20. As I have noted in paragraph 7 the deceased was referred by the prison medical services to the Central Mental Hospital in March 2009.
21. I have carefully considered whether the contacts between the deceased and the medical/psychiatric services during earlier periods of his incarceration are relevant to this investigation. I have concluded that they are not but will address this as an issue raised by the family in paragraph 18.
22. The deceased's contact with the medical/psychiatric/addiction services during his last imprisonment are relevant to this investigation. I set out hereunder the relevant contacts between the deceased and such services from the date of his committal – 23<sup>rd</sup> January 2014 to the date of his release – 16<sup>th</sup> April 2014:-

- The deceased was initially in Cloverhill Prison and remained there from 23<sup>rd</sup> January to 5<sup>th</sup> February 2014. During this time he was seen by the Nurse Officers and the Prison Doctor.
- On 5<sup>th</sup> February 2014 the deceased was transferred to Mountjoy Prison where a comprehensive assessment was carried out which noted his past medical/psychiatric history.
- On 6<sup>th</sup> February he was seen by the Prison Doctor who referred him for addiction counselling.
- On 12<sup>th</sup> February he was seen by the Addiction Counsellor. There is a comprehensive note of the interview with the addiction counsellor. The deceased declined a referral to the psychology services. He was placed on the Special Observation List.
- On 13<sup>th</sup> February his case was discussed at the healthcare meeting. He was to be reviewed at a future multi agency meeting.
- On 19<sup>th</sup> February he was again seen by the Addiction Counsellor.
- On 20<sup>th</sup> February he was reviewed at a multi agency meeting and discharged back to primary care and removed from the Special Observation List.
- On 20<sup>th</sup> February assessed by the Prison Psychiatrist whose notes disclose that the deceased did not have psychotic symptoms and that he denied suicidal intent. The Psychiatrist noted the deceased's bereavement as a result of recent deaths (referred to earlier in this report). The Psychiatrist noted the deceased saying – "*I don't want to continue seeing mental doctor*".
- On 12<sup>th</sup> March due to recent bereavement he was placed on the Special Observation List.
- On 13<sup>th</sup> March he had another session with the Addiction Counsellor.
- On 20<sup>th</sup> March he was removed from Special Observation List by a Prison Doctor – the deceased firmly denying any threat of self harm.
- On 24<sup>th</sup> March he had a further session with the Addiction Counsellor. This, *inter alia*, explored the deceased's possible return back to the community.
- On 27<sup>th</sup> March he had a further session with the Addiction Counsellor.

- On 8<sup>th</sup> April he was reviewed by Prison Doctor who noted that the deceased was – *“much calmer, not agitated or depressed, no evidence of self harm, does not need special observation”*.

### **Temporary release of the deceased**

23. I set out in this section of this Report the chronology of events which led to the deceased being granted temporary release on 16<sup>th</sup> April 2014.
24. On 10<sup>th</sup> April 2014 the deceased’s case was referred to the Community Support Scheme for assessment.
25. On 14<sup>th</sup> April 2014 the assessment was carried out by a representative of Care After Prison in the Separation Unit of Mountjoy Prison. As part of this assessment the conditions and responsibilities attaching to the Community Support Scheme were explained to the deceased. He nominated his parent’s address as his place of residence. This address was confirmed by his mother as referred to in paragraph 16.
26. On 15<sup>th</sup> April 2014 the deceased’s case was discussed at the Community Support Scheme meeting. This meeting was attended by the Integrated Sentence Management team for Mountjoy Prison, a representative of the Operations Directorate of the Irish Prison Service and a representative of Care After Prison. It was decided that the deceased would be a suitable candidate to engage with the Care After Prison and that he would be granted temporary release for this purpose. The rationale for the granting of temporary release included:-
  - A comprehensive risk assessment.
  - His offences were for non violent matters.
  - His sentence was short in duration.
  - There was an offer of community support from Care After Prison – he was assessed as suitable and motivated by the Community Support Scheme Assessment team.

- He had accommodation.
- He had a young child.
- He was a well behaved prisoner.
- He had complied with temporary release in the past.

27. On 15<sup>th</sup> April a letter addressed to the deceased confirming the deceased's first appointment with the Community Support Scheme was emailed by a representative of Care After Prison to the General Office in Mountjoy Prison which stated:-

*“Please attend your first CSS community appointment **Upon Release** in the CAP Office, Carmelite Community Centre, 56 Aungier Street, Dublin 2”.*

28. On 16<sup>th</sup> April 2014 the deceased was released on temporary release. The conditions attached to his temporary release included the following:-

- To reside at his parent's house.
- To report to his local Garda Station within 24 hours of release and daily thereafter.
- To return to sign on at Mountjoy Prison on 22nd April.
- To link in with and attend appointments arranged by the Community Support Worker.

29. I have been informed that the letter referred to in paragraph 27 was handed to the deceased on his release. However, there is no documentary evidence to support this statement.

30. The deceased did not attend his first CSS Community appointment in the CAP Office, Carmelite Community Centre, Dublin on the day of his release – 16<sup>th</sup> April.

31. On 17<sup>th</sup> April a representative from the Care After Prison telephoned the deceased's mother asking that the deceased would contact them which he did by telephone and spoke of his enthusiasm to getting his life back on track and agreed to adhere to Care After Prison's conditions.
32. On 17<sup>th</sup> April a further letter addressed to the deceased from Care After Prison was forwarded to Mountjoy Prison with a request that this be given to the deceased on his next signing day. This letter is dated **15<sup>th</sup> April 2014** and is in the following terms:-
- “Please attend your first CSS community appointment @ **12.30pm**  
**Wednesday 23<sup>rd</sup> April** in the CAP Office, Carmelite Community  
Centre, 56 Aungier Street, Dublin 2”.*
33. The deceased signed on at Mountjoy Prison on 22<sup>nd</sup> April 2014 for the period up to 29<sup>th</sup> April 2014 on the same terms as set out in paragraph 28. There is no documentary evidence that the deceased was handed the letter referred to in paragraph 32 but I have been assured that he did receive same.
34. The deceased did not attend the CSS Community appointment in the CAP Office, Carmelite Community Centre, Dublin on 23<sup>rd</sup> April 2014.
35. On 24<sup>th</sup> April 2014 Care After Prison emailed a warning letter to Mountjoy Prison stating that the deceased was *“in danger of Care After Prison ceasing their engagement with him”*.
36. The deceased signed on on 4 occasions at his local Garda Station as follows – 16<sup>th</sup> April, 18<sup>th</sup> April, 21<sup>st</sup> April and 22<sup>nd</sup> April.
37. There is a protocol between the Irish Prison Service and An Garda Síochána which sets out in detail the obligations of both bodies when a prisoner is being released on temporary release and for the duration of such temporary release. In essence, the Irish Prison Service must inform An Garda Síochána of all temporary releases and An Garda Síochána must inform the appropriate prison

of any breaches of temporary release conditions, particularly, where a prisoner does not sign on at the nominated station. There is a provision in the protocol that communications between both bodies should be conducted by email.

38. The deceased was not classed as unlawfully at large.

#### **Interview with friend of deceased**

39. As part of my investigation I interviewed the deceased's friend referred to in paragraph 17. This man had been a close friend of the deceased for many years.

40. The friend stated that on 16<sup>th</sup> April he received a telephone call from the deceased advising that he, the deceased, had been released from prison and asking if he would collect him from the bus station of a town midway between Dublin and the deceased's hometown. I should point out that the bus would have passed through the deceased's hometown.

41. The friend described the deceased as being – *“high as a kite but not on heroin it must have been tablets”*. The deceased stayed with his friend that night. The friend enquired as to whether he (the deceased) had any conditions attaching to his temporary release. The deceased stated that did not have to do anything except sign on at the Garda Station.

42. The friend stated that he (the deceased) had stated that he had been mentally depressed in the prison and thought that people were going to fight him but that he was afraid to tell the Governor.

43. The deceased stayed with his friend for approximately 2 days. His friend stated that he was – *“saying funny things, he was snappy, not capable of doing things, not capable of going to Dublin”*.

44. His friend talked to him on the telephone on either the following Tuesday or Wednesday. He described him as being *“out of it and was not a normal human being”*.

45. His friend raised 2 concerns:-
- Why are privileges taken away from a prisoner if he is on medication for depression etc.?
  - Why did the deceased not see a psychiatrist?

### **Findings**

46. The deceased did have considerable contact with the medical, psychiatric and addiction services while serving his last sentence.
47. According to the medical notes the deceased did not present with suicidal ideas.
48. The deceased's assessment on his transfer to Mountjoy on 5<sup>th</sup> February was thorough and adequate.
49. The assessment for the Community Support Scheme was thorough and adequate. The terms of his release were adequate and reasonable.
50. The deceased was enthusiastic and willing to engage in the Community Support Scheme.
51. The deceased was released on temporary release on 16<sup>th</sup> April with an obligation that he link with and attend appointments with a community support worker.
52. The first appointment referred to in paragraph 27 was to be on the day of his release. He did not attend this appointment.
53. The deceased signed on at his local Garda Station on 3 days during his first period of temporary release and once during his second period.

54. The deceased did not reside at his home address which was one of the terms of his temporary release.
55. The deceased may well have been informed verbally on 15<sup>th</sup> April (the day of his assessment for the Community Support Scheme) of his obligation to attend his first meeting with Care After Prison on his release (see paragraph 29). The letter of appointment (emailed to Mountjoy Prison) which Care After Prison relied on the prison to give to the deceased was confusing. It did not specify a time for the appointment. In all of the circumstances it must be borne in mind that the deceased was leaving prison and travelling to his hometown – a considerable distance from Dublin with an appropriate bus/train pass for such journey. No arrangement was made for him to travel from the prison to the heart of Dublin for his appointment.
56. A further letter was addressed to the deceased by Care After Prison (see paragraph 32) but this letter was emailed to Mountjoy Prison with a note asking that it be handed to the deceased when he next signed on.
57. The deceased signed on at Mountjoy Prison on 22<sup>nd</sup> April 2014.
58. I cannot say if the letter referred to in paragraph 32 was handed to the deceased on 22<sup>nd</sup> April.
59. The deceased did not attend for appointment on 23<sup>rd</sup> April as required by the letter referred to in paragraph 55.
60. The letters referred to in paragraphs 27 and 32 are both dated 15<sup>th</sup> April. No explanation has been provided for this.
61. Having regard to the contents of this report and my findings I am satisfied that Mountjoy Prison acted reasonably and responsibly in releasing the deceased on temporary release on 16<sup>th</sup> April 2014.

62. The failure of the deceased, for whatever reason, to attend his appointments with the Community Support Scheme cannot be attributed to the personnel in Mountjoy Prison.

### **Addressing the concerns of the family**

63. In this section of my Report I endeavour to address the concerns of the family.
64. On a general point the family raised a number of questions regarding matters of general concern which they and a wide section of concerned people would ask concerning the services available, the facilities available, the medical psychiatric and addiction services for prisoners with vulnerabilities such as in the instant case.
65. My obligation in investigating the deaths of prisoners who die while on temporary release is to ascertain whether or not the prison environment, the prison conditions, the prison regimes or the actions or non actions of prison management, staff or others working within the prison system contributed in any way to the death of a prisoner. In addition I also seek to ascertain if the relevant prison complied with its own rules.
66. In this paragraph I endeavour to address the concerns of the family. I adopt the same numbering sequence as in paragraph 18.
- (a) As my investigation refers to the deceased's last term of imprisonment I have set out in this Report in sequence the actions taken to address the deceased's illness by the prison.
  - (b) There is a programme in prisons to educate people about prescription drugs, heroin and methadone.
  - (c) I have set out the psychiatric assistance given to the deceased.  
While the broad issue raised by the family is relevant and important it is not relevant to this investigation **but should form part of a wider debate.**
  - (d) The Irish Prison Service are developing drug free areas in prisons for people who want to 'stay clean'. The Irish Prison Service are

also bringing forward a strategy under which a national drug treatment centre will be situated in one prison which will be accessible to all prisons and prisoners who have been appropriately assessed.

- (e) The availability of drugs in prisons is a worldwide problem. The Irish Prison Service has taken and continues to take measures to prevent the egress of drugs into prisons such as the erection of nets in the yards, the searching of visitors and staff and other measures.
- (f) I have set out in this Report the medical attention that the deceased received. In addition to that documented in this Report the deceased received medical attention for a number of issues not connected with his depression or psychiatric needs.
- (g) The deceased did receive addiction counselling as set out in this Report.

67. The deceased's friend raised two concerns as set out in paragraph 45. In addressing the concerns of the family referred to in paragraph 66 and my findings set out in paragraphs 46 to 62, I have addressed the second concern. The first matter raised by the friend is relevant to vulnerable prisoners in general. I address this particular concern in Recommendation 6.

### **Recommendations**

1. Where prisoners are to attend interviews or link in with organisations, such as in the instant case, there should be no ambiguity as to where, when and how these are to be achieved.
2. Prisoners should, not alone, be told of interviews and obligations to link with organisations but this information should be given in writing to each prisoner who should acknowledge same in writing.
3. The scheduling of interviews and obligations to link with organisations must be practicable and have regard to time and the distance to be travelled by such prisoners.

4. Practical arrangements by way of transport or otherwise should be made in advance in order that prisoners are able to meet their obligations.
5. The protocol between the Irish Prison Service and An Garda Síochána mentioned at paragraph 37 must be adhered to to the letter by both parties.
6. The Irish Prison Service and individual prisons must ensure that privileges are not taken from vulnerable prisoners or those on medication or suffering from depression.