



Chair of the Independent Advisory Panel on Deaths in Custody

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Dear Juliet,

COVID-19 IN PRISONS

Thank you for your 24th April response to my letter of 21st April, regarding the need for further action to prevent the spread of COVID-19 in prisons. You raise a number of matters, which include the pace of early release for pregnant women and residents in the mother and baby units, and of eligible prisoners who are medically vulnerable or otherwise suitable for consideration for early release.

We are committed to containing the spread of COVID-19 within the prison system, to reduce the impact of the pandemic on the National Health Service (NHS), protect the vulnerable in our care and our staff, maintain safety and order, and continue to provide a functioning prison service while managing public protection risks. I take the European Convention of Human Rights Articles extremely seriously, and this is why we have put in place a multi-faceted plan to actively manage the pandemic in prisons.

Our contingency planning is informed by the latest Public Health England (PHE) advice, updated to reflect the developments in the spread of the virus and its effect in prisons. Latest PHE modelling, developed in conjunction with HMPPS, was published on 27 April and is available [here](#)¹. This provides an early indication that our COVID-19 strategy in prisons is having a positive impact on limiting hospitalisations, deaths and the transmission of the virus within the estate. While we are seeing outbreaks of COVID-19 affecting staff and those in our care, emerging data suggests that the 'explosive outbreaks' which were initially feared, are not being seen. The updated modelling suggests that the additional headroom required to limit the spread of the virus is around 5,000. The prison population has already reduced by 3,000 over a seven-week period, which, combined with the measures we are taking and outlined below, means that we are on track to achieving this target.

Our strategy entails a number of measures. To save lives we have restricted regimes and are minimising transfers of prisoners and staff between prisons. We are implementing our 'compartmentalisation' strategy: isolating the sick, shielding the vulnerable and quarantining new arrivals to reduce risk. We are easing pressures on prisons by maximising safe releases, for example through the early release of low-risk offenders, expediting remand hearings and making full use of Home Detention Curfew. We are growing the capacity of the estate through temporary expansion. And we are exploring options to minimise the use of custody with further use of safe community measures.

¹ <https://www.gov.uk/government/publications/covid-19-population-management-strategy-for-prisons>

You rightly outline the vital role our staff are playing as key workers and emphasise the need to protect them. A key strand of our strategy is about boosting staff resilience at the frontline. We are continuing to roll out testing for keyworkers in HMPPS. Since staff testing has started we have seen a fall in staff absences due to self-isolation, hence reducing the pressure on staff overall. We have offered bonuses and overtime to staff and have initiated a scheme to bring back former retired and resigned staff on temporary contracts. We are redeploying HQ staff to operational roles. We have launched our #hiddenheroes campaign to celebrate our staff and have secured high-profile celebrity endorsements to raise the profile of the campaign and staff morale.

We have continued to focus efforts on ensuring that adequate supplies of personal protective equipment (PPE) remain available to frontline staff. Our key aim is to maintain a sustainable supply chain for all items needed. Our current position is that we have adequate supplies against forecast demand of all items. We are starting to make some items in prison industries for the NHS, something in which we can all take pride.

I continue to keep all of these elements and the overall strategy under review as events develop.

Early release schemes

We are progressing with our plans to temporarily release up to 4,000 risk-assessed prisoners who are within two months of their release date from prison, as part of the national plan to protect the NHS and save lives. Those released will be subject to conditions and will be electronically monitored, with the option for their licence to be revoked at any time. We have worked closely with the electronic monitoring supply market and have procured sufficient equipment to enable us to effectively implement this measure. We are also working closely with the Ministry for Housing, Communities and Local Government to ensure that no one in our care will be released without housing and healthcare support in place. We are working to identify suitable temporary accommodation for low-risk vulnerable offenders, and will ensure this complies with public health guidance on self-isolation and social distancing.

As always, we have a duty to maintain public protection and so no high-risk offenders will be considered for release under this scheme, including those convicted of violent or sexual offences, those of national security concern, or those who are a danger to children.

The same applies for the cohort of female offenders who are currently pregnant or living in mother and baby units and are being considered for release under compassionate measures. We will not release any women without ensuring they have access to appropriate, safe accommodation, necessary support services in the community and an agreed health care pathway in place. Governors are working with their family services, Through the Gate teams, and those third sector organisations that currently work within their prisons, to provide the many practical items that women will need, including those who are pregnant or who are leaving custody with their baby. In addition, we are protecting the most clinically vulnerable within our prison system, including the elderly and those with underlying health conditions. Prisoners identified in accordance with NHS guidance as being 'extremely vulnerable' to coronavirus and requiring shielding, are being proactively considered for release from custody under existing Release on Temporary Licence (ROTL) provisions. They will be released where their risk level is sufficiently low and where release is not otherwise excluded under Rule 9 of the Prison Rules and the ROTL policy framework. Where a prisoner falling within this category is considered not suitable for release, they will continue to be appropriately shielded within custody.

I am pleased that you have seen our published early release policy and guidance and will be placing it on your website. Our expectation is that the rate at which individuals are released will increase as our processes bed in.

I value the role of the Independent Advisory Panel on Deaths in Custody as an independent voice to Government on reducing deaths in custodial settings. My Department welcomes the opportunity to maintain regular contact with the Panel as we continue to strive to protect our staff and those in our care and under our supervision. Following your meeting with Minister Frazer on 29 April, my officials will be in touch with you to convene a Ministerial Board in the near future.

In terms of your request for the publication of up to date information and policy documentation, in addition to the publication of the PHE guidance this week, I can confirm that we are also exploring options to publish data on the number of prisoners and staff who have died with Covid-19 deaths and early releases on a routine basis.

Yours ever

A handwritten signature in black ink that reads "Robert Buckland". The signature is written in a cursive, slightly slanted style.

RT HON ROBERT BUCKLAND QC MP