



Department
of Health &
Social Care

[REDACTED]
*Parliamentary Under-Secretary of State for
Patient Safety, Women's Health and Mental Health.*

39 Victoria Street London
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[REDACTED]
HM Senior Coroner Rachael Griffin
Coroner's Office
BCP Civic Centre
Bourne Avenue
Bournemouth
BH2 6DY
[REDACTED]

22 August 2025

Dear Ms Griffin,

Thank you for your Regulation 28 report of 30 May 2025 sent to the Secretary of State about the death of Colin David Lovett.

Firstly, I would like to say how saddened I was to read of the circumstances of Mr Lovett's death, and I offer my sincere condolences to his family and loved ones. The circumstances your report describes are very concerning and I am grateful to you for bringing these matters to my attention. Thank you for the additional time provided to the Department to provide this response to the concerns raised in your report.

Your report raises concerns over a lack of training and guidance for prison staff regarding diabetes and its effects, the restricted hours of availability of healthcare services at HMP The Verne and how that could impact on prisoners with diabetes, support for prisoners with poorly managed diabetes and a general lack of awareness among prison staff at The Verne and perhaps more widely within the prison sector about the management of long term conditions like diabetes.

In preparing this response, my officials have made enquiries with NHS England to ensure we adequately address your concerns related to healthcare services at the prison. Your other concerns regarding issues related to training, guidance and raising awareness of diabetes for prison staff are for the Director General Chief Executive of His Majesty's Prison and Probation Service to address in their response to you.

I understand your concerns about the healthcare services at HMP The Verne not being available 24 hours a day, which could mean delays in action being taken to resolve a hypo glycaemic or hyper glycaemic attack outside of its operational hours. However, this is a Category C prison, and under the Health and Social Care Act 2022, NHS England is required to ensure the provision of healthcare to Category C prisons is within core hours. This is equivalent with community provision.

The core hours of healthcare provision are agreed between health and justice commissioners based on local population needs, identified through a comprehensive health needs assessment. The Act states that urgent and out of hours care is the responsibility of integrated care boards for all prisons. Healthcare providers, supported by NHS England regional health and justice commissioning teams should work with local out of hours and urgent care services to agree effective pathways for any urgent care needs outside of routine healthcare hours.

As your report has highlighted, some prisoners may have poorly managed diabetes and may require support at any time. NHS England service specifications for prison healthcare require all healthcare providers to comply with National Institute for Health and Care Excellence (NICE) guidance on Type 1 diabetes in adults: diagnosis and management which is available at: <https://www.nice.org.uk/guidance/ng17> and guidance on Type 2 diabetes in adults: management which is available at: <https://www.nice.org.uk/guidance/ng28>


Both of these include recommendations for healthcare staff to ensure individualised care and education, which would include arrangements for out of hours care and deteriorating health. Any high-risk patients should be alerted to prison staff, with an outline of emergency escalations.

As a result of your report, NHS England has agreed to share the details of this case and the concerns raised by you with all regional health and justice commissioning teams, along with links to the relevant NICE guidance and the National Diabetes Audit - a comprehensive, England and Wales-based audit that measures the effectiveness of diabetes care against NICE guidance (and now includes prison healthcare data). This is to ensure that learning from this case is spread nationally.

As signatories to the National Partnership Agreement for Health and Social Care for England, the Department of Health and Social Care and NHS England are committed to working with partners to reduce health inequalities for people in prison and improving services to ensure that people have access to timely and effective healthcare whilst in prison. I would like to inform you that the Chief Medical Officer for England's report on health in prisons is due to be published this year and will provide recommendations for further action.

I hope this response is helpful. Thank you for bringing these concerns to my attention.

All good wishes,

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**PARLIAMENTARY UNDER-SECRETARY OF STATE FOR PATIENT SAFETY, WOMEN'S
HEALTH AND MENTAL HEALTH.**