

Parliamentary Under-Secretary of State for Women's Health and Mental Health

39 Victoria Street London SW1H 0EU

HM Senior Coroner Rachael Clare Griffin Senior Coroner BCP Civic Centre Bourne Avenue Bournemouth BH2 6DY

16th October 2025

Dear Ms Griffin,

Thank you for the Regulation 28 report of 25 July 2025 sent to the Secretary of State for Health and Social Care about the death of Sheldon Lawrence Jeans. I am replying as the Minister with responsibility for mental health and offender health. Thank you for the additional time provided to the Department to provide a response to the concerns raised in your report.

Firstly, I would like to say how saddened I was to read of the circumstances of Mr Jean'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.

Your report raises concerns over the availability illicitly brewed alcohol and a lack of national and local policy at HMP Guys Marsh, around the governance of medication held in prisoners' possession in the prison estate. The first of these is a matter for my Ministerial colleagues at the Ministry of Justice.

I understand your concerns about medication held in prisoners' possession. It is important that robust governance processes are in place to ensure safe and effective medicines management. In preparing this response, my officials have made enquiries with NHS England to ensure we adequately address your concerns.

National NHS policies relating to the overarching use, governance and supply of medicines for prisoners are the same as those used for people in the community. As in the community, prescribed medicines are the patient's property and taking them is an act of daily living which the patient is responsible for. Any unused medicines should be returned to the pharmacy or healthcare team for safe disposal.

NHS England commissions healthcare services for prisoners that are underpinned by specific service, regulatory and professional standards and national guidance. The main underpinning standards and guidance for health, wellbeing and use of medicines in prisons are:

- HM Inspectorate of Prisons Expectations. These describe the living environment expectations which include safe storage facilities (lockable cupboards) for prisoners to store their personal possessions including medicines. They also set out the importance of rehabilitation and the need for prisoners to take responsibility for meeting their own needs. This underpins the policy to provide medicines inpossession so that prisoners continue to manage their health and wellbeing whilst in prison, enabling them to continue to do so on release. Specific measures for inpossession medicines are also included making it clear that, subject to a regularly reviewed in-possession risk assessment, patients can store their medicines securely and self-administer them.
- The Royal Pharmaceutical Society's professional standards for the optimisation of medicines in secure environments. These set out standards for medicines management for prisoners on admission, during their stay and on release.

I recognise that that there is a difficult balance to be had between allowing prisoners to look after their own prescription medicines (as they would in the community) and mitigating the risk of the illicit diversion of these medicines within a prison environment for all the reasons you set out in your report.

Procedures and governance around the management of prescription medicines will vary between different prison categories and local risks and incidents. Various processes are used to inform medicines use and safety in each prison including security and clinical incident management and review; in-cell searches and clinical therapeutic or substance misuse testing. National guidance could further complicate what is already a complex issue for both prisoners and prison staff.

Instead, NHS service commissioners use contractual monitoring, outcomes from regulatory inspections and regional governance to provide assurance that the standards and guidance are being delivered.

In the light of any serious incidents or fatalities attributed to medicines use and safety, NHS England has assured me that it proactively shares and uses the learning from these to remind stakeholders of the standards and expectation for safe practice and to inform the review of local policies.

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



PARLIAMENTARY UNDER-SECRETARY OF STATE FOR WOMEN'S HEALTH AND MENTAL HEALTH