



HM Prison & Probation Service

[REDACTED]
Interim Director General of Operations
HM Prison and Probation Service
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Edward Steele
HM Assistant Coroner
The Coroner's Office
The Guildhall
Alfred Gelder Street
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HU1 2AA

28 August 2026

Dear Mr Steele,

REGULATION 28 REPORT TO PREVENT FUTURE DEATHS: MR DAVID CLAIRMONTE

Thank you for your Regulation 28 report dated 26 June 2026, addressed to the Ministry of Justice (MoJ), NHS England, Department for Health and Social Care and Care Quality Commission following the inquest into the death of David Clairmonte at HMP Full Sutton on 4 October 2024. I am responding to the concerns raised in relation to the MoJ as the Interim Director General of Operations for HM Prisons and Probation service (HMPPS).

I understand that you will share this response with Mr Clairmonte's family. I would like to begin by expressing my sincere condolences for their loss. Every death in custody is a tragedy, and ensuring the safety of those in our care remains our highest priority.

Your report draws attention to the increasing demand for specialist personality disorder placements and the importance of ensuring sufficient capacity within appropriate care settings to meet patients' complex needs.

HMPPS recognises the importance of ensuring that individuals with complex personality disorders receive care in the most appropriate setting, consistent with public protection requirements and clinical need. While decisions regarding the commissioning and provision of secure mental health services are the responsibility of NHS England; HMPPS works closely with healthcare partners to support effective management of prisoners with complex mental health needs.

You heard evidence at the inquest regarding specialist units referred to as Psychologically Informed Planned Environments (PIPEs). Placements into these units are offered as part of the Joint NHS and HMPPS Offender Personality Disorder (OPD) Pathway.

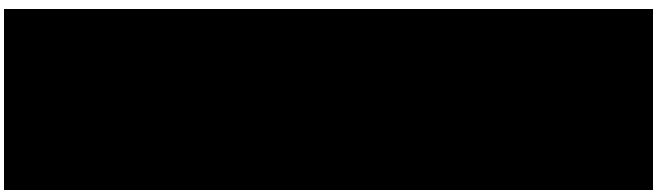
The OPD Pathway is funded and operated jointly by HMPPS and NHS England. It identifies the additional support and treatment needs of over 60,000 high-risk, highly complex offenders likely to meet the medical threshold of having 'personality disorder'. The pathway routinely sees around 50% of screened in cases assessed as needing, and receiving, additional support. This is complemented by provision of around 4,000 specialist intervention places that are co-commissioned and operated in partnership with the NHS. The OPD Pathway includes provision of 20 PIPE units in prison settings and 13 PIPEs in community Approved Premises.

PIPEs are specifically designed environments where staff members have additional training to develop an increased psychological understanding of their work. PIPE services are supported by additional staff and a qualified psychological therapist and focus on providing pro-social relationships and interactions and form part of a treatment pathway of services. They are designed to support offenders at key stages in their sentence, with individual units focussing on either preparation for treatment interventions, stabilisation, progression and consolidation, or transition into the community.

HMPPS will continue to engage with NHS England regarding the availability, development, and co-commissioning of specialist pathways for offenders with complex personality related difficulties and high levels of clinical need.

Thank you again for bringing these important matters to my attention. I hope this response provides assurance that appropriate action is being taken to address the issues raised.

Yours sincerely,

A large black rectangular box redacting the signature of the Interim Director General of Operations.

Interim Director General of Operations