

Independent Advisory Panel on Deaths in Custody

Statistical Analysis of all recorded deaths of individuals detained in state custody between 1 January 2000 and 31 December 2010

October 2011

Advising the Ministerial Board sponsored by:



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Introduction

1. The Independent Advisory Panel (IAP) on Deaths in Custody forms the second tier of the three tier Ministerial Council on Deaths in Custody, and it acts as the primary source of independent advice to ministers and service leaders through the Ministerial Board – the first tier of the Council - on measures to reduce the number and rate of deaths in custody. The Council was established in 2009 for an initial term of three years and its effectiveness is currently being evaluated to inform advice to Ministers about continuation of the arrangements beyond March 2012.

2. In the IAP's mid term report, which was published in February 2011, the Panel outlined a series of priorities to take forward in 2011/12 including a commitment to publish a comprehensive statistical summary of all recorded deaths of individuals detained in state custody between 1 January 2000 and 31 December 2010. The Panel uses this data to inform its general work programme. This publication will be developed in future years to provide a more in-depth analysis. Nevertheless, it shows for the first time a full demographic breakdown of all recorded deaths in the following custodial sectors:
 - Prisons¹
 - Police²
 - Immigration Removal Centres
 - Approved Premises³
 - Young Offender Institutes (YOIs)⁴
 - Secure Children's Homes (SCHs)⁵
 - Secure Training Centres (STCs)⁶

¹ These figures include all prisoners within public and private sector prisons, but exclude deaths in HM Prison Service run Immigration Removal Centres.

² These figures include deaths of persons who have been arrested or otherwise detained by the police. It includes deaths that occur while a person is being arrested or taken into detention. The death may have taken place on police, private or medical premises, in a public place or in a police or other vehicle. These figures do not include fatal shootings, road traffic accidents involving police vehicles and 'other' deaths following police contact, which are not custody related.

³ Approved Premises (formerly known as Probation & Bail Hostels) are premises approved under Section 13 of the Offender Management Act 2007. They are managed either by the Probation Service or Voluntary Organisations and offer residential provision to selected offenders and some bailees in order to provide enhanced levels of protection to the public and reduce the likelihood of further offending.

⁴ YOIs are run by both the HM Prison Service and the private sector and can accommodate 15-21 year olds, although the estate is split between establishments that take 15-17 year olds and 18-21 year olds.

⁵ SCHs are generally used to accommodate young offenders aged 10-14 years old, girls up to the age of 16, and 15-16 year old boys who are assessed with high risk factors.

⁶ STCs are purpose built centres for young offenders up to the age of 17. They are run by private operators under contracts, which set out detailed operational requirements.

- Whilst not specifically a custodial sector, the report also contains data on the deaths of patients who died in hospitals whilst detained under the Mental Health Act (MHA).

3. This report contains data, where available, on the following⁷:

- Natural cause deaths broken down by age, gender and ethnicity;
- Self-inflicted deaths broken down by age, method, gender and ethnicity;
- Homicides broken down by age, gender and ethnicity;
- Restraint deaths broken down by age, gender and ethnicity;
- Other causes of death broken down by gender and;
- Data on the average annual populations and/or throughput in each sector in order to provide some context to the number of deaths⁸.

Statistical Methodology

Data Sources⁹

4. The data used in this report was collated by the Secretariat to the Panel and is produced with permission from the following organisations:

- National Offender Management Service (NOMS)¹⁰
- Independent Police Complaints Commission (IPCC)¹¹
- UK Border Agency (UKBA)¹²
- Care Quality Commission (CQC)¹³
- Youth Justice Board (YJB)¹⁴

Inclusion Criteria

5. The terms of reference for the Ministerial Council on Deaths in Custody, of which the IAP forms one tier, include all types of death in state custody (prison, approved premises, police, immigration and those detained under the Mental

⁷ A full demographic breakdown of these deaths is included in **Appendices 1-6**.

⁸ These should be viewed with caution, given the differing population sizes in custodial establishments and as such; they should not be used as a comparator of death rates between custodial sectors.

⁹ The data contained within this report was provided to the Secretariat by the custodial sectors. They were drawn from administrative IT systems, which, as with any large scale recording system, are subject to possible errors with data entry and processing and can be subject to change over time.

¹⁰ For prisoners in the adult prison estate, YOIs and residents of Approved Premises.

¹¹ Between 2000 and 2004, the Home Office collated statistics on deaths in police custody. The IPCC took over responsibility for data collection in 2004.

¹² These include the three HM Prison Service run Immigration Removal Centres at Dover, Haslar and Lindholme.

¹³ As of 1 April 2009, the Mental Health Act Commission's functions were split between the CQC and the Healthcare Inspectorate Wales.

¹⁴ The figures provided by the YJB include all young people in an STC or SCH.

Health Act - MHA). Whilst the secure youth estate was not explicitly mentioned in the original terms of reference of the Council, the IAP is considering deaths which occur in the secure youth estate as part of its work¹⁵.

Exclusion Criteria

6. The Panel have not included data for residents in Bail Accommodation Support Services (BASS)¹⁶; those subject to probation supervision on either post release licence, or community supervision (both suspended sentence orders and community orders) and those detained in military custody¹⁷ as they fall outside of the Terms of Reference

Data Analysis

7. This report does not draw comparisons between rates of deaths across custodial sectors. Each custody sector has very different population sizes, duration of detention and institutional pressures on detainees, which prevent accurate comparison. The data is presented to draw attention to the number of deaths in each sector over a long term period, rather than across the sectors. We have, however, included death rates taking account of changing population size for prisons and detained patients in secure mental settings.

Deaths in State Custody Overview

8. **Table 1** (overleaf) summarises the number of recorded deaths in state custody between 1 January 2000 and the 31 December 2010.

¹⁵ For further details about the background to the Ministerial Council, please refer to the IAP's mid term report, by clicking <http://iapdeathsincustody.independent.gov.uk/wp-content/uploads/2011/03/IAP-Mid-Term-Report-February-2011.pdf>

¹⁶ The BASS commenced in June 2007 and provides a service for those who would otherwise be held in prison. The service is specifically for defendants who can be bailed and offenders who can be released on Home Detention Curfew or who are subject to a community order as an alternative to custody. For data relating to BASS and probation supervision, please refer to the Ministry of Justice *Offender Management Caseload Statistics* publication (by clicking <http://www.justice.gov.uk/publications/statistics-and-data/prisons-and-probation/oms-quarterly.htm>), which provides statistics relating to offenders who under probation supervision.

¹⁷ For data on deaths in the UK military, please refer to the website of the Defence Analytical Service and Advice (by clicking <http://www.dasa.mod.uk/applications/newWeb/www/index.php?page=48&pubType=1&thiscontent=300&PublishTime=09:30:00&date=2011-03-31&disText=2010&from=listing&topDate=2011-03-31>).

Table 1: Summary of recorded deaths in state custody between 1 January 2000 and 31 December 2010

	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	Total
Prison:	146	142	164	182	207	174	153	185	165	169	196	1883
Police:	30	29	32	34	39	28	26	23	18	16	19	294
In-Patient Mental Health Setting (detained patients)	406	346	307	331	310	337	363	325	326	294	283	3628
Approved Premises	24	22	21	12	20	17	10	17	15	9	12	179
STC / SCH:	0	0	0	0	2	0	0	0	0	0	0	2
Immigration detention:	1	0	0	2	4	2	1	0	0	0	2	12
Total Deaths in State Custody for England and Wales	607	539	524	561	582	558	553	550	524	488	512	5998

1. Includes deaths of individuals 18 and over in custody or released on licence for medical reasons. These also include deaths of 15 - 17 year olds held in YOIs. These figures exclude two deaths that occurred in Haslar Immigration Removal Centre, which is run by HM Prison Service in 2003 and 2004. These are included in the immigration detention figures.

2. Deaths in or following police custody as defined in category A of the PACE Act 1984.

3. These figures include deaths of young people in Secure Training Centres (STCs) and Secure Children's Homes (SCHs)

4. These figures include the three prison service run IRCs at Haslar, Dover and Lindholme.

Summary¹⁸

- In total, there were 5,998 deaths recorded for the 11 years from 2000 to 2010. This is an average of 545 deaths per year. Of these deaths, 72% (N=4,291) were of males and 28% (N=1,676) were of females.¹⁹
- A total of 607 deaths were reported in 2000 compared to 512 in 2010 (this represents a 16% reduction between the beginning and the end of the reporting period).
- Deaths of those detained under the MHA and those in prison custody, account for 92% (N=5,511) of all deaths in state custody, at 61% (N=3,628) and 31% (N=1,883) respectively.
- 66% (N=3,974) of deaths were recorded as natural causes. Of these, 71% (N=2,814) of deaths were of patients detained under the MHA²⁰.
- 9% (N=553) of the 5,998 deaths were of individuals from Black and Minority Ethnic (BME) groups, with 5% (N=305) classified as Black, 3% (N=184) as Asian, 1% (N=52) as Mixed Ethnicity and 0.2% (N=12) as Chinese. 87% (N=5,192) were classified as White. Ethnicity was either not known, or not stated in 3% (N=180) of cases.²¹ 1% (N=76) were classified as 'Other'²².

¹⁸ Some percentages may add up to more or less than 100% due to rounding.

¹⁹ For data on gender, please see **Appendices 1-6**.

²⁰ A breakdown of these deaths can be found in **Appendix 2**.

²¹ 67 were residents of Approved Premises. Up to and including 2002, NOMS did not record data on the ethnicity of Approved Premises residents.

²² For data on ethnicity, please see **Appendices 1-6**.

These figures need further analysis to understand whether there is any disproportion between race and ethnic identity and types of death.

- In 0.3% (N=19) of deaths, the application of restraint by custodial staff was attributed to the cause of death during the Coroner's inquest.²³

Recent trends: 2008 to 2010

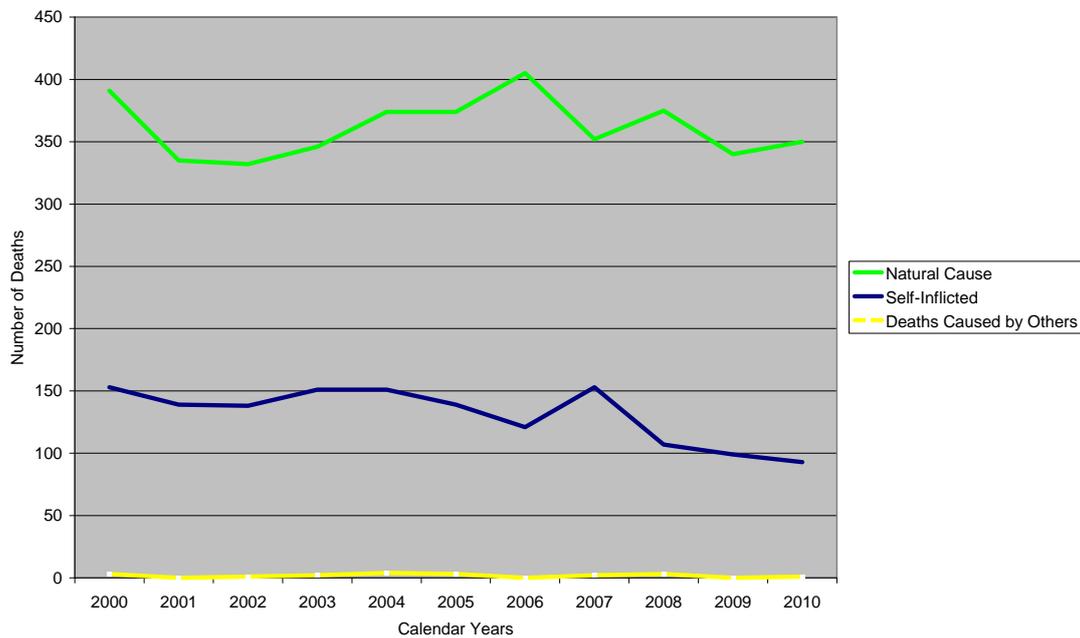
- In order to analyse more recent trends in deaths in custody, we have looked at data for the three-year period, between 2008 and 2010.
- In 2008 there were 524 deaths in state custody, compared to 512 in 2010. The number of deaths in 2009 (488) is the lowest recorded figure in the whole reporting period.
- Looking at specific sectors, there was a slight increase in prison deaths from 2008 to 2009 (165 in 2008 and 169 in 2009), followed by a further increase to 196 in 2010. Deaths of detained patients have reduced each year from 2008 to 2010 from 326 to 283 respectively. The number of deaths in Approved Premises reduced between 2008 and 2009 from 15 to 9, respectively, and then increased again to 12 in 2010. Deaths in police custody reduced between 2008 and 2009 from 18 to 16, and then rose slightly to 19 in 2010.
- UKBA recorded two deaths of immigration detainees in 2010, which were the first recorded deaths since 2006.

²³ The age, gender and ethnicity of restraint deaths are available in **Appendices 1-6**. For a more detailed statistics and analysis on deaths following restraint, please refer to the IAP's cross sector restraint report: <http://iapdeathsincustody.independent.gov.uk/wp-content/uploads/2011/01/Report-of-the-IAPs-Cross-Sector-Restraint-Workshop.pdf>.

Deaths in state custody by cause of death

9. The Panel has worked with the custodial sectors to compile the figures and tables below, which provide an overview of the number of deaths in state custody between 1 January 2000 to 31 December 2010 broken down by cause of death and gender. The full ethnicity and age breakdown, where this information was available, is included in the appendices at the end of this paper.

Figure 1: Trend lines for natural cause, self-inflicted and deaths caused by others in all state custody.



A) Natural Causes deaths

Figure 2: Number of natural cause deaths by custodial sector²⁴

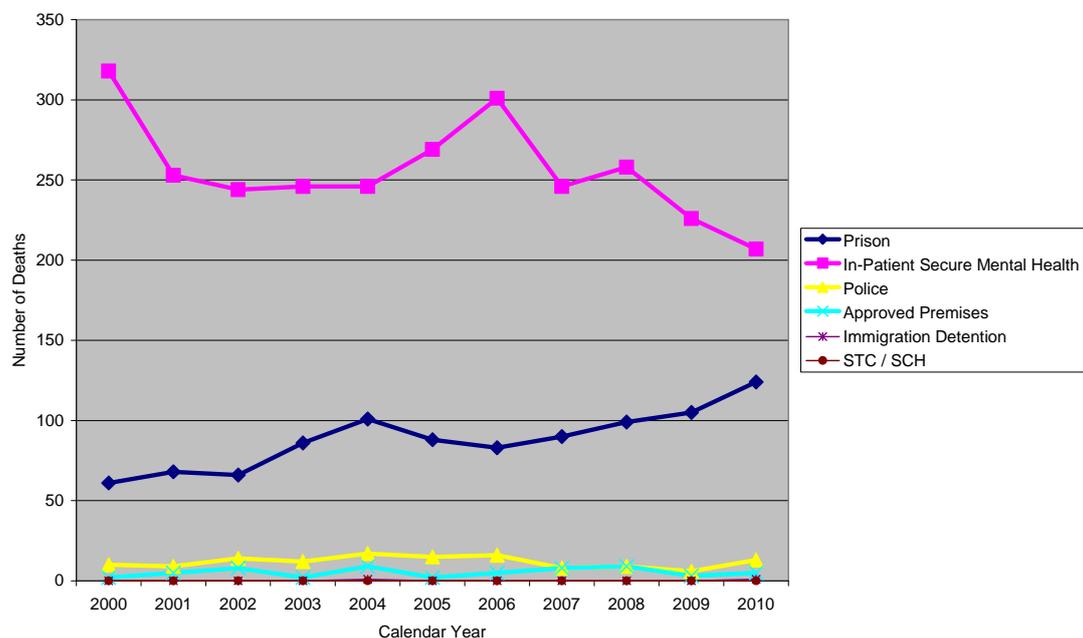


Table 2: Number of natural cause deaths, broken down by gender, by custodial sector

All Natural Causes Deaths	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	TOTALS
Prison	61	68	66	86	101	88	83	90	99	105	124	971
Males	59	66	63	85	94	86	80	90	96	102	121	942
Females	2	2	3	1	7	2	3	0	3	3	3	29
Police	10	9	14	12	17	15	16	8	9	6	13	129
Males	10	9	14	10	16	13	13	8	8	5	11	117
Females	0	0	0	2	1	2	3	0	1	1	2	12
In-Patient Secure Mental Health (detained patients)	318	253	244	246	246	269	301	246	258	226	207	2814
Males	163	132	129	133	141	150	164	126	149	126	126	1539
Females	155	121	115	113	105	119	137	120	109	100	81	1275
Approved Premises	2	5	8	2	9	2	5	8	9	3	5	58
Males	2	5	8	2	9	2	5	8	9	2	5	57
Females	0	0	0	0	0	0	0	0	0	1	0	1
Immigration Removal Centres	0	0	0	0	1	0	0	0	0	0	1	2
Males	0	0	0	0	1	0	0	0	0	0	1	2
Females	0	0	0	0	0	0	0	0	0	0	0	0
STC / SCH	0	0	0	0	0	0	0	0	0	0	0	0
Males	0	0	0	0	0	0	0	0	0	0	0	0
Females	0	0	0	0	0	0	0	0	0	0	0	0
TOTALS	391	335	332	346	374	374	405	352	375	340	350	3974

Analysis of statistics for natural cause deaths

- Between 1 January 2000 and 31 December 2010, there were 3,974 deaths recorded as natural causes, compared with 2,024 deaths attributed to non-natural causes. Natural cause deaths represent the largest proportion (66%)

²⁴ In 2010, NOMS introduced a new category of 'unclassified' deaths. There are currently eight such deaths in the prison estate. Once these have been classified, the overall death in custody figures for natural cause deaths, self inflicted deaths and homicide deaths will change slightly as these prison deaths are classified.

of deaths in the custodial estate. As a category, natural cause deaths include cases where death was inevitable; where the care and treatment of the detainee could have been better and those that could be viewed as preventable.

Prison deaths

10. There were 124 natural cause deaths in prison in 2010, compared to 61 in 2000²⁵. **Figure 2** shows that the number of natural cause deaths in prison has generally increased each year between 2000 and 2010. More recently, in 2008 there were 99 natural cause deaths, which rose to 105 in 2009 and 124 in 2010. The IAP acknowledges that the prison population has increased significantly in the reporting period from an average of 64,602 prisoners in 2000, to 84,725 in 2010, a rise of 31%.²⁶

11. **Figure 3** (overleaf) shows natural cause deaths in the context of the rising prison population – which demonstrates that the rate of natural cause deaths has increased. In 2000, there were 0.94 natural cause deaths per 1000 prisoners, this rose to 1.35 in 2004 and fell again to 1.06 in 2006. In 2009 (the last year for which all cases have been classified), this figure had risen to 1.26 natural cause deaths per 1000 prisoners. This increase is of concern to the Panel. We will be undertaking further work to understand the significance of these figures and to focus on natural cause deaths in prisons.

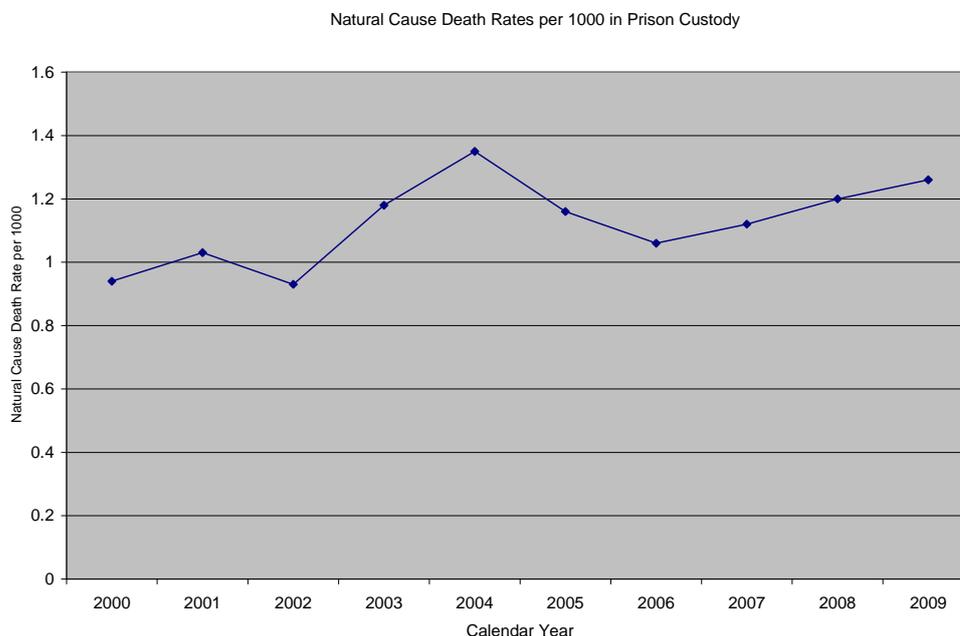
12. Between 2000 and 2009, 319 natural deaths occurred in those aged between 21-50 years which are regarded as premature deaths. In November 2010, the PPO published a report²⁷ based on investigation reports, into circulatory diseases in prisons. It outlined a number of implications for practice and highlighted the need for new or amended NOMS guidance on deaths in custody, with a greater focus on deaths from natural causes.

²⁵ In 2010, NOMS introduced a new category of 'unclassified' deaths. Therefore, the analysis of natural cause prison deaths is between 2000 and 2009 as the data in 2010 is not comparable with earlier years.

²⁶ Prison population figures quoted in this report and appendices averaged over 12 months. To view population figures in greater detail, please visit: <http://www.justice.gov.uk/publications/statistics-and-data/prisons-and-probation/population-in-custody.htm>

²⁷ Accessible by clicking here: <http://ppo.gov.uk/docs/deaths-from-circulatory-diseases.pdf>

Figure 3: Natural Cause Deaths in Prisons per 1000 prisoners

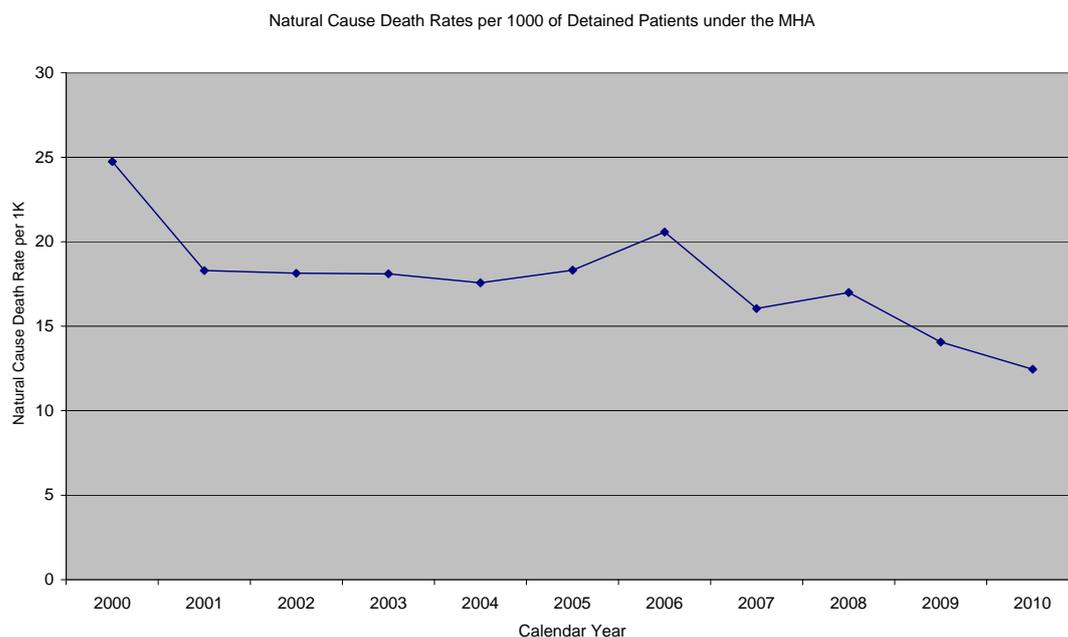


Deaths of patients detained under the Mental Health Act (MHA)

13. Between 2000 and 2010, 71% (N=2,814) of natural causes deaths across all custodial sectors were of individuals detained under the MHA. However, the number of natural cause deaths fell from 258 to 207 between 2008 and 2010. **Figure 4** (overleaf) shows this reduction in the context of the population of detained patients, which increased from an average of 12,855 in 2000 to an average of 16,662 in 2010²⁸. In 2000, there were 24.73 natural deaths of detained patients per 1000 patients, compared to 12.54 natural cause deaths in 2010.

²⁸ Data on average populations is included in **Appendix 2**.

Figure 4: Natural Cause Deaths in Secure Mental Health settings per 1000 patients



14. Whilst this reduction is welcomed by the IAP, the Panel think that continued efforts to screen and treat physical health problems of detained patients will be vital. In March 2011, the IAP workstream led by Simon Armson, considering the deaths of patients detained under the MHA, presented a paper to the Ministerial Board on Deaths in Custody. The focus of this paper was on natural cause deaths as there is an increasing body of evidence in relation to the poor physical health and morbidity of mental health patients.²⁹

15. The IAP recognised that further analysis of the data held by the Care Quality Commission (CQC) on the natural cause deaths of those detained under the Act. In summary, the analysis found that for all age groups, the most frequent natural cause deaths were due to pneumonia (23%), myocardial infarction (MI - 20%) and pulmonary embolism (PE - 8%). The results also suggest that there were a small number of deaths (on average 15 per year) due to medical or surgical emergencies, which could be considered as potentially avoidable.

16. Following recommendations made by the Panel, action is being taken by the Department of Health (DH) and CQC to analyse existing data and to collect relevant future data to examine reasons for the high numbers of deaths from MI and PE. CQC has also incorporated feedback from the IAP on its Death

²⁹ Disability Rights Commission (2006) *Equal Treatment: Closing the Gap – A Formal Investigation into Physical Health Inequalities Experienced by People with Learning Disabilities and/or Mental Health Problems*. DRC: 34.

Notification form, in order to improve reporting and to collect data on physical health diagnosis and treatments for all patients who die whilst detained and DH is working with the NHS Information Centre (IC) to undertake further scoping to identify data on detained patients. Finally, from 2011/12, the Mental Health Minimum Data Set (MHMDS) will provide a richer source of data on natural cause deaths. The IAP welcomes these developments.

B) Self-Inflicted Deaths

Figure 5: Number of self-inflicted deaths by custodial sector

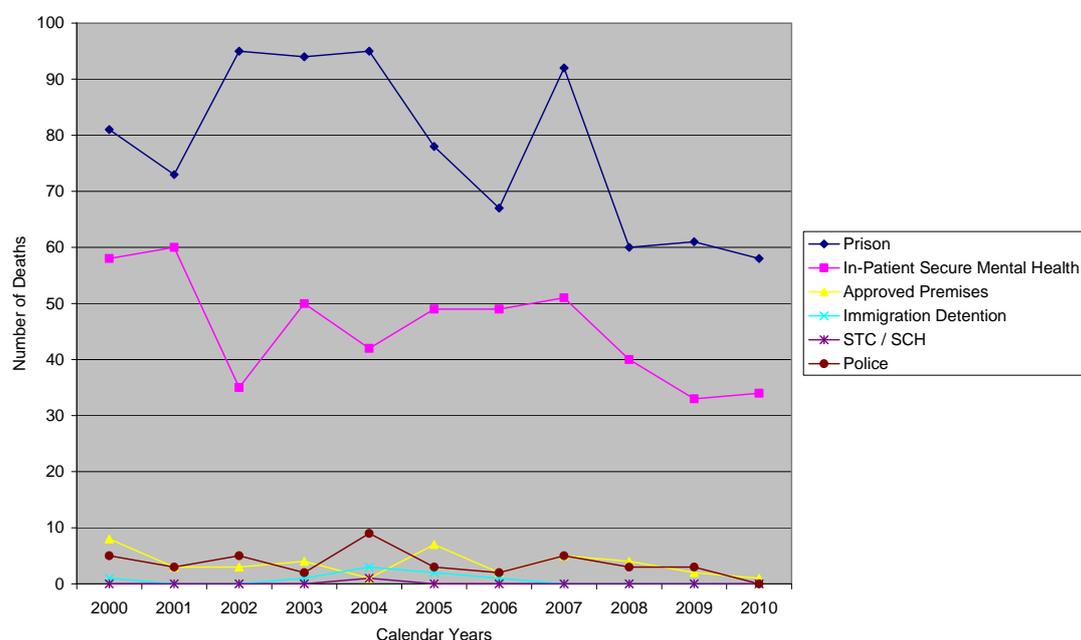


Table 3: Number of self-inflicted deaths, broken down by gender, by custodial sector

All Self Inflicted Deaths	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	TOTALS
Prison	81	73	95	94	95	78	67	92	60	61	58	854
Males	73	67	86	80	82	74	64	84	59	58	57	784
Females	8	6	9	14	13	4	3	8	1	3	1	70
Police	5	3	5	2	9	3	2	5	3	3	0	40
Males	5	3	5	1	8	2	2	5	3	3	0	37
Females	0	0	0	1	1	1	0	0	0	0	0	3
In-Patient Secure Mental Health (detained patients)	58	60	35	50	42	49	49	51	40	33	34	501
Males	36	35	21	30	21	30	31	34	25	27	18	308
Females	22	25	14	20	21	19	18	17	15	6	16	193
Approved Premises	8	3	3	4	1	7	2	5	4	2	1	40
Males	8	3	3	4	1	7	2	4	4	2	1	39
Females	0	0	0	0	0	0	0	1	0	0	0	1
Immigration Removal Centres	1	0	0	1	3	2	1	0	0	0	0	8
Males	1	0	0	1	3	2	1	0	0	0	0	8
Females	0	0	0	0	0	0	0	0	0	0	0	0
STC / SCH	0	0	0	0	1	0	0	0	0	0	0	1
Males	0	0	0	0	1	0	0	0	0	0	0	1
Females	0	0	0	0	0	0	0	0	0	0	0	0
TOTALS	153	139	138	151	151	139	121	153	107	99	93	1444

Analysis of statistics for self-inflicted deaths

- Between 1 January 2000 and 31 December 2010, there were 1,444 self-inflicted deaths in state custody. There were 153 self-inflicted deaths in 2000 compared to 93 in 2010 (39% less than 2000).

- Of these, the most common method of self-inflicted death was hanging, which accounts for 71% of deaths (N=1,024). 6% (N=89) of self-inflicted deaths were as a result of drugs or alcohol overdose³⁰.
- 68% (N=985) of the total self-inflicted deaths were of White males. 16% (N=231) were of White females³¹.
- In 2008 there were 60 self-inflicted deaths in prisons, compared to 58 in 2010 (which is the lowest annual number since 1995). The IAP welcomes the continuing reduction in self-inflicted deaths and the efforts by NOMS to improve the policy and practice that contribute to prisoner safety. A continued focus will be required, particularly in the context of stretched resources.
- In 2008 there were 40 self-inflicted deaths of detained patients, compared to 34 in 2010. Like prisons, there has been a reduction in the number of self-inflicted deaths each year –although there were 16 deaths of female patients in 2010.
- Gender. Of all 501 self-inflicted deaths of patients detained under the MHA between 2000 and 2010, 61% (N=308) were male and 39% (N=193) were female. The population figures for patients detained under MHA show there are approximately two male patients to every female patient³². In 2008, in the context of average populations, there were 2.5 (N=25) male self-inflicted deaths per 1000 patients and 3.0 (N=15) female self-inflicted deaths per 1000 patients respectively. There were 2.5 per 1000 (N=27) male self-inflicted deaths and 1.1 per 1000 (N=6) female self-inflicted deaths in 2009. In 2010, there were 1.6 per 1000 (N=18) male deaths and 2.9 per 1000 (N=16) female deaths.
- 55% (N=277) of self-inflicted deaths of detained patients were of patients between the ages of 21-40³³.
- For the first time, there were no recorded self-inflicted deaths in police custody in 2010.

³⁰ Methods of self-inflicted deaths are included in **Appendices 1-6**.

³¹ Please see **Appendices 1-6** for gender breakdown.

³² Average population figures for patients detained under the MHA are included in **Appendix 2**.

³³ For a breakdown on ages, please see **Appendix 2**.

C) Deaths Caused by Others (including Homicide)

Figure 6: Number of deaths caused by others (including homicide) by custodial sector

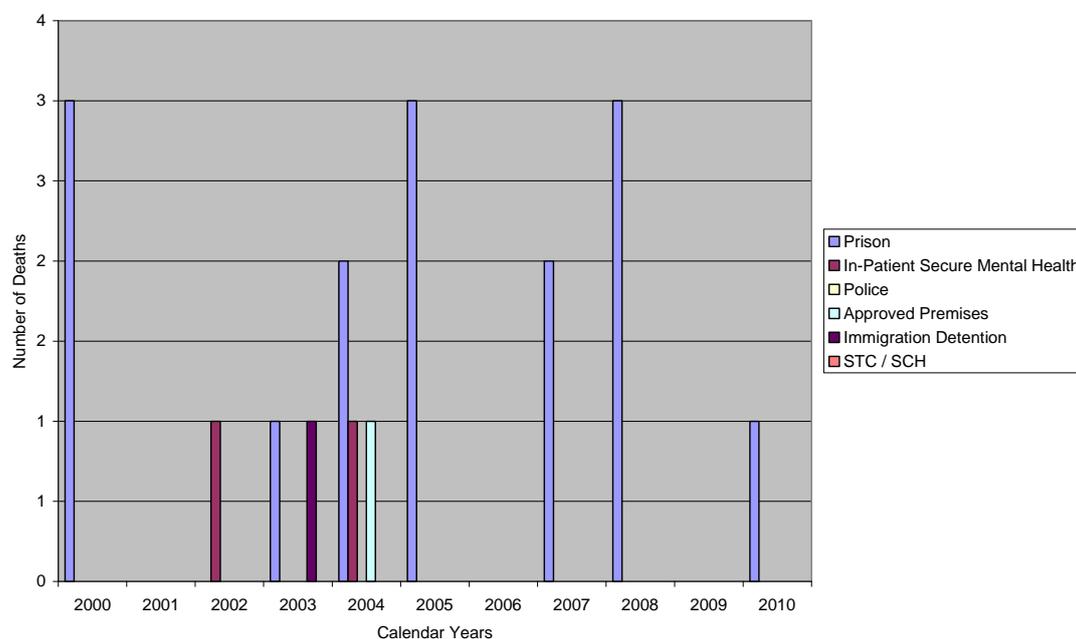


Table 4: Number of deaths caused by others (including homicide), broken down by gender, by custodial sector

All Deaths Caused by Others (including Homicide)	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	TOTALS
Prison	3	0	0	1	2	3	0	2	3	0	1	15
Males	3	0	0	1	2	3	0	2	3	0	1	15
Females	0	0	0	0	0	0	0	0	0	0	0	0
Police	0	0	0	0	0	0	0	0	0	0	0	0
Males	0	0	0	0	0	0	0	0	0	0	0	0
Females	0	0	0	0	0	0	0	0	0	0	0	0
In-Patient Secure Mental Health (detained patients)	0	0	1	0	1	0	0	0	0	0	0	2
Males	0	0	0	0	1	0	0	0	0	0	0	1
Females	0	0	1	0	0	0	0	0	0	0	0	1
Approved Premises	0	0	0	0	1	0	0	0	0	0	0	1
Males	0	0	0	0	1	0	0	0	0	0	0	1
Females	0	0	0	0	0	0	0	0	0	0	0	0
Immigration Removal Centres	0	0	0	1	0	0	0	0	0	0	0	1
Males	0	0	0	0	0	0	0	0	0	0	0	0
Females	0	0	0	1	0	0	0	0	0	0	0	1
STC / SCH	0	0	0	0	0	0	0	0	0	0	0	0
Males	0	0	0	0	0	0	0	0	0	0	0	0
Females	0	0	0	0	0	0	0	0	0	0	0	0
TOTALS	3	0	1	2	4	3	0	2	3	0	1	19

- There were 19 homicides recorded between 1 January 2000 and 31 December 2010. Of these, 79% (N=15) of homicides were in prison custody.

Conclusions and Next Steps

17. This analysis has highlighted that the overall numbers of deaths in custody has been reducing since 2000. The IAP will develop its analysis of the data in the next year to understand the significance of some of the recent trends. Natural cause deaths are the largest proportion of all deaths in state custody. The IAP welcomes the reduction in self-inflicted deaths and believes this is a credit to custody sectors efforts in addressing some of the underlying issues around self-inflicted deaths in custody. However, the Panel would like to re-iterate the importance to custody providers of maintaining focus in this area to bring about further reductions, particularly at a time of stretched resources and continuous changes in governance.
18. The analysis has highlighted that natural cause deaths in prison are increasing and this is an area which the Panel believes requires a greater focus and the Panel will be addressing this in its longer term work plan.
19. Additionally, in June 2011, at a seminar held by the IAP on the medical theories behind restraint deaths, experts identified that there have been more restraint related deaths than those included in both this review and the IAP's cross sector restraint report. This is related to the difficulties of an inconsistent approach to recording and reporting the use of force across the custodial sectors. Attendees believed there would be value in strengthening mechanisms to capture information on restraint related deaths, which the Panel will also explore as part of its longer term work plan.³⁴
20. The IAP intends to provide an annual update to this paper and will build on the depth of analysis as we obtain more data from the sectors and outcomes from investigations and inquests.

³⁴ For further information about the IAP's work on restraint, please see the IAP's cross sector restraint report by following this link: <http://iapdeathsincustody.independent.gov.uk/wp-content/uploads/2011/01/Report-of-the-IAPs-Cross-Sector-Restraint-Workshop.pdf>