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Robber Who Attacked Shop Staff with Machete Found Dead in Prison Cell

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A violent offender jailed for a series of machete attacks on shop workers has been found dead in his prison cell, with a newly released report revealing multiple failings in the handling of his mental health and personal safety behind bars.

Marc Skelly, 44, died on June 22, 2022, at HMP Lindholme in South Yorkshire, just four months after arriving at the facility. The convicted robber had been serving an eight-year sentence for a string of armed attacks in Bradford. A report published by the Prisons and Probation Ombudsman (PPO) on July 18, 2025, has now detailed critical shortcomings in the prison's care and monitoring procedures.

Skelly's offences took place in September 2020. On September 15, he and an accomplice targeted a Subway shop in Tong Street, threatening staff with a machete. Three days later, he returned to the area to commit a second robbery, during which he slammed the weapon on the counter and warned a worker he would "cut up" if they didn't open the till. He also attempted to rob a Farmfoods store nearby, slashing a male staff member and causing deep injuries to his hand and shoulder.

In November 2021, Skelly pleaded guilty to two counts of robbery and one count of attempted robbery. During sentencing at Bradford Crown Court, it was acknowledged that he understood he would be facing a lengthy prison term. He was later transferred to HMP Lindholme in February 2022. However, by June that year, he was found unconscious in his cell. Despite medical efforts, he never regained consciousness and was pronounced dead six days later. An inquest held in December 2023 concluded that he had taken his own life.

Systemic Failures

The PPO report has highlighted concerning lapses in how the prison managed Skelly under the Assessment, Care in Custody and Teamwork (ACCT) process, a framework designed to monitor and support prisoners at risk of self-harm or suicide. Although he was also on a Challenge, Support and Intervention Plan (CSIP), aimed at managing violent behaviour, his ACCT supervision lacked consistency.

The investigation found that a multidisciplinary team did not always attend key case reviews, and crucially, his care map did not include a plan to address substance misuse issues. Furthermore, prison staff failed to conduct a post-closure review after he was removed from ACCT monitoring.

Skelly had been diagnosed with personality disorders and was prescribed antidepressants and antipsychotic medication. Despite these indicators, healthcare teams did not explore whether he required more intensive, individualised psychological support. A clinical review found that the level of mental health and addiction treatment he received in custody fell short of what would typically be expected in the community.

The ombudsman, Kimberley Bingham, has made several recommendations, urging the prison's Governor to ensure ACCT procedures are followed in full and that care plans are better tailored to each prisoner's specific risks. The report adds to growing concerns about

the state of mental health provision within U.K. prisons and how vulnerable inmates are often left unsupported, even when warning signs are evident.