



HMIPS

HM INSPECTORATE OF
PRISONS FOR SCOTLAND

INSPECTING AND MONITORING

REPORT ON HMP GREENOCK

FULL INSPECTION

19 FEBRUARY - 2 MARCH 2018

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INTRODUCTION AND BACKGROUND

HM Chief Inspector of Prisons for Scotland (HMCIPS) assesses the treatment and care of prisoners across the Scottish Prison Service estate against a pre-defined set of standards. These Standards are set out in the document 'Standards for Inspecting and Monitoring Prisons in Scotland', published March 2015 which can be found at <https://www.prisoninspectorscotland.gov.uk/>.

The Standards reflect the independence of the inspection of prisons in Scotland and are designed to provide information to prisoners, prison staff and the wider community on the main areas that are examined during the course of an inspection.

The Standards provide assurance to Ministers and the public that inspections are conducted in line with a framework that is consistent and that assessments are made against appropriate criteria.

While the basis for these Standards is rooted in International Human Rights treaties, conventions and in Prison Rules, they are the Standards of Her Majesty's Inspectorate of Prisons for Scotland (HMIPS).

This report is set out to reflect the performance against these standards and has 10 main sections:

Standard 1	Lawful and transparent custody
Standard 2	Decency
Standard 3	Personal safety
Standard 4	Health and wellbeing
Standard 5	Effective, courteous and humane exercise of authority
Standard 6	Respect, autonomy and protection against mistreatment
Standard 7	Purposeful activity
Standard 8	Transitions from custody to life in the community
Standard 9	Equality, dignity and respect
Standard 10	Organisational effectiveness

HMIPS assimilates information resulting in evidence based findings utilising a number of different techniques. These include:







- obtaining information and documents from the Scottish Prison Service (SPS) and the prison inspected;
- shadowing and observing Prison Service and other specialist staff as they perform their duties within the prison;
- interviewing prisoners and staff on a one-to-one basis;
- conducting focus groups with prisoners and staff;
- observing the range of services delivered within the prison at the point of delivery;

- inspecting a wide range of facilities impacting on both prisoners and staff;
- attending and observing relevant meetings impacting on both the management of the prison and the future of the prisoners such as Case Conferences; and
- reviewing policies, procedures and performance reports produced both locally and by Scottish Prison Service headquarters specialists.

HMIPS is supported in our work by inspectors from Healthcare Improvement Scotland (HIS), Education Scotland, Scottish Human Rights Commission and the Care Inspectorate.

The information gathered facilitates the compilation of a complete analysis of the prison against the standards used. This ensures that assessments are fair, balanced and accurate. In relation to each standard and quality indicator, inspectors record their evaluation in two forms:

1. A colour coded assessment marker.

Rating	Definition
Good performance 	Indicates good performance which may constitute good practice.
Satisfactory performance 	Indicates overall satisfactory performance .
Generally acceptable performance 	Indicates generally acceptable performance though some improvements are required.
Poor performance 	Indicates poor performance and will be accompanied by a statement of what requires to be addressed.
Unacceptable performance 	Indicates unacceptable performance that requires immediate attention.
Not applicable 	Quality indicator is not applicable .

2. A written record of the evidence gathered is produced by the Inspector allocated each individual standard. This consists of a statement against each of the indicators contained within the standard inspected. It is important to recognise that although standards are assigned to inspectors within the team all inspectors have the opportunity to comment on findings at a deliberation session prior to final assessments being reached. This emphasises the fairness aspect of the process ensuring an unbiased decision is reached prior to completion of the final report.

KEY FACTS

Location

Her Majesty's Prison Greenock is situated close to the main A78 on the Old Inverkip Road in Greenock.

Role

HMP Greenock is a local community facing prison, receiving offenders predominately from the courts in Greenock, Campbeltown, Oban, Dunoon and surrounding Inverclyde and North Strathclyde areas. It holds remand and short-term convicted male and female prisoners. It provides a national facility for selected long-term and life sentenced prisoners.

Brief history

The prison was built between 1907 and 1910, taking its first prisoners in August 1910.

Accommodation

It was originally built as two residential halls, Ailsa Hall and Darroch Hall, with a third building, Chrisswell House being built in the 1990s. It also has two Community Integration Units, one for up to eight men and one for up to six women, which accommodate those serving short-term sentences who are assessed as low risk and suitable for community access.

Design capacity

The design capacity is 249. At the time of the inspection the prison held 235. Of this number 43 were untried prisoners, 108 were serving less than four years, eight were serving four to 10 years, two were serving over 10 years, 67 were serving life and two were serving an Order for Lifelong Restriction. There were also five prisoners who were convicted awaiting sentence.

Date of last inspection: 19 – 27 May 2014

Healthcare provider: NHS Greater Glasgow and Clyde

Learning provider: Fife College

Overview by HM Chief Inspector of Prisons for Scotland

Introduction

HMP Greenock is one of the oldest remaining prisons in Scotland, having been built in the early years of the last century. The infrastructure and fabric of the buildings are showing their age, in stark contrast to the more modern prisons which make up the majority of the prison estate in Scotland. The residential halls in particular were suffering from water ingress resulting in unacceptable dampness in a number of cells. Shortly before the inspection a number of cells had been taken out of use because of their level of dampness.

The last inspection of HMP Greenock was conducted in 2014. This inspection was carried out in February 2018. I am grateful to the guest inspectors from Healthcare Improvement Scotland, the Care Inspectorate, Education Scotland, the Scottish Human Rights Commission and other prisons in Scotland for their assistance with this inspection.

Inspection Findings

In relation to the ten Standards for Inspecting and Monitoring Prisons in Scotland used to inspect HMP Greenock, seven were assessed as satisfactory, two as generally acceptable and one as poor.

The quality of relationships in a prison always plays an important part in how well the prison is run and shapes the experience of people detained there. Throughout the inspection, inspectors observed good relationships between staff and prisoners. This was not only due to HMP Greenock being a local prison where staff were familiar with a number of prisoners, but also the professional, caring and respectful manner in which prisoners were treated. Staff, prisoners and those visiting the prison told us they felt safe. This sense of safety was recognised as being largely the product of the strong and positive relationships that existed within HMP Greenock.

The Standard which was assessed as poor related to Decency, and was as a result of the quality and conditions of the residential buildings. Given that the main residential areas were built over a century ago, they did not meet modern standards, nor were they comparable with the conditions found in the majority of prisons in Scotland. Ailsa Hall and, to a lesser extent, Darroch Hall were suffering from unacceptable dampness in a number of cells. As a result the Governor had recently taken 17 cells out of use. It is difficult to see how this issue can be addressed without significant investment, and should the status quo remain it will almost certainly result in more cells being taken out of use over time.

Additionally, HMP Greenock is now the only prison in Scotland where the in-cell toilets are not contained within cubicles, which is an unsatisfactory situation in a modern prison. Whilst I am aware that a site has been procured on which to build a replacement prison, it is unknown when these plans may come to fruition. Until there is a replacement built, significant upgrading will be required to prevent further weather deterioration of the residential halls. The Scottish Prison Service (SPS) and

the Scottish Government must bring forward plans to address and reverse the physical deterioration of the current buildings, or finalise their plans and confirm a date for the replacement of HMP Greenock.

The food provided in HMP Greenock was amongst the best seen during inspections. The quality was greatly enhanced by being made in close proximity to where it was served, and not being transported on heated trolleys.

The Healthcare Team at HMP Greenock was a well-motivated and caring workforce. Inspectors saw many examples of innovative practice and prisoners were positive about the healthcare they received. There was a strong emphasis on making sure that prisoners were involved in and kept informed of their care. There was a comprehensive range of clinics within the prison and waiting times met the required standards. The prison had IT access to laboratory results, which meant they were able to obtain key results for their patients quickly and efficiently, which was good practice. Inspectors found clear processes and pathways for identifying patients with long term conditions, which were well managed. Healthcare staff had established good links with healthcare providers in the community, which meant that prisoners were well supported when they returned to the community on release from prison. Inspectors saw the innovative use of tele-healthcare, where prisoners admitted late on a Friday evening were assessed by a doctor using this facility, thus allowing faster access to assessments by a GP. On the other hand, the design and age of the prison meant there was limited accommodation for providing healthcare, and patient confidentiality was compromised when discussions could be overheard.

Unlike other establishments, HMP Greenock did not have a full-time Family Contact Officer (FCO). This is a concern as FCOs are an important bridge between prisoners and their families. The environment in the Visits Room appeared to be a positive one where staff, visitors and prisoners had good relationships. Staff carried out their observations in an unobtrusive manner, and prisoners and visitors commented on the relaxed atmosphere.

The recent establishment of a clothing bank within the prison was an excellent initiative and one that should be rolled out throughout the SPS.

Access to purposeful activity was limited at HMP Greenock due to the footprint, but they offered a small number of workshops. There was no offending behaviour programmes being delivered, which could cause issues for female prisoners who wished to progress and would therefore need to move to another establishment. There was an impressive range of work placements available and good support for those who were on them.

The quality of learning and teaching was good and most prisoners accessing the Learning Centre spoke highly of their learning experiences and positive relationships with education staff. However, many learning activities continued to have no accreditation. Prisoners had been successful in being nominated for a total of 28 Koestler Awards achieving 14 winning entries. The education contract provider changed in August 2017 from New College Lanarkshire to Fife College. The full implications of the changes were not settled, resulting in an adverse impact on the

opportunities available for prisoners to engage in educational activities. HMIPS will continue to monitor the provision of educational opportunities in HMP Greenock.

The library was not widely promoted, therefore was rarely used by prisoners. The range of reading material available was improving following the recent partnership with Inverclyde Council. However, there was no material available for prisoners with additional support needs.

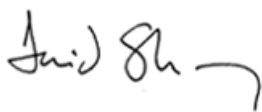
Prisoners benefitted from a well-equipped and accessible gym which was popular and well used. However, only a minority of female prisoners attended the gym. The Fit Together programme, run in conjunction with the Fitzgerald Resource Centre, provided opportunities for people from the local community with learning disabilities to benefit from physical activities in the gym at HMP Greenock. They were supported by prisoners to develop and improve their lifestyles through fitness and exercise activities.

HMP Greenock was active in supporting a large number of prisoners in returning successfully to their community at the conclusion of their sentence. A range of agencies worked well and in partnership to ensure prisoners' needs and risks were addressed prior to returning to the community. Through-care Support Officers provided a valuable and effective service, which was making a significant contribution to the successful resettlement of prisoners on release. They had been creative in developing service level agreements with a number of housing partners to support better housing options being available for prisoners on release.

Next Steps

This report identifies a number of areas of good performance which are worthy of sharing and which I hope will be taken up by other prisons in Scotland. It also highlights where improvements can be made. I look forward to seeing these improvements introduced through the prison's future plans.

HMIPS will continue to monitor progress in HMP Greenock, through regular monitoring visits by the Independent Prison Monitors.



David Strang
HM Chief Inspector of Prisons for Scotland

13 June 2018

Summary of Inspection Findings

Standard 1 Lawful and transparent custody

Satisfactory performance



Standard 2 Decency

Poor performance



Standard 3 Personal safety

Satisfactory performance



Standard 4 Health and wellbeing

Satisfactory performance



Standard 5 Effective, courteous and humane exercise of authority

Satisfactory performance



Standard 6 Respect, autonomy and protection against mistreatment

Satisfactory performance



Standard 7 Purposeful activity

Generally acceptable performance



Standard 8 Transitions from custody to life in the community

Satisfactory performance



Standard 9 Equality, dignity and respect

Generally acceptable performance



Standard 10 Organisational effectiveness

Satisfactory performance



Good Performance

There were 15 good performance Quality Indicators: 1.1, 2.9, 2.10, 4.9, 4.10, 4.17, 4.20, 4.21, 5.6, 5.11, 7.3, 7.4, 7.23, 8.5 and 10.9.

STANDARDS, COMMENTARY AND QUALITY INDICATORS

STANDARD 1 - LAWFUL AND TRANSPARENT USE OF CUSTODY

The prison complies with administrative and procedural requirements of the law and takes appropriate action in response to the findings and recommendations of official bodies that exercise supervisory jurisdiction over it.

Commentary

The prison ensures that all prisoners are lawfully detained. Each prisoner's time in custody is accurately calculated; they are properly classified, allocated and accommodated appropriately. The prison co-operates fully with agencies which have powers to investigate matters in prison.

Inspection findings

Overall Rating: Satisfactory performance 

There appeared to be a good atmosphere within the Reception area, which was not only due to HMP Greenock being a local prison where Reception staff were familiar with a number of prisoners from past sentences, but also the manner in which staff dealt with those entering the establishment which was professional, caring and compassionate. Prisoners were treated with respect, and staff followed the correct procedures to ensure persons entering the establishment were not at risk, either through the effective utilisation of the 'Talk to Me' Strategy or their history on the SPS electronic prisoner record system (PR2).

HMP Greenock had robust procedures in place to ensure that prisoners were lawfully detained, and the Reception area was well organised. All staff dealing with warrants had completed the required training and were competent in calculating all but the most complex of sentences. Staff were experienced and had developed effective approaches and processes for dealing with new arrivals in a humane and caring manner. Staff followed the Scottish Prison Service (SPS) procedures with regards to classification and allocation.

Space in HMP Greenock was limited due to the number of cells that had been put out of use, as they were no longer fit-for-purpose. Although a first night in custody unit had been identified, due to cells having been put out of use, it was often full resulting in inductions being carried out in the cell the prisoner had been allocated to.

Throughout the week inspectors observed a number of statutory duties and powers being performed in line with the law but in a decent and caring manner.

Quality Indicators

1.1 Statutory procedures for identification and registration of prisoners are fully complied with.

Rating: Good performance



HMP Greenock receives prisoners from Greenock, Campbeltown, Oban, Dunoon, and the surrounding Inverclyde and North Strathclyde courts, as well as those transferred in from other establishments. Due to the static population within the establishment, and the number of cells that had been put out of use, as they were not fit for purpose, very few admissions and transfers took place during the inspection. However, of those that were observed, the admission and release process was effective. The Reception staff were very experienced and had worked there for a long period of time. Both male and female Officers were competent in foundation and intermediate warrant processes and they were aware of what made a warrant lawful, and the process for registering prisoners on PR2. On each occasion observed, staff showed professionalism and compassion in dealing with prisoners.

1.2 All prisoners are classified and this is recorded on the prisoner's electronic record.

Rating: Satisfactory performance



Those entering the establishment were recorded on PR2. An example of this was the transfer in of a female prisoner. Reception staff took steps to confirm her identity by asking her to confirm her personal details, and checked them against the warrant. The Prisoner Escort Record (PER) was scrutinised by the Officer who then signed all relevant paperwork. The seven-point check was carried out to ensure validity of the warrant to detain the prisoner. Staff also informed her of her earliest date of liberation (EDL) before she left the Reception area.

1.3 All prisoners are allocated to a prison or to a location within a prison dependent on their classification, gender, vulnerability, security risk or personal medical condition.

Rating: Generally acceptable performance



HMP Greenock offered various options for allocation; Darroch Hall for female prisoners, Ailsa Hall for male short and long-term prisoners, remand prisoners and those wishing protection, and Chrisswell House which is a National Top End (NTE). The allocation of prisoners was observed in Reception on a number of occasions at the point of admission, and staff were seen to take account of all the factors appropriate to this indicator. Staff checked for possible vulnerability by checking the charges on the warrants, through good open questioning of prisoners, completing the 'Talk to Me' Strategy documentation, and checking PR2 for previous history and any risk and condition issues. Prisoners were also informed of some immediate information that would be of benefit to them regarding medication, visiting times, the regime and the use of the prison telephone.

Staff ensured a core screen interview was carried out on admission but this could take a number of days to fully complete.

1.4 A cell sharing risk assessment is carried out prior to a prisoner's allocation to cellular accommodation.

Rating: Not Applicable

HMP Greenock only has single cell accommodation and therefore do not carry out cell-sharing risk assessments.

1.5 Release and conditional release eligibility dates are calculated correctly and communicated to the prisoner without delay.

Rating: Satisfactory performance 

The Reception staff calculate critical dates on admission and then pass the warrant on to the main office for confirmation. If HMP Greenock receives prisoners after the office closes an independent check by another Reception Officer is carried out. Lists of those appropriately trained are available to Unit Managers and First Line Managers (FLM), should there be a need to confirm a warrant. If the information was available prisoners were advised of future court dates, and prior to leaving the Reception were informed of their EDL, otherwise it was confirmed the following day.

1.6 The statutory duties and powers granted to the governor or director are performed as required by law.

Rating: Satisfactory performance 

During the inspection a range of statutory duties and powers were observed to be performed as required by law. These included the Health and Safety at Work Act, 1974, The Food Standards Act 1999, The Prisons and Young Offenders Institutions (Scotland) Rules 2011, Rule 95 applications, and the 'Talk to Me' Strategy was in place.

1.7 Appropriate action has been taken in response to findings or recommendations of monitoring, inspectorial, audit or judicial authorities that have reported on the performance of the prison since the last full inspection.

Rating: Satisfactory performance 

HMP Greenock had been subject to a number of internal audits in recent months, evidence was provided of how HMP Greenock had or was currently addressing any resulting recommendations. A number of documents confirmed what actions had been taken, by whom and the timescales attached to them. The relatively new Senior Management Team has recognised that there is a need to consolidate these documents to manage the actions more easily.

STANDARD 2 - DECENCY

The prison supplies the basic requirements of decent life to the prisoners.

Commentary

The prison provides to all prisoners the basic physical requirements for a decent life. All buildings, rooms, outdoor spaces and activity areas are of adequate size, well maintained, appropriately furnished, clean and hygienic. Each prisoner has a bed, bedding and suitable clothing, has good access to toilets and washing facilities, is provided with necessary toiletries and cleaning materials, and is properly fed. These needs are met in ways that promote each prisoner's sense of personal and cultural identity and self-respect.

Inspection findings

Overall rating: Poor performance 🟡

Noting that the main residential areas, Ailsa and Darroch Halls, were built at the start of the 20th Century, they did not meet modern standards nor were they comparable with the conditions found in the majority of prisons in Scotland.

In addition to the age of the main areas of the prison, both Ailsa Hall and to a lesser extent Darroch Hall, were suffering from water ingress resulting in unacceptable dampness within a number of cells. It was pleasing to note that the Governor had recently put 17 cells out of use in Ailsa Hall, due to the poor conditions resulting from the dampness. During the inspection, inspectors were told by staff in Darroch Hall that a further cell had been put out of use due to concerns about dampness. It is difficult to see how this issue can be addressed without significant investment, and should the status quo remain it will almost certainly result in more cells being put out of use over time.

HMP Greenock is now the only establishment in Scotland where the in-cell toilets are not contained within cubicles. Whilst many had small modesty screens the toilets were open to the room, which is far from ideal. Few prisoners eat in their cells, and all cells were single occupancy which mitigated some of the health and safety issues. However, given the length of time prisoners spend in their cells, especially at the weekends, it is an unsatisfactory situation in a modern prison service.

Whilst it is understood that work is being undertaken on plans for a replacement establishment to be built on a nearby site, it is uncertain when these plans may come to fruition. SPS management must come forward with plans to address and reverse the on-going deterioration of the current buildings, or finalise their plans and confirm a date for the replacement of HMP Greenock.

It was clear that the staff and prisoners in HMP Greenock put in a great deal of effort to maintain a clean environment. Many of the general areas had benefitted from extensive painting immediately prior to the inspection, and this created a bright and cheerful atmosphere in those areas. See the photographs at Annex D. Additionally,

prisoner work parties had been initiated to paint many of the cells to freshen and brighten them up, which was welcomed by staff and prisoners alike.

Management and staff should ensure that those prisoners who are less able to maintain their cells in a clean and tidy state are offered the appropriate level of support, in order that they can readily benefit from a clean and hygienic living environment. Special attention should be paid to the conditions within the accessible and safer cells, to ensure that they are maintained, at all times, to the highest levels of cleanliness and hygiene.

There appeared to be ample bedding and clothing available for the number of prisoners in HMP Greenock. However, there needs to be a formal and consistent approach to the removal of items that are no longer fit for purpose. It was evident from speaking to the staff and prisoners in the Laundry and the residential areas, that there was not a clear understanding of how to access new bedding or clothing, or how these items were removed from use and replaced. Whilst it is a somewhat subjective assessment, inspectors were of the opinion that some of the clothing and bedding that was in use was close to or beyond its useful life. Local management should review this situation and satisfy themselves that the system operates in a clear, consistent, equitable and decent manner.

The recent establishment of a clothing bank within the prison is an excellent initiative and one that should be rolled-out throughout the SPS.

The food provided in HMP Greenock was amongst the best seen during inspections, in large part this was due to the manner in which it was served. Food did not spend extended periods in heated trolleys. It was mainly served in the servery adjacent to the kitchen, and where that was not the case, e.g. for fried food, it was prepared immediately prior to serving and within the serving areas. The food choice system operated in a similar fashion to other establishments, working on a three week rota system. It would be good to see greater prisoner involvement in this process, and if the Prisoner Information Action Committee (PIAC) and food focus groups were held more regularly, that would go a long way to contributing to prisoner involvement and buy-in. It was encouraging to note that the catering staff worked closely with those individuals who had particular dietary needs, in order to ensure that they had a variety of choices available to them.

What cannot be overlooked, when considering the following element of this Standard *'the prison provides to all prisoners the basic physical requirements for a decent life'*, is that the main residential buildings were suffering from significant water ingress in certain areas, and HMP Greenock has the only cells in Scotland without toilets contained within cubicles, and is therefore unable to meet the standards expected within a 21st Century custodial prison estate. HMP Greenock requires significant upgrading or replacement within a short period.

Quality Indicators

2.1 The prison buildings, accommodation and facilities are fit-for-purpose and maintained to an appropriate standard.

Rating: Unacceptable performance 

The two main residential halls in HMP Greenock that housed the vast majority of those held there, Ailsa and Darroch Hall, dated backed to Edwardian times and were reflective of their age. Whilst the Estates Department within the establishment were doing what they could with these Halls, they were showing significant signs of dilapidation. Photographs of the conditions of the cells recently taken out of use can be found at **Annex E**.

It was encouraging to note that the Governor had recently put 17 cells in Ailsa Hall out of use due to water ingress, dampness, mould and the deterioration of the paintwork. Whilst this was welcomed, it is highly probable that without significant investment designed to protect the structure from the elements, that other cells will similarly deteriorate to such an extent that they too will need to be put out of use. During the first week of the inspection a further cell was put out of use in Darroch Hall as a result of dampness, a week which saw no inclement weather. Given the apparent creeping nature of this situation, it is likely that in the near future these two buildings could become unfit for purpose, and thereby unfit for human habitation. It was noted that the SPS is developing plans to replace HMP Greenock on a nearby site, and HMIPS would therefore encourage the SPS to bring forward these plans within a short timescale.

In addition to the ingress of water, none of the cells in HMP Greenock had enclosed toilets within the cells; rather the toilet sits in the corner of the cell either open to the room or benefitting from a small modesty screen. Such conditions do not compare well with other SPS establishments, and fall short of what should be expected in the 21st Century. Additionally much of the cell furniture across the establishment was showing signs of age and will require replacement in the near future.

2.2 Good levels of cleanliness and hygiene are observed throughout the prison ensuring procedures for the prevention and control of infection are followed.

Rating: Satisfactory performance 

Despite the age of the building, levels of cleanliness were generally of a good standard. Prisoners undertook the cleaning activities within the secure areas of the establishment, and most were trained to British Institute of Cleaning Science (BICS) standards. However, due to recent staff shortages not all prisoners undertaking these duties have undergone the training. Management must ensure that all prisoners undertaking cleaning duties are appropriately trained. One area of concern was the level of cleanliness of the accessible cell within Ailsa Hall. However, once this was brought to the attention of the Hall Manager actions were taken to remedy the situation.

It was noted that immediately prior to and during the inspection there was an extensive programme of repainting being undertaken. See the photographs at Annex D. Whilst this undoubtedly improved the look and feel of these areas, it could not conceal the fact that much of the establishment is close to or beyond its useful life.

2.3 Cleaning materials are available to all prisoners to allow them to maintain their personal living area to a clean and hygienic standard.

Rating: Generally acceptable performance 

Prisoners were able to freely access cleaning materials to maintain their cells in a clean, tidy and hygienic state. There was a system in place that allowed those who attended work or education during the day, to access time and materials in the evenings to clean their cells. Whilst time and materials were provided, it was difficult for some prisoners to maintain their cells due to the physical condition of the building. As previously stated some cells had been put out of use. Also, the age of the establishment and much of the in-cell furniture made it more difficult to maintain a clean and hygienic environment. The exception to this were the two new Community Integration Units (CIUs) which were modern, well-designed and well looked after by those located there.

2.4 All prisoners have a bed which is fit-for-purpose and in good condition.

Rating: Satisfactory performance 

All cells in HMP Greenock were single occupancy, which was a positive. However, the configuration of the cells meant that beds were higher than the standard height. This was due to majority having originally been bunks beds which had been altered into single beds. Additionally this process had left a small 'tail' piece at each corner which could be considered a potential health and safety risk. The bed height could also prove to be challenging for a number of the older and less mobile prisoners. SPS management should review this situation. Please see the photographs at **Annex F**.

2.5 All prisoners are given sufficient bedding or are allowed to supply their own. Bedding is in good condition, clean and can be laundered regularly.

Rating: Generally acceptable performance 

Much of the bedding, whilst still serviceable, was old and very worn. Prisoners were able to provide their own bedding so long as it met Crib 7 standard, which made the bedding very expensive and difficult to obtain. This situation appeared to penalise prisoners given that the bedding provided by the SPS, was unlikely to meet this high standard, in the condition it was found in, and having been laundered on many occasions. SPS should review this situation to satisfy themselves that the standard they set for personal bedding does not penalise prisoners and their families, and that the bedding they supply remains at Crib 7 standard having been laundered on a large number of occasions.

There were processes in place to ensure that bedding was laundered regularly and that there was sufficient clean bedding available. However a formal process is required to identify bedding that is no longer fit for purpose, therefore condemned and suitable replacements ordered. There was a lack of clarity on who was responsible for this. Local management should ensure that they introduce a formal process, to be followed by everyone, for the removal of items beyond their useful life and the procuring of replacements.

2.6 A range of toiletries and personal hygiene materials are available to all prisoners to allow them to maintain their sense of personal identity and self-respect.

Rating: Satisfactory performance 

Prison issued toiletries were freely available. They were basic but appropriate for their purpose. The range available to purchase via the weekly canteen or sundry purchases appeared appropriate. Prisoners stated that 'affordable' options of some toiletries had been removed from the canteen in the past and only reintroduced recently, this was confirmed by staff. Local management should ensure that 'affordable' options are continually available on the canteen sheet.

2.7 All prisoners have access to washing and toileting facilities that is either freely available to them or readily available on request.

Rating: Satisfactory performance 

Whilst there were no in-cell showering facilities in HMP Greenock, all prisoners spoken with stated that they could access a shower on a daily basis and more frequently if time allowed. Cells did, however, have integral washing facilities.

2.8 All prisoners have supplied to them or are able to obtain for themselves a range of clothing suitable for the activities they undertake. The clothes available to them are in good condition, fit for purpose and allow them to maintain a sense of personal identity and self-respect. Clothing can be regularly laundered.

Rating: Generally acceptable performance 

In line with the comments made in QI 2.5, the process by which items of clothing are condemned and replaced also needs to be formalised. At present it is rather informal and in relation to clothing, appears to rely upon the opinion of the prisoners working in the Laundry. It was not clear who managed the process of ordering and replacing clothing deemed beyond effective use. The lack of a formal process could result in the gradual reduction of clothing available to prisoners. Both staff and prisoners stated that there had been a recent purchase of new clothing, but were unsure by what process this had occurred. Management should put in place a formal process, owned by an identified area, which ensures there is a consistent process for the condemning and replacement of prison issued clothing.

2.9 The meals served to prisoners are nutritionally sufficient, well-balanced, varied, served at the appropriate temperature and well presented.

Rating: Good performance



There were two food serveries in HMP Greenock, one adjacent to the kitchen and the other adjacent to Ailsa Hall. The quality of the food in HMP Greenock was greatly enhanced by it being made in close proximity to where it is served, and not being transported on heated trolleys. Inspectors tasted the food at the point of serving on a number of occasions, and found it to be good quality, hot and well presented. Food such as pastries and chips, at the point of service, were greatly improved by being freshly cooked.

2.10 The meals served to each prisoner conform to their dietary needs, cultural or religious norms.

Rating: Good performance



The kitchen operated a two season, three week rotational menu system. The menus offered prisoners the option of eating a healthy diet, should they choose to do so. Individuals who required a special diet due to health, faith or belief issues were fully accommodated. Where an individual had more complex dietary needs, the catering staff arrange to meet them on a one-to-one basis to ensure their needs were met. Prisoners stated that the quality of the food at the point of delivery in HMP Greenock was superior to that available in most other Scottish prisons, as a result of the manner in which it is produced and served.

STANDARD 3 - PERSONAL SAFETY

The prison takes all reasonable steps to ensure the safety of all prisoners.

Commentary

All appropriate steps are taken to minimise the levels of harm to which prisoners are exposed. Appropriate steps are taken to protect prisoners from harm from others or themselves. Where violence or accidents do occur, the circumstances are thoroughly investigated and appropriate management action taken.

Inspection findings

Overall Rating: Satisfactory performance 

It was abundantly clear from the discussion at focus groups, conversations during the inspection and general observations, that staff, prisoners and those visiting the establishment felt safe. This sense of safety was acknowledged by all parties as being, in a large part, derived from the strong and positive relationships that existed within HMP Greenock. Of particular note were comments made by female prisoners within Darroch Hall, who almost universally stated that the staff in HMP Greenock more willingly and freely engaged in conversation and dialogue with them, than they had experienced in any other establishment in Scotland. This made them feel much more settled and supported.

Whilst staff in the different areas engaged with those they were responsible through a varied range of approaches, it appeared that these engagements were friendly and supportive, whilst maintaining the required level of formality and respect. HMP Greenock was a well-ordered and appropriately controlled prison.

Staff in HMP Greenock had to adapt their approaches as they were working with such a wide range of prisoner categories. For instance, staff in Reception may be dealing with a first time offender who was arriving in prison for the first time, immediately after working with a life sentenced prisoner who has been in custody for an extensive time, and then receiving a female on transfer from HMP & YOI Cornton Vale. All such eventualities were witnessed during the inspection and it is pleasing to report that staff dealt with each case with the appropriate level of humanity, care and consideration.

Prisons are places where staff and prisoners work and live, and it is vital that all activities are undertaken with due consideration to the presenting risks and hazards. Whilst the role of the Health and Safety and Fire Officer was not someone's full-time task, it was clear that the post-holder undertook their role with dedication and professionalism. The individual maintained an extensive suite of risk assessments and safe systems of work, and there was clear evidence that these were reviewed and updated as necessary. However, it was noted when talking to staff that they were not as clear as they should be on their roles and responsibilities in maintaining a safe environment. Most staff spoken with were of the view that this was the responsibility of others. Whilst this did not mean that tasks were being undertaken in

an unsafe manner, it did highlight that Health and Safety was not as deeply embedded within HMP Greenock as would be desirable. This situation is not unique to HMP Greenock and has been found in other establishments.

There was widespread awareness of the 'Talk to Me' Strategy amongst staff. However, it was slightly concerning that the application of the Strategy differed between Ailsa and Darroch Halls. Whilst there was no inference or indication that there was any impact on the safety of individuals as a result of these differences, it could mean that two individuals presenting similarly may be managed in a different manner. It was also surprising to note that there was no power in the safer cell within Ailsa Hall. This meant that someone located there could not have access to a television, when such access may be beneficial in a range of circumstances. Local management should review this situation.

Considerable effort was put into ensuring that individuals were appropriately located within the establishment. However, the fact that Ailsa Hall housed remand, short-term, long-term and at least one life sentenced prisoner, during the week of the inspection, meant that keeping potential enemies apart required a great deal of awareness by staff. The fact that HMP Greenock experiences relatively low levels of violence is largely down to the professionalism, diligence and knowledge of the staff.

The Reception area was not ideally set up for dealing with the gender mix that the establishment holds. The staff did what they could to make it work as smoothly as possible, but there were inevitable delays for either males or females when they arrived at the establishment in the same vehicle. However, the staff working in Reception managed this with care and compassion. One area within the Reception that should be reviewed is the large viewing panel into the toilet area of the largest holding room. This was especially concerning as prisoners may be moved past this area when it is occupied by someone of the opposite gender.

As stated in a number of recent HMIPS reports, the lack of a corporate anti-bullying strategy leaves establishments to deal with bullying and intimidation in a manner that they believe is fair and effective. Staff in HMP Greenock address issues of bullying, but unfortunately there were few, if any, formal records kept of the actions taken. Evidence was provided by way of investigations through the complaints process. However, in such a small establishment, it was challenging for management and staff to ensure that sufficient independence was maintained. HMIPS is aware that SPS is working to develop a revised approach to bullying and intimidation, and inspectors would encourage them to ensure that it is rolled-out nationally at the earliest opportunity.

Quality Indicators

3.1 All reasonable steps are taken to minimise situations that are known to increase the risk of aggressive or violent behaviour. Where such situations are unavoidable, appropriate levels of supervision are maintained.

Rating: Satisfactory performance 

The establishment had developed a Violence Reduction Policy, which was primarily aimed at ensuring that appropriate focus and resources are allocated to the minimisation and deterrence of violence within the prison. All incidents where violent or aggressive behaviour was present were reviewed by the Head of Operations and the Intelligence Analyst. They ensured that all possible lessons were extracted, and actions were taken immediately after any incident to ensure that the victim(s) was/were appropriately protected, and that the perpetrator(s) had been identified and appropriately dealt with. In collaboration with the Head of Operations the establishment's Psychologist had developed an awareness session for staff on how personality traits could affect behaviours or responses to authority. It was in the early stages of roll-out, but appeared to be a forward thinking and progressive approach, that had the potential to be rolled-out across the SPS after it has been fully evaluated.

3.2 The requirements of Health and Safety legislation are observed throughout the prison.

Rating: Satisfactory performance 

Whilst the local Health and Safety Co-ordinator undertook a wide range of management tasks in addition to this key role, he maintained a comprehensive record of assessments, safe systems of work, and post incident investigations. In discussions with staff it became evident that they were not clear about their roles and responsibilities for Health and Safety. As found in other establishments, there was an expectation that the Co-ordinator was responsible for their Health and Safety whilst at work. Management should ensure that all staff understand the role they must play in achieving and maintaining a safe working environment. It was encouraging to note that all FLMs within the prison had completed accident investigation and reporting training.

3.3 All activities take place according to safe systems based on realistic risk assessments.

Rating: Satisfactory performance 

The Health and Safety Co-ordinator maintained a comprehensive electronic register of all the establishment's safe systems of work, and their associated risk assessments. When new or altered activities were identified, risk assessments and safe systems of work were developed. There was clear evidence of recent tasks having been appropriately assessed and implemented.

3.4 The behaviour of staff contributes to the lowering of the risks of aggression and violence.

Rating: Satisfactory performance 

During the inspection it was evident that good relationships existed between staff and prisoners, and this was clearly a major contributing factor to the calm atmosphere witnessed throughout the establishment by all inspectors. During the inspection, inspectors witnessed staff intervening in an altercation. Whilst force was used to gain initial control of the situation, it was very quickly de-escalated and the perpetrator was returned to their cell in loose holds. What was particularly notable was that staff recognised that this behaviour was unusual for the individual concerned, and quickly sought the support of the Mental Health team to assess him. The situation was dealt with in a professional, caring and effective manner.

3.5 Care is taken during the period immediately following the admission of a prisoner to ensure their safety.

Rating: Satisfactory performance 

The staff working within Reception dealt with those arriving in a humane and professional manner. They did what they could to put individuals at ease, whilst ensuring that they extracted all the information they required to ensure the individual was appropriately located within the prison. The Reception area was not ideally set up for dealing with the mixed gender population, and could result in extended waiting times for either male or female prisoners. Given the importance of the work undertaken in the Reception area, inspectors were surprised that it had not been adapted to allow both male and female prisoners to be dealt with simultaneously. The toilet facilities within the main holding area had clear glass windows to enable staff supervision. Whilst there was a degree of screening it did not offer a high level of privacy, particularly given that male and female prisoners were present within Reception at the same time.

3.6 The prison implements thorough and compassionate practices to identify and care for those at risk of suicide or self-harm.

Rating: Generally acceptable performance 

The 'Talk to Me' Strategy was well-understood by staff throughout the prison, and it was obvious when speaking with them that they felt comfortable using the Strategy. However, it was noted that the application of it varied quite significantly between the two main residential areas. Staff in Darroch Hall, which housed female prisoners, appeared to be more willing or confident to allow individuals access to their own property and television whilst being managed on 'Talk to Me'. Whereas the staff in Ailsa Hall, appeared to be more likely to remove such items in the initial stages. Management should review this to ensure the Strategy is universally deployed. It was also noted that the safer cell in Ailsa Hall had no power socket, meaning someone located there could not have access to a television.

3.7 The prison takes particular care of prisoners whose appearance, behaviour, background or circumstances leave them at heightened risk of harm or abuse from others.

Rating: Satisfactory performance 

Staff spoken with during the inspection appeared sensitive to and dealt appropriately with situations where individuals were potentially at risk from others. Staff could readily identify individuals who they 'kept an eye on' especially during periods of association and at meal times. In line with findings during other inspections, management should ensure that all staff are made aware of and are empowered to access translation services. This is important in order to ensure that staff use these services as and when required, rather than just at key points, such as during admission. Particularly where there is a risk that the prisoner could become isolated through their inability to readily communicate.

3.8 The allocation, management and supervision of prisoners known to present a risk takes into account the nature of the risk they present.

Rating: Satisfactory performance 

The establishment utilises a number of methods to inform decision-making regarding the allocation of an individual. Given that Ailsa Hall houses remand and sentenced prisoners this could be particularly challenging. What was clear was that staff knew the majority of the prisoners in their care, and undertook their supervisory duties with diligence and experiential knowledge. In addition to the use of personal knowledge and experience, staff were also supported by an intelligence management system and a tactical tasking process, which equipped them with additional information to manage prisoners safely.

3.9 Where bullying or harassment of prisoners is suspected or known to have taken place, steps are taken to isolate those responsible from their current or potential victims and to work with them to modify their behaviour.

Rating: Generally acceptable performance 

In line with comments made in a number of recent reports, the lack of a national anti-bullying strategy leaves establishments feeling isolated and uncertain about how best to deal with bullying in a fair, defensible and consistent manner. The result of this situation is that there are local informal and undocumented processes for dealing with bullying. Whilst HMIPS accepts that this process is applied fairly and equitably, and that the bully is appropriately dealt with and the victim is supported as required, there was little or no hard evidence available to support this.

3.10 Those who have been the victims of bullying or harassment are offered support and assistance.

Rating: Generally acceptable performance 

As mentioned in QI 3.9, the lack of any documentation made it difficult to establish clear evidence regarding the support and assistance provided to those subjected to bullying. Or indeed, the number who had been subjected to bullying in the past months and years.

3.11 Allegations or incidents of mistreatment, intimidation, hate, bullying, harassment or violence are investigated by a person of sufficient independence and lead to appropriate management action.

Rating: Generally acceptable performance 

As reported in QI 3.9 and 3.10, the lack of a structured and documented approach to bullying meant that clear evidence did not exist of the outcomes for individuals who had been victims. Given the small size of the management team it would also be challenging to investigate matters without some prior knowledge or understanding of the incident. Therefore ensuring that sufficient independence is maintained would be difficult to achieve.

3.12 Systems are in place throughout the prison to ensure that a proportionate and rapid response can be made to any emergency threat to safety or life that might occur.

Rating: Satisfactory performance 

The Head of Operations maintained an extensive range of contingency plans for most conceivable situations. In addition, there were a number of SOPs that formalised a wide range of day-to-day activities or eventualities. Whilst inspectors did not witness any staff alarms during the inspection, the response to a small number of minor incidents demonstrated a scaled and measured response by staff.

3.13 There are emergency means of communication and alarms throughout the prison; they are tested regularly and are working satisfactorily.

Rating: Satisfactory performance 

Staff had access to radios and alarms and they were regularly checked and repaired as required. All staff entering the secure area of the establishment were either appropriately escorted or were issued with an alarm.

3.14 There is an appropriate set of plans for managing emergencies and unpredictable events and staff are adequately trained and exercised in the roles they adopt in implementing the plans.

Rating: Satisfactory performance 

As detailed in QI 3.12, an extensive range of SOPs and contingency plans existed. The Staff Training Manager maintained a database of key training dates and organised training on a calendar that allowed all staff to maintain competency in all of their core skills. The establishment also undertook annual incident management training, where key staff were given the opportunity to role play in a number of theoretical and practical exercises. This helped maintain their competence and confidence in roles they may be required to undertake should an incident occur whilst they are on shift.

STANDARD 4

The prison takes all reasonable steps to ensure the health and wellbeing of all prisoners.

Commentary

All prisoners receive care and treatment which takes account of all relevant NHS standards, guidelines and evidence-based treatments. Healthcare professionals play an effective role in preventing harm associated with prison life and in promoting the health and wellbeing of all prisoners.

Inspection findings

Overall Rating: Satisfactory performance 

The Healthcare Team at HMP Greenock was a well-motivated and caring workforce, and staff feel safe and well supported by SPS colleagues to deliver healthcare.

Inspectors saw many examples of innovative practice by the Healthcare Team. There was a strong emphasis on making sure that prisoners were involved in and kept informed of their care, and that they understood the purpose as well as the risks/benefits of any proposed treatment. The prisoners spoken to were positive about the healthcare they received.

Primary Care

The Healthcare Team provided a comprehensive range of clinics within the prison in order to meet the health needs of their patients. The primary care nurses provided a same day access service, and the waiting time for a routine GP appointment was three days. Access to services such as the Dentist, physiotherapy and the Opticians met the Glasgow City Health and Social Care Partnership (GCHSCP) target for access to clinical services.

The prison had access to IT electronic laboratory specimen/results, which meant healthcare staff had an efficient and quick access point for obtaining key results for their patients.

Inspectors found clear processes and pathways for identifying patients with long-term conditions. Nursing staff were able to demonstrate knowledge and competence in the management of patients with long-term conditions. Several primary care nurses were link nurses for individual conditions, such as asthma, diabetes and venous ulcer management. These nurses had completed additional training in these conditions which meant they could take a more specialised role in their management.

The prison had established links with healthcare providers in the community. Inspectors saw good examples of in-reach community services, such as the Sandyford Clinic that provided in-reach sexual health services for female patients,

and access to specialist services like occupational therapy, physiotherapy and speech therapy.

Prisoners identified as requiring social care support and assessment were assessed the next working day, following referral by the Inverclyde Health and Social Care Partnership (IHSCP). This enabled the prisoner to be provided with the necessary aids and equipment.

During the inspection, inspectors saw the innovative use of tele-health care. Prisoners admitted late on a Friday evening were assessed by a doctor using this facility, thus allowing faster access to assessments by a GP.

There was a strong focus on ensuring that patients were involved in and kept informed of their care. All patients on their return from a specialist hospital appointment met with a primary care nurse to discuss the outcome of the appointment, discuss any anxieties and concerns, or to clarify information. This personalised approach to care was example of good practice.

There were clear processes in place to collect, triage and record and discuss self-referrals. Referral forms showed pictures of healthcare services so that prisoners could easily identify the service they required. Prisoners were also given an information pack on health improvement, health screening and how to access healthcare services.

As in other prisons in Scotland, the lack of an electronic prescribing system meant that there was a continued impact on time and resources as a result of having a paper system.

Regime and Environment

Due to the design and age of the prison there was limited accommodation to provide healthcare. The Addictions Team, the Mental Health Nurse and other specialist services carried out many of their interventions in small interview rooms in the Link Centre. The structure and layout of some of the rooms did not maintain patient confidentiality. Inspectors observed that conversations held in these rooms could be overheard.

In one of the Halls, patient confidentiality was not maintained during supervised drug administration as a Prison Officer stood directly next to the prisoner. The rationale for this was that the restrictive physical layout of the room could potentially be a risk to healthcare staff if a prisoner was to become aggressive. The decision to have a Prison Officer in close proximity should only be taken when a risk to staff safety has been identified through a formal risk assessment and is supported by documentary evidence. Although GCHSCP had undertaken a risk assessment, this contained no record of the specific risk or the steps needed to reduce the risk. GCHSCP acknowledged this and agreed to formally review their risk assessment process with operational colleagues.

As only one Officer was deployed in the Health Centre, balancing service delivery between male and female prisoners was often challenging during busier clinical

days. Healthcare managers to inspectors they had approached SPS colleagues with a proposal to deliver healthcare interventions and clinics directly in the female Hall, but this was rejected by SPS managers due to the availability of operational staff. We understand discussions are on-going.

Addiction services

The Addiction Team was observed to be professional and demonstrated an empathic manner towards their patients. Regular multi-disciplinary meetings were held and were attended by representatives from mental health, addictions and a clinical psychologist. Each case was discussed and assigned to the most appropriate team member. Patients referred to the Addictions Team were seen for an initial assessment within the national target waiting times. Due to the size of the prison population harm reduction interventions were mainly provided on a one to one basis.

Inspectors were told that the Healthcare Team was implementing the GCHSCP Prison Health Care Drug, Alcohol & Tobacco Strategy. This strategy provides a clear tiered model of service delivery and pathways of care within prison healthcare, for prisoners with substance misuse issues.

Health Improvement

The prison understood the positive benefits to prisoners of health education and health promotion activities, and health education events were frequently held for prisoners and staff. A wide range of topics were covered including flu vaccinations, bowel screening and smoking cessation. Smoking cessation classes were available to all prisoners; however waiting times for males were lengthy, with waits of 13 weeks at the time of inspection. For female prisoners there were no waiting times. This is not an equitable provision of service.

Mental Health Team

The nursing complement consisted of one full-time equivalent Mental Health Nurse who saw all referrals to the Mental Health Team. On average patients received a mental health assessment within five days. An arrangement was in place for urgent referrals and for patients who required additional support to be followed up by an addiction nurse, trained in mental health, if the Mental Health Nurse was not available. Inspectors had concerns regarding the process to manage, review and plan the Mental Health Nurse workload. The Mental Health Nurse received clinical supervision from a Senior Mental Health Nurse from another prison within the Partnership, and line management supervision from a Senior Primary Care Nurse within HMP Greenock.

The waiting times to start psychological therapy treatment varied. There was a quick access time for those prisoners requiring highly specialist interventions by a clinical psychologist, but for those prisoners requiring low level psychological interventions, a wait of more than 18 weeks was not uncommon. To address the waiting times senior managers told us that a plan was in place to provide additional skilled staff.

A Consultant Psychiatrist held a weekly clinic and could be contacted for advice concerning urgent referrals. There were weaknesses in the way mental health assessments were documented in patients' records. A standardised "Mental Health assessment and care plan document" was used in the prison for patients requiring a mental health assessment. However it was only used for reference purposes and not scanned onto VISION or kept in the patient's clinical record. Inspectors also found the level of detail of the clinical notes contained in the patient's electronic record varied, particularly those relating to assessments and care plan information. This was an area for improvement.

Quality Indicators

4.1 There is an appropriate level of healthcare staffing in a range of specialisms relevant to the healthcare needs of the prisoner population.

Rating: Satisfactory performance 

Prisoners could access a range of specialist services including psychiatry, dental, podiatry, out of hours services, blood borne virus (BBV) and optical services. A GP service was provided Monday to Friday with a three-day wait for a routine appointment. There was a same day access to Primary Care Nursing Services and a five-day waiting time for an assessment by the mental health and addiction nurse services. The waiting time for a routine dental appointment was 12 weeks. Prisoners also had access to a dental hygienist and mouth matters (an evidence-informed oral health promotion resource) sessions.

The benefits of using tele-healthcare to deliver healthcare and support staff attend meetings was evident. Prisoners admitted at night on a Friday evening from Oban and other outlying courts would be seen by a doctor using this facility for medical assessments, and it enabled staff to participate in NHS GCHSCP meetings. Managers told us that using tele-healthcare reduced the time spent on travel between facilities and meant the patient could expect faster access to assessments by a GP. This is practice worthy of sharing.

The waiting times to start treatment for patients identified and assessed as requiring psychological therapies varied depending on whether they required highly specialist interventions by a clinical psychologist or low level psychological interventions. Patients requiring low level psychological interventions generally had to wait a minimum of 18 weeks. Inspectors were told that this delay was due to a combination of staff absence and a lack of specialist skills within the Team. To address the waiting times senior managers told us that a plan was in place to provide additional skilled staff. At the time of the inspection there were two vacancies, one Band 5 Addiction Nurse and one Health Care Assistant. These posts were in workforce planning in preparation for recruitment.

4.2 Prisoners have direct confidential access to a healthcare professional.

Rating: Satisfactory performance 

There were clear processes in place to collect, triage and record self-referrals. The referral forms had a picture of each service so that the prisoners could easily identify the service they required. This constitutes practice worthy of sharing. Inspectors were informed that the referral forms were not available in other languages. Prisoners were also told the expected waiting times for access to services. This is good practice. During their initial meeting with healthcare staff, prisoners were given an information pack explaining how to access healthcare services as well as health improvement and screening. Although this was not available in other languages, inspectors were told that a translation service “language line” was available for consultations with those for whom English was not their first language.

4.3 Appropriate confidentiality of healthcare consultations and records is maintained in the prison.

Rating: Generally acceptable performance 

Due to the design and age of the prison there was limited accommodation to provide healthcare. The Addictions Team, Mental Health Nurse and other specialist services carried out many of their interventions in small interview rooms within the Link Centre. The interview rooms did not maintain confidentiality as conversations could be overheard. This is a concern. To ensure confidentiality was maintained during the clinics and consultations the patient's VISION record was updated at the time of the consultation. Psychiatrists also recorded their consultations onto VISION which enabled healthcare staff to easily review and note any changes to medication or care planning. This was practice worthy of sharing. Inspectors observed healthcare staff give patients their appointment slips and test results in a sealed envelope marked as confidential.

Inspectors observed a supervised drug administration where the Prison Officer stood directly next to the prisoner, and could overhear the conversation between the prisoner and the nurse. This breached patient confidentiality. The decision to have a Prison Officer in close proximity should only be taken when a risk to staff safety has been identified through a formal risk assessment and supported by documentary evidence. Although GCHSCP had undertaken a risk assessment, this contained no record of the specific risk or the steps needed to reduce the risk. GCHSCP acknowledged this and agreed to formally review their risk assessment process with operational colleagues.

4.4 Healthcare provided in the prison meets accepted professional standards.

Rating: Generally acceptable performance 

Clear processes were in place to check Nursing and Midwifery Council registrations, and support revalidation of nursing staff. Nursing staff told us that they were supported throughout the revalidation process. All staff had an up-to-date personal development plan, a scheduled review date and were up-to-date with their

mandatory training. Staff reported that arrangements to access training identified in their personal development plan were good. Inspectors were also informed that the induction process for new staff was comprehensive and detailed.

There was a variation in the type and consistency of supervision available to individual nursing teams to support them in their role. Regular clinical and managerial supervision meetings were held every six weeks for primary care nurses. These meetings covered professional development, relationships, service development and reflections on the clinical supervision process and were well documented. There were also clear processes for assuring clinical competency of primary care nursing staff. Whilst the addiction nurses had good access to regular individual managerial and clinical supervision, team clinical supervision to discuss individual cases in depth was not available. This was recognised as an area for improvement. The Mental Health Nurse received clinical supervision from a Senior Mental Health Nurse from another prison within the Partnership, and line management supervision from a Senior Primary Care Nurse within HMP Greenock.

Inspectors observed variation in practice during the administration of controlled drugs to prisoners, in particular, the requirement to observe patients taking their medication. In line with Nursing and Midwifery Council guidance, staff dispensing medications should clearly observe patients taking the medication before they leave the dispensary area.

The prison held daily safety briefing meetings for healthcare staff which provided information about any specific risks and concerns for the day. The information was recorded and available to staff starting work later in the day. This increased staff awareness of patient safety issues and ensured the appropriate levels of communication for staff. This is practice worthy of sharing.

4.5 Where the healthcare professional identifies a need, prisoners are able to access specialist healthcare services either inside the prison or in the community.

Rating: Satisfactory performance 

The Healthcare Team had submitted waiting list information for all clinics and specialist services as part of their self-assessment. As discussed in QI 4.1 waiting times, with the exception of access to low level psychological therapies, were acceptable and met the GCHSCP target for access to clinical services.

At the point of admission, if a prisoner had on-going investigations or treatment in secondary care services, they were supported to ensure this continued. Inspectors saw that all patients on their return from a specialist hospital were seen by a primary care nurse to discuss the outcome of the appointment and discuss any anxieties, concerns or clarify information. This personalised approach to care is an example of good practice.

The nursing complement consisted of one full-time equivalent Mental Health Nurse who saw all referrals to the Mental Health Team. On average patients received a mental health assessment within five days. When the Mental Health Nurse is not

available to complete an assessment, if they are on leave, any urgent referrals are seen by the addiction nurses who are mental health trained. The addictions nurses also provided follow up support to patients in the absence of the Mental Health Nurse.

A Consultant Psychiatrist held a weekly clinic and could be contacted for advice concerning urgent referrals. As stated in QI 4.1 for patients identified and assessed as requiring psychological therapies, the waiting time to start treatment varied, with those requiring low level psychological interventions waiting longer than the 18 weeks. This is a weakness.

Where admission to a Psychiatric Unit was indicated, arrangements were made to transfer prisoners. This could be to a low secure environment (intensive Psychiatric Care Unit), medium or high secure environment, determined by the level of illness and offence. Inspectors were told that there were no current delays in accessing medium secure beds. The Mental Health and Addiction Team took a collaborative approach to the management of patients identified as having addictions as well as mental health issues. This was good practice.

Inspectors found that the prison had strong links with local community services with patients having good access to specialist services such as occupational therapy service, physiotherapy and speech therapy. This is good practice.

4.6 Prisoners identified as having been victims of physical, mental or sexual abuse are supported and offered appropriate treatment. The relevant agencies are notified.

Rating: Satisfactory performance 

Prisoners who suffered injury within the prison were seen immediately by the Healthcare Team. If the injury was serious they would attend the local accident and emergency department.

Prisoners could make a confidential referral to the Mental Health Team and clinical psychology was available for prisoners with complex trauma. Prisoners could also access and self-refer to the Open Secret Service. This service offers supportive listening for prisoners rather than evidence based treatments for complex trauma. Again inspectors saw areas of good practice with the Prison Healthcare Team in collaboration with the Sandyford Clinic (specialised sexual health services for NHS Greater Glasgow and Clyde, including both clinical and health improvement) providing a comprehensive in reach sexual health service for female patients. Male prisoners could also access this service by attending Sandyford outpatient clinics at the local hospital.

4.7 Care is taken during the period immediately following the admission of a prisoner to ensure their health and wellbeing.

Rating: Satisfactory performance 

All prisoners arriving at HMP Greenock were screened on admission by a registered nurse. The nurse assessed if the prisoner was fit to be detained in custody, and placed any health care markers into the prisoner's PR2 record to highlight health concerns to SPS staff. The admission screening reviewed the prisoner's present and past medical health and covered their hepatitis and sexually transmitted infection status, an assessment of their mental health and risk of suicide, confirmation of regular prescriptions and a weight, blood pressure and pulse check. All registered nurses had undergone training in the "Talk to Me" Strategy, and primary care nurses had attended Applied Suicide Intervention Skills Training. This is a two-day interactive workshop in suicide first aid, and teaches participants to recognize when someone may have thoughts of suicide and how to work with them to create a plan that will support their immediate safety. This is good practice.

On arrival to prison, prisoners were screened for alcohol and drug use and had the opportunity to discuss issues in relation to these. For those prisoners admitted to the prison in withdrawal, a detoxification programme would be offered. Information was recorded on the patient's VISION health records. The following day the prisoner would have a health assessment carried by the GP, who had access to the prisoners' patient records and medication prescription information. All prisoners were issued with an information pack explaining the range of healthcare services available at HMP Greenock, and given information on how to access these services. Healthcare staff in HMP Greenock also had access to Adastra, a national IT system for use in police custody, in a read only capacity. This gave healthcare staff access to clinical interventions within the police custody units and contributed to improving continuity of care.

As part of the inspection process inspectors observed the prisoners' initial health screening interview and reviewed their written care record. Inspectors found one instance where the patient had identified in Reception that they could not read or write well, but this had not been recorded in the patient's electronic record. Inspectors also found that the patient had signed the access to care summary, medicine consent and patient registration form, and again nothing was documented to say that these documents had been read and explained to the patient before they were signed. This was a concern.

4.8 Care plans are implemented for prisoners whose physical or psychological health or capacity leave them at risk of harm from others.

Rating: Generally acceptable performance 

As discussed in QI 4.5, even though patients referred to the Mental Health Nurse were seen promptly, the process for reviewing, discussing and managing the nursing caseload could be improved. The Mental Health Nurse could discuss cases with the Psychiatrist at the weekly clinic, but there was no formal process to ensure that all cases on the Mental Health Nurses caseload were discussed and reviewed. There

were weaknesses in the way the Team documented patients' mental health assessments. Although a standardised "mental health assessment and care plan document" was used in the prison for patients requiring a mental health assessment, this form was used for reference purposes only, and was not scanned onto VISION or kept in the patient's clinical record. On reviewing clinical notes in the patient's electronic record, inspectors saw variations in the detail and quality of assessments and care plan information being recorded. This was an area for improvement. GCHSCP acknowledged the issues identified and informed inspectors that plans to review how information was recorded in patient's records were underway. In addition steps to ensure that a robust and appropriate process for the management of the Mental Health Nurse caseload were being implemented. When a prisoner was considered at risk of self-harm the plan of care was jointly agreed through the "Talk to Me" process. The prison had safer cells for prisoners identified as being at risk of self-harm. For male prisoners the safer cell did not have access to electrical points which meant that they did not have access to a TV or radio.

Inspectors found that the care plans for patients with specific conditions and physical healthcare needs were outcome focussed, detailed, and had clear review dates. Inspectors were also advised that HMP Greenock plans to introduce an anticipatory care planning pathway for patients with long-term conditions, palliative care needs or end-of-life care needs. This would allow patients receiving palliative care or end-of life care to formally set out what they would like to happen. Patients will be initially assessed for suitability at Reception but could be re-assessed at any stage throughout their stay in the prison. This is an area of good practice.

SPS are responsible for ensuring the appropriate level of social care support is provided to prisoners. During the time of the inspection there were no prisoners in receipt of social care support. If a prisoner is identified as requiring social care support arrangements with IHSCP are in place to carry out an assessment of their needs, and provide them with the necessary aids and equipment. The response time for assessments was the next working day following the referral. This is an area of good practice.

4.9 Healthcare staff offer a range of clinics relevant to the prisoner population.

Rating: Good performance



The Healthcare Team provided a comprehensive and extensive range of clinics within the prison including; GP, tele-health, primary care, wound care, dental, dental hygienist and oral health improvement sessions, referral process, BBV, podiatry, Optician, sexual health, methadone high dose monitoring, chronic disease management and psychiatrist clinics. The prison also had access to IT electronic laboratory specimen results which allowed healthcare staff too efficiently and quickly access key results for their patients. This is an area of good practice.

There were clear processes and pathways for identifying patients with long-term conditions. Due to the small numbers of patients with the more common long-term conditions they were seen in primary care clinics. A number of primary care nurses were link nurses for individual conditions, such as asthma, diabetes and venous

ulcer management. These nurses had completed specific training in these conditions which allowed them to undertake a more specialised role in the management of these conditions. The nurses were able to demonstrate knowledge and competence in the management of patients with long-term conditions.

4.10 Preventive healthcare practices are implemented effectively in relation to Transmissible diseases.

Rating: Good performance



A weekly BBV service was run with input from a specialist BBV community nurse. This service was comprehensive and patients progressed from initial blood testing to treatment in a few months. All prisoners were offered a Hepatitis B vaccination programme and an opt-out service for Dry Spot Testing for Hepatitis B and C. This was good practice. Blood spill kits were available in the Health Centre, and within the prison setting, the services of the SPS cleaners were utilised for the cleaning of bodily fluids. The staff in the Health Centre followed NHS Greater Glasgow and Clyde's guidance on the identification and management of an outbreak of infection.

The provision of Take Home Naloxone (THN) was well-established, with regular training being provided. Plans were in place to train peer trainers. This is good practice. Inspectors were concerned to hear that, despite there being an increase in the numbers of prisoners receiving Naloxone training, and Naloxone kits being put in to their belongings prior to liberation, not all prisoners were leaving the prison with their kits. GCHSCP and SPS were working together to improve the numbers of kits leaving with prisoners.

A range of information materials promoting public health-based prevention were available in the Halls and Health Centre, including posters describing how to obtain condoms; information on common illicit drugs and information about Naloxone training.

4.11 Preventive healthcare practices are implemented effectively in relation to the maintenance of hygiene and infection control standards.

Rating: Satisfactory performance



During the inspection, inspectors observed that all areas where healthcare interventions were delivered were clean. However inspectors noted areas of damage to some walls and door frames in the Health Centre, and water damage to the wall and ceiling in one medication dispensary.

Inspectors observed good adherence with standard infection control precautions, as described in Health Protection Scotland's national infection prevention and control manual. The Health Centre had received a gold audit result from their most recent infection prevention and control audit. There was evidence of checks being made for environmental cleanliness and inspectors observed staff cleaning patient equipment following use. Inspectors saw that clinical waste awaiting uplift was appropriately stored. Discussion with staff about the management of outbreaks of infection in the

prison demonstrated that they had good knowledge of the precautions required, and whom they were required to contact in these instances.

4.12 Preventive healthcare practices are implemented effectively in relation to the assessment, care and treatment of those at risk of self-harm or suicide.

Rating: Generally acceptable performance 

As discussed in QI 4.5, the Psychiatrist and the Mental Health Nurse ran a weekly clinic to review and support patients referred to the Mental Health Team. As discussed in QI 4.1 there was lengthy appointment waiting times for those patients requiring low level psychological therapy. Also reported in QI 4.8 the level of detail recorded in and the quality of patients clinical notes in the patient's electronic record varied. This was an area for improvement.

The SPS "Talk to Me" Strategy was in place and patients identified as being at risk of suicide or self-harm were referred to the Mental Health Team for assessment. There were regular multi-disciplinary prison meetings to discuss patients at risk of self-harm. This was good practice.

As discussed in QI 4.7 primary care nurses had attended ASIST training. This is good practice.

4.13 Preventive healthcare practices are implemented effectively in relation to the care and treatment of those exhibiting self-harming and addictive behaviours.

Rating: Satisfactory performance 

The Addiction Team was observed to be professional and demonstrated an empathic manner towards their patients. Regular multi-disciplinary meetings were held to discuss cases, and were attended by representatives from mental health and addictions services, and also by a clinical psychologist. Each case was discussed and assigned to the most appropriate team member. This was good practice.

A GP with a specialist interest in addictions provides the Team with clinical leadership and provides staff the opportunity to discuss prisoners receiving, or preparing for Opiate Replacement Therapy (ORT), as well as seek general support or advice. Whilst the addiction nurses had good access to regular individual managerial and clinical supervision, team clinical supervision to discuss individual cases in depth was not available. This was recognised as an area for improvement. Patients referred to the Addictions Team were seen for an initial assessment within the national target waiting times. Due to the size of the prison population harm reduction interventions were mainly provided on a one to one basis.

Inspectors were told that the Healthcare Team were implementing GCHSCP Prison Health Care Drug, Alcohol & Tobacco Strategy. This strategy provides a clear tiered model of service delivery and pathways of care within prison healthcare, for prisoners with substance misuse issues.

4.14 Health education activities for both prisoners and staff are implemented throughout the prison.

Rating: Satisfactory performance 

The prison understood the positive benefits that could be gained by prisoners from health education and health promotion activities, and events were frequently held for prisoners and staff. A wide range of topics was covered including flu vaccinations, bowel screening and smoking cessation. As part of their induction, prisoners were invited to take part in the oral health group 'Mouth Matters' within the Link Centre. Inspectors were informed that attendance was low due to a lack of communication and understanding of the purpose of the group amongst both prisoners and Prison Officers.

Although smoking cessation classes were available to all prisoners, the waiting times for males were lengthy with waits of 13 weeks at the time of inspection. For female prisoners there were spaces in the classes, with only two out of a potential ten spaces being filled. The rolling nature of the programme meant that those who attended for several weeks were being given the same information repeatedly, which was potentially impacting on the attendance numbers. In addition, prisoners attending these classes were unable to attend work sheds for the day and sacrificed their full wages, which could be a further disincentive to attend. This was a concern. When a prisoner is liberated within 12-14 weeks of the smoking cessation programme, the leaders contact community services to ensure they continue to receive support. This is good practice.

Well-man and Well-women clinics are run frequently to encourage prisoners to look after their own health. As discussed in QI 4.6, the continued sexual health collaboration with the Sandyford Clinic has helped to encourage and support woman to attend appointments and participate in national screening programmes.

4.15 Healthcare professionals working in the prison are able to demonstrate an understanding of the particular ethical and procedural responsibilities that attach to practice in a prison and to evidence that they apply these in their work.

Rating: Satisfactory performance 


Healthcare staff were able to explain the boundaries between professional and ethical issues, and were aware of the demands of delivering healthcare within the prison setting and the requirement for security. Regular meetings were held with healthcare staff and the prison management to discuss issues, review incidents and to improve practice.

4.16 Every prisoner on admission is given a health assessment, supplemented, where available, by the health record maintained by their community record. Care plans are instituted and implemented timeously.

Rating: Satisfactory performance 

All new prisoners to HMP Greenock were offered a health assessment by a GP. The prisoners' admission/transfer pathway was recorded within each prisoner's VISION health record, by nursing staff. During this assessment any concerns raised by the prisoner relating to a referral, review or further assessments were appropriately actioned. As discussed in QI 4.1 the use of tele-health care meant that prisoners admitted on a Friday evening would get seen by a doctor using this facility for medical assessments. This is practice worthy of sharing.

4.17 Healthcare records are held for all prisoners. There are effective procedures to ensure that healthcare records accompany all prisoners who are transferred in or out of the prison.

Rating: Good performance 

The Healthcare Administration Team was found to be well organised with robust administration processes in place for the organisation of clinics, appointments and the management of patients' records. A clear process was in place for recording patient records coming in and out of the prison. VISION electronic health records were completed for all prisoners. Paper health records were held in a secure office within the Health Centre, and could only be accessed by healthcare staff. Patient health records and notes were transferred between establishments using secure bags. As there is no national electronic prescribing system, drug Kardex's were in paper format and were transferred with the prisoner.

4.18 Healthcare professionals exercise all the statutory duties placed on them to advise the governor or director of any situations in which conditions of detention or decisions about any prisoner could result in physical or psychological harm.

Rating: Satisfactory performance 


Procedures were in place to ensure healthcare staff made appropriate notifications in cases where there was potential of physical or psychological harm to prisoners. All staff were aware of this procedure, were comfortable that it did not conflict with their professional expectations, and were clear of their duty to pass on any intelligence that may compromise the health and wellbeing of the prisoner, or the safe running of the prison. If a prisoner wished to report sick they could see a member of the Nursing Team. Healthcare managers told us that this was not always the best use of clinical staff time, and discussions were on-going with SPS to review this practice.

4.19 Healthcare professionals fully undertake their responsibilities as described in the law and in professional guidance to assess, record and report any medical evidence of mistreatment of prisoners and to offer prisoners treatment needed as a consequence.

Rating: Satisfactory performance 


Healthcare staff demonstrated a clear understanding of their duty of care and escalated concerns through the intelligence reporting system. Regular communication between the healthcare and SPS management teams meant concerns were discussed and looked into promptly. Information affecting the welfare of prisoners was passed on to the appropriate SPS manager who would initiate an investigation and involve the police if necessary. Prisoners would be offered counselling and appropriate protective measures, where required.

4.20 Effective measures that ensure the timeous attendance of appropriate healthcare staff in the event of medical emergencies are in place and are practised as necessary.

Rating: Good performance 

The Primary Care Nursing Team responded to medical emergencies, and carried radios and responded immediately to code red (bleeding and circulation) and code blue (airway and breathing) emergencies. All clinical staff were trained in basic life support. Emergency bags, portable oxygen, suction machines and defibrillators were located within the Health Centre, and inspectors found the process for checking emergency bags to be robust.

4.21 Appropriate steps are taken prior to release to assess a prisoner's needs for on-going care and to assist them in securing continuity of care from community health services.

Rating: Good performance 

Prisoners who were due to be released from prison were well supported by the Healthcare Team, to ensure that any on-going treatment and support they received whilst in prison continued once they were released. Healthcare staff worked collaboratively with the prisoner and community staff. They attended multi-agency case conferences and liaised with SPS Throughcare Support Officers (TSOs) for vulnerable or complex prisoners to maintain continuity of care on release.

Mental health nursing staff liaised with the relevant Community Mental Health Teams and prior to release prisoners were informed of the arrangements being made and that appointment letters would be issued. Patients with addiction needs would be visited by their Addiction Worker in the prison prior to release. This constitutes practice worthy of sharing.

Prisoners were given a five-day supply of their medication on release. The Primary Care Team contacted and provided the community GP practice with a copy of the prisoners' care plan.

STANDARD 5 - EFFECTIVE, COURTEOUS AND HUMANE EXERCISE OF AUTHORITY

The prison performs the duties both to protect the public by detaining prisoners in custody and to respect the individual circumstances of each prisoner by maintaining order effectively, with courtesy and humanity.

Commentary

The prison ensures that the thorough implementation of security and supervisory duties is balanced by courteous and humane treatment of prisoners and visitors to the prison. Procedures relating to perimeter, entry and exit security, and the personal safety, searching, supervision and escorting of prisoners are implemented effectively. The level of security and supervision is not excessive.

Inspection findings

Overall Rating: Satisfactory performance 

It was evident that a number of processes were in place to support the operational and security delivery within the establishment. This was evidenced through viewing both national documents such as Contingency Plans, SOPs and local policies and procedures. There were a number of challenges that came with providing an effective operational and security function in an establishment as old as HMP Greenock. However, it was noted that there was an underlying desire from staff to ensure that they could deliver outcomes to the best standard possible. Indeed, many staff spoke with pride about what they deliver on a daily basis.

During the inspection, it was noted on a number of occasions that staff worked with prisoners in a humane and decent way, and often spoke about prisoners as individuals with individual needs. This ethos was equally evidenced when observing staff working with visitors and family members.

Reception Officers have a relatively new environment in which to carry out their duties, however, the area is not ideally configured for managing female and male prisoners at the same time which can result in delays and frustrations. It was observed that when working with prisoners and partner agency colleagues, there were thorough and effective processes in place which were implemented effectively and appropriately.

During the inspection there was the opportunity to meet with staff working in the Link Centre. They were acutely aware of their responsibilities and it was encouraging to hear Officers speak with such knowledge and dedication about what they aimed to deliver. Whether this be talking about prisoners going out on Licence to placements or working with Partner Agency colleagues. It was evident that there was a drive amongst staff to ensure that the right thing was done at the right time, for the right reasons. This was particularly evident when staff were speaking about a prisoner who had particular needs, where a decision had been taken to put this individual into

a work placement with another prisoner to ensure the appropriate levels of support were provided, in a subtle but appropriate way.

Whilst staff were keen and clearly dedicated to their role and the wider establishment, it was noted during the inspection that there was a sense of frustration, particularly around perceived issues with staffing levels. Though this was not evident when directly observing the breadth and depth of tasks being carried out. Staff spoke of being in 'no cover' posts, for example within Mandatory Drug Testing. Whilst there may be no rostered cover for these posts, it was observed that there was a wide number of Officers who could carry out this role. This meant there was no obvious delay in working with prisoners, ensuring that they progressed through their management plan without undue delay.

Searching of the establishment, prisoners, property and staff appeared to be effective. It was of particular note the manner in which staff searched prisoners who were leaving the establishments to attend placements, what could have become a commonplace and cursory process was undertaken with the same level of purpose and focus on each day it was observed.

The integrity of locking systems within the establishment was viewed to be effective. Good robust processes were in place to ensure that all keys were accounted for, and records were viewed which evidenced that the locking mechanisms were effective and fit-for-purpose.

In considering the 'Use of Force', all staff who were spoken to demonstrated a clear and appropriate understanding of when force should be used, and how this should be documented. Inspectors talked with a local Control and Restraints (C&R) Instructor who spoke with dedication about the secondary role he carried out. During the inspection there was an opportunity to witness staff managing a physical altercation between two prisoners. It was dealt with in an appropriate manner and concluded swiftly, resulting in no impact on the establishment regime, or risk of injury or harm to staff or other prisoners.

Where there was the requirement to segregate prisoners from others, it was observed that this was done in a humane and decent way, with staff ensuring that prisoners were removed from circulation for the absolute minimum of time necessary. Where segregation was proportionate and necessary, documentation was viewed that evidenced prisoners were treated as individuals with their individual needs being considered. Thought was also given to the impact on family and maintenance of social contact e.g. if there was an assessed requirement for a prisoner to be transferred to another establishment.

Staff were observed working with visitors and family members attending the establishment. It was clear that there were excellent and effective relationships as would be expected of a local establishment, and this was evident in the way that there was an appropriate level of security but done in a way that could not be considered to be overbearing or excessive, but still nonetheless effective.

Whilst it was clear that the establishment was not without its challenges in delivering the security and operational aspects of the overall regime, it was equally evident that staff were committed and dedicated to ensuring that they carried out their role to the best standard possible.

Quality Indicators

5.1 Prison staff discharge all supervisory and security duties courteously and in doing so respect the individual circumstances of prisoners and visitors to the prison.

Rating: Satisfactory performance 

Staff working within the Front of House Reception interacted with colleagues, external agencies and visitors in a professional manner, and any challenges were appropriate. When talking to staff and observing practice, it was clear they were aware of their responsibilities, which were exercised in a courteous manner. There was a system in place for recording visitors photograph, and staff had an understanding of the policy in relation to the retention and deletion of images once a visitor had left the establishment.

5.2 The procedures for monitoring the prison perimeter are suitable and working effectively.

Rating: Satisfactory performance 

There was a robust SOP in place in relation to perimeter checks, associated records were checked and noted to be current and up-to-date. It was evident that staff had a sound understanding of their role and responsibility in relation to maintaining a secure boundary. Staff within the Electronic Control Room (ECR) were knowledgeable and had a good understanding of their role. Written documentation was observed and evidenced that checks were carried out. Staff within the ECR had a good understanding of where the various CCTV cameras were located, and how the system operated. The Prison Watch process was well publicised and staff knew what to do if a member of public contacted the number.

5.3 The systems and procedures for the admission and release of prisoners are implemented effectively and courteously.

Rating: Satisfactory performance 

Inspectors discussed and reviewed relevant documentation with Administration staff and the Compliance Manager who managed these processes. They were observed to be appropriate, and appeared robust. Staff were clearly knowledgeable and could easily articulate their responsibilities, which was supported by written evidence. Warrant calculation were carried out by an administrator and then validated by another experienced administrator. The Compliance Manager had oversight of this process and carried out appropriate checks before approving the Liberation list for the next day. There appeared to be a robust process in place to identify prisoners with specific risks, in order that any required notifications could be carried out. Through discussion and observation, processes in Reception were found to be appropriate, and there was clearly a wealth of knowledge within this area. When working with prisoners, staff were observed to be courteous and appropriate, and there was good interaction with the Escort Provider.

5.4 The systems and procedures for access and egress of all other people are implemented effectively and courteously.

Rating: Satisfactory performance 


Within the Front of House Reception, there were a range of helpful SOPs in place, and staff were found to be knowledgeable of these procedures. There was a Visitor Log which recorded the access and egress of all Official Visitors to the establishment, with family visitors being recorded via PR2. There was also a diary which was used to record any planned visitors and the area they were visiting. A good process was in place to issue temporary paper identification to a member of staff or partner agency who did not have their ID card in their possession. During the inspection, a range of visitors were observed coming into the establishment, and at all times Operations Officers were seen to be polite, welcoming and helpful.

5.5 The systems and procedures for controlling the entry and departure of goods to and from the prison are working effectively.

Rating: Generally acceptable performance 

There was a SOP which detailed the actions to be taken in respect of Searching Vehicles. Not all staff spoken with were aware of this; however searching was carried out to a reasonable standard. The control of entry and departure of goods to the establishment was observed and it was noted that the organisational template for recording this was not being used. However, the relevant information was being captured on a locally produced form. A range of equipment for searching was present in the Vehicle Lock, and was utilised by staff. Further searching equipment was available within the wider establishment if required. Where goods were leaving the establishment, there was a 'Gate Pass' system in place, which staff were aware of and were able to talk confidently about the process. Where goods were hand-delivered to the Front of House Reception, they were passed through an X-Ray machine then recorded as received. Where the item was too large, staff spoke confidently about the searching processes that would be carried out.

5.6 The risks presented to the community by any prisoner are assessed and appropriate security measures are adopted.

Rating: Good performance 

A range of relevant documentation was reviewed, including a random sample of PERs, and they were found to be appropriately completed. A random sample of SPS Escort Certificates were also reviewed and there was a good level of detail, particularly around risk in relation to handcuffing. It was clear that in completing forms such as the PER and Escort Approval Certificate, PR2 was utilised to a good standard and appropriate information was taken, which allowed mitigation to be considered where risk had been identified. Within the Link Centre, Officers were spoken to regarding generating Prisoner Licences for those going to external work placement. A number of Licences were viewed and were all found to be appropriate, it was clear that they had an excellent understanding of both individual Licences, and also overarching principles about how these were used to manage risk.

5.7 The risks presented to others in the prison by any prisoner are assessed and appropriate supervision is enforced.

Rating: Satisfactory performance 

A number of Prisoner Supervision System (PSS) forms were reviewed within Ailsa and Darroch Hall and appeared to be completed to a good standard. All staff spoken with had a good understanding of the process for reviewing an individual PSS level, and their role when completing the documentation. Where potential risks were highlighted via the Intelligence Management Unit (IMU), there was a robust process in place for managing this information and ensuring that it was passed to the appropriate person timeously. This included briefings being given to FLMs via the telephone, and then followed-up in writing. Staff within the IMU were experienced and knowledgeable, and information received via Intelligence Reports could be used to help formulate individual management plans if appropriate. The establishment does not have a Separation and Reintegration Unit (SRU), and whilst this could potentially be problematic, it was evident that individual prisoners were managed appropriately in order to ensure any highlighted risk was managed. Rule 95 documentation was made available and reviewed.

5.8 The risks presented by any prisoner to themselves are assessed and appropriate supervision is applied.

Rating: Satisfactory performance 

Staff in Reception appeared to use the Reception Risk Assessment (RRA) appropriately. All staff spoken with were knowledgeable in relation to the Prevention of Suicide in Prison (PSIP) Strategy, and were clear on their responsibilities when managing a prisoner within the 'Talk to Me' Strategy. It was evident that they gave consideration to what regime should be made available to prisoners who were presenting at risk to themselves, with an underlying desire to ensure that the regime was meaningful. The Head of Residential had overall responsibility for PSIP within the establishment, and carried out a regular audit of documentation. Copies of the local audit confirmed this and that any resulting actions had been taken. Where the Management of an Offender at Risk Due to Any Substance (MORS) policy was used, it was well-documented and there were good records within individual Residential Halls, so that staff working there were aware of which prisoners required additional supervision or care. Staff were knowledgeable about the MORS policy and how it should be used.

5.9 The systems and procedures for monitoring and supervising movements and activities of prisoners inside the prison are implemented effectively.

Rating: Satisfactory performance 

Within the establishment, there were a range of systems in place to monitor the movement and activities of prisoners, which appeared effective. A range of CCTV cameras were in place and used to good effect when monitoring movement. Staff within the ECR appeared to have a good knowledge of where cameras were located


and the views they provided. Where there was a lack of individual knowledge, this was overcome by using the various lists and reference guides which were available within the ECR. Staff had a good situational awareness of where prisoners were, and how this could impact upon moving other prisoners to and from various points. When recreation was taking place, staff were seen to be located in and around the areas where prisoners were.

5.10 The systems and procedures to maintain the security of prisoners when they are outside the prison are implemented effectively.

Rating: Satisfactory performance 

As stated previously, there were good processes in place to manage prisoners who were under escort, and QI 5.6 provides further information. Staff appeared to be knowledgeable about the prisoners who were out on work placement etc. and were confident talking about the use of Prisoner Licences and Placement Reports. Staff were able to demonstrate knowledge regarding the use of handcuffs when out on escort, and were acutely aware of their individual limits when escorting. A number of mobile telephones were available within the Gate which were used when staff took prisoners out on escort. FLMs were able to demonstrate the local practice for preparing an emergency escort for departure.

5.11 The prison disciplinary system is used appropriately and in accordance with the law.

Rating: Good performance 

Misconduct Reports were generally heard within the FLMs Office within the residential Halls. During the inspection a number of Reports were observed. The Adjudicator was confident and well-prepared in terms of knowledge of the Disciplinary Hearing process, and it was evident that he did not have any prior knowledge of the incident that had occurred. Whilst maintaining an appropriate authoritative manner, the Adjudicator demonstrated a caring approach, and treated prisoners as individuals. This was particularly evident when speaking to prisoners about why a particular incident had taken place, or what could be done by staff to support prisoners in order to try and prevent further incidents from taking place.

5.12 The law concerning the searching of prisoners and their property is implemented thoroughly.

Rating: Satisfactory performance 

There were a number of SOPs in place that related to searching. Searches that were observed within Reception were of a good quality, and were periodically viewed by one of the FLMs, which helped assure the quality of searching. A number of Rub Down Searches were observed within the residential Halls, and were of an acceptable standard. The searching of prisoner property was completed thoroughly, professionally and to a good standard.

5.13 The law concerning the testing of prisoners for alcohol and controlled drugs is implemented thoroughly.

Rating: Satisfactory performance ●

Two Operations Officers carried out testing on prisoners for controlled drugs. It was evident that they were experienced, had a wealth of knowledge and took pride in what they did. The area in which testing was carried out was secure and appeared to be fit-for-purpose. There was clear evidence regarding the use of SPS Guidance and Policy documents, and the recording of data that was viewed appeared up-to-date and appropriate. When considering the testing of women prisoners, it was acknowledged that this could present issues given the requirement for female Officers to carry out the test, but it was noted that through good working relationships this very rarely presented any significant issue.

5.14 Searches of buildings and grounds and other security checks are carried out thoroughly.

Rating: Satisfactory performance ●

There was an SOP within the establishment which covered both routine and intelligence-led searches of cells and areas. The majority of Officers spoken with were aware of the SOP and its content. Cell Searches were recorded onto PR2 and a random selection were observed during the inspection. Intelligence Led searches were carried out as required, and through discussion with staff in the IMU. They were planned jointly between the IMU and the manager responsible for the relevant area. Cell Security Checks were carried out in accordance with the required standard and staff were aware of recently published Advice Notices and SOPs relating to this practice, particularly around the move to smoke-free prisons.

5.15 The systems and procedures for tracking the movements of prisoners and reconciling prisoner numbers are implemented accurately.

Rating: Satisfactory performance ●

As stated in QI 5.9, there were a number of ways that the establishment was able to track the movement of prisoners. Staff working in the ECR were aware of the high-level principles relating to the use of CCTV when monitoring individuals. The 'Numbers Check' was observed and appeared to be effective. The establishment SOP was viewed, and it provided detail of how a Numbers Check should be carried out and recorded, and the action(s) that should be taken in the event that the Check was found to be incorrect.

The Occurrence Book located within the Gate also recorded the movement of prisoners leaving and entering the establishment. A number of random entries were confirmed as being correct.

5.16 The integrity of locking systems is audited effectively and with appropriate frequency.

Rating: Satisfactory performance 

Within the establishment, there were two distinct sets of keys – 'live' keys which were actively being used within the establishment, and located within the Gate when not in use, and 'stock' keys which were located within the Estates Function. The Estates Manager had responsibility for the 'stock' keys, with the Head of Operations having responsibility for the 'live' keys in use. Documentation was reviewed which clearly showed which keys were in each category. Clearly maintained documentation was reviewed which showed the records of all keys and locks, and a random review of this documentation showed that there were no issues.

On a weekly basis, Operations staff undertook a count of each key bunch which confirmed that all keys were present and the correct number of keys were on each bunch. Written documentation supported this process.

5.17 Powers to confine prisoners to their cell, to segregate them or limit their opportunities to associate with others are exercised appropriately, with humanity and in accordance with the law.

Rating: Satisfactory performance 

There is no SRU in HMP Greenock due in part to the fabric of the area that was previously used for this purpose. As a result, any prisoner who required to be separated from other prisoners for longer than 72 hours, using Rule 95, would be considered for transfer to another establishment. During the inspection, Rule 95 had been exercised, and a review of the documentation showed no areas of concern. Staff were observed to discuss fully with the prisoner the reasons for the Rule 95 being used, and how this individual could expect to be managed during this time. This helped ensure that the prisoner was fully engaged with staff during the term of the Rule 95.

5.18 The management of prisoners segregated from others is effected in accordance with the law and with regard for their continuing need for a stimulating programme of activities and social contact and for treatment aimed at enabling their return to normal conditions of detention as soon as can be achieved safely.

Rating: Satisfactory performance 

QI 5.17 confirms that a prisoner, who had been segregated in accordance with Rule 95, fully understood why he was being removed from general circulation. The documentation was reviewed and met the required standard. The documentation for all prisoners segregated under Rule 95, was located in the Residential FLM's office, and included historic documentation. In the rare circumstances where it had been necessary to segregate prisoners for a period in excess of 72 hours, case conference documentation had been completed. In each case there was mention of

activities that prisoners could participate in to assist in their return to the full regime. Where this was not possible, the reasons for this were recorded.

5.19 Powers to impose enhanced security measures on a prisoner are exercised appropriately and in accordance with the law.

Rating: Generally acceptable performance 

During the inspection, there were no prisoners being managed using SSM, and there had not been for a considerable period of time. As such, there was no documentation made available during the inspection. That said, the Head of Operations was able to show the database where such prisoners would be recorded, and it was clear that he was fully aware of the processes that would require to be followed.

5.20 Force is used only when necessary and strictly in accordance with the law.

Rating: Satisfactory performance 

A database held in the IMU was utilised to record instances of Use of Force and provided an excellent level of detail. Maintenance of the database ensured that there was a good level of management information if required. It was noted that the Head of Operations reviewed 100% of completed forms, and clearly articulated if there were any concerns, or if any further action was required. The local process for managing planned Use of Force appeared to work well. Discussion with C&R Instructors and the wider staff group they openly talked about the use of de-escalation at the earliest opportunity which was clearly evidenced within the completed Use of Force forms.

5.21 Physical restraints are only used when necessary and strictly in accordance with the law.

Rating: Satisfactory performance 

At the time of the inspection, there had been no use of physical restraints for some considerable time. No records were evident to show when the restraint had last been used, but staff commented that it was some time ago. Discussion took place with the local Quartermaster, C&R Instructors and staff, the vast majority of whom had a good knowledge of the Rule governing the use of the 'restraint'. Considering the need for other physical restraints, the use of handcuffs was considered proportionate based on written records made available during the inspection.

5.22 Prisoners' personal property and cash are recorded and, where appropriate, stored.

Rating: Satisfactory performance 

There appeared to be clear and robust processes in place to manage cash handed into Front of House Reception by visitors for prisoners. Staff spoken with appeared

knowledgeable and confident in what they were required to do. The documentation created a robust and auditable process which tracked the money from the point it was handed in, to the point that it was uplifted by the establishment Cashier and processed through Prisoner Records. All staff involved were able to clearly articulate what monies had been handed-in on one day, and this was confirmed with the Cashier the next day. The Cashier demonstrated an excellent knowledge of his responsibilities and the SPS finance procedures that require to be followed. A 'spot' Cash Check was carried out monthly by Unit Managers, and there appeared to be good, robust documentation to support this. Prisoner property was managed via the Reception, and there were robust processes in place to account for individual items of prisoner property. Random 'property checks' were carried out by FLMs, and confirmed by the Duty Manager. Property Cards viewed during the inspection appeared to be completed appropriately, and there appeared to be robust secure procedures in place to store all property, including Valuable Property (VP). The VP store was located within the Reception area itself, and only Reception Officers had keys to both the room and the locked store cupboard where the VP was stored.

STANDARD 6 - RESPECT, AUTONOMY AND PROTECTION AGAINST MISTREATMENT

A climate of mutual respect exists between staff and prisoners. Prisoners are encouraged to take responsibility for themselves and their future. Their rights to statutory protections and complaints processes are respected.

Commentary

Throughout the prison, staff and prisoners have a mutual understanding and respect for each other and their responsibilities. They engage with each other positively and constructively. Prisoners are kept well informed about matters which affect them and are treated humanely and with understanding. If they have problems or feel threatened they are offered effective support. Prisoners are encouraged to participate in decision making about their own lives. The prison co-operates positively with agencies which exercise statutory powers of complaints, investigation or supervision.

Inspection findings

Overall rating: Satisfactory performance 

As previously reported, HMP Greenock is in clear need of restoration in places. Therefore it is encouraging to note that there are plans for the development of a new site in the future.

Despite the Edwardian design and the complexities of the diverse population, it was evident that across the prison, staff and prisoner relationships were positive and built on understanding, decency and respect. It was often suggested during the inspection that the experience of the staff group, particularly in the residential function, played a significant role in maintaining this situation.

Although prisoners reported that they were treated well and courteously by staff, and were supported when this was required, they also understood that there were occasions when staff had to exercise control. This was seen as legitimate and important in maintaining an orderly and predictable environment. As a reflection of this stable environment, low numbers of prisoners are placed on disciplinary report and there is a low level of violence across the prison.

Similarly, a low level of formal complaints by prisoners might be interpreted as another indicator of the orderly and predictable environment. However, the operation of the prisoner complaints system raised concerns. It was surprising that given the low frequency of PCF1 complaints, a number were not resolved within the prescribed timescale. It is also perhaps surprising that of the complaints relating to prison staff, the final response in the vast majority of cases favoured the subject of the complaint. It was suggested that there was a culture of staff being unwilling to provide complaint forms and that if prisoners did make a complaint it could be to their detriment, leading to a possible downgrade or transfer from the prison. This does not fit easily with the generally very positive staff/prisoner relationships reported and should be reviewed by prison management.

As a further reflection of the stable prison environment, there was no SRU in HMP Greenock, with prisoners being placed on Rule 95 in their own cells within the residential accommodation. There were no prisoners on SSMS or Closed Visits at the time of the inspection and, more generally, both staff and prisoners referred to the minimal use of force in the prison.

Reflective of comments made by the male prisoner population, the female population were extremely positive about staff/prisoner relationships and the high degree of support provided by staff. They reported that they felt confident in approaching staff, and that generally they found staff to be more compassionate and understanding than their experience in other female establishments.

There was also a wealth of evidence that prisoners were encouraged to participate in decision-making about their own lives. They were invited to attend meetings and make representations whenever key decisions about their management were being considered. This extended across operational decisions relating, for example, to SSMS and Closed Visits to addressing prisoners need for support through the 'Talk to Me' Strategy or the Multi-disciplinary Mental Health Team (MDMHT). Complementing the opportunity for prisoners to attend these meetings, they were provided with timely feedback on the outcome of the meeting.

Similarly, in the case of the RMT and Adverse RMTs, which are chaired by the Deputy Governor and have representatives from all areas of the prison, prisoners were provided with the opportunity to attend the meetings and make representations. Again, key outcomes were relayed to prisoners after the conclusion of the meetings.

In the specific case of Chrisswell House, life sentence prisoners were able to participate in unescorted community placements as a key element of their preparation for progressing to open conditions. Staff were found to work closely and supportively with these prisoners to agree a robust management plan, part of which allowed prisoners to be tested on community placements. The prisoners were expected to take personal responsibility for managing this transition, relying on skills learned during their sentence.

Communication with prisoners across the prison was generally good, and began with an extensive induction programme. Prisoners were kept informed of forthcoming events through prisoner notice boards and, more importantly, through the effective operation of the Personal Officer Scheme. Based on the evidence provided to inspectors, it appeared that the PIAC had not met between April 2017 and the beginning of the inspection in February 2018. The Committee did meet during the inspection, and its proposed reintroduction will further enhance communication, and provide a direct avenue for prisoners to make suggestions on recreational and cultural activities, and canteen purchases. This will also afford an opportunity for improved general consultation with the wider prisoner group.

The system for contacting Independent Prison Monitors (IPMs) was well-established in the prison, and the Monitors were seen to be valued by both staff and prisoners. The Monitors provide further testimony to the quality of staff/prisoner relationships. They were presented with very few applications from prisoners and, more generally,

they commented that prisoners report that they are treated with respect and courtesy in HMP Greenock.

A more general, and significant, concern noted during the inspection concerned the length of time it was taking for SPS Headquarters to approve applications for First Grant of Temporary Release for life sentence prisoners. This meant that some prisoners waited up to five months for a decision. These delays can impact on sentence management arrangements and, with the prisoners failing to be tested at key dates, they could face a potentially longer period in custody.

Quality Indicators

6.1 Relationships between staff and prisoners are respectful. The use of disrespectful language or behaviour is not tolerated.

Rating: Satisfactory performance 

During the period of the inspection both staff and prisoners demonstrate positive and respectful relationships. It was suggested that the experience of the staff group, particularly in the residential function, played a significant role in maintaining this. One prisoner was keen to describe an altercation that he had with a member of staff on admission, where he agreed that he had displayed aggressive behaviour and used inappropriate language. Later, having settled into the prison, he requested to speak to the Officer and, in front of both staff and other prisoners, apologised for his behaviour.

6.2 Staff respect prisoners' needs for privacy and personal life.

Rating: Generally acceptable performance 

Given that all of the cells within HMP Greenock were single occupancy the prisoners could readily get time to themselves, however, the design of the majority of the cells meant that there was only a small partition separating the toilet and the living area, which was less than ideal. The lack of in-cell showers meant that prisoners had to share communal shower areas, whilst configured with individual cubicles this did not provide the same level of privacy that is offered in the modern facilities available in other establishments.

Clearly, however, these issues were independent of staff, prisoners reported that generally staff were sensitive to their need for privacy and gave them space when they needed it.

6.3 Staff respect prisoners' rights to confidentiality in their dealings with them.

Rating: Satisfactory performance 

Although the prison is of Edwardian design and construction, there were interview rooms available, providing an appropriate setting for staff to interview prisoners or conduct confidential discussions. There was also a robust process for managing prisoners' mail. All legal and privileged correspondence was handed over unopened to the prisoner by the FLM, and the prisoner signed to record receipt. The second floor above the Visit Hall provided a confidential setting for prisoners' legal visits. There were four booths available for use by Solicitors visiting their clients.

6.4 Staff achieve an environment within the prison that is orderly and predictable. Their use of authority in achieving this is seen by prisoners as legitimate.

Rating: Satisfactory performance 

Both staff and prisoners agreed that positive relationships between them were the foundation of managing an effective prison. Prisoners reported that staff would generally assist them and provide support when required. This was seen to be critical in maintaining an orderly and predictable environment. Further testimony to this stable environment could be seen in the low numbers of prisoners placed on disciplinary report, and the low level of violence across the prison.

6.5 Staff challenge prisoners' unacceptable behaviour or attitudes whenever they become aware of it. They do this in a way that is assertive and courteous.

Rating: Satisfactory performance 

Generally, prisoners reported that they were treated well and courteously by staff. They also recognised that on occasions staff had to exercise their authority when appropriate. This was seen to be done legitimately and the prisoners understood that to maintain stability in the prison, the balance of control had to remain with staff. It was reported by both groups that the Use of Force by staff was a last resort. To highlight this, during the inspection there were two incidents of prisoner-on-prisoner assault when staff had to intervene. On each occasion the prisoners were separated and walked back to their cells, as opposed to staff resorting to C&R techniques.

6.6 Any limitations imposed on prisoners' freedoms or access to facilities are justified and the reasons for them are courteously communicated to the prisoners.

Rating: Satisfactory performance 

As previously reported there was no SRU in HMP Greenock, therefore on occasions when Rule 95 was used the prisoner was locked in their cells in the Hall. In examining the use of Rule 95, it was found across cases that appropriate approval had been granted, prisoner representations were considered, case conferences were conducted in accord with policy and prescribed timescales were met. No prisoners were on Closed Visits at the time of the inspection, but paperwork for previous cases was scrutinised. The process was found to be robust, and in every instance prisoners were afforded representation and the opportunity to appeal against the decision.

6.7 The operation of the system of privileges promotes a climate of activity and purpose, prisoners' responsibility for their own affairs and good face to face relationships with staff.

Rating: Satisfactory performance 

There was no formal Incentive and Earned Privilege Scheme based on Enhanced, Standard and Basic regimes in operation in HMP Greenock. Hence there were no enhanced work sheds. However there were sought after roles in the Kitchen, as a Hall passman and in the Joiners Shed, where there was the opportunity to earn a bonus in line with the national wage structure. Prisoners were allocated to these roles as set out in the response to Q1 6.8.

6.8 The system by which prisoners may apply and be selected for paid work reflects as fully as possible systems of job application and selection within the community.

Rating: Generally acceptable performance 

Prisoners were advised during induction and core screening interviews how they could apply for different jobs within the prison. The Activities Manager was responsible for allocating the available 63 places in work parties, and at the time of inspection there were no waiting lists for male prisoner work places. However, should the Activities Manager be absent from duty, this could result in a delay in prisoners being allocated to a work party. Prisoners interested in a Hall passman role applied to the Residential FLM, whereas prisoners wishing to work in the Kitchen applied to the Catering Manager. In view of the potential delay in work placements in the absence of the Activities Manager, prison management may wish to consider establishing an Allocation Board to ensure consistency in the timely allocation of prisoners to available work places.

6.9 Prisoners are consulted about the range of recreational activities available to them.

Rating: Satisfactory performance 

Prisoners were informed during the induction process of available recreational activities. There were also posters in the Halls advertising these activities, and Personal Officers provided another source of information. However, based on the evidence provided to inspectors that the PIAC had not met between April 2017 and the beginning of the inspection, this removed the primary means of consulting the wider prisoner group about recreational activities. A meeting of the PIAC was convened during the inspection, prison management need to ensure that it continues to meet on a regular basis.

6.10 Prisoners are consulted about the range of products available through the prison canteen.

Rating: Generally acceptable performance 

Based on the evidence provided to inspectors that the PIAC had not met between April 2017 and the beginning of the inspection. The apparent failure to convene the PIAC removed the primary means for consulting prisoners on the range of products available in the prison canteen. At the meeting convened during the week of the inspection, it was agreed that regular meetings would be reintroduced. The range of products available in the canteen was also discussed, and prisoners were advised that prison management would consider offering alternative products in line with the Catalogue of National Retail Products. Prison management need to ensure that the PIAC continues to meet regularly.

6.11 The systems for reserving places on recreational and cultural activities are equitable between prisoners and allow them to exercise personal choice.

Rating: Satisfactory performance 

Events across the prison were offered on a weekly basis, with prisoners signing up to attend particular activities. In advance of the activities, the attendance list for each event was passed to the IMU to ensure there was no risk to the prisoners wishing to attend, e.g. 'keep separates' or 'known enemies'. In recognition of the diversity of the population there were deliberate efforts made to ensure equity in the provision of recreational and cultural activities across the prisoner groupings.

6.12 The systems for regulating prisoners' access to money held in their prison account and their own property allow them to exercise personal choice within the constraints of the law.

Rating: Satisfactory performance 

Prisoners had access to their Prisoner Personal Cash (PPC) and earnings, and were provided with a canteen sheet each Monday which showed how much money they could spend that week. In addition to making weekly purchases from the canteen, they were able to make special purchase requests through approved suppliers such as Argos.

6.13 The limits on the actions staff can take in implementing security procedures are observed.

Rating: Satisfactory performance 

A sample of records were inspected encompassing SSM, Closed Visits and Rule 95 applications. All paperwork was found to be completed appropriately and prisoners were free to make representations in every instance. Prisoners were also able to appeal against the decision in all circumstances described.

6.14 The rules in relation to medical supervision of activities and persons in circumstances of increased risk of harm or mistreatment are observed.

Rating: Satisfactory performance 

The prison has not used the application of Rule 41 for some time, relying more heavily on the 'Talk to Me' Strategy. A sample of records were scrutinized and on every occasion it was decided that a prisoner was to have restricted access to activities, or to have particular articles removed, and they were advised verbally by the case conference chair. Although prisoners' families were free to attend the case conferences, this had not occurred. A dedicated MDMHT meeting chaired by the Deputy Governor took place weekly. It was attended by NHS personnel, the Psychology Department, Head of Residential, Head of Offender Outcomes and the Unit Manager. From the cases discussed, further actions could be agreed or cases could be closed. For prisoners with mental health issues who were eligible for temporary release, there was the opportunity for support from the Scottish Association for Mental Health, an agency specialising in this area. Several prisoners reported that they had been provided with significant assistance by this agency during temporary leave from the prison.

6.15 Procedures and decisions conform to established standards of natural and administrative justice.

Rating: Satisfactory performance 

There was a low frequency of prisoners being placed on report within HMP Greenock. Of those who had been found guilty in the Orderly Room in 2017, seven prisoners had submitted PAF1 appeals against the decision. Four appeals were upheld, one was dismissed and in another two cases there was no action as the prisoners had been liberated. In the specific case of Closed Visits, there was a robust process chaired by the Head of Operations and involving the IMU. Staff statements were scrutinized, CCTV was observed and intelligence was assessed before any decisions were reached.

6.16 Prisoners' international human rights as asserted in law are respected.

Rating: Satisfactory performance 

This featured during the induction process, and posters highlighting the role of the European Court of Human Rights (ECHR) were available in all residential areas. Both prisoners and staff spoken with were aware of human rights issues and what this meant in the management of prisoners. HMP Greenock was not aware of any contact by prisoners with the ECHR during 2017.

6.17 Prisoners are kept well informed about prison procedures and how to access services available to them.

Rating: Satisfactory performance 

Prisoners were provided with a brief overview of prison procedures during the Reception interview. HMP Greenock operated a First Night in Custody area where all processes, procedures, rules and the availability of services were described. Following this, prisoners attend the induction programme which provided more detailed information. The prison operated a Personal Officer Scheme and, in addition to interacting with prisoners on a daily basis when on duty, Personal Officers were required to meet their allocated prisoners on a monthly basis. These meetings were recorded on PR2.

6.18 Prisoners are kept well informed about events taking place in the prison.

Rating: Generally acceptable performance 

There were notice boards throughout the prison advising prisoners of forthcoming events. Prisoners reported that staff also advised them of these events and actively encouraged their attendance. The re-establishment of the PIAC should serve to increase prisoner awareness further.

6.19 The prison reliably passes critical information between prisoners and their families.

Rating: Satisfactory performance 

On first admission to the prison, prisoners were provided with a telephone call to advise their family of their location. Having implemented the service wide 'Talk to Me' Strategy, HMP Greenock used the standard consent form for prisoners to agree to information being passed to their families. Also in accord with the Strategy, families were invited to attend case conferences should the prisoner so desire. Similarly, if a prisoner was transferred to an outside hospital, the Duty Manager would inform the next of kin if the prisoner had advised that they would like them to be contacted.

In the case of foreign national prisoners, there was provision for additional money to be placed into their telephone accounts to assist them to maintain contact with family members in other countries. At the time of inspection there were two foreign national prisoners, but neither had opted to use this facility.

6.20 Prisoners' access to information necessary to safeguard themselves against mistreatment or arbitrary decisions is observed.

Rating: Satisfactory performance 

During the induction process prisoners were informed about the range of agencies they could access to seek advice or register complaints. They were advised of how to access the prison's criminal justice social workers and the Independent Prison

Monitors (IPMs), and how to complain to the Scottish Public Services Ombudsman (SPSO). Prisoners did not report any difficulties accessing these services and, in respect of the SPSO, no complaints had been registered from 2017 to date. The prisoner complaints system was also described in detail during the induction process.

6.21 The prison complaints resolution system works well.

Rating: Generally acceptable performance 

There was a detailed examination of prisoner complaints registered in 2017. There were 58 PCF1 complaints and 45 PCF2 complaints. From the 58 PCF1 complaints, 19 progressed through to ICC stage where nine were rejected, seven upheld and three partially upheld. None of the PCF2 complaints progressed to the SPSO. Whilst most PCF1 complaints were answered within the prescribed 20 day timescale, 11 complaints were not resolved within this period. In view of the low frequency of PCF1 complaints, it was surprising to find that some complaints could not be resolved within the prescribed timescale. From the total of PCF1 complaints, 23 related to prison staff. More generally, PCF1 complaints centred on Home Detention Curfew (HDC), downgrades, and progression issues.

6.22 The NHS complaints resolution system works well in the prison.

Rating: Satisfactory performance 

Patient feedback and complaint forms were available to prisoners in each Hall. There was a clear process in place for responding to and managing complaints, and feedback from prisoners. All complaints were dealt with and responded to within the appropriate time scales. The Prisoner Health Care Governance Group provided staff an opportunity for reflective learning from complaints.

6.23 The system for allowing prisoners to book interviews with independent prison monitors works well.

Rating: Satisfactory performance 

The system for contacting IPMs was fully embedded within the prison. Prisoners could make contact by telephone, or through a written application deposited into a secure mail box on each Hall. The most recent quarterly IPM report confirmed that there were six written requests and six telephone requests to book interviews during the period of the report. Within the report, IPMs comment that prisoners reported to them that they were treated with respect and courtesy in HMP Greenock.

6.24 The prison gives every assistance to agencies which exercise statutory powers of complaints, investigation or supervision.

Rating: Satisfactory performance 

Members of staff were questioned on their understanding of particular agencies falling into this category. They were able to name IPMs and HMIPS personnel as

representatives of agencies entitled to unimpeded access to the prison. They also reported that they would not refuse entry to the prison to any agency and, in cases where they were unsure, their first step would be to contact the Duty Manager for advice.

6.25 Prisoners are afforded unimpeded and confidential access to legal advice, the courts and agencies which exercise statutory powers of complaints, investigation or supervision.

Rating: Satisfactory performance 

During the induction process prisoners were informed about the range of agencies they could access to seek advice or register complaints. They were advised of how to access the prison's criminal justice social workers and the IPMs, and how to complain to the SPSO. Prisoners did not report any difficulties accessing these services.

6.26 Citizens of states other than the UK are afforded confidential access to their states' representatives. Refugees and stateless persons are afforded privileged access to a consular office of their choice and to organisations or agencies that protect their interests.

Rating: Satisfactory performance 

At the time of the inspection, only two prisoners fell into this category. Both were interviewed and confirmed that their Personal Officers had advised them of the assistance available to citizens of states other than the UK. Neither prisoner had felt it necessary to seek this form of assistance. A list of contact numbers for the relevant support agencies was held in Reception.

6.27 Prisoners are afforded confidential access to members of national and international parliaments who represent them.

Rating: Generally acceptable performance 


This information was available as part of the induction process. However, when staff and prisoners were questioned, both groups were unsure of how this access would operate and what form of assistance could be provided. Local management should ensure that all staff are aware of the process in order to support or advise individual prisoners.

STANDARD 7 PURPOSEFUL ACTIVITY

All prisoners are encouraged to use their time in prison constructively. Positive family and community relationships are maintained. Prisoners are consulted in planning the activities offered.

The prison assists prisoners to use their time purposefully and constructively. Prisoners' sentences are managed appropriately to prepare them for returning to their community. The prison provides a broad range of activities, opportunities and services based on the profile of needs of the prisoner population. Prisoners are supported to maintain positive relationships with family and friends in the community. Prisoners have the opportunity to participate in recreational, sporting, religious and cultural activities.

Inspection findings

Overall rating: Generally acceptable performance 

HMP Greenock offered 17 opportunities over the course of the week for prisoners to engage in family contact through visits. The visits lasted between 50-90 minutes covering a reasonable split between male and female prisoners. Three afternoon visit sessions were recently removed, which reduced family contact. One of the sessions was replaced with a child development session with a follow-up visit. However during the inspection only one male prisoner from a class of six took up the follow-up visit. Unlike other establishments HMP Greenock do not have a full-time Family Contact Officer (FCO) and attempts to gain funding for this have failed. HMP Greenock currently relies on volunteers who carry out this role between 13:30-15:00 hours on week days. This is a concern as FCOs are an important bridge between prisoners and their families.

Access to purposeful activity was limited at HMP Greenock due to the footprint, but they offered a small amount of workshops. There was no offending behaviour programmes being delivered, which could cause issues for female prisoners who wished to progress and would therefore need to move to another establishment. HMP Greenock did, however, run a number of very good courses to assist those leading up to release to deal with issues such as housing and benefits. CIUs functioned well, although not always to their capacity, particularly in the female CIU due to the criteria.

Sentence management was not always on a formal basis, and staff used their positive relationships with partner organisations to support services within the prison. Where evidence was produced on a more formal basis, it appeared to work well and HMP Greenock should be encouraged to carry out more formal sentence management in the future. The ICM process, for those wishing to engage, appeared to work well with a high completion against time recorded. Family engagement appeared to be low. HMP Greenock had excellent examples of where family engagement has worked well, and this should be used as motivation for others to attend. HDC and RMT also appeared to work well and met relevant timescales. However this was done by an administrator and not a co-ordinator. She had an excellent working knowledge of the system, but was moving on to work on parole.

A number of new initiatives were highlighted during the inspection to improve prisoners' chances of not returning to prison, including a life skills class, which was due to replace the joiner's workshop. Also an adaption of the 'Sense of balance' programme designed to prepare those in the Open Estate for release, which will be adapted to deal with the issues prisoners find during placements, prior to progressing to the Open Estate. These initiatives should be reviewed within six to 12 months of them launching.

The HDC process used a system that maximised the opportunities for those who qualified, or would qualify in the near future. This was good practice.

Work parties were made available to short-term and long-term male and female convicted prisoners. Work parties were available for male prisoners in: industrial cleaning; wood-assembly; hairdressing; bike sheds; environmental duties; painting and decorating and refectory kitchen. A smaller number of work parties were available for female prisoners in laundry; wood-production and hairdressing. A number of male and female prisoners were employed as Passmen and Passwomen in their residential Halls. A few work parties led to vocational qualifications. In others staff recognised and informally assessed individual prisoners' progression, skills and competencies, but this did not result in attainment of qualifications. During work party activities most prisoners were actively engaged. Female prisoners worked diligently and purposefully when improving rough sawn-wood and preparing it for finishing and assembly by male prisoners. The hair salon was well furnished and is popular with male and female prisoners. Male and female prisoners undertaking hair cutting and treatment duties were supported well to achieve units of an NPA qualification. However, there were no qualification opportunities for prisoners undertaking most work party programmes. Many prisoners participated regularly in work party activities and attended sessions through the week.

Under the direction of the education team leader, the Learning Centre provided a comfortable and relaxed environment which encouraged prisoners to participate meaningfully in activities. However, the quality of the classroom accommodation was variable. The Learning Centre was open five days a week and education staff planned and delivered a variety of learning activities. Prisoners took part in a suitable range of core skills activities, particularly in communications, numeracy and ICT. In addition, prisoners were offered classes in art, music, social subjects and business studies. Education classes were available to all prisoner categories although learning opportunities for female prisoners were less than their male counterparts. There were very few mixed classes offered in the Learning Centre. From August 2017 to December 2017, only 13 prisoners in total attained a unit of qualification. This was due to problems experienced with the changeover of computers and associated infrastructure installation issues. The Learning Centre is now able to offer a wider range of qualifications as it has invested in new ICT software and equipment. However, many learning activities continue to have no accreditation attached and managers recognise this needs to be addressed. On average, approximately 50% of the prisoner population benefited from attendance at the Learning Centre. However, most Learning Centre classes were undersubscribed and only a few prisoners attended the Learning Centre on a full-time basis. Overall, the quality of learning and teaching was good and most

prisoners accessing the Learning Centre spoke highly of their learning experiences and positive relationships with education staff.

Various cultural events and activities take place within the prison throughout the year. Both male and female prisoners have been successful in being nominated for a total of 28 Koestler Awards achieving 14 winning entries.

Quality Indicators

7.1 The prison maximises the opportunities for prisoners to meet with their families and friends.

Rating: Generally acceptable performance 


HMP Greenock offered a range of visit sessions on weekdays and at weekends. The number of women taking up visits was low, resulting in male prisoners being offered their weekend visits if there were no uptake. Based on evidence provided by staff in the visits area, HMIPS was concerned that recently afternoon sessions on a Tuesday, Wednesday and Friday had been removed, resulting in a reduction in opportunities for prisoners to see their families. The rationale for this was to free-up staff to carry out FCO work, but this was only one member of staff, and they had other general duties to undertake in tandem. The Friday afternoon session was replaced by a child development session but the uptake to date had been low. HMP Greenock does not mix male and female prisoners during visits unless there are extenuating circumstances, which results in a more complex visit timetable than is necessary. Facilitating mixed visits should increase opportunities for male prisoners to have more contact with their families.

7.2 The arrangements made for admitting family members and friends into the prison are welcoming and offer appropriate support.

Rating: Generally acceptable performance 

Visitors spoken to were appreciative of the way staff interacted with them. Visitors were observed to be treated courteously by staff, who were friendly, helpful and professional. Visitors gave examples of the support they received by telephone prior to their first visit and also on arrival, when they were met by staff to explain the process. HMP Greenock does not have full-time FCOs, and currently have a list of nine part-time Officers wishing to be involved in the role. Due to the lack of full-time FCOs, support to visitors was only available immediately pre and post-visits where time permitted. Staff said that on many occasions families required support due to a negative visit and they were unable to do this, but helped as best they could under the constraints of carrying out their duties.

7.3 Any restrictions placed on the conditions under which prisoners may meet with their families or friends take account of the importance placed on the maintenance of good family and social relationships throughout their sentence.

Rating: Good performance 

HMP Greenock had a robust process for managing and reviewing closed visits, managed by the IMU. At the time of the inspection no closed visits were taking place. A review of historical paperwork indicated the process adhered to recognised practices and guidelines. The outcomes of closed visit reviews were communicated by the IMU analyst, who meets the prisoner face-to-face and explains the process and expectations to return to open visits. They also invite the visitor, if banned or in

closed visits, to make arrangements to speak to the IMU Analyst so that the situation and the process for returning to open visits can be explained. This is good practice.

7.4 The atmosphere in the visit room is friendly and, while effective measures are adopted to ensure the security of the prison and safety of those taking visits, supervision is unobtrusive.

Rating: Good performance



The Visit Room was a good size located in a newer part of the establishment. Although the seating was comfortable, it was highlighted by the Management Team that the seating was too low for some visitors. A plan was in place to replace the furniture and refurbish the area. The tables and chairs were not fixed, providing flexibility in dealing with larger family visits, events and child development classes. Staff dealt very well with one visitor on crutches by organising a high comfortable chair for them to sit in. An area was set aside for play, supported by Early Years Scotland (EYS), who deliver the child development course over 10 weeks in the practicalities of looking after children, and to support parents during a follow-up visit to transfer learning into practice. This was open both to male and female prisoners. The visits environment appeared to be a positive one where staff, visitors and prisoners had good relationships. Staff carried out their observations in an unobtrusive manner. Prisoners and visitors commented on the relaxed atmosphere.

7.5 Opportunities are found in the prison for prisoners to interact with family members in a variety of parental and other family member roles.

Rating: Generally acceptable performance



An EYS parenting programme took place on Wednesday afternoons for male prisoners and Friday afternoon for female prisoners, replacing previous open visits. On the Wednesday of the inspection, inspectors observed six male prisoners attending the EYS course referred to in QI 7.4. It was disappointing to note that only one prisoner took up the opportunity to remain for the follow-up visit with his child and partner. It was suggested by EYS that perhaps prisoners who had completed the course could also benefit from this session, and allow EYS to top up their numbers, or at least touch base with the prisoners to see if they required additional help.

HMP Greenock advertises family induction sessions by FCOs and on posters and the information board at the front of house Reception. There was no evidence of family induction visits during the week of the inspection, and it was intimated that they were demand led. However, inspectors were informed that as there was no dedicated FCO it was difficult to facilitate and most family issues were dealt with by operations staff if they had time.

Through interviews with staff, prisoners and visitors, it was evident that they felt that the loss of the mid-week afternoon visit sessions had affected family contact, and reduced the flexibility for those wishing to engage in family contact.

7.6 Where it is not possible for families to use the normal arrangements for visits, the prison is proactive in taking alternative steps to assist prisoners in sustaining family relationships.

Rating: Satisfactory performance 

Accumulated visits and video conferencing were available in HMP Greenock but were rarely used as it was a local prison. NTE prisoners utilised Special Escorted Leave (SEL) to contact family rather than video conferencing. Prisoners also had the opportunity to access Escorted Days Absence (EDA) and inter-prison visits.

7.7 The arrangements to facilitate a free flow of communication between prisoners and their families help the prisoners to sustain family ties.

Rating: Generally acceptable performance 

Telephone access was available both in residential and recreation areas. When not on recreation prisoners could request to be listed for the telephone. Where possible, additional access to telephones would be accommodated if staff or time was available. Female prisoners complained at the lack of telephone access, due to limited telephone points in the Hall and being locked up on Fridays and only opened up for cell cleaning. Telephone points are limited to two between 54 women; however there is no additional capacity in the system to add more.

Contact with families and friends could also be facilitated through writing materials and the mail system. The 'email a prisoner' initiative was also utilised to maintain family contact. Where prisoners required emergency contact with their family, a telephone call could be facilitated through the emergency PIN system.

7.8 Prisoners and where appropriate their families, participate in their case management. Prisoners are consulted about case management decisions reached.

Rating: Generally acceptable performance 

Fifty six ICMs had taken place in the last six months at HMP Greenock. Family members were sent letters inviting them to attend if the prisoner agreed, but there were only seven instances where family members had attended. Of the 41 RMTs that took place no family members attended. NTE families tended not to attend, due to having been there before or distance to travel and some prisoners did not wish their families to attend. Staff explain the benefits of family involvement, but more work needs to be done to encourage both prisoners and their families to get involved in the processes.

7.9 Prisoners are encouraged to maintain and develop a range of social relationships that will help in their successful return to their communities on release.

Rating: Generally acceptable performance 

Recreation was available most days either am or pm, in both Ailsa and Darroch Halls. However there was no recreation on a Friday in Darroch Hall as that time was used for cell cleaning. In Ailsa Hall, prisoners only got recreation on one day at weekends. Situations could arise where if a prisoner received recreation on a Friday morning, the next time they would attend recreation was on the Sunday. Most prisoners ate in their dining halls. Those on protection had an area for in-hall dining, but it was rarely used as they ate in their cells. Each level in Ailsa Hall ate separately so there were four sittings and time was tight for prisoners to dine.

Although this was an opportunity to engage with fellow prisoners, the protection prisoners that inspectors spoke with reported that they stayed in their cells more often than not, only leaving to collect their meals, attend education, to visit the library or access the telephone. Due to lack of interaction with others, these prisoners were not maintaining and developing a range of social relationships, which should be encouraged. Management should review this situation to ensure that self-isolation is not an issue within the protection population.

7.10 The prison operates an individualised approach to effective prisoner case management.

Rating: Generally acceptable performance 

As part of the admission process a core screen interview was undertaken, but could take up to three days to complete. The outcome was recorded in PR2 by the ICM Administrator on the Community Integration Plan (CIP), allowing various service providers to review and make appointments with those requiring support. This also helped avoid duplication of different service providers, as the system was updated when appointments were met. However, a delay in carrying out core screens runs the risk that timescales may be missed or time is wasted before prisoners are seen, especially for those serving short sentences. Many of the admissions into Ailsa Hall were repeat offenders with short sentences, who chose not to engage in any personal management plans. Due to the relationships between staff and external partners, inspectors were told that often a telephone call was made to deal with immediate issues around e.g. housing, particularly those serving short sentences. However this was not evidenced. Inspectors were taken through Personal Officer documentation on PR2 that evidenced good practice. Staff recognised that it was better use of their limited Personal Officer time to deal with those that wished help, than to continually challenge those that did not.

7.11 The systems and procedures operated by the prison to identify or select prisoners for release or periods of leave outside the prison are implemented fairly and effectively.

Rating: Satisfactory performance 

HMP Greenock had a robust system in place and clear evidence that information on the entire prison population was reviewed weekly to identify any prisoners who were eligible to be considered for release, periods of leave outside the prison and considered for the CIU. A plan was in place for those who met the NTE criteria, concentrating on critical dates to be met from SEL's community placement, to progression to the Open Estate. The ICM process appeared to run well within HMP Greenock. Although an ICM Co-ordinator had been identified, their role was that of an ICM Administrator, who functioned very well and achieved 97% in meeting timescales.

Short-term prisoners were identified six weeks prior to release, so as to engage with external agencies in areas such as benefits and housing. RMTs met weekly, and part of their considerations was access to the community. Support was offered by attempting to match prisoners to job opportunities to increase their employment prospects when released.

The HDC Co-ordinator used a system that searched PR2 to identify prisoners who may qualify for HDC, and built in sufficient time to process their application in advance of this date. The system could also identify those who would benefit from having a PSS review, under future qualifying dates, in order to qualify for HDC in the near future which minimised the chance of missing prisoners who would be eligible to return to the community at the earliest possible date. This was good practice.

7.12 Sentence management procedures are implemented as prescribed and take account of critical dates for progression, release on parole or licence.

Rating: Generally acceptable performance 

HMP Greenock had a system in place to identify critical dates for progression or licence. The NTE clearly defined a management plan for those progressing to the Open Estate, which was developed around critical dates. Staff checked dates for those eligible to progress to the CIUs as well as community placements. Where dates were identified, the ICM Administrator organised case conferences. RMTs were arranged on a weekly basis, ensuring the appropriate timescales were met for those requiring a case conference. RMTs also identified those that qualified for the CIUs, to allow short-term prisoners' access to the community prior to release. HMP Greenock does not offer offending programmes, therefore if offender programme attendance is identified, they must move to another establishment to do so.

7.13 The risk management measures that have to be observed in respect of prisoners serving Orders of Lifelong Restriction and those subject to Multi-Agency Public Protection Arrangements are implemented.

Rating: Generally acceptable performance 

At the time of the inspection there were two prisoners in the NTE serving an Order for Lifelong Restriction (OLR), with one due to be transferred imminently. At the time of the inspection the Psychologist was pregnant and therefore had no prisoner contact. However, a Psychiatrist met with OLRs regularly. There were currently 12 prisoners on MAPPA in the NTE. MAPPA was implemented but there were potential issues in relation to the experienced MAPPA Co-ordinator, who was moving on to a new post. Local management should ensure continuity of experience and ability in this critical role.

Staff told inspectors that HMP Greenock tended to use timescales for progression rather than a management plan. One weakness was that prisoners did not bring their plan with them from other establishments, however there was an RMT minute identifying any risk factors. Staff spoken with thought that it would be beneficial to receive more information from the sending establishment, including any specific recommendations on how to deal with individuals, to help shape the management of the individual.

7.14 There is an appropriate and sufficient range of employment and training opportunities available to prisoners.

Rating: Generally acceptable performance 

Work parties were available for male prisoners in industrial cleaning, wood-assembly, hairdressing, bike sheds, environmental duties, painting and decorating and a refectory kitchen. A smaller number of work parties were available for female prisoners in Laundry, wood-production and hairdressing. A number of male and female prisoners were employed as Passmen/women in their residential Halls. Work parties were made available to short-term and long-term male and female convicted prisoners. A number of work parties led to achievement in vocational qualifications. Prisoners undertaking cleaning duties gained BICS industrial cleaning certificates. Prisoners gained Royal Environmental Health Institute Scotland (REHIS) food hygiene certificates whilst preparing food in the kitchens. The prison offered units of accreditation in National Progression Awards (NPA) in cosmetology, and painting and decorating. However, there were no progression opportunities for prisoners on to more advanced qualifications. There were no qualification opportunities for prisoners undertaking work programmes in Laundry, environmental duties, wood preparation, wood assembly or bicycle maintenance. Staff recognised and informally assessed individual prisoners' progression, skills and competencies, but this did not result in attainment of qualifications.

7.15 There is an appropriate and sufficient range of educational, including physical and health educational, activities available to the prisoners.

Rating: Generally acceptable performance 

Following a change of provider in August 2017, SPS contracted Fife College to deliver educational activity at HMP Greenock. The Learning Centre was open five days a week and education staff planned and delivered a variety of learning activities.

The recent change in provider had a negative impact on the number of qualifications achieved by prisoners. Prior to the change, on average, approximately 25 prisoners attained units of qualifications each month. From August 2017 to December 2017, only 13 prisoners achieved them. This was due to problems experienced with the IT changeover and associated infrastructure installation issues, which had a detrimental impact on the motivation of prisoners to participate in education provision. Since January 2018, the numbers of accredited units had increased. Managers anticipate a further increase in the next few weeks and a return to previous levels. However, most Learning Centre classes were undersubscribed and only a few prisoners attended the Learning Centre on a full-time basis.

The Learning Centre now offered a wider range of qualifications as it has invested in new ICT equipment, containing modern Microsoft software and prisoners had access to Fife College's learning platform, allowing prisoners to gain iLearn certificates. However, many learning activities continued to have no accreditation attached and managers recognised this needed to be addressed. A new Assistant Tutor was recently appointed to champion the value of education for prisoners and the Learning Centre, increase its profile across the prison and encourage prisoners to access learning.

Prisoners took part in a suitable range of core skills activities, particularly in communications, numeracy and Information and Communication Technology (ICT). In addition, prisoners were offered classes in art, music, social subjects and business studies. Many learning activities were project-based such as LGBT History Month and 100 Years of Votes for Women. A few prisoners undertook flexible learning programmes, sourced from external providers, including programmes from the Open University. Education classes were available to all prisoner categories, although learning opportunities for female prisoners were fewer than their male counterparts.

7.16 There is an appropriate and sufficient range of therapeutic, treatment and cognitive development opportunities available to prisoners.

Rating: Generally acceptable performance 

HMP Greenock does not run any accredited programmes. There were a number of activities delivered to assist prisoners deal with specific issues. These include Drug Action for Change and alcohol awareness. The establishment had recently introduced a Recovery Café through the Link Centre. Anecdotal evidence suggested that numbers had dropped since its inception. Staff reported that numbers had

reduced since Operations staff had taken over the security of it, and there was a suggestion that this was due to a conflict between listening to what was being said in the Café and then supervising the prisoners at visits, where Operations staff had confidential information about prisoners' life styles, i.e. drug taking.

An interesting new initiative planned is the adaption of the Sense of Balance course for long-term prisoners, which originally focused on those going to the Open Estate. The first stage is to prepare them for placements within a closed environment rather than preparing to go home. The second part will be based on how to manage themselves on placement, the risks associated with placements regarding media coverage and pressure to bring items back to the prison.

The 218 Women's Weekly Drop-in Project supported women within the prison and on release. This allowed access to clinics including mental health and allowed women to build up relationships with external workers prior to release.

7.17 There is an appropriate and sufficient range of social and relational skills training activities available to prisoners.

Rating: Satisfactory performance 

Due to the size of HMP Greenock they were limited in the space offered to deliver training. The Link Centre was well-utilised with 329 prisoner appointments in January. The Link Centre staff appeared to have a good relationship with a number of external agencies. Staff encourage prisoners to empower themselves to make appointments and take ownership of their issues. TSOs also supported those prior to and post-release, particularly at external meetings for e.g. housing after release. As mentioned in QI 7.5, access to child development for both male and female prisoners was being delivered but was in its infancy.

7.18 All purposeful activities provided are of good quality and encourage the engagement of prisoners. Prisoners are consulted in planning the activities offered.

Rating: Generally acceptable performance 

Female prisoners worked diligently and purposefully when improving rough sawn-wood and preparing it for finishing and assembly by male prisoners in an adjoining area. During these activities, both male and female prisoners generally worked productively as they were incentivised through a production bonus scheme. However, on occasions, production was disrupted through wood supply or production issues.

Four male prisoners cut male prisoners' hair in the mornings and were supported to gain up to three units of an NPA in Cosmetology. Four female prisoners worked afternoons in the salon where they cut and coloured female prisoners' hair and provided nail treatment services and were also able to achieve NPA qualification.

Under the direction of the Education Team Leader, the Learning Centre provided a comfortable and relaxed environment which encouraged prisoners to participate

meaningfully in activities. However, the quality of the classroom accommodation was variable. There were only four small classrooms, one of which was used exclusively as an ICT suite. The room used for art and crafts had no sink, which constrained the learning activities available, and a lack of storage space resulted in a cluttered teaching space. Overall, the quality of learning and teaching was good, and most prisoners accessing the Learning Centre spoke highly of their learning experiences and positive relationships with education staff. However, the Learning Centre staff had difficulty attracting prisoners with additional support needs (ASN) to engage in learning activities to improve their literacy and numeracy skills.

7.19 The scheduling of activities and individual prisoner's access to them is organised so that each prisoner takes part in the activities agreed for them.

Rating: Generally acceptable performance 

Male prisoners accessed a reasonable range of work party activities. Most of them participated regularly in work party activities and attended sessions throughout the week. Few work parties had waiting lists, so there was a choice of work party activity for male prisoners. For female prisoners, the choice of work party activity was more limited. On average, approximately 50% of the prisoner population benefited from attendance at the Learning Centre where they undertook educational experiences. The Learning Centre has a capacity for 80 attendances throughout the day. However, most classes had vacancies as insufficient numbers of prisoners had signed-up to attend Learning Centre programmes.

7.20 All prisoners have the opportunity to take exercise for at least an hour in the open air every day. Provision is made for this to be realistically available in all seasons and conditions of the weather.

Rating: Generally acceptable performance 

Exercise was carried out as per Prison Rules. Protection prisoners reported that they rarely went out due to the poor weather but had also been shouted at occasionally, and therefore preferred to stay in their cell and study or watch TV. All categories of female prisoners exercised together. Prisoners who request protection status should be encouraged to take exercise.

One disabled prisoner explained that he never took the opportunity to go out for fresh air. Although it was offered he declined as this meant the staff had to get a wheelchair from the Health Centre and it was too much trouble. Efforts should be made to allow access to a wheelchair more readily, and allow for more opportunities for this prisoner to gain fresh air and not feel a burden to staff.

7.21 Prisoners are assisted in their religious observances.

Rating: Generally acceptable performance 

HMP Greenock offered five sessions of pastoral care, taking in all the main religious groups. One Chaplain had been off work for approximately one year due to other circumstances; however a new Chaplain was due to start the Monday after the


inspection. Where other faiths required religious practice, the appropriate faith would be contacted. If a referral was required this was made through a request book in each residential area. The establishment also had a part-time Imam, who was available once a week or when required.

7.22 Prisoners are afforded access to a library which is well-stocked with materials that take account of the cultural and religious backgrounds of the prisoner population.

Rating: Poor performance 

The library facility had recently been relocated to the upstairs section of the Link Centre, and was available to all prisoners on a weekly rotational basis. Due to the library's location, access for prisoners was dependent on SPS staff to escort and supervise them. However, staff were not always available to perform this role. In addition to the main library, there was a small range of children's reading materials in the Visits Room. There were no library facilities or reading materials in the Learning Centre or any of the residential halls. Although there was no librarian or dedicated person with responsibility for the library, prisoners were able to access a limited range of reading material, predominantly fiction novels. The range of reading material available was improving following the recent introduction of a partnership with Inverclyde Council. However, there were no large print books, audiobooks, DVDs, legal journals, foreign language books or reading material for prisoners with ASN. The library's location was not conducive to communal activities such as debating societies or book clubs. Many prisoners were not aware of how they could access the library or borrow books. Therefore, the library was rarely used by prisoners.

7.23 Prisoners are afforded access to participate in sporting or fitness activities relevant to a wide range of interests, needs and abilities.

Rating: Good performance 

Prisoners benefitted from a well-equipped and accessible gymnasium. It was open seven days a week, was popular and well-used. It provided exercise and fitness activities from 08:30 through to 20:30 Monday to Friday, and was open from 09:00 to 17:15 at weekends. Sessions were provided for all categories of the prison population to support fitness and healthy living lifestyles. The gym contained a multi-purpose games area which was used for badminton, volleyball, short tennis, netball and skittleball. In addition, it contained a good range of well-maintained fitness equipment and a dedicated free-weights room.

A small number of male and female prisoners were supported to gain Sports Leader Course certificates. This enabled them to assist other prisoners in exercise activities and helped to develop and improve their communication skills. A volunteer tutor supported a small number of male prisoners to deliver yoga classes. For a number of years, a Fit Together group, consisting of individuals with ASN attend the prison gym and were supported by prisoners to develop and improve their lifestyles through fitness and exercise activities. Prison gymnasium staff work with a Mental Health Nurse to support reluctant prisoners to participate and engage in exercise activities.

Most male prisoners participated in gymnasium activities. However, only a minority of female prisoners attended the gym. The majority of female prisoners do not benefit from exercise activities and remained in their cells or accommodation hall.

7.24 Prisoners are afforded access to participate in recreational, self-help or peer-support activities relevant to a wide range of interests and abilities.

Rating: Generally acceptable performance 

Prisoners were able to access a limited range of recreational and self-help activities. In addition to arranged gym sessions, prisoners could access the Fit Together group with members of the local community. Visitors to the prison provided a few opportunities to engage in self-help activities, such as a mindfulness seminar led by Inverclyde Libraries. In the Learning Centre, there were a few valuable self-help learning activities such as a business start-up course and a range of iLearn courses including 'staying safe with noise', 'an introduction to first-aid' and 'food safety essentials'. There were a few examples of prisoners providing informal peer support in the Learning Centre, in areas such as communication and art. However, there were no formal peer-tutoring schemes operating in either the Learning Centre or any of the work parties. No consideration has been given to providing training or awards to support the process of peer support or mentoring.

7.25 Prisoners have access to a variety of cultural activities and events and are encouraged to participate in them.

Rating: Satisfactory performance 

Various cultural events and activities took place within the prison throughout the year. Within the Learning Centre, creative writing and art projects provide means for prisoners to express themselves, engage in debate and contribute to the prison magazine Peter Patter. Commendably, both male and female prisoners had been successful in being nominated for a total of 28 Koestler Awards achieving 14 winning entries. One successful prisoner visited the Koestler Awards exhibition at the Tramway Gallery in Glasgow where their winning entry was part of the exhibition. A few additional events took place across the prison to celebrate culture and citizenship including a MacMillan Coffee Morning, Learning Centre band concert and visits by authors and actors to promote reading and creative writing.

STANDARD 8 - TRANSITIONS FROM CUSTODY TO LIFE IN THE COMMUNITY

Prisoners are prepared for their successful return to the community.

Commentary

The prison is active in supporting prisoners for returning successfully to their community at the conclusion of their sentence. The prison works with agencies in the community to ensure that resettlement plans are prepared, including specific plans for employment, training, education, healthcare, housing and financial management.

Inspection findings

Overall Rating: Satisfactory performance 

Overall, the prison was active in supporting a large number of prisoners in returning successfully to their community at the conclusion of their sentence. A range of agencies worked well and in partnership to ensuring CIPs, based on prisoners' needs were detailed, and that the risks posed by prisoners were addressed, where possible, prior to returning to the community.

There was effective communication and strong multi-agency partnership working between prison and partners including PBSW. Productive and positive working relationships were well-established with willingness across partnerships to find solutions when issues developed.

The ICM process was well-established within the prison and was generally being delivered in accordance with standards. Personal Officers knew individual prisoners well and contributed meaningfully to reports and planning meetings.

However, having Personal Officers in the role of chair during ICM case conferences jeopardised the level of objectivity and scrutiny, in comparison to an independent chair that would bring these to the process. A dedicated ICM Co-ordinator would provide more objectivity, consistency and a better overview, and would support improved quality assurance of recording.

Attendance by community-based criminal justice social workers at ICMs was very good and the contribution made by PBSWs was highly valued by SPS staff. They showed a willingness to work flexibly to meet the needs of prisoners. This meant that as well as carrying out all their statutory duties which included work with short and long-term sex offenders and supervised release orders, they worked with the CIU to make sure risk assessments were up-to-date and assessments were well-informed.

The RMT and Adverse RMT were effective in providing operational overview and robustness to the decision-making in the case management and planning for prisoners. Where necessary there was also an operational Sex Offender Management Board where cases were discussed.

Although processes were in place to facilitate the exchange of information between the prison and the community, this would be more robust if ICM and MAPPA co-ordination sat with SPS operational staff rather than be seen as an administrative task.

TSOs provided a valuable and effective service which was making a significant contribution to the successful resettlement of prisoners on release. TSOs worked hard to make sure those prisoners with more complex needs were given more intensive support post-release. They had been creative in developing service level agreements with a number of housing partners to support better housing options being available for prisoners on release. The line management responsibility for these posts was clear with regular formal supervision in place. TSOs were also allocated reflective practice time by an Officer other than their line manager.

Prison processes were transparent and supported the participation of the prisoner in sentence and pre-release planning. Individual prisoners were generally engaged in formulating their plans. All prisoners were encouraged to be actively involved in their case conferences. Prisoners told inspectors they were well-informed of the process and said the relevant paperwork was always shared with them prior to meetings. With the prisoner's agreement, families were sent a written invitation to attend ICM case conferences. The numbers that attended remained poor. This is a similar pattern across all prisons.

There were no accredited programmes delivered by the prison, and whilst purposeful activities were available they were less accessible to female prisoners. Generally, SPS staff worked hard to deliver a range of activities as opposed to formal programmes. However, partly because of the physical environment, the population of prisoners, the short-term nature of some of the sentences and numbers of prisoners on remand, it was not always possible to offer a range of group activities for some prisoners. Consequently a significant number of prisoners, in particular women, had access to a limited regime with limited access to any trauma informed programmes.

Whilst structured pre-release programmes were not in place, all partners worked well together and showed a high level of commitment to making sure all relevant appointments were in place prior to release, to support successful transition.

Although fairly new, the CIUs were making a positive difference to a limited number of prisoners' ability to successfully return home and to retaining and sustaining links with their local community. Prisoners based in the CIUs were extremely positive and valued the opportunity to spend time in the Unit prior to release.

Quality Indicators

8.1 The prison encourages government agencies, private and third sector organisations who offer services relevant to the community integration needs of each prisoner to jointly agree an appropriate plan.

Rating: Satisfactory performance 

The Link Centre staff, alongside a number of third sector agencies offered advice and support to prisoners. Representatives from the Department for Work and Pensions (DWP) were present five days per week to provide information on welfare benefits. Two motivated Job Centre Plus (JCP) staff alternated their week between the prison and local DWP office to provide support to prisoners' pre and post-release, which reduced the stress at the point of transition. This was good practice.

The CIP was used to provide a single point of information sharing and communication for all agencies, which helped avoid duplication and provided up-to-date information. A review team, chaired by the Link Centre line manager met when needed to deal with specific issues. The design of the recent TSO/SHINE collaboration process map was a good example of positive collaboration between professionals to improve communication and understanding between agencies.

Given the geographical spread of prisoners, Link Centre staff had developed a network of positive relationships across a range of local authority housing/homeless departments, which meant prisoners had contact with the housing department most meaningful to them.

A formal Matching Forum identified the most suitable placement for a prisoner. The prison had in the region of 19 live placements across a wide range of settings. These included established businesses, plant hire company, engineering company and local voluntary sector providers. Prisoners spoken with were positive of their experience of placements. The Matching Forum and range of placements was good practice.

8.2 Where there is a statutory duty on any agency to supervise a prisoner after release, all reasonable steps are taken to ensure this happens.

Rating: Generally acceptable performance 

Partner agencies spoke positively of their working relationships with SPS staff. Attendance at ICM by Community Based Social Workers was generally good with good use of video conferencing. The PBSW and Personal Officer meet to share risk assessments prior to the case conference. Significant effort was made to ensure meetings were held within a four week window prior to the ICM, and 96.8% of ICM case conferences were held within the relevant timescales during 2016-17. Prisoners were encouraged to be actively involved in their case conferences. Prisoners told us they were well-informed of the process and that the relevant paperwork was shared with them in advance.

Inspectors found the standard of some action plans variable. Although CIPs were routinely used these should not detract from the need to complete ICM action plans and for these to be SMART. The quality of recordings of outcomes of case conference were variable. There was a lack of formal regular review or oversight of CIPs. The prison may wish to consider introducing a formal structure for reviewing the quality and content of documentation. Whilst PBSW were making sure the quality of the processes was robust there was a lack of management oversight. This was a concern.

8.3 Where prisoners have been engaged in development or treatment programmes during their sentence, the prison takes appropriate action to enable them to continue or reinforce the programme on their return to the community.

Rating: Generally acceptable performance 

No formal accredited programmes were available within HMP Greenock. The expectation being that because the prison operated an NTE facility, all prisoners should have completed the relevant programmes prior to coming to HMP Greenock. However, on an individual and identified needs basis, PBSW, alongside qualified group work staff carried out intensive one-to-one interventions to top-up gaps identified within the CIP. Whilst partners showed commitment to try to avoid prisoners having to transfer, this was a resource intensive approach.

External agencies supported prisoners on their return to the community. SHINE provided women with a mentor to provide practical and emotional support with issues they may face in the community. TSOs continued to support liberated prisoners in the community, for up to 12 weeks. The 218 Women's Weekly Drop-in Project supported liberated women, and had a 12-bedded residential unit with provision of a day service programme. The project also provided access to a range of clinics which dealt with mental and physical health issues. These clinics supported access to on-going treatment programmes post-release.

There were limited opportunities within the prison for prisoners to develop their independence or life skills. However, the CIUs provided significant opportunity for a limited number of prisoners to transfer learning and treatment programmes from prison to community. Prisoners within the CIU spoke very positively of their experiences of being able to visit their own GP, receive support to manage money and learn new life skills.


Community Links Scotland in partnership with University of Glasgow and HMP Greenock successfully ran three Activate groups. This community development outreach programme was designed to get prisoners involved in the community in a pro social way, learning to investigate problems and solve issues positively. The course provided opportunities for prisoners prior to and after liberation. Feedback from prisoners was positive.

8.4 As prisoners near release all reasonable steps are taken to ensure appointments and interviews are in place with relevant agencies.

Rating: Satisfactory performance 

Prisoners were encouraged and supported to take an active role in arranging their own appointments. Link Centre staff facilitated telephone conversations and ensured prisoners could have direct contact with external agencies via telephone. Education staff also supported prisoners to make enquiries and appointments with education establishments, in planning for future courses. Healthcare staff liaised with external agencies to make sure relevant appointments were in place prior to release, and attendance was supported by third sector providers or TSOs. As well as local prisoners knowing JCP staff prior to release, a TSO was based twice a month in the JCP offices to provide an informal drop-in for prisoners who needed further help. JCP staff completed paperwork prior to prisoners release then saw them on the day of release at the JCP office. This continuity of provision of a core service reduced the stress prisoners felt on liberation. Partners worked well together to make sure relevant appointments were in place to support successful transition.

8.5 As prisoners near release all reasonable steps are taken to ensure that accommodation will be available.

Rating: Good performance 

For prisoners who did not have families or accommodation to return to on release, housing was a prominent feature in casework forums. It was also central in the planning for release during ICM process, and good links were established with community criminal justice social workers and local housing departments. Housing partners were invited to ICM meetings as appropriate. TSOs had worked hard to build effective working relationships with local housing providers and associations. They had established rehousing of people with convictions protocols with Fyne Homes and River Clyde Homes which assisted the rehousing of up to four persons with convictions. These local housing agreements were having a significant impact on prisoners' post-release. Instead of having to declare themselves as homeless and being placed in temporary accommodation, prisoners were being housed with a short Scottish Secured Tenancy Agreement in place. Support was provided for as long as necessary by the housing associations which included budgeting, home making and life skills. The prisoner's condition of tenancy included accepting support by TSOs for the duration of the tenancy agreement. This creative initiative had the potential to reduce both the cost and impact of homelessness. The interventions and support offered by TSOs were highly valued by prisoners.

Link Centre staff and TSOs had established relationships with a wide range of housing/homeless sections in a number of local authorities. When requested TSOs or partner agencies would accompany the prisoner on the day of release to housing offices to make sure accommodation was in place. 99.6% per cent of prisoners had secured accommodation or been referred to the relevant housing provider.

8.6 As prisoners near release all reasonable steps are taken to help them find work or enrol for training or education.

Rating: Satisfactory performance 

Prisoners interested in academic courses were supported to identify and apply for these prior to release. Education and other staff had encouraged a few prisoners to gain Open University qualifications. Open learning opportunities were offered in partnership with Dumfries and Galloway College. Tutors worked hard to support prisoners who were interested in a business start-up course, and encouraged external speakers into the prison. Adapted business gateway courses were available to prisoners.

There was support from JCP staff and Tutors to complete a CV in preparation for employment. On occasion the TSOs had been able to negotiate, on behalf of prisoners who had been in employment prior to being sentenced, that the employer keep the post vacant until the prisoner was released. In the interim prisoners had been able to remain in post as volunteers. There was evidence to confirm that a few placements had progressed to full employment. Prisoners were supported to complete the Construction Skills Certification Scheme certificate which was a ticket to work on a building site. Community learning and development provided a variety of literacy supports to prisoners which included signposting and support in putting together a CV. The City College Glasgow also offered adult literacy on demand.

8.7 As prisoners near release all reasonable steps are taken to help them manage their financial affairs.

Rating: Generally acceptable performance 

A number of positive initiatives had been introduced to support prisoners to manage their financial affairs when released. The duty system offered by TSOs was valued by prisoners and it was recognised that this initial contact with recently admitted prisoners helped avoid prisoners accruing rent arrears whilst in prison as well as more constructively manage other debt.

Agencies and staff based in the Link Centre had a good understanding of the impact poverty could have on individuals, and worked together to try to minimise further financial hardship at the point of release. The JCP staff dealt with a range of money-related matters, and made sure applications for benefits were well-progressed prior to release. They played a key role in offering financial advice and offered on-going support to address issues post-release. SPS staff had recently established a clothes bank within the prison and TSOs routinely referred prisoners to food banks. TSOs had also established good working relationships with local banks, and were able to support prisoners in the setting up of bank accounts. Prisoners were also supported to secure a suitable form of identification. These actions made getting access to benefits and other support on release as straight forward as possible. However, apart from the relevant practical support offered to the few prisoners within the CIUs, there was currently a general lack of life skills teaching and budgeting support for prisoners during their sentence. Inspectors were told that a life skills class was due to replace the joiner's workshop.

8.8 The prison reliably discharges its statutory duties to assist the resettlement of prisoners on release.

Rating: Satisfactory performance 

In preparing short-term sentenced prisoners for their return to the community the prison employed four TSOs. This committed group worked hard with short-term prisoners who were willing to engage with support pre and post-release for up to 12 weeks. TSOs established constructive relationships with prisoners six weeks prior to release, and made a commitment to continue supporting individuals, who often had quite complex and longstanding needs.

Long-term prisoners had their resettlement needs addressed within the ICM process. From records and attendance at pre-release ICMs it was evident that prisoners were meaningfully involved in these meetings with time taken to address resettlement needs thoroughly.

A range of other external partners worked in partnership with prison staff to assist in the resettlement of prisoners on release including SHINE and drug and alcohol services.

8.9 Where the prison offers any services to prisoners after their release, those services are well planned and effectively supervised.

Rating: Generally acceptable performance 

As previously reported, the ICM process was managed operationally by an experienced ICM Administrator and PBSW, with the Head of Residential responsible for oversight, and the Deputy Governor responsible for providing strategic leadership. Whilst most of the ICM processes conformed to national guidance, the lack of a dedicated ICM Co-ordinator or team was impacting on the quality and consistency of the delivery of ICM. There appeared little evidence of any robust management oversight with no apparent plans to change this model. This was a concern. The work of the four TSOs was well-planned, managed and supervised by a very experienced and competent FLM. The Team had formed and sustained effective relationships with prisoners and partner agencies in order to support transition from custody to community.

STANDARD 9 - EQUALITY, DIGNITY AND RESPECT

The prison employs fair processes whilst ensuring it meets the distinct needs of all prisoner groups irrespective of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex and sexual orientation.

Commentary

The prison ensures that all prisoners experience equality of opportunity and outcomes whilst ensuring that the law that applies to any specific group of prisoners is implemented in ways that recognise and respect particular needs.

Overall rating: Generally acceptable performance 

Overview

HMP Greenock is one of the oldest remaining prisons in Scotland, having been opened in 1910, with further buildings added in the 1990s. This has an important impact on how rights and services are delivered within the prison. Whilst efforts have been made to maintain its cleanliness and upkeep, some areas were no longer fit for purpose, and 18 cells had been put out of use due to significant damp, and toilets in cells were only partially enclosed. Access for prisoners with disabilities to prison facilities was limited, and some key areas of the prison were below the standard required for the delivery of modern services.

The prison provides most prisoners with the basic physical requirements for an adequate standard of living; however particular attention should be paid to disabled prisoners and their needs. Prisoners had suitable clothing and bedding, and good access to necessary toiletries and cleaning materials. However, some vulnerable groups raised the inadequacy of the necessary toiletries based on their gender. While these prisoners could purchase additional or different toiletries from the canteen list, this seems limited and not regularly updated.

Prisoners were clear that staff treated them with dignity and respect and vice versa. From both interviews and observations, there appeared to be a positive atmosphere between staff and prisoners. The same can be said of relations between staff.

The provision of information about entitlements and day-to-day processes is fundamental to enabling prisoners' access to services, and to understanding what is expected from them. Whilst lack of information and inconsistent communication were issues raised by a broader range of prisoners, inspectors were particularly concerned about the experience of ethnic minorities, cross border transfers, those with learning difficulties and foreign nationals, who faced greater difficulty in navigating the system due to language barriers and social isolation. Being unable to access information in a language they could understand constituted a barrier to accessing legal representation, medical services, dietary needs and complaint procedures. The national Induction Information Booklet was both accessible and comprehensive. However, during interviews it became apparent that some prisoners stated that they were not aware of it.

From the detailed discussions with the prison population, inspectors consider that there is a need for both greater awareness raising of good practice, and application of SPS policies in relation to the needs of prisoners with various protected characteristics. Whilst the proportion of the population with protected characteristics was relatively low at the time of inspection, their vulnerabilities and risks merit particular attention.

The confidence in the complaints process amongst prisoners was mixed. The observations and documentation inspected on PCF2s from October to December 2017 showed that the complaints were treated seriously and dealt with promptly. However, they lacked the required thoroughness and confidentiality. It is crucial that every prisoner on admission is provided with written information on regulations, complaints and disciplinary procedures in a language which he or she understands. If necessary, these rules should be explained orally.

During the inspection, inspectors encountered a number of examples of good practice, including the support given to most prisoners to facilitate visits and contact with the outside world. However, more could be done in this respect in relation to foreign prisoners. There were good examples of efforts made to ensure that the regime was designed to sustain and strengthen links with relatives and the outside community. These included a children's play area and café as well as a gym.

Examples of innovative practices include the 'non-participant programme' which is in the process of being developed. It encourages prisoners to participate in the educational, recreational and cultural activities that take place within the prison. An independent evaluation of this programme is recommended in order to roll this out in other Scottish prisons if effective.

There was positive evidence that the basic needs of prisoners in the process of transitioning from one gender to another were identified and provided for.

The Equality & Diversity (E&D) Group had not been active for at least a year, but was reactivated in February 2018. Documentation and evidence of the meetings of this group prior to 2018 was difficult to obtain. There was no local E&D Strategy or action plan. The E&D Team should work closely together with management to ensure E&D, and human rights, are reflected in the corporate plan and is adequately implemented on the ground, by reflecting the local needs of the prison population in HMP Greenock.

An explicit reference to human rights in the E&D Strategy is important, as human rights provide protection for all prisoners and staff, not only those who have protected characteristics. A lack of reference to human rights in the statement, and to a lesser extent to equality and non-discrimination was reflected in the relatively low level of understanding of human rights throughout the prison and staff, which is reasonable, but could be enhanced.

Inspectors consider that there is a need for both greater awareness-raising of good practice and application of SPS policies on the ground in relation to the needs of prisoners with various protected characteristics.

Quality Indicators

9.1 The prison's Equality and Diversity Strategy meets the legal requirements of all groups of prisoners including those with protected characteristics.

Rating: Generally acceptable performance 

The E&D Group had not been active for at least a year, but was reactivated in February 2018. Documentation and evidence of the meetings prior to 2018 was difficult to obtain. There is no local E&D Strategy or action plan. As a consequence there had been little progress in the delivery of E&D. In practice, the Halls appeared to have varying approaches to supporting prisoners with protected characteristics, with little consistency. Despite these limitations, inspectors saw some positive engagement by staff with prisoners with diverse needs, and the planning forums were generally appropriate. The lack of a Strategy was also reflected in the level of understanding of human rights, and to a lesser extent of equality and non-discrimination throughout the prison and staff, which was reasonable, but could be enhanced. The prison should aim to demonstrate a clear and co-ordinated approach to E&D, and an effective processes to identify, and resolve if any, the distinct needs of each protected characteristic.

9.2 Staff understand and play an active role in implementing the prison's Equality and Diversity Strategy.

Rating: Generally acceptable performance 

As reported in QI 9.1 there was no E&D structure in place. There was positive engagement by staff with prisoners with diverse needs, but the approach to dealing with E&D issues was highly individualised. Often, rather than structured processes to identify issues, they arose from relationships between staff and prisoners and from general case management. This approach depended heavily on the quality of individual relationships and may lead to differential treatment among those who do not benefit from such strong relationships. This highlights the importance of up-to-date training for all staff on a continuing basis.

The support to foreign nationals was inconsistent. In some cases SPS staff translated correspondence for foreign nationals personally, rather than using translation services. Whilst this was helpful for some prisoners, the prison should be aware that the right to privacy and data protection are paramount. There was a good support for LGBT prisoners, as well as older prisoners. Prisoners said that staff treated them with dignity and respect. Inspectors considered that an action plan with relevant, measurable, specific and time-bound targets would be helpful for the effective implementation of an E&D strategy and understanding of the role expected by the staff.

9.3 Prisoners of all ages are treated with dignity, respect and according to their individual needs.

Rating: Generally acceptable performance 

The age of the building had an important impact on how rights and services were delivered within the prison. There were significant limitations to providing adequate material conditions of detention for older prisoners and those with physical disabilities. There were a low number of young persons and older prisoners in custody, and there was reasonable support for older prisoners.

However, one case in particular was concerning, the prisoner had not been provided with a wheelchair, something that he had used in the outside world, and the hygiene of his room was poor. The room was partially adapted to the prisoner's needs, but reasonable adjustments should be made to allow full access to the regime and facilities for disabled prisoners, which should be maintained and reviewed according to updated needs assessments. It is urgent that the prison undertake a need assessment, or reviews the current one.

9.4 Prisoners with disabilities are treated with dignity, respect and according to their individual needs.

Rating: Generally acceptable performance 

The prison had a few partially adapted accessible cells. At the time of the inspection, there were a few prisoners with significant physical disabilities, including one prisoner who was not able to stand from his bed. There were severe limitations to enabling adequate material conditions for prisoners, particularly those with physical disabilities. However, it is important to note that prisoners expressed that most of their needs were met, by staff readily available to assist. As with older prisoners, disabled prisoners were not able to access all parts of the prison therefore their regime was limited in relation to recreational and educational activities. In light of the current material conditions of this building, the prison should conduct a comprehensive analysis of prisons' physical compliance with disability discrimination and age equality laws.

The National Induction Information Booklet was both accessible and comprehensive; however during interviews it was apparent that prisoners were not aware of it.

9.5 Prisoners who have undergone or are in the process of transforming from one gender to another are treated with dignity, respect and according to their individual needs.

Rating: Satisfactory performance 

There were two prisoners in this category at the time of the inspection. The information available, including the case conference notes, suggested good practice was being followed. There was reasonable support for LGBT prisoners. Inspectors noted that the individual's wishes were met, and a clear offer of on-going support

was made. However, there was a need for greater understanding of their needs, for example improved external and peer to peer support for transgender prisoners.

9.6 Prisoners who are married or who have entered into civil partnership unions are treated with dignity, respect and according to their individual needs.

Rating: Generally acceptable performance 

It is important that SPS enable and support the right to private and family life for foreign nationals or those prisoners whose family are not able to attend visits. The SPS may wish to consider allowing access to Skype or other internet based communication applications to ensure that good quality family contact can be maintained irrespective of where those family members reside.

9.7 Women prisoners are treated with dignity, and their individual needs are met including those associated with pregnancy and maternity.

Rating: Generally acceptable performance 

For most women, access to healthcare was good across a range of services, particularly in relation to mental health. Support for the most vulnerable however continued to be a challenge, requiring specialist support and care. There was a need for healthcare and prison staff to co-ordinate continuity of healthcare plans when transferred from one prison to another.

The fact that women constitute a minority in HMP Greenock was reflected in infrastructures that were sometimes inadequate, for example some women prisoners reported that access to education and work was limited compared with that available to male prisoners, and that workshops were often closed.

9.8 Prisoners of all racial groups and nationalities are treated with dignity, respect and according to their individual needs.

Rating: Generally acceptable performance 

Prisoners reported being treated with dignity and respect, regardless of their racial group or nationality. There were no reports of racial tension or incidents among those spoken with, including a number of foreign nationals. As has been noted in other prisons, foreign nationals were a marginalised group whose isolation could be exacerbated by language barriers. The library's content should include texts in foreign languages. Professional interpreting services were not used in all confidential matters. Written information should be available in the most common foreign languages. Prisoners who are not proficient in English would struggle to follow the information provided during induction, which may explain some of the gaps in knowledge among some prisoners. The SPS may wish to consider allowing access to Skype or other internet based communication applications, which present an efficient and simple means of facilitating family relations.

9.9 Prisoners of all religious groups are treated with dignity, respect and according to their individual needs.

Rating: Satisfactory performance 

Prisoners were able to practise their religion fully and in safety. The Chaplaincy played a full part in prison life and contributed to prisoners' overall care, and support of religious and non-religious groups. Religious texts and artefacts were promptly provided, and both staff and the Chaplaincy were compliant with equality and human rights legislation. Regular services took place for those of Protestant and Catholic faiths. Dietary needs according to religious practices were met, however the information provided around available options were not clearly communicated to prisoners. The Chaplaincy played an important role to facilitate understanding between religions.

9.10 Prisoners of all genders are treated with dignity, respect and according to their individual needs.

Rating: Satisfactory performance 

This is already reported in 9.5, 9.7 and 9.11.

9.11 Prisoners of any sexual orientation are treated with dignity, respect and according to their individual needs.

Rating: Satisfactory performance 

According to the E&D data there were only a few prisoners who identified as LGBT in HMP Greenock. No issues in relation to sexual orientation were raised and prisoners expressed that their needs were generally addressed.

STANDARD 10 - ORGANISATIONAL EFFECTIVENESS

The prison's priorities are consistent with the achievement of these standards and are clearly communicated to all staff. There is a shared commitment by all people working in the prison to co-operate constructively to deliver these priorities.

Staff understand how their work contributes directly to the achievement of the prison's priorities. The prison management team shows leadership in deploying its resources effectively to achieve improved performance. It ensures that staff have the skills necessary to perform their roles well. All staff work well with others in the prison and with agencies which provide services to prisoners. The prison works collaboratively and professionally with other prisons, and other criminal justice organisations.

Inspection findings

Overall Rating: Satisfactory performance 

As one of the smaller local prisons in Scotland, HMP Greenock benefited from a more settled staffing group, who had a great deal of experience and service in Greenock. It was apparent to the Inspection Team that there were very positive relationships throughout the prison, both between prisoners and staff and between different staffing groups. There were good levels of co-operation and joint working with healthcare staff and social workers. The Governor provided clear and visible leadership to everyone in the prison.

Staff took pride in their work and contributed to a safe and productive prison. The limitations of such old accommodation and facilities were apparent, restricting the opportunity for activities which would be available in other prisons. Despite these limitations, staff maintained a positive attitude and approach to their work.

The prison had developed good links with organisations in the community who could provide opportunities for work placements for prisoners in the NTE and the CIUs. There was an impressive range of work placements available and good support for those who were on them. The TSOs, too, had developed good links with local housing providers and others who could offer support to people leaving the prison. There was a good success rate for finding accommodation for those who were supported by the TSOs on liberation.

In relation to the provision of education, the contract provider had changed about six months before the inspection from New College Lanarkshire to Fife College. The full implications of the changes were not yet apparent to the staff that would be affected. This had an adverse impact on the opportunities available for prisoners to engage in educational activities. HMIPS will continue to monitor the provision of educational opportunities in HMP Greenock.

Quality Indicators

10.1 The prison successfully implements plans to improve performance against these standards. The management team gives clear leadership by communicating the prison's priorities and what is expected of all staff.

Rating: Satisfactory performance 

HMP Greenock had a Business Improvement Plan and a Business As Usual Plan in place for 2017-18. A clearer plan was being developed for 2018-19, which would provide greater clarity for all staff. There had been a significant change in the senior management team over the previous eight months, with a new Governor-in-Charge and Deputy Governor. Staff and prisoners appreciated the visibility of the Governor, who made herself available to listen to the views of others in all areas of the prison.

10.2 The management team makes regular and effective use of information in improving the prison's performance against these standards.

Rating: Satisfactory performance 

Regular management meetings monitored the performance of the prison against a number of performance indicators. These meetings were supported with detailed audit and performance information. Actions which had been agreed were tracked using a structured action plan tracker. There was a lack of detailed information about the performance in the Learning Centre, which had resulted from the change of education provider. It was expected that this would improve over the coming months.

10.3 Staff are clear about the contribution they are expected to make to the priorities of the prison and each is trained to fulfil the requirements of their role. Succession and development training plans are in place.

Rating: Satisfactory performance 

Staff throughout HMP Greenock were aware of the importance of the role they fulfilled and how it contributed to the priorities of the prison. Many staff had been in post for considerable lengths of time and were very familiar with what was required of them. There was a comprehensive training programme in place, which was monitored systematically. Uncertainties about the implications of the new education contract for individual members of staff were having an impact at the time of the inspection. Greater clarity on these issues was expected in the months to come. There were some limited succession plans in place.

10.4 Good performance at work is recognised by the prison in ways that are valued by staff. Effective steps are taken to remedy inappropriate behaviour or poor performance.

Rating: Generally acceptable performance 

Plans were in place to introduce a more formal recognition scheme for members of staff, to ensure that good performance at work was acknowledged. There was no recognition committee, but one was to be introduced this year. Managers were able to nominate members of staff for awards at a local level and these were presented at a suitable event in the Board Room. There was a local HMP Greenock newsletter, which included information about relevant initiatives and achievements. There was a reasonable completion rate of annual performance appraisals at the mid-year and end-year points. Arrangements were in place to manage underperforming members of staff.

10.5 Staff at all levels understand the value of work undertaken by others.

Rating: Satisfactory performance 

Throughout HMP Greenock there was a good level of appreciation of the different roles that members of staff played. A strong sense of identity was apparent and a shared commitment to delivering good standards of care and professionalism. There were some concerns expressed about the impact of the Prison Officer Professionalisation Programme on the running of the prison, particularly in the light of the shift pattern in HMP Greenock.

10.6 Each functional staff group understands and respects the work undertaken by each of the other functions.

Rating: Satisfactory performance 

Throughout the inspection process it was evident to inspectors that there were good relationships between different functional groups in HMP Greenock. This extended beyond SPS staff to other disciplines such as social work, education and healthcare staff. Successful joint working was apparent across a range of settings, to the benefit of outcomes for prisoners.

10.7 The prison is effective in fostering supportive working relationships with other parts of the prison system.

Rating: Satisfactory performance 

Because of HMP Greenock's diverse range of prisoner populations, including a NTE, women prisoners and two CIUs, there were good working relationships with other prisons in Scotland. HMP Greenock had successfully integrated prisoners from other prisons, whose behaviour had previously been problematic. Once again on this inspection, inspectors found that some women had endured unacceptably long journeys in the escorting contractor's vehicles before arriving at HMP Greenock.

HMIPS will continue to monitor the treatment and conditions for women during their journey to and from prison.

10.8 The prison works effectively in partnership with agencies which share responsibility for managing and supporting prisoners.

Rating: Satisfactory performance 

HMP Greenock worked well with a wide range of partner agencies that had responsibility for supporting and managing prisoners. There were positive relationships with statutory partners such as NHS and social work, as well as with third sector agencies. The Fit Together programme, run in conjunction with the Fitzgerald Resource Centre, provided opportunities for people with learning disabilities to benefit from physical activities in the gym at HMP Greenock.

10.9 The prison works effectively in partnership with organisations that provide services either during their sentence or on release.

Rating: Good performance 

There was an impressive range of placements available for prisoners who were able to access work placements from the NTE and the CIUs. It was clear that the workplace providers valued their link with the prison, and understood fully their responsibilities when a prisoner was with them. There were clear lines of communication between the prison and the placement providers, which were used to resolve any difficulties as they arose.

The TSOs had good links into appropriate service providers to support people leaving prison, particularly housing providers, addiction support services and potential employment providers.

HMP Greenock was represented by senior staff on a number of community justice partnerships in Inverclyde and the Ayrshires, designed to support people at risk of offending. The Governor chaired the partnership group supporting women offenders in the Ayrshire local authority areas.

10.10 The prison is effective in communicating its work to the public and in maintaining constructive relationships with local and national media.

Rating: Satisfactory performance 

HMP Greenock had engaged positively and constructively with local community groups. Positive initiatives had been reported in the local press. Visits from local and national politicians had been facilitated to increase the public awareness of the work of the prison in Greenock.

Annex A

HMP Greenock - Prison population profile as at 19 February 2018

Status	Number of prisoners	%
Untried Male Adults	33	14
Untried Female Adults	10	4
Untried Male Young Offenders	0	0
Untried Female Young Offenders	0	0
Sentenced Male Adults	144	61
Sentenced Female Adults	42	18
Sentenced Male Young Offenders	0	0
Sentenced Female Young Offenders	0	0
Recalled Life Prisoners	1	0
Convicted Prisoners Awaiting Sentencing	5	2
Prisoners Awaiting Deportation* (See note below)	0	0
Under 16s	0	0
Civil Prisoners	0	0
Home Detention Curfew (HDC)	15	6

Sentence	Number of prisoners	%
Untried/ Awaiting Sentence	48	20
0 – 1 month	0	0
1 – 2 months	0	0
2 – 3 months	0	0
3 – 4 months	4	2
4 – 5 months	5	2
5 – 6 months	4	2
6 months to less than 12 months	29	12
12 months to less than 2 years	33	14
2 years to less than 4 years	33	14
4 years to less than 10 years	8	3
10 years and over (not life)	2	1
Life	67	29
Order for Lifelong Restriction (OLR)	2	1

Age	Number of prisoners	%
Minimum age:	21	0
Under 21 years	0	2
21 years to 29 years	60	26
30 years to 39 years	86	37
40 years to 49 years	60	26
50 years to 59 years	20	9
60 years to 69 years	8	3
70 years plus	1	0
Maximum age:	76	0

Total number of prisoners	235
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*One prisoner is held on both an immigration warrant and untried warrant, he is counted in the untried figures.

Annex B

Inspection Team

David Strang, HMIPS

Jim Farish, HMIPS

Calum McCarthy, HMIPS

Keith Waddell, SPS

Pamela Swan, Serco

Catherine Haley, Healthcare Improvement Scotland

Jacqueline Jowett, Healthcare Improvement Scotland

Leon Wylie, Healthcare Improvement Scotland

Erin McGinley, Healthcare Improvement Scotland

Andrew Brawley, Education Scotland

Steven McPherson, Education Scotland

Martha Shortreed, Care Inspectorate

Diego Quiroz, Scottish Human Rights Commission

Annex C

Acronyms

AAU	Audit Assurance Unit
ASIST	Applied Suicide Intervention Skills Training
ASN	Additional Support Needs
BBV	Blood Borne Virus
BICS	British Institute of Cleaning Science
C&R	Control and Restraint
CCTV	Closed Circuit Television
CIU	Community Integration Unit
CIP	Community Integration Plan
DVD	Digital Video Disk
DWP	Department for Work and Pensions
E&D	Equality and Diversity
ECHR	European Court of Human Rights
ECR	Electronic Control Room
EDA	Escorted Days Absence
EDL	Earliest Date of Liberation
EYS	Early Years Scotland
FCO	Family Contact Officer
FGTR	First Grant of Temporary Release
FLM	First Line Manager
GCHSCP	Glasgow City Health and Social Care Partnership
GP	General Practitioner
HDC	Home Detention Curfew
HMIPS	HM Inspectorate of Prisons for Scotland
HSCP	Health and Social Care Partnership
ICC	Internal Complaints Committee
ICM	Integrated Case Management
ICT	Information and Communication Technology
IEPS	Incentive and Earned Privilege Scheme
IHSCP	Inverclyde Health and Social Care Partnership
IMU	Intelligence Management Unit
IPM	Independent Prison Monitor
JCP	Job Centre Plus
LGBT	Lesbian, Gay, Bisexual, Transgender
LTP	Long-Term Prisoner

MAPPA	Multi-Agency Public Protection Arrangements
MDMHT	Multi-disciplinary Mental Health Team
MORS	Management of an Offender at Risk Due to Any Substance
NPA	National Progression Awards
NTE	National Top End
OLR	Order for Lifelong Restriction
ORT	Opiate Replacement Therapy
PBSW	Prison-Based Social Worker
PCF	Prisoner Complaint Form
PER	Prisoner Escort Record
PIAC	Prisoner Information Action Committee
PIN	Personal Identification Number
PPC	Prisoners Personal Cash
PR2	The SPS electronic prisoner records system – version 2
PSIP	Prevention of Suicide in Prisons
PSS	Prison Supervision System
QI	Quality Indicator
REHIS	Royal Environmental Health Institute Scotland
RMT	Risk Management Team
RRA	Reception Risk Assessment
SEL	Special Escorted Leave
SMART	Smart, Measurable, Achievable, Relevant, Timely
SOP	Standard Operating Procedure
SPS	Scottish Prison Service
SPSO	Scottish Public Services Ombudsman
SRU	Separation and Reintegration Unit
SSM	Special Security Measures
THN	Take Home Naloxone
TSO	Throughcare Support Officer
VISION	Prisoner's electronic health record
VP	Valuable Property

Annex D - Painting programme upgrade of cells

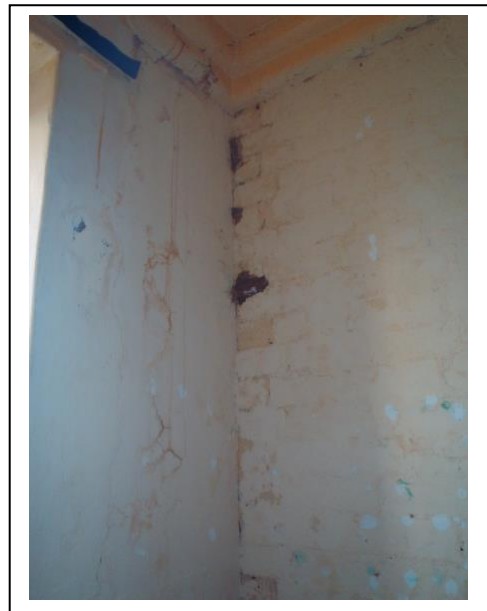
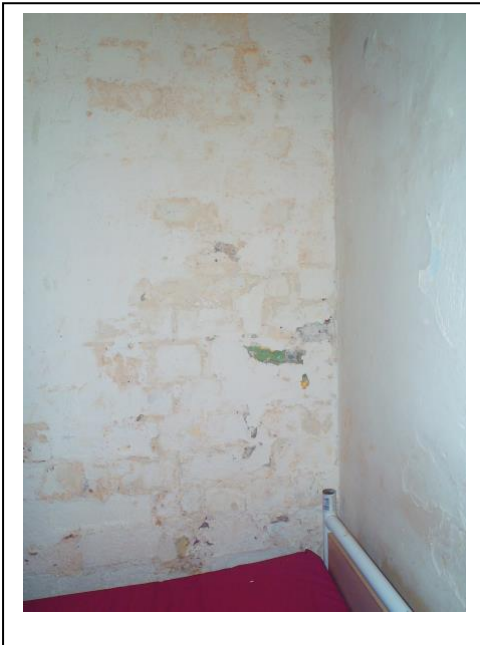
Before



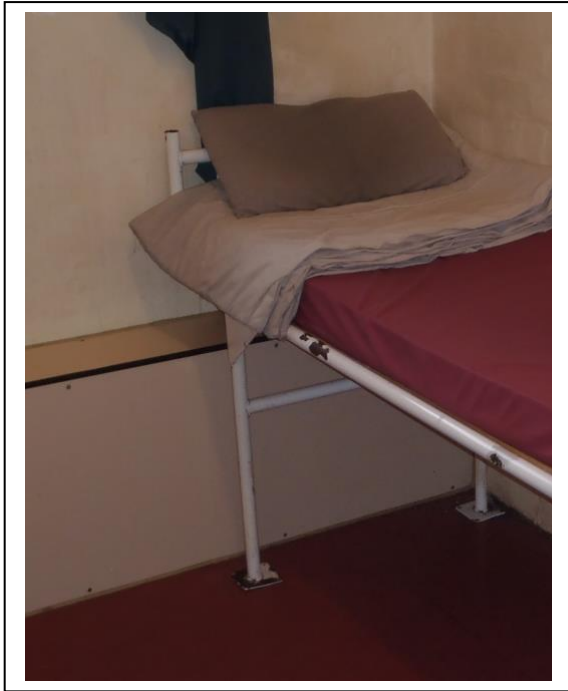
After



Annex E - Condition of the cells that have been removed from use



Annex F - Bed height resulting from cell design



Projection remaining after top bunk removed





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Room Y1.4
Saughton House
Edinburgh
EH11 3XD

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