



HM INSPECTORATE OF PRISONS

HMP PERTH

INSPECTION: 19-20 MAY 2004

LAST FULL INSPECTION 7-11 JANUARY 2002



SCOTTISH EXECUTIVE

CONTENTS

PAGE(S)

1.	INTRODUCTION	1
2.	PREAMBLE	2-3
3.	PROGRESS ON RECOMMENDATIONS AND POINTS OF NOTE	4-6
4.	NEW DEVELOPMENTS	7-11

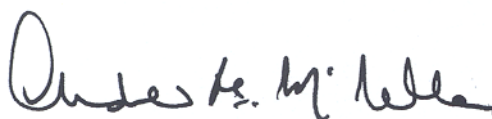
1. INTRODUCTION

1.1 The visit to HMP Perth was made as part of a programme to visit every prison each year in which a full inspection is not being made. In the course of such visits the purpose is to follow up points of note from previous inspections, to examine any significant changes, and to explore issues arising from the establishment's own assessment of itself. It should not be seen as an attempt to inspect the whole life of the establishment.

1.2 The Inspection Team comprised:

Andrew McLellan
Rod MacCowan
David McAllister
David Abernethy

HMCIP
HMDCIP
HMACIP
HMIP



June 2004

ANDREW R C McLELLAN
HM CHIEF INSPECTOR OF PRISONS

2. PREAMBLE

2.1 It would be possible to write a report on Perth Prison which was gloomy. The conditions in ‘C’ Hall are dreadful. The combination of slopping out and cell-sharing produces, wherever it is found, very bad conditions, and that combination is everywhere in ‘C’ Hall. The installation of in-cell power has helped, and it is true that some minor modifications have been attempted since last year (better ablutions processes, unsatisfactory vanity screens). Nevertheless, it was a dismal place last year and it is still a dismal place. It is home to about 250 prisoners, 40 of whom are long-term prisoners.

2.2 Prisoners share cells in ‘C’ Hall because the whole prison is overcrowded. The Visiting Committee called overcrowding at Perth “a terrible problem”, and the Committee is right. The inexorable rise in prison numbers means that “last year’s high becomes this year’s average” number. In the new Contract between the SPS and Perth Prison, Perth is contracted to hold 700 prisoners: that figure represents severe overcrowding in a prison with 596 places. The practice of ‘contracting for overcrowding’ may well have implications for the future. If it means that overcrowding is accepted as the normal at Perth, then that will not be good for prisoners. Nearly always it is found that prisons which are badly overcrowded are simply unable to provide enough useful activity for prisoners. Since last year Perth has found ways of making work places available more regularly to prisoners; but there is still not enough. So overcrowding is very often related to prisoners spending a long time in cells. In Perth, and it is not alone in this, those for whom there is least useful activity are prisoners who are receiving protection and prisoners on remand. Among those remand prisoners at Perth are people under 21 years of age. The number at the time of the inspection was 34, and they are mixing freely with adult prisoners on remand.

2.3 Yet this is not a gloomy report. Good relationships between staff and prisoners continue: this was agreed by every group of prisoners and by staff, and was confirmed by what was seen and heard during the inspection. Staff and management alike spoke with appreciation of partnership working. Mental Health care has developed well. Some small changes have brought some small improvements in catering. Perth has made good progress with its Anti-Bullying Strategy; there is an excellent new Addictions Centre; the role of the Family Contact Development Officers has been reinvigorated; and there has been very real

improvement in the Reception area and in Reception procedures since the last report. Lifer liaison work is impressive.

2.4 The imminent beginning of very considerable new building work at Perth offers the prospect of a renewed prison by the end of the decade. This is a positive prospect for members of staff, since it offers good working conditions. At the end of the building work it is expected that prisoners will live in much better conditions, and will have more access to better facilities. In the meantime every effort must be made to address the issue of slopping out in 'C' Hall, and the problems associated with overcrowding.

3. PROGRESS ON OUTSTANDING RECOMMENDATIONS AND POINTS OF NOTE

13.2 The interview area in reception should be moved to accommodate a SPIN computer and sufficient space to conduct assessments in privacy (paragraph 5.11).

Achieved. Further development within the Reception has provided a new nursing station and a room in which assessments can be conducted in privacy.

13.7 The hospital/ward area is unsatisfactory in terms of design, space, privacy, treatment and facilities (paragraph 6.6).

This is still the case: but improvement work is in progress, with an emphasis on access for people with disability.

13.12 Ways should be explored to achieve the implementation of the principles of clinical supervision for nursing (paragraph 6.40).

Achieved. Informal clinical supervision takes place every day. The SPS Nursing Services Review is likely to produce proposals for a system of clinical governance for the whole of the SPS.

13.18 The role of the Family Contact Development Officer should be reinvigorated (paragraph 7.24).

The role of the Family Contact Development Officer (FCDO) has been clarified over the past year and the whole area has been reinvigorated. There are now four FCDOs who are given time to carry out these duties. The FCDOs, line management and senior management are to be commended for turning the situation around.

The FCDOs are now part of programmes team, within the Regimes function. They are available to visitors most afternoons and have produced information leaflets, referral forms and other information which is placed on notice boards in the visitors waiting room. It is particularly encouraging to note the introduction of 'Prison Life Induction Visits'. These take

place once a month and are basically an induction for family or close friends to help address any concerns or problems. The format of these sessions is flexible and should be able to change depending on circumstances.

13.20 Closer links should be established between education and industry (paragraph 7.32).

Not achieved. Discussions have taken place on how this can be factored into the new contract with the education service provider. No actual progress has been made.

13.23 The library should be redeveloped into a multi-media learning Centre (paragraph 7.35).

Not achieved. No further progress since last years comments.

13.24 The interview rooms in the halls are inadequate (paragraph 7.38).

Not achieved. No progress since last report.

13.25 The Race Relations Liaison Officer should institute regular one-to-one informal meetings with all the prisoners from ethnic minorities (paragraph 7.42).

Achieved. One-to-one meetings with ethnic minority prisoners do take place. There are currently three Race Relation Managers but no Race Relations Officers. However, formal mechanisms for monitoring issues such as a Multi-disciplinary Race Relations Monitoring Group are still not in place.

13.26 The issue of transporting food from the kitchen to the halls should be reviewed, to ensure that heat loss is kept to a minimum (paragraph 7.54).

Partially achieved. The catering department have tried a variety of measures to improve the quality of the food at point of serving. The heated trolleys have helped and changes to the menu have also been introduced. These have involved replacing chips with options which

better retain their heat and flavour. The menus have been adjusted to allow for “snack packs” to be available at lunch time. However, the food was still criticised by prisoners.

The practice of attaching ‘post its’ to special diet trays and the trolleys has continued but does not appear to have caused any problems.

4. NEW DEVELOPMENTS

Reception

4.1 The Reception area has been further enhanced since the last report. A nursing station has been created allowing the previous nursing station to be converted into an interview/assessment room. A new PIN phone is also available for admissions. The whole area was clean, bright and in a good state of decoration.

4.2 In addition to the changes within Reception itself, an upstairs area had been identified and converted to provide the Movements Manager (who also manages Reception) with an office and a briefing area for escorts. Two substantial storerooms have also been created for prisoners' private property. The improvements to the Reception over the period since the last full inspection are very welcome.

Addictions

4.3 At the time of the last follow up inspection 68 prisoners were receiving methadone: at the time of the current inspection there were 95. The Addictions Co-ordinator indicated that in order to manage methadone prescription, an upper limit had been placed on the numbers receiving it. This was difficult to operate in practice as new admissions receiving a prescription would be continued on that.

4.4 Since the last inspection, the number of officers conducting mandatory drug tests has been reduced by one. For 2003-04, the percentage of clear random tests was 74% against a target of 78%. At the time of the inspection, the number of clear random tests was 70% against a target of 78%. It is accepted that this figure covered only two months but it does cause concern.

4.5 Since the last inspection the number of Cranstoun Drug Services Workers has increased by one. Due to staff shortages and staff turnover a considerable waiting list for assessment had developed towards the end of 2003 into early 2004. This was being addressed. In addition, Cranstoun now undertake the national harm reduction session for admissions.

4.6 Since the last inspection, the prison has introduced the ‘First Steps Addictions Programme’. The plan to develop an Addiction Centre has also been completed and a dedicated facility with administration areas and two classrooms is now in use.

4.7 At the time of the last report it was indicated “there is little in place for remand prisoners; this will be a focus in the coming year”. All remand inductions receive the national harm reduction awareness session, but beyond that there is still little in place.

Links Centre

4.8 Work has been consolidated in the Links Centre with an increase in the internal and external service providers accessing prisoners. Additionally, Jobcentreplus now have a permanent presence. Perth was part of the pilot scheme for the Short Term Offender Needs Assessment/Community Integration Plan process and this system is now developing well with an extremely good database and monitoring system in place. At the time of the last inspection, it was noted that “no Community Integration Plans had been developed, reviewed or passed to an outside agency”. The Links Centre has now developed a system whereby 16 staff are “key workers” with a responsibility for monitoring the CIPs and ensuring that interventions and follow-ups are carried out and that the six monthly and six weekly reviews are also completed. All liberations now come to the Links Centre one week prior to liberation as an additional check that transitional issues have been dealt with. The system is thorough.

4.9 Induction for all prisoners is now carried out by Programmes Staff with additional input from Cranstoun, the Listeners and others. The Induction Programme is based on the new national SPS induction guidelines. Remand and young offender induction is carried out by hall staff. No clear monitoring of the content of this latter induction appears to be carried out and this should be reviewed.

Prisoner Activity

4.10 The prison does not have to close workshops as frequently as before. New arrangements mean that ex gratia payments to staff help to cover posts better than they did last year. In the financial year 2003/04 there were an average of 261 prisoners eligible to

work but not doing so. In April 2004 there were 245 in their cells. This is a significant challenge for Perth, and will remain so until the new activities complex is built.

4.11 The practice of not allocating prisoners serving less than 6 months to a work party continues. The introduction of a more sophisticated induction means that some of these prisoners are now given the opportunity to access education and programmes as an alternative. The Work Assessment Centre is now closed and is currently being used as a craft workshop.

Friarton Hall

4.12 Work in Friarton is well organised, of good quality and with a good number of contracts. The high turnover of prisoners makes training difficult.

4.13 The cells are small, and the hall is one of the few in the SPS where long-term prisoners share cells. Prisoners said that laundry arrangements were inadequate and the system in place meant that laundry could build up in cells for up to seven days.

4.14 It has not proved possible to integrate sex offenders into Friarton.

Violence

4.15 In 2003/04 there were 16 serious prisoner on prisoner assaults against a KPI target of 5. This is up from 14 in 2002/03. The problem remains most acute amongst the local population in 'A' and 'C' Halls. Between 1 April and 19 May 2004 there were two KPI prisoner-on-prisoner assaults. A new system of anti-violence measures has been piloted in 'A' Hall since April 2004.

Anti-Bullying Strategy

4.16 Since the beginning of October 2003, the SPS Anti-Bullying Strategy has been initiated on 51 occasions. On all but one occasion this was in 'A' or 'C' Hall. Posters publicising the anti-bullying message are posted around the prison and the general awareness of the procedures is high, especially in 'A' and 'C' Halls. More training is planned to raise

awareness in the long-term halls. Anti-Bullying Awareness is also part of prisoner induction. Good progress has been made by Perth in this area.

Healthcare

4.17 Concern was raised in the last report that food was not stored in a suitable pantry area. Food is now stored in a room set aside for this purpose: but furniture and fittings are not yet in place. Work is in progress to install new showers which will include good provision for disabled people. At the moment there is one shower (adapted for people with disability) used by all.

4.18 Good progress has also been made in providing a Mental Health Resource. This now involves staff from other parts of the prison, and there is a good relationship with Perth psychiatric hospital. The Governor spoke of the work of the Mental Health team as “a model of good practice”.

4.19 There is more stability in terms of medical provision than for a number of years. Three doctors share the work. However, there are still no jointly run clinics with nurses.

4.20 The heavy workload imposed by methadone has got even worse. It is almost impossible for nursing staff to find time for any individual support for those who receive methadone.

Community placements

4.21 Friarton Hall has started running community placements. There was only one placement operating at the time of inspection (involving one prisoner) and reports were that it was of good quality. It is however, difficult to achieve continuity of placements as the average time of stay in Friarton is less than four months, and employers are unwilling to make arrangements for so short a period. Nevertheless, the prison is to be commended on its efforts.

Lifer Liaison

4.22 Friarton has the only full-time Lifer Liaison Officer in the SPS. He and the Friarton Governor jointly manage the lifers. There have been 48 tribunals in last two years, and impressive progress is being made with the work of preparation for these tribunals.

4.23 Careful preparation for tribunals means that prisoners are being better prepared for release, which is good for prisoners and good for public safety.