



HM Inspectorate of Prisons for Scotland

# Report on HMP Inverness

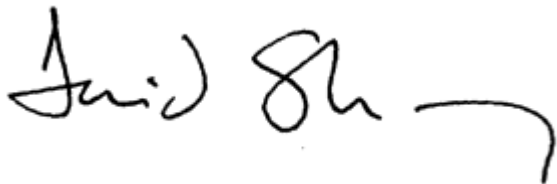
Full Inspection 10-18 February 2014



The Scottish Ministers

In accordance with my Terms of Reference as HM Chief Inspector of Prisons for Scotland, I present a report of the full inspection carried out at HMP Inverness between 10-18 February 2014.

The report makes a number of recommendations. It also highlights areas of good practice.

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**DAVID STRANG**  
HM Chief Inspector of Prisons

May 2014

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## INTRODUCTION AND BACKGROUND

HM Chief Inspector of Prisons for Scotland (HMCIPS) assesses the quality of prisons in Scotland against a set of Standards. These Standards are set out in the document “Standards Used in the Inspection of Prisons in Scotland” which can be found at [www.scotland.gov.uk/hmip](http://www.scotland.gov.uk/hmip).

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 and conventions and in prison rules, they are the Standards of Her Majesty’s Inspectorate of Prisons for Scotland (HMIPS).

This report reflects the Standards and has three main sections:

1. **Safety:** security, good order, protection of prisoners from harm;
2. **Decency, humanity and respect for legal rights:** all aspects of the treatment of prisoners and the framework of rights within which imprisonment should operate; and
3. **Opportunities for self-improvement and access to services and activities:** the activities provided by the prison, the ethos, measures taken to solve the problems that led the prisoner into crime, preparation for release and social reintegration.

HMIPS gathers together information to enable assessments to be arrived at. A number of different techniques are used to do this. These techniques include:

- obtaining information and documents from the Scottish Prison Service (SPS) and the prison being 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 prison services as they are delivered;
- inspecting facilities;
- attending and observing relevant meetings; and

- reviewing policies, procedures and other documents including performance reports.

HMIPS is supported in our work by inspectors from Healthcare Improvement Scotland (HIS) and Education Scotland.

The information that we gather enables us to obtain a full picture of the prison. This enables us to ensure that our assessments are fair, balanced and accurate.

This report outlines where Standards are being met and where they are not. It identifies where improvements are required. Where improvements are needed, the report makes appropriate recommendations. The report also highlights areas of the establishment which are to be commended and are listed as good practice.

## **KEY FACTS**

### **Location**

Her Majesty's Prison Inverness is situated close to the city centre of Inverness.

### **Role**

HMP Inverness serves Courts in the Highlands, Islands and parts of Moray – a large and diverse catchment area embracing rural and urban communities. Inverness prison is currently the smallest penal establishment in Scotland. It holds both male and female prisoners.

### **Design Capacity/Population held at time of Inspection**

The design capacity is 103. At the time of the inspection the prison held 129. Of this number 38 were adult untried prisoners and two were untried young offenders, 67 were sentenced prisoners serving less than four years, four were sentenced prisoners serving four to 10 years, and four were life sentence prisoners. There were also 14 prisoners who were convicted awaiting sentence. There were no women prisoners held within HMP Inverness at the time of inspection.

### **Brief History**

The present prison was opened in 1902, having relocated from nearby Inverness Castle to what was, at that time, the rural parish of Porterfield.

### **Date of last inspection**

November 2007

### **Accommodation**

The accommodation areas within the confines of the original walls have changed internally over the past 100 years although their facades have remained the same. A number of extensions and additional buildings have been incrementally added to cope with rising and changing demands. Examples include the new gate complex, the workshops and laundry. Other areas, such as facilities for healthcare and catering, have been modernised over time.

In addition to the two main accommodation halls, there are three smaller wings and a small unit for women prisoners.

### **Healthcare Provider**

NHS Highland

### **Learning Provider**

Fife College

## **HM Chief Inspector's Overview**

### **Setting the Scene**

As the prison estate in Scotland is improved and modernised, a prison like HMP Inverness, built over 100 years ago, stands out as old and physically inadequate. These physical conditions provide an additional challenge to the staff in delivering a well-run prison.

Despite these conditions, the staff at HMP Inverness provide a good level of care and run an effective prison.

HMP Inverness was last subject to a full inspection by HM Inspectorate of Prisons for Scotland in 2007. For this inspection in February 2014, the team was assisted by inspectors from Education Scotland and Healthcare Improvement Scotland, for whose invaluable contribution I am very grateful.

### **Inspection of HMP Inverness**

HMP Inverness is the smallest of Scotland's 15 prisons, with a population of mainly local prisoners serving predominantly short-term sentences or on remand. As a result, many of the prisoners are known to the staff – a product of the unsatisfactory levels of reoffending and reconviction rates. Overall the prisoners felt it was a safe prison. I was impressed with the quality of the relationships between staff and prisoners.

The Governor-in-Charge and her Deputy had both taken up post in 2013; it was apparent to me the direction, energy and sense of purpose which they brought to the prison. It was reported to me by those who worked both in the prison and with the prison, that communications had improved and there were good working relationships. Staff recognised that improvements had been made and there were good communication channels with the senior management. Staff appreciated the increased level of senior management visibility and active consultation.

HMP Inverness benefits from flexibility in the staffing group, in their willingness both to perform duties additional to their core tasks and to take on increased responsibilities. Such flexibility is essential to the successful operation of the prison. Added to this is a generally respectful and supportive atmosphere amongst both staff and prisoners.

The size of the prison brings with it both strengths and vulnerabilities. That staff know so many of the prisoners has a positive influence on the levels of co-operation and constructive attitude of the prisoners. However, the prison also needs to guard against the dangers of complacency resulting from familiarity. There is a high turnover of prisoners, including the transfer of prisoners to other prisons in Scotland - this raised the question of whether the criteria for transfer to other prisons were clear and consistently applied.

I hope that this inspection report will provide the opportunity for the prison to review a number of processes in order to improve the running of the prison.

The age of the prison brings its own challenges. Whilst the buildings are well maintained, clean and relatively well decorated, the design is not adequate for a 21st Century prison. The layout of the Halls and Wings require additional staff for the number of prisoners, which add to the staffing requirements and costs. The complexity of the arrangements place additional demands on staff.

The Community Integration Unit (CIU) currently designed to house women prisoners is a useful facility, but, for reasons such as eligibility criteria and lack of demand, has rarely been used for community access purposes. A review of its use should be conducted. The two Separate Cells are bleak and in need of modernisation and refurbishment.

Shortly before the inspection, the regime timetable was changed, to allow more time out of cells for remand prisoners. The arrangements for first night in custody and the location of protection prisoners had also been amended. However, the range and quality of activities are limited. This observation extends to the wider area of Purposeful Activity, including work. While there is high quality work available in the kitchen, laundry, cleaning and recycling, the levels of Purposeful Activity are limited for the size of the population. It is difficult for the prison to provide prisoners with a busy and full day of work and activities. The laundry service was assessed to be of exceptionally high quality, in comparison with other prison laundries.

The gymnasium is popular, with a good range of activities being offered by the Physical Training Instructors, but the environment is restricted and space for equipment and exercising is cramped.

The quality of education provision is satisfactory, but more prisoners could be encouraged to attend. The library is limited in use, content and accessibility. There is an active Chaplaincy.

The Links Centre contributes positively to the outcomes for prisoners. There was a strong sense of purpose and positive working throughout the Centre. Throughcare arrangements are very good; I was impressed with the levels of multi-agency partnership working with agencies operating in the community. I saw an excellent example of the use of technology for a video conference appearance at the Sheriff Court in Stornoway. This worked efficiently and removed the need for the prisoner to spend a day travelling to and from Stornoway. The criminal justice system in Scotland should continue to develop the use of technology to reduce travelling and thereby improve the treatment of prisoners.

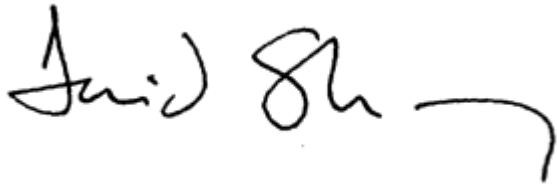
There are good levels of healthcare provided to the prisoners, particularly in the demanding areas of addictions and mental health, despite fragile staffing levels. The relationship between the prison and NHS Highland is positive, resulting in a good range of medical services, and acceptable waiting times. Again, the accommodation is not adequate - particularly for the demands of medical treatment and patient confidentiality.



## Summary

Overall this is a good report for HMP Inverness, which highlights areas of good practice and identifies where there is potential and opportunity for improvement. The age and design of the building inevitably places some restrictions on what can be achieved, but the staff have worked hard to build a positive ethos. There are excellent links to the wider community, which should contribute positively to reducing reoffending. With regards to the long-term future of the prison, concerns were raised about the plans for a future prison in the Highlands of Scotland.

The report contains 56 recommendations and identifies 11 areas of good practice. The Inspectorate will continue to monitor the progress the prison makes in implementing its action plan in response to the recommendations. We look forward to seeing the areas of good practice taken up throughout prisons in Scotland.

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David Strang  
HM Chief Inspector of Prisons for Scotland

## **PART 1: SAFETY**

### **OUTCOME 1**

**Appropriate steps are taken to ensure that individual prisoners are protected from harm by themselves and others.**

#### **Overview**

Prisoners report that they feel safe within HMP Inverness.

On admission, all prisoners undergo robust health and addiction assessments and there are suitable measures in place to consider their levels of risk in relation to harm from themselves and others however improvement is required in how risk-related information is shared. Facilities and processes in Reception should be reviewed to ensure prisoners are afforded maximum safety, confidentiality and privacy during the crucial period of admission.

The prison has comprehensive contingency plans in place to deal with emergency situations. However procedures to respond to cell call alarms are confusing and require clarification.

Recorded levels of in-prison violence are low. Similarly, the use of force is infrequent, however associated documentation is not always completed.

The regime takes account of the differing prisoner types nonetheless the prison should satisfy themselves that appropriate preventative measures are in place to ensure prisoner and staff safety at all times.

#### **STANDARD 1**

**Prisoners are safe at all times; while being escorted to and from prison, in prison and while under escort in any location.**

1.1 A health screening assessment is conducted for every prisoner admitted to HMP Inverness. This includes the opportunity for the prisoner to disclose if he has a substance misuse or alcohol issue. Referrals to appropriate specialists are made when deemed necessary and procedures are in place to accommodate those prisoners who require prescribed medication or treatment.

1.2 The toilet used by prisoners to provide a urine sample on admission is situated in the clinical interview room. This room is in a state of disrepair and at the time of the inspection, was not clean. It has a clear glass window and its proximity to prisoner holding cubicles mean confidential conversations between the prisoner and Nurse can be overheard.

**Recommendation 1: HMP Inverness should ensure that the clinical interview room in Reception is clean and fit for purpose.**

1.3 On reception, if a prisoner states he has a difficulty with substance misuse, a drug screen is conducted. It is noted that producing the urine sample is not witnessed and that the interview takes place prior to the prisoner being searched.

**Recommendation 2: HMP Inverness should ensure that prisoners are supervised when providing a urine sample for the purpose of drug screening.**

1.4 A Doctor conducts a medical assessment within 24 hours of arrival in the prison. This provision is not available on a Sunday unless the prisoner is deemed as having a high clinical risk or requiring an urgent medical assessment, in which case access to a Doctor from the on-call service is in place. Healthcare records do not always accompany prisoners transferred in from other establishments. This causes a delay in accessing health-related information and is time consuming for administration staff to follow-up with other establishments. **This is a weakness.**

1.5 During observation, all prisoners entering Reception were body searched by an Officer of the same gender and none presented with any visible injuries. Officers confirmed that they were aware of the requirement to visually check prisoners for injuries, ask how they were sustained, record the injuries and inform healthcare staff of the details.

1.6 All prisoners entering Reception sit on the Body Orifice Security Scanner (BOSS) chair. For safety and security reasons it is good practice for prisoners to do this prior to being interviewed by an Officer or Nurse as this will confirm if they have any metal items concealed on their person. However, during observation prisoners were regularly interviewed by Officers and Nurses prior to sitting on the BOSS chair.

**Recommendation 3: HMP Inverness should ensure that all prisoners sit on the Body Orifice Security Scanner (BOSS) chair prior to being interviewed by staff.**

1.7 All warrants and appropriate legislative paperwork arriving with a prisoner are checked by an Officer in Reception. Any offence-related issue which has the potential to put the prisoner at risk of self-harm or harm from others is discussed with him. The design of Reception does not ensure confidentiality as the area where prisoners are interviewed is directly adjacent to the prisoners' shower thus allowing confidential conversations to be overheard.

**Recommendation 4: HMP Inverness should ensure confidentiality is maintained during prisoner interviews in Reception.**

1.8 A completed Prisoner Escort Record (PER) form, detailing the prisoner's risks and conditions, accompanies all prisoners. These are checked by the Reception Officer, however neither the form nor the information contained in it is routinely passed to the Nurse undertaking the interview. This has the potential for important information to be missed. **This is a weakness.**

**Recommendation 5: HMP Inverness should ensure that all information contained in the Prisoner Escort Record (PER) form is passed to the relevant functions.**

1.9 During the inspection, a prisoner arrived in Reception immediately prior to the evening staff break (17:30-18:30); a time when all prisoners are locked up. As is common practice in HMP Inverness, he was located in a cell in the First Night Centre (FNC) during this period. However, the initial ACT 2 Care admission assessments had not been completed by the Officer and Nurse, nor a potentially significant medical issue highlighted on the PER form considered prior to him being located in the FNC. **This is a significant weakness.**

**Recommendation 6: HMP Inverness should ensure that prisoners are not located in a cell until the ACT 2 Care admission interviews have been completed.**

1.10 A number of Officer-generated ACT 2 Care interviews conducted in Reception were observed and in most cases there was positive interaction between the Officer and the prisoner which encouraged the sharing of information. However on a limited number of occasions the Officer commenced the process by informing the prisoner he was required to give a yes or no answer to a series of questions. While this allowed basic information to be obtained, the interviews felt mechanistic and lacked empathy. **This is a weakness.**

1.11 At the time of the inspection, there were no admissions or returns from Court deemed to be at risk of self-harm, however Officers and Nurses were able to provide a satisfactory explanation of what actions they would take if this were to happen.

1.12 There is no signage within Reception for prisoners whose first language is not English to identify their preferred language.

**Recommendation 7: HMP Inverness should ensure signage is in place for prisoners whose first language is not English to identify their preferred language.**

1.13 HMP Inverness has a contract with an interpretation service and Reception Officers confirmed that they would utilise this service to complete the admission process if required.

1.14 All admissions to HMP Inverness are located in the FNC in B Hall. On arrival at the FNC a member of staff completes a 'First Night Admission Checklist', covering the following areas:

Summoning help or support during the night (use of cell-call system)
Resolving immediate welfare requirements where possible
Fire procedures
Identification of individuals who may pose a risk to the prisoner
Vulnerability while in prison
Accessing a prisoner Listener
Basic discipline requirements
Provision of induction literature
Procedure for using the telephone system
Issue of personal hygiene items
Morning unlock and breakfast procedures
Smoking preferences

1.15 On the morning after admission a member of staff completes a 'First Morning Admission Checklist', covering the following areas:

Establishment regime
Grievances/Requests/Items allowed in use
Prisoner progression system
Drug testing
Visits
Potential problems while in prison
Access to activity
Induction
Role of the Personal Officer
ACT 2 Care
Listener Scheme
Opportunity to ask any questions

1.16 Once completed, each checklist is signed by the prisoner to demonstrate an understanding of the areas covered.

1.17 Observation of the checklists being completed confirmed that prisoners are provided with the basic information they require on admission and have the opportunity to discuss any issues with staff. **This is positive.** However, these discussions normally take place at the staff desk in B Hall which offers limited privacy especially if the prisoner wishes to discuss sensitive matters.

**Recommendation 8: HMP Inverness should ensure First Night and First Morning in Custody Checklist discussions are conducted in private.**

1.18 Basic questions which a prisoner may have on admission have been translated into a number of languages to support those prisoners whose first language is not English. **This is positive.**

1.19 All prisoners admitted to HMP Inverness, regardless of whether they have money or not, have 30 pence credited to their account by the prison to make a telephone call on admission. As there is no prisoner telephone in Reception these telephone calls are made after their arrival in B Hall. A number of prisoners spoken with on the day after their admission confirmed that they had been able to make a telephone call on the day of their admission.

1.20 While checking warrants and interviewing prisoners Reception Officers identified those in prison for the first time, on remand, those sentenced to a long-term or life sentence and those likely to need protection from other prisoners. Any significant issues were discussed with the prisoner during subsequent interviews.

1.21 Space is limited in Reception with one large holding room, a small clinical room and three small cubicles. The holding room provides Officers with good levels of observation and during the inspection prisoners on admission were held in this room whenever possible. The small clinical room is used primarily to hold prisoners at risk of harm from others and provides very poor levels of observation as it is out with the Officers' direct line of sight. The three small cubicles are not suitable to hold

prisoners securely as they are fitted with stable doors which can be easily unlocked from within. On occasions however different classifications of prisoners were held in all three holding areas at the same time. These were routinely left unlocked posing a risk to the safety and security of all staff and prisoners within Reception. **This is poor practice.**

**Recommendation 9: HMP Inverness should ensure that prisoners are held safely within Reception.**

1.22 On admission, those charged with or convicted of a sexual offence are held in the FNC separate from other prisoners and, space permitting, are moved to E Wing the following day. If no spaces are available, they remain in the FNC until such time as a cell becomes vacant.

1.23 If a prisoner requires protection from other prisoners for reasons other than their index offence, eg enemies or debt issues, they will be located in the FNC on the night of admission, during which time staff will attempt to confirm and resolve any related issues. If this is not possible, the prisoner will remain in B Hall, separated from other prisoners for a period of 72 hours, while the First Line Manager (FLM) attempts to resolve any problems or, if this is not possible, contacts other establishments to facilitate a transfer for the prisoner. Occasionally prisoners who are listed as enemies may remain within HMP Inverness while located in different residential areas.

1.24 HMP Inverness does not routinely hold Long-Term Prisoners (four years and above). During the inspection the Escort Contractor contacted Reception to inform them that a prisoner returning from Court had been sentenced to nine years. Officers completed this prisoner's admission process thoroughly, satisfying themselves that as a result of this long sentence he displayed no signs or thoughts of self-harming behaviour. Later that evening Residential Officers in the area he was located were observed to interact well with the prisoner. **This is positive.**

1.25 HMP Inverness holds a number of different classification of prisoners and records indicate that they occasionally hold convicted and untried prisoners in the same cell. **This is a significant weakness.**

1.26 On admission, where a prisoner is suspected of having a mental health disorder, a referral is made to the Mental Health Nurse or Consultant Psychiatrist as appropriate. The Nurse conducts a risk assessment and makes appropriate care arrangements. In addition, a risk assessment is undertaken by an Officer who conducts an ACT 2 Care interview and completes the appropriate documentation.

1.27 Arrangements are in place to enhance observation of prisoners deemed to be at risk to themselves or others. Specific cells are identified for this purpose.

1.28 There are appropriate processes in place to ensure a prisoner has access to detoxification interventions and symptomatic relief.

1.29 Hard copies of Contingency Plans are held in the Head of Operations' Office, the gate and the Command Room which are comprehensive and up-to-date,

however they lack version control. An electronic copy of these plans, which is available on a restricted basis, is in the process of being updated.

**Recommendation 10: HMP Inverness should ensure that all Contingency Plans are version controlled and up-to-date.**

1.30 Officers undertaking night-duty and weekend patrols are issued with a hard copy of 'Orders' relevant to these duties, prior to taking up post. Officers undertaking weekday patrol however are not issued with these 'Orders'. While the Contingency Plans contain detailed instruction of the actions to be taken in the event of a fire, the 'Orders' do not. Furthermore, other sections of the 'Orders' were found to be out-of-date.

**Recommendation 11: HMP Inverness should ensure that the relevant, complete and up-to-date 'Orders' are issued to all patrol staff.**

1.31 During the inspection there were no prisoners in HMP Inverness assessed as requiring a Personal Emergency Evacuation Plan (PEEP). However FLMs and staff are familiar with the purpose of PEEPs and gave examples of prisoners who had been subject to them in the past. They were able to confirm where PEEPs are retained and that all staff had 24 hour access to them. **This is positive.**

1.32 The establishment facilitated Local Incident Management training during 2012-13 which allowed staff and managers to gain experience in generic and role specific training. Further training is scheduled for later in 2014.

1.33 At the time of the inspection 99% of the operational staff group were competent in Control and Restraint (C&R) Phase 1. In addition 100% of those staff required to complete C&R Phase 2 and 3 were competent.

1.34 As all residential and operations FLMs are trained in First Aid, appropriate cover is assured at all times. **This is positive.**

1.35 Prisoners are aware of the actions to be taken in the event of a fire from information relayed to them during their 'First Night Admission Checklist' process. There are signs on the inside of each cell door informing prisoners of the required action to be taken if locked in their cell in the event of a fire. **This is positive.**

1.36 There is a cell call system for prisoners to summon assistance in the event of an emergency. When a prisoner presses the cell call button a light activates in all residential areas indicating which residential area the call originates in. This is accompanied by an audible alarm. The need for multiple alerts is due to some residential areas having no staff cover at certain times, meaning staff from other residential areas are required to respond. However during discussion there was confusion among staff in relation to response protocols. **This is a significant weakness.**

1.37 There was a general feeling from prisoners who attended Focus Groups and those spoken with during the inspection that cell calls are answered timeously during periods of unlock, however during patrol and night-duty periods they believe cell calls

remain unanswered for long periods. The cell call system in HMP Inverness does not have the capacity to record usage and as there is no Close Circuit Television (CCTV) within residential areas (with the exception of a system within the Community Integration Unit (CIU)) it is impossible to confirm exact waiting times for cell calls to be answered.

1.38 Observation during patrol and night-duty periods showed very little usage of the cell call system. However, when activated, cell calls were answered timeously. Staff spoken with stated this was the norm.

1.39 Observation of response times to cell calls during periods of unlock showed the majority were answered timeously. However on one occasion a cell call remained unanswered for approximately 10 minutes. **This is unacceptable** in the event of an emergency. Further investigation and discussion with staff in relation to this instance reinforced the confusion as to who has responsibility to answer cell calls in other residential areas.

**Recommendation 12: HMP Inverness should develop and implement a robust cell call response protocol.**

1.40 An electronic system is in place to confirm all areas are patrolled during night-duty on a routine basis. This system requires staff to trigger 'pegging points' located throughout the establishment at regular intervals during their duty period. During the inspection, this system was not in working order and had not been for several months. Consequently officers undertaking night-duty populate an electronic form and submit it to their manager at the end of each duty period stating the times areas were visited. However there is no way of verifying the accuracy of this document. **This is a significant weakness.** Senior Management confirmed a Business Case had been approved for the replacement of this system.

1.41 All cell doors have an observation panel which provide staff with good levels of observation within the cells. A number of observation panels were checked in each residential area and were found to be clear from obstruction.

1.42 Operations' FLMs who routinely cover night-duty periods reported that Senior Managers make regular unannounced visits to the establishment during these times and provided copies of their reports from July 2013 to January 2014 detailing these visits. **This is positive.** However when the occurrence book was checked there were no entries confirming these visits.

**Recommendation 13: HMP Inverness should ensure that Senior Managers' visits out with normal working hours are recorded in the occurrence book.**

1.43 Prisoners' family members and friends can raise concerns regarding the prisoner's health, safety or wellbeing by calling or leaving a message on a dedicated telephone line with Family Contact Officers (FCOs). However, while this service is normally checked on a daily basis, in cases of emergency or in potentially high risk situations, it does not provide a sufficiently quick response. **This is a weakness.**



1.44 During the inspection there were a number of prisoners deemed at risk of self-harm or suicide who were being managed under the ACT 2 Care Strategy. A sample of ACT 2 Care documentation was checked and found to be completed properly.

1.45 There are three 'Safer Cells' in HMP Inverness, two in B Hall and one in F Wing. These cells are not completely anti-ligature compliant, but do provide a 'safer' environment than normal cells. They are however extremely basic and provide very little in the way of comfort or stimulus for prisoners.

**Recommendation 14: HMP Inverness should ensure 'Safer Cells' are upgraded to full 'Anti-Ligature' Cells.**

1.46 Only the 'Safer Cells' in B Hall were occupied during the inspection. These cells are directly adjacent to the staff desk and throughout the inspection staff were seen to make regular routine checks and positively interact with prisoners held here. **This is positive.**

1.47 Records show that the 'Safer Cell' in F Wing was also routinely used and in a few instances had been used to house women prisoners. This area has no continuous Officer presence during patrol and night-duty periods and is in an area which holds male prisoners. While managers could describe the process for ensuring observations are carried out and prisoners of both genders remain separate, there were no written protocols or instructions in place for the management of women prisoners held in this cell.

**Recommendation 15: HMP Inverness should ensure that a protocol is in place for use in the event of a women prisoner being held in the 'Safer Cell' in F Wing.**

1.48 Observation of a Case Conference for a prisoner on high risk showed that it was carried out in a professional and positive manner. The Case Conference chaired by a FLM was attended by an Officer, a Nurse, and the prisoner. All relevant issues were discussed and the prisoner was encouraged to contribute throughout. A well thought-through decision to allow the prisoner limited interaction with other prisoners and be subject to reduced levels of observation during periods of unlock, while reverting to heightened levels of observation during patrol periods, was arrived at. **This is positive.**

1.49 Prisoners at risk of self-harm have access to mental health services provided by a Mental Health Nurse and a Consultant Psychiatrist. Attempts are made by the Mental Health Nurse to allow prisoners being managed under the ACT 2 Care strategy to spend time in the Links Centre under her supervision. This is to break the monotony of the limited regime, encourage meaningful activity and build therapeutic relationships. This activity can at times be impeded by the lack of operational staff to monitor and escort the prisoner.

1.50 There were three prisoner Listeners in HMP Inverness at the time of the inspection with an additional two prisoners identified, awaiting training. There is good signposting throughout the establishment about how to access this service.

1.51 The SPS has a policy on the prevention and management of communicable diseases. The NHS has a National Infection Prevention and Control Policy. While both policies are available, there is no clarity around which policy should be used in which part of the prison and therefore application is at best sporadic and at worst, presents risks.

**Recommendation 16: HMP Inverness and NHS Highland should ensure that infection control policies are applied correctly across the prison to control and prevent the spread of contagious diseases.**

1.52 Prior to the inspection, a dirty protest had taken place in one of the Separate Cells. The cell had been cleaned by a local contractor who gave an assurance that a suitable product for cleaning bodily fluids (Prochem D500 Microsan) was used. Despite this, the cell was not clean and traces of faeces were evident throughout the cell. The cell had to be cleaned again, this time by HMP Inverness Industrial Cleaning party, before it was deemed fit for use once more.

1.53 Inspectors also have concerns about potential risks of infection control and cross-contamination while managing a prisoner on a dirty protest. In two previous inspection reports HMIPS have commented about the absence of an SPS policy and associated protocol for the management of prisoners on dirty protest. Despite assurances from SPS that such a policy is being developed, the situation remains the same. **This is unacceptable.**

**Recommendation 17: The Scottish Prison Service should ensure a national policy for the management of prisoners on dirty protest is designed and implemented across the estate as a matter of urgency.**

1.54 There is no approved infection control compliant hand washing facilities within the Health Centre or the Dental Suite. In addition, worktops and skirting boards in these areas are not infection control compliant.

**Recommendation 18: HMP Inverness should ensure that approved infection control compliant hand washing sinks and seamless skirting are installed in the Health Centre and Dental Suite.**

## **STANDARD 2**

**Force is only used as a last resort and then strictly according to law and procedures.**

2.1 There were 30 recorded instances of C&R removals between 1 January and 31 December 2013 and four during the period 1 January to 10 March 2014.

2.2 Documentation relating to these removals confirmed that the necessary authority was sought and given in all cases and that a variety of C&R techniques were considered and applied as appropriate to the situation. However on a number of occasions Section 10 of the documentation for completion by the Nurse after the removal was left blank. This section details any injuries the prisoner claims to have sustained. **This is a weakness.**

**Recommendation 19: HMP Inverness should ensure all parts of the Control and Restraint removal documentation are completed in all cases.**

2.3 There was no evidence of any prisoner being subject to Special Security Measures in the recent past, nor were there any prisoner complaints in relation the use of illegitimate force.

2.4 HMP Inverness has facilities to record planned C&R removals. However at the time of the inspection not all planned C&R removals were being video-recorded.

**Recommendation 20: HMP Inverness should ensure that consideration is given to the video-recording of all planned Control and Restraint removals.**

**STANDARD 3**

**Prisoners are protected from violence and harm by other prisoners.**

3.1 Prisoners who attended Focus Groups and those spoken with during the inspection stated they felt safe while in HMP Inverness. They confirmed that they would be happy to talk to and seek support from staff if they had any issues in relation to their personal safety. **This is positive.**

3.2 Levels of recorded violence in HMP Inverness are relatively low as shown in the table below:

	Apr 2012- Mar 2013	Apr 2013- Dec 2013
Serious prisoner on staff assaults	0	0
Minor prisoner on staff assaults	1	0
Serious prisoner on prisoners assaults	0	1
Minor prisoner on prisoner assaults	36	22

3.3 Acts of violence are reviewed as part of the monthly Tactical Tasking Co-ordination Group (TTCG). As this is a relatively new group established within HMP Inverness, management's stated intention to move from monthly to daily tasking groups is at this time aspirational as there is no Violence Reduction Strategy in place in HMP Inverness which would support this intention.

**Recommendation 21: HMP Inverness should consider implementing a Violence Reduction Strategy to analyse all acts of violence and support the work done by the Tactical Tasking Co-ordination Group.**

3.4 With the exception of a standalone system in the CIU, there is no CCTV coverage in residential, activity or communal areas in HMP Inverness. **This is a**

**weakness.** A Business Case has been submitted to SPS Headquarters to have the CCTV equipment transferred from HMP Aberdeen. However at the time of the inspection there has been no confirmation that this will be approved.

3.5 HMP Inverness Front-of-House security complies with SPS requirements. All persons entering the establishment walk through a metal detector portal and their bags and other items are put through an X-ray machine. In addition Front-of-House staff have access to handheld metal detectors. There are also a number of lockable cabinets for staff and visitors to store any prohibited items. **This is positive.**

3.6 During the inspection there was no evidence of staff being searched on entry to the establishment, however staff searching records for the previous year show approximately seven had taken place each week.

3.7 There were occasions when staffing was below the agreed levels, however this was generally as a result of unplanned, short-term absences. Occasionally the regime and staff deployment in HMP Inverness is such that there is the potential for different prisoner classifications to come into contact with each other; mainstream prisoners and convicted sex offenders can be found working together in the kitchen at the same time, supervised by one Catering Officer. **This poses a potential risk.**

3.8 Mainstream prisoners and those charged with or convicted of a sexual offence attend the same Church of Scotland (CoS) and Roman Catholic (RC) services. On a basic level this is positive, however it also poses risks as during observation 10 mainstream prisoners and two convicted sex offenders attended the CoS service, supervised by one officer. Additionally there was no separation between the two groups with the sex offenders sitting directly in front of mainstream prisoners. This lack of supervision and separation was compounded at the end of the service when the prisoners remained in the area for refreshments with the Chaplain and three visitors. This was mirrored in the RC service when one mainstream prisoner and one prisoner charged with a sexual offence attended the same service while the supervising officer remained outside the room. **This poses a potential risk.**

3.9 The situation becomes more complex as both services overlap and at the same time untried prisoners can attend outside exercise and a group of up to 12 prisoners have access to the gymnasium.

**Recommendation 22: HMP Inverness should ensure their regime and staff deployment are fully risk assessed.**

3.10 There were no prisoners being managed under the SPS Anti-Bullying Strategy (ABS) during the inspection and management were only able to confirm one occasion when a prisoner had been managed under ABS in recent times. Instead of using the recognised ABS, staff and prisoners stated that prisoners suspected of bullying, their victims or both parties may be transferred out of the establishment.

**Recommendation 23: HMP Inverness should use the recognised Scottish Prison Service Anti-Bullying Strategy.**

3.11 When a prisoner charged with or convicted of a sexual offence is admitted to HMP Inverness he is held in the FNC on the night of his admission and then transferred to E Wing when a space becomes available. However the prison does not have a designated area or regime for prisoners who require protection from others for any other reason. Should a prisoner fitting this criteria arrive in HMP Inverness he is normally transferred to another establishment if his protection issues cannot be resolved.

3.12 A Cell Sharing Risk Assessment (CSRA) is completed for every admission when they arrive in B Hall and for every subsequent cell move. Observation of a number of CSRAs being conducted confirmed that they were completed correctly and recorded appropriately in PR2. A random selection of CSRAs in PR2 were examined and found to be robust.

3.13 A system to ensure that food for vulnerable prisoners is not tampered with is in place. Food is prepared, transferred into the servery and then served to prisoners who arrive to pick up their meals in an order as directed by staff. This ensures that when preparing, cooking, and serving food kitchen passmen are unaware of what food vulnerable prisoners will receive.

#### **STANDARD 4**

**Security levels for individuals are no higher than is necessary to meet the risk presented by the prisoner.**

4.1 HMP Inverness complies with the recognised SPS Prisoner Supervision System (PSS). A selection of PSS paperwork examined confirmed that supervision levels allocated to prisoners are appropriate.

4.2 Generally, PSS reviews are undertaken within relevant timescales, however during the inspection there were two reviews outstanding from 2013.

#### **STANDARD 5**

**Procedures for deciding security levels are as transparent as is compatible with the sensitivities of the decision.**

5.1 Completed PSS review forms note the revised supervision level and are signed by the Residential Officer, FLM and Unit Manager. The prisoner subject to the review is informed of the outcome and given the opportunity to make written representation, should he wish to do so. **This is positive.** In HMP Inverness an additional level of scrutiny and control is then applied whereby another meeting is convened to confirm the original review decision. This meeting is chaired by the Head of Operations and attended by the Residential, Intelligence Management Unit and Activities FLMs and an Officer. This secondary level of scrutiny operates out with the SPS guidance and is superfluous to the process as all relevant information required should be considered at the original review.

**Recommendation 24: HMP Inverness should ensure that Prisoner Supervision System Reviews are completed in accordance with Scottish Prison Service guidelines.**

## **PART 2: DECENCY, HUMANITY AND RESPECT FOR LEGAL RIGHTS**

### **OUTCOME 2**

**Prisoners are treated with respect for their dignity while being escorted to and from prison, in prison and while under escort in any location.**

### **STANDARD 6**

**The standards that apply to the treatment of prisoners in prison extend to all other places where they are held.**

6.1 This inspection examined HMP Inverness. It did not examine other locations where prisoners are held out with HMP Inverness, for example, while under escort in transit vehicles on journeys to and from Court or while detained in Courts or in Legalised Police Cells.

6.2 Separate inspections on these locations have been carried out and have been published and are available on the HMIPS website at [www.scotland.gov.uk/hmip](http://www.scotland.gov.uk/hmip).

### **OUTCOME 3**

**Prisoners are held in conditions that provide the basic necessities of life and health, including adequate air, light, water, exercise in the fresh air, food, bedding and clothing.**

#### **Overview**

Prisoner accommodation in HMP Inverness is amongst the oldest within the SPS estate. It is routinely overcrowded. Cells vary from single occupancy to dormitory configuration. Ventilation, natural light and temperature is generally acceptable. The exception being the two separate cells, both of which have an unscreened toilet, no wash hand basin and are cold. Showering facilities are adequate and available in all areas, however showering facilities for wheelchair using prisoners should be reviewed. Accommodation and communal areas are generally clean.

All prisoners are given the opportunity to access time in the open air on a daily basis. The prison should explore however the reason why certain types of prisoners do not engage in this activity.

With the exception of socks, shoes and underwear, prison issue clothing is of a reasonable standard and fit. The service provided by the laundry is of the highest quality.

The supply and condition of bedding, mattresses, duvets and pillows is good. There is an effective system in place for the laundering and replacement of these items. The kitchen is clean and fit for purpose. The quality, variety, temperature and portion size of meals served is good with the central serving point adjacent to the kitchen contributing positively to this outcome. However, there is no communal dining in place and some prisoners, dependent on location, are required to carry their meals from the central servery to their cells. This may present a risk and can result in some deterioration of the food served. Practices in place for washing cutlery, bowls and mugs should be reviewed.

## **STANDARD 7**

**The accommodation is clean and provides a reasonable amount of space for each prisoner, with space for personal belongings, ventilation, a reasonable temperature, natural light.**

### **A Hall**

7.1 Built on two levels connected by an internal stairwell, A Hall has a total of 14 single occupancy cells and a four person dormitory. One of the cells has had the door widened to allow wheelchair access, however there have been no modifications made within the cell to support a prisoner with mobility issues. All 14 cells have been fitted with bunk beds. These cells also contain two chairs and a table. The four person dormitory has been fitted with three sets of bunk beds. This means that A Hall despite a design capacity of 18, could potentially hold up to 34 prisoners. During the inspection A Hall regularly held more than 18 prisoners, meaning it was routinely overcrowded.

### **B Hall**

7.2 B Hall is built on three levels connected by an internal stairwell and has a total of 44 single occupancy cells. In addition there are also two 'Safer Cells' on the ground floor. Similar to A Hall, one of the cells has had the door widened to allow wheelchair access however there have been no modifications made within the cell to support a prisoner with mobility issues. All 44 cells have been fitted with bunk beds, two chairs and an additional table. This means despite a design capacity of 44 B Hall can hold up to 88 prisoners. During the inspection B Hall regularly held more than 44 prisoners, meaning it was routinely overcrowded.

7.3 When the cells in A and B Halls are occupied by a single prisoner they provide adequate space to move around in and live comfortably. However when they are occupied by two prisoners they are cramped. This lack of space is compounded by the fact that a second chair and table have been put into the cell.

7.4 The dormitory in A Hall is large enough that the fitting of a third bunk bed still leaves prisoners with enough room to move around in and live comfortably.

### **C Wing**

7.5 C Wing is built on one level with nine cells located along a corridor. These cells are designed for single occupancy and have only one bed meaning the Wing is never over capacity. C Wing held nine prisoners throughout the period of the inspection. Each cell has a table and chair and enough space to move around in.

### **D Wing**

7.6 D Wing is a CIU for women prisoners and has four single occupancy rooms and one double occupancy room. The building is a self-contained single storey unit with cooking, laundry, recreation, gymnasium and exercise facilities. During the inspection there were no prisoners located in D Wing.

7.7 The rooms in D Wing are comfortable, adequately furnished and allow prisoners enough room to move around in. Rooms are well-ventilated and have windows that allow adequate light. It is unfortunate that the CIU, which has the best accommodation, is the area least frequently used in the establishment.

## **E Wing**

7.8 E Wing comprises one single occupancy cell and six double occupancy cells built over one level. One of the double occupancy cells is designated as an accessible cell and has a specially modified toilet, however its design would make it extremely difficult for a wheelchair user to access the cell. Two of the double occupancy cells are fitted with two sets of bunk beds. In total, despite a design capacity of 13, E Wing could potentially hold 17 prisoners. During the inspection 15 prisoners were held in E Wing, rendering it overcrowded.

7.9 The single occupancy cell and the four double occupancy cells housing two prisoners have chairs and worktop space commensurate with the number of prisoners held there. These cells provide enough space for the occupants to move around in and live comfortably. The two double occupancy cells fitted with additional bunk beds have four chairs and a large table. This enables all prisoners living there to sit at a table while eating their meal or reading or writing, however when these cells house three prisoners, they are cramped and do not provide a great deal of space to move around in.

## **F Wing**

7.10 F Wing is built on two levels connected by an internal stairwell and has one single occupancy cell and three dormitories designed to hold four prisoners in each. There is also a 'Safer Cell' and a disabled cell in F Wing. The capacity of F Wing is 13. During the inspection the average number of prisoners held in F Wing was 10. All the accommodation in F Wing provides adequate space to move around in and live comfortably.

**Recommendation 25: HMP Inverness should ensure that the population in all residential areas does not exceed its design capacity.**

7.11 In general cell furniture and fittings in some of the cells and the dormitories would benefit from a degree of refurbishment. However the furniture and fittings in D Wing (CIU) is of an acceptable standard.

**Recommendation 26: HMP Inverness should ensure cell and dormitory furniture and fittings are of an acceptable standard.**

7.12 With the exception of C Wing there are no lockable storage facilities in any of the cells or the dormitories for prisoners to store medication or personal items. The importance of lockable storage is heightened by the high levels of cell sharing and a prison-held perception that prescription medication is being abused. **This is a significant weakness.** During the inspection, management at HMP Inverness were able to confirm that lockable storage boxes for all prisoners have been ordered and will soon be fitted in all residential accommodation. **This is positive.**



7.13 Windows allow for sufficient fresh air and natural light into the cell or dormitory. Not all windows are fitted with a curtain and some curtains are in poor condition. This situation means prisoners cannot control the amount of natural light coming into their cell. Management at HMP Inverness confirmed new curtains for every cell and dormitory are on-site ready to be fitted.

7.14 There are designated areas in each cell and dormitory for prisoners to display photographs. In general prisoners do not display items out with these areas.

7.15 Water from the taps in the in-cell wash hand basins is potable. Prisoners in the 'Separate Cells' are provided with bottled water as there is no in-cell tap.

7.16 Prisoners are allowed adequate time to clean their cells and have access to fit-for-purpose cleaning materials. The majority of cells and dormitories are clean.

### **Separate Cells**

7.17 HMP Inverness does not have a Separation and Reintegration Unit (SRU), rather it has two 'Separate Cells'. These cells are poorly equipped in terms of fixtures and fittings. Only one of the cells has a bed frame and mattress, the other has a concrete 'plinth' on which the mattress sits. Neither cell has a table or chair. Likewise neither cell has a curtain. In addition both these cells were extremely cold during the period of the inspection. Both cells are barely fit for purpose and require immediate upgrading. **This is a significant weakness.**

**Recommendation 27: HMP Inverness should take immediate action to upgrade the 'Separate Cells'.**

7.18 All communal areas in HMP Inverness are clean.

### **STANDARD 8**

**Prisoners are allowed into the open air for at least one hour a day every day.**

8.1 All prisoners in HMP Inverness can access a one hour period in the open air on a daily basis timetabled as follows:

<b>Prisoner Classification</b>	<b>Day</b>	<b>Time</b>
Convicted Mainstream (B Hall, C and F Wings)	Monday–Friday Weekend	13:30–14:30 10:30–11:30
Convicted & Untried Sex Offender (E Wing)	Monday–Friday Weekend	11:15–12:15 11:30–12:30
Untried Mainstream (A and B Hall)	Monday–Friday Weekend	10:30–11:30 09:30–10:30
Women prisoners	Monday–Friday Weekend	As required As required

8.2 Prisoners held within the Separate Cells are offered exercise on a daily basis, however during the inspection chose not to take it.

8.3 Hard surfaced areas at either side of B Hall are the designated areas where prisoners can spend time in the open air. Both areas are fit for purpose and large enough for the amount of prisoners attending at any one time. The larger of the two areas is the preferred location and was used throughout the period of the inspection.

8.4 During the inspection the number of prisoners accessing time in the open air varied from day-to-day and between different prisoner classifications. None of the sex offender population attended at all, approximately 20 convicted prisoners attended every day and on the days where untried mainstream prisoners did attend, the number was no higher than 12.

8.5 Those sex offenders spoken with stated that they did not spend periods of time in the open air as when they did they were often subject to verbal abuse from prisoners in B Hall. As no sex offender prisoners spent time in the open air during the inspection, it is impossible to confirm this position. However management of HMP Inverness have confirmed they will monitor the attendance of sex offenders during periods in the open air.

8.6 Waterproof jackets for use in inclement weather are held in two areas. Jackets for use by sex offenders are stored in a cupboard in E Wing and jackets for the remainder of the population are stored in a similar storage in B Hall. Neither storage facility is appropriate as wet jackets cannot be properly dried before reuse.

**Recommendation 28: HMP Inverness should ensure proper storage and drying facilities are available for clothing used by prisoners during inclement weather.**

## **STANDARD 9**

**Personal clothing is in decent condition, washed frequently and fits.**

9.1 Prisoners in HMP Inverness are issued with prison clothing and can wear selected items of their own clothing.

9.2 On admission to HMP Inverness male prisoners are issued with the following clothing:

<b>Kit Issue</b>	<b>Quantity</b>
T-Shirt (convicted only)	2
Polo Shirt	3
Jogging Trousers	2
Sweatshirt	2
Socks	4
Boxer Shorts	4
Shoes or Training Shoes	1
Towels	3

9.3 An additional set of clean prison issue clothes is retained in the laundry, which prisoners can exchange for dirty clothing.

9.4 Most prison clothing issued to prisoners is in good condition and the Laundry Officer who controls the clothing stock replaces items as required. There are adequate stocks of different sizes of clothing meaning prisoners are supplied with clothing that fits. In comparison with some other SPS establishments **this is positive**. However, during Focus Groups, prisoners were critical of the underwear and socks issued on admission, stating they were often in poor condition. A number of 'kits' containing underwear and socks were checked and while some of the underwear and socks were new, a large percentage was second hand and in some cases the quality was poor. **This is a weakness**.

**Recommendation 29: HMP Inverness should ensure that prisoners are issued with new underwear and socks.**

9.5 Prisoners were also critical of the condition of footwear issued to them on admission. HMP Inverness does not allow them to retain their own footwear on admission. Instead, they are given prison issue shoes or training shoes, some of which are in poor condition. Prisoners preferred to take training shoes over ordinary shoes, even if it meant taking the wrong size.

**Recommendation 30: HMP Inverness should consider allowing prisoners to retain the footwear they are wearing on admission, if appropriate and suitable.**

9.6 The laundry process in HMP Inverness is excellent with prisoners able to send prison issue clothing for laundering on a Monday, Wednesday and Friday and personal clothing on a Thursday. There are no recorded complaints from prisoners in relation to the quality of the laundry service or of items of clothing being damaged or lost. Personal clothing held in Reception can also be laundered on request. Prisoners value this service. Overall the laundry in HMP Inverness is an **area of good practice**.

9.7 On admission prisoners are issued with three towels, which can be laundered on a Monday, Wednesday and Friday.

## **STANDARD 10**

**Bedding is supplied and laundered at frequent intervals.**

10.1 On admission to HMP Inverness prisoners are issued with a duvet cover, sheet and pillow case. A selection of prisoners bedding was checked and found to be in good condition. The Laundry Officer holds a stock of bedding and will replace any items that are in poor condition. Additionally there is a system to replace all bedding in the establishment on an annual basis. **This is an area of good practice**.

10.2 Prisoners can send bedding to the laundry every Monday morning. As each set of bedding has a unique number on it prisoners retain the same bedding after laundering. **This is positive**.

10.3 Each time a cell is vacated the duvet is laundered ensuring all admissions receive a freshly laundered duvet. Additionally there is a system to ensure all duvets are laundered on a quarterly basis. **This is an area of good practice.** Pillows are also laundered regularly.

10.4 A number of mattresses were checked in all residential areas and found to be of an acceptable standard. Mattresses are replaced as required.

## **STANDARD 11**

### **Sanitary arrangements take account of health, hygiene and human dignity.**

11.1 All cells and dormitories in HMP Inverness have an integral toilet and wash hand basin apart from the Separate Cells which have no wash hand basins. With the exception of the 'Separate Cells' and 'Safer Cells' in B Hall and F Wing, all toilets are fully enclosed thus ensuring privacy is provided.

11.2 There is a shower in Reception. During observation all prisoners were offered and accepted a shower on admission. **This is an area of good practice.** Discussion with Prisoners at Focus Groups and observation confirms prisoners are able to shower on a daily basis.

11.3 There are showers in the gymnasium for prisoners to use after attending Physical Training (PT).

11.4 Prisoners attending Court can shower in the morning unless they are required to leave before normal unlock time, in which case they are offered a shower the previous evening.

11.5 The disabled cell in F Wing and the four person dormitory in A Hall have in-cell showers. All other prisoners use communal showering facilities located in each of the residential areas. These are generally adequate and fit for purpose. However with the exception of the shower in F Wing there is no provision for wheelchair access. **This is a significant weakness.**

## **STANDARD 12**

### **Food is adequate for health, varied and religiously and culturally appropriate.**

12.1 The kitchen is dated, however it is clean and well maintained.

12.2 Prisoners working within the kitchen have undertaken the appropriate training covering induction training, the Foundation Food Safety Award (Level 1) and Manual Handling Training as required. **This is positive.** All training is recorded.

12.3 There are two separate work parties employed in the kitchen on a shift basis allowing both mainstream and sex offender prisoners employment opportunities.

12.4 Appropriate signage is displayed and relevant up-to-date Control of Substances Hazardous to Health information is retained. Correct Personal Protective Equipment is worn by staff and prisoners.

12.5 Throughout the inspection food was prepared in line with hygiene standards. Ample food supplies are available and all stock items are appropriately stored.

12.6 Vegetables are served with most meals and fruit is offered in addition to a dessert at lunchtime. **This is positive.**

12.7 As the servery is located adjacent to the kitchen, food is served almost directly from oven to plate and so the temperature is maintained and the quality is not diminished as a result of storage and transportation. However some prisoners are then required to carry their meals on a tray upstairs and along corridors to their cell or dormitory. This presents a potential risk of harm due to spillage. There are no communal dining facilities for prisoners. All meals are taken within cells or dormitories.

12.8 The standard, temperature and portion size of food presented and sampled during the inspection was good.

12.9 A breakfast pack is issued the previous night and consists of a sealed portion of cereal, a roll, jam or marmalade and margarine. Milk is issued at 07:30 Monday to Friday and 08:30 at weekends. Lunch is served at 12:00 and the evening meal at 17:00 every day. A packet of biscuits is issued to prisoners every Friday night and tea bags are issued on a Saturday.

12.10 Standard SPS recipes and menus are used, however are only available in English.

12.11 Highland Council and The Food Standards Agency awarded a 'pass' mark to the kitchen for their Food Hygiene Information Scheme in May 2012. They have also received a Healthy Living Award.

12.12 Cutlery is retained by prisoners and washed in their in-cell wash hand basins. This practice is unhygienic as many prisoners share cells or dormitories in HMP Inverness and subsequently also share wash hand basins. In addition prisoners have no access to washing up liquid. This situation poses an infection control risk.

**Recommendation 31: HMP Inverness should review the system for washing prisoners' cutlery.**

## **OUTCOME 4**

### **Prisoners are treated with respect by prison staff.**

#### **Overview**

Relationships between staff and prisoners are positive across the whole prison. The size of the prison and its local nature contribute to the relaxed and informal atmosphere which exists between many staff and prisoners. Due to the level of overcrowding experienced in HMP Inverness, prisoners are regularly transferred out to other prisons, often at short notice. Where possible, on such occasions, staff offer prisoners opportunities to meet or make telephone contact with their families prior to their transfer date.

In general, all searching is carried out to an acceptable standard however searching procedures on admission should be reviewed.

#### **STANDARD 13**

##### **Respect is the underlying basis of all interactions between staff and prisoners.**

13.1 Both staff and prisoners who attended Focus Groups and those spoken with during the inspection stated that staff–prisoner relationships are positive. This was confirmed through observation during the inspection where relaxed and positive interaction between staff and prisoners was evident in all areas of the establishment including the Remand Hall where traditionally, in other establishments, staff prisoner relationships are usually less established. **This is positive.** The size, make-up and location of the prison is a contributory factor.

13.2 A high percentage of staff and prisoners refer to each other by their first names. It is also apparent that a number of staff and prisoners know each other well. There were occasions when staff referred to prisoners by nicknames, however this was not done in a derogatory manner.

13.3 The majority of staff in HMP Inverness clearly display their name badges.

13.4 There were no instances during the inspection where prisoners were informed of unwelcome news. However the Residential FLM confirmed that on such occasions, the prisoner is given the information in private by a FLM.

13.5 Any prisoner listed for a potential transfer is informed by the Residential FLM as quickly as possible. Where possible the prisoner is allowed a visit prior to his transfer date. He is also allowed to use the telephone to inform his family of any imminent transfer. If he has no credit on his telephone account the prison meets the cost of the telephone call.

#### **STANDARD 14**

##### **Security measures such as searching are carried out with regard to the protection of human dignity.**

14.1 A number of rub-down searches across all areas of the prison observed were found to be carried out in a professional and efficient manner. All of these searches were carried out by an Officer of the same gender as the prisoner.

14.2 A number of body searches, as part of the admission process were observed in Reception and all were undertaken by Officers of the same gender as the prisoner. The majority were undertaken in a professional manner, however on one occasion, a prisoner was, at times, completely naked and was not provided with a towel to stand on. In addition, one body search was conducted by a single Officer and prisoners were routinely required to walk, albeit a very short distance, from the search area to the Body Orifice Security Scanner (BOSS) chair with bare feet and only a towel to cover them while in full view of other prisoners. **This is poor practice.**

**Recommendation 32: HMP Inverness should ensure that all searching is carried out with regard to the protection of human dignity.**

14.3 During the inspection prisoners were present when their cells or property were searched.

## **OUTCOME 5**

### **Good contact with family and friends is maintained**

#### **Overview**

HMP Inverness has a small but well maintained Visit Room which provides facilities for up to no more than six prisoners and their visitors at any given time. There is evidence of recent positive developments in relation to the promotion of family contact with the formation of a Children and Families Strategy Group in June 2013. The high volume of prisoners transferred out to other establishments impacts negatively on their ability to maintain the same quality family contact they would enjoy should they have been able to remain in their local prison. The Visit Room has recently been decorated, a children's play area created and a range of family-orientated events scheduled.

Visitors spoken with found the entry procedures straightforward and commented on the helpful attitude displayed by staff at the check-in desk and in the Visit Room itself. Six Family Contact Officers (FCOs) are trained and in place however this role is in addition to their core duties which means their attendance at visits is variable and their response to their dedicated telephone line sporadic.

The provision and accessibility of telephones throughout the prison is good. No issues are highlighted in relation to the sending or receiving of mail.

## **STANDARD 15**

**Family visits are given high priority in terms of frequency, length and quality and are not restricted as part of any disciplinary or control process.**

15.1 There is evidence of some recent, constructive, initiatives having taken place in relation to visiting arrangements in HMP Inverness together with an indication of good intentions.

15.2 A Children and Family Strategy Group was established in June 2013 and has convened twice. The Group has been responsible for improvements to the décor and facilities in the Visit Room including changes to the children's play area and

vending machines. The Group's action plan also delivered a series of family-orientated events including a family fun day and special events days at Halloween and Christmas.

15.3 Observation throughout the inspection and discussions with prisoners and their visitors confirm that staff working in the visitors entry area and in the Visit Room carry out their duties in a professional and helpful manner.

15.4 Six members of staff from both Operations and Residential functions carry out the duties of Family Contact Officer (FCO) however the frequency and volume of time devoted to this role is unstructured and therefore variable.

15.5 These six Officers are specifically trained and able to provide information and assistance to prisoners and their families and friends as part of the prison's Family Contact Service. These FCOs are not rostered for visits unless the post falls into their normal shift pattern although at the time of the inspection no FCO was on duty due to training commitments, annual leave or night-shift attendance. **This is a weakness.** They are however responsive to enquiries via the dedicated telephone messaging service for visitors, written contact sheets for prisoners or oral requests from visitors at the time of their visit.

15.6 Family members do not take part in the induction system for new prisoners however a Family Induction Pack is being prepared. HMIPS will monitor progress in this area.

15.7 Inverness city centre has a rail and bus station, both of which are within walking distance of the prison. Travel timetables and taxi telephone numbers are available in the waiting area and the prison will call a taxi for visitors if requested.

15.8 Visits by prisoners' families and friends in HMP Inverness are booked by the prisoners themselves. The booking process is explained to all prisoners on admission as part of their initial induction. The process is straightforward; visits may be booked in advance and can be selected from a schedule which operates seven days per week and includes afternoon and evening sessions. Where possible, staff attempt to facilitate prisoners' session selection. Double visits are sometimes offered where spaces permit and more especially in instances where the visitors are travelling a distance to reach the prison. However, such allocation is random and only determined on the day of the visit which does not always tie in with visitors' travel, work or childcare arrangements.

15.9 Untried prisoners may have a visit each day throughout the week and on a Saturday afternoon. Convicted prisoners are offered one visit per week to be taken from Monday to Friday and one 'family' visit on a Sunday. Some prisoners spoken with were unaware of the criteria for accessing these 'family' visits and there was no written guidance in relation to this available to prisoners.

**Recommendation 33: HMP Inverness should ensure that prisoners can access and understand the purpose of and criteria for 'family' visits.**



15.10 All visits are of 30 minutes duration. Many prisoners spoken with were unhappy with this and expressed a wish to have the length of the visit session extended to one hour which would bring them in line with visits in most other prisons in Scotland. During the inspection, it was noted that the evening visits often exceeded the allocated half hour duration however this was seen as an informal arrangement, dependent on variable factors such as staff availability.

**Recommendation 34: HMP Inverness should consider extending the duration of prisoners' visits.**

15.11 No records are available to indicate when or why visits may have been cancelled however neither staff nor prisoners spoken with could recall any time in the recent past when this situation has occurred.

15.12 Visitors are advised to arrive at the prison 15 minutes prior to the visit start time and there are effective arrangements in place to hand in cash and clothing, etc, for prisoners on immediate entry to the prison. Some visitors spoken with expressed the view that the area directly inside the main entrance can be congested at peak visit times however observation during the inspection showed that the average length of time visitors spent 'checking-in' was approximately five minutes. Once they deposit all non-essential personal items not permitted in the Visit Room in the lockers provided, pass through the metal detector portal, have their visit session confirmed and their photographic identity checked, they are shown through to the visitors' waiting area. **This is positive.** Arrangements however for visitors to be given rub-down searches should be reviewed. Time spent in the waiting room is also relatively short as the visit timetable is strictly adhered to.

15.13 Sex offenders and prisoners from mainstream enjoy visits at the same time in the same place with no restrictions on where they are located within the Visit Room. They are however escorted to and from the Visit Room separately. This present escorting system results in the sex offender group usually being brought into the Visit Room after the mainstream group, after the visit session has commenced. Such a system often results in the sex offenders and their visitors being unfairly disadvantaged as their time spent together can be shorter than that of their mainstream counterparts.

**Recommendation 35: HMP Inverness should ensure that all prisoners are afforded equal time with their visitors.**

15.14 Those prisoners holding enhanced status are able to book two visits each week in addition to the basic entitlement of one visit per week of 30 minutes duration afforded to all other prisoners. These extra visits are provided through an Incentives and Earned Privileges Scheme which the prison is partially operating. At the time of the inspection, aspects of the Scheme were in place however it has fallen largely into disuse and a review was being considered. It is unclear, at the time of writing, if the Scheme will continue.

15.15 Records revealed that only six prisoners were subject to closed visits in the 12 months prior to the inspection. Furthermore, the decision to impose closed

conditions is carefully considered and each case is regularly reviewed as part of the prison's monthly Prisoner Supervision System (PSS) Review Board meeting.

15.16 From the records retained in relation to banned visitors there is sufficient evidence to demonstrate that the processes in place for banning visitors, informing them of that decision and reviewing each case are applied fairly and consistently.

15.17 As a local prison, HMP Inverness receives many prisoners from the City of Inverness and immediate surrounding areas which allows them to maintain contact more easily with their family and friends. Conversely, the prison also serves Courts across the Highlands, Islands and parts of Moray which means that prisoners from these more remote areas are held quite some distance from their home, often making visiting very difficult and at times impossible. In addition, the total prisoner population which could be held in HMP Inverness significantly exceeds its capacity resulting in the consistent transfer of prisoners out to other prisons throughout Scotland. As a consequence, the majority of this displaced group experience a reduction in the level of contact they have with their families and friends. Many prisoners spoken with were anxious about the possibility of being transferred out. Most were unclear if or when they may be transferred as the criteria changes dependent on the availability of accommodation elsewhere in the prison estate. Figures checked show that between 2 December 2013 and 12 February 2014, a total of 133 prisoners were transferred out of HMP Inverness.<sup>1</sup>

15.18 Transfers from HMP Inverness to other prisons are responsive to the fluctuating number of admissions and as such prisoners may only be afforded limited notification.

## **STANDARD 16**

### **Visitors are well treated**

16.1 Staff dealt with visitors to the prison politely and respectfully. Visitors spoken with were positive in their comments about the treatment they received from staff at the front entrance and in the Visit Room.

16.2 Appropriately equipped male and female toilets are provided for visitors along with a disabled toilet and baby-changing facilities. The waiting room is clean and comfortable with seating for 20 people, a hot drinks vending machine, a wall-mounted television and a few children's toys. Wall-mounted racks and notice boards provide useful information on a range of topics including local and national support services, complaints procedures, health and welfare advice, the visiting schedule and copies of the prison's family information booklet. The names, photographs and contact details of FCO are also posted throughout the visits area.

16.3 An LCD screen has been purchased for the visits waiting area which, once fitted, will display and update information relating to Family Contact, visit times and special visit events, etc.

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<sup>1</sup> Of the 133, 19 went to Polmont Young Offenders Institution (YOI) and 10 were temporarily transferred for Court appearances.

## **STANDARD 17**

### **Visits take place in the most relaxed environment compatible with security.**

17.1 The Visit Room is compact and provides for a maximum of only six visits at any one time. It is however clean and well maintained. Due to the limited size of the room, visits take place in close proximity to others and it is possible to clearly hear the conversations of those prisoners and visitors sitting at adjacent tables. A small area of the room has been sectioned off in which visiting children can play with the toys provided in a safe, soft play environment. Prisoners are encouraged to engage with their children and are allowed to leave their visit table and interact with their children in the play area during the 'family' visit sessions held each Sunday.

17.2 All prisoners taking visits do so in their prison clothing.

## **STANDARD 18**

### **Telephone contact is made as easy as possible.**

18.1 There is a sufficient number of telephones for prisoners to use throughout the residential accommodation. There are also two telephones in the main recreation room. No prisoner telephone is located in the Separate Cells, however prisoners held there can access a telephone in B Hall.

18.2 The telephones have a privacy hood or, unusually for a prison, are located in a traditional red telephone box. One of the telephones with a privacy hood in A Hall is situated directly adjacent to a video games console. As prisoners use this during recreation periods there can be a degree of background noise and reduced privacy during this time. When offered the choice, prisoners opt to use the telephone located in the telephone box.

18.3 Two telephones are also available in the general recreation area. Staff and prisoners stated that on occasions prisoners only attended the recreation period to use the telephone. Observation showed the telephones were consistently busy during initial periods of recreation.

## **STANDARD 19**

### **Letter contact is made as easy as possible.**

19.1 During Focus Groups prisoners did not highlight any concerns in relation to either outgoing or incoming mail.

19.2 There is no limit on the amount of letters prisoners in HMP Inverness can send out. Prisoners leave outgoing mail at the staff desk in each residential area which is subsequently taken to the main office at lunch time for posting.

19.3 Similarly there is no limit to the amount of letters prisoners can receive. All incoming mail is delivered to B Hall where it is allocated to the respective residential areas. During the inspection prisoners mail was always issued by lunch time. **This is positive.**

## OUTCOME 6

**Prisoners' entitlements are accorded them in all circumstances without facing difficulty.**

### Overview

Information relating to complaints, requests and disciplinary procedures is relayed to prisoners on admission, during their first full day in custody and as part of the SPS National Induction Programme.

Access to the Visiting Committee is made simple and the prison hold a list of Solicitors and their telephone numbers which prisoners can readily access.

HMP Inverness is part of a video conferencing pilot between the prison and the Courts aimed at reducing unnecessary travelling time and improving access and communications between prisoners, their legal agents and Court officials.

Adjudication procedures are fair and complaints are handled properly and in line with published guidance.

The use of and the conditions in the two separate cells should be reviewed. Activity within these cells, when in use, should be recorded regularly and accurately.

### STANDARD 20

**Staff are aware of their duty of care to give prisoners their legal rights. They know what these rights are. They accept the legitimacy and meet their obligations under it promptly.**

20.1 An explanation of the disciplinary procedures is given to prisoners during the 'First Night Admission Checklist' session. Staff go on to outline the complaints and request process the following day as part of 'First Morning Admission Checklist'. While relatively basic, this overview provides prisoners with an understanding of their fundamental legal rights. This aspect of prison life is further covered during delivery of the SPS National Induction Programme.

20.2 Within each residential area there is a list of Solicitors and their telephone numbers for prisoners to access if required.

20.3 There is a process in place for prisoners to request to meet with a member of the Visiting Committee.

20.4 Guidance on the SPS complaints procedure was not displayed throughout the prison. **This is a weakness.**

20.5 HMP Inverness is part of an SPS pilot to provide video link facilities between the prison and some Courts. At the time of the inspection a prisoner was observed using this facility to meet with his legal agent and to appear before Stornoway Sheriff Court. **This is positive.**

20.6 A robust system of recording and distributing legally privileged mail is in place. Staff spoken with during the inspection clearly understood the process. Relevant detailed desk instructions had been issued by the Governor in January 2014. There has been no formal prisoner complaints recorded in respect of prisoners correspondence since January 2012. **This is positive.**

20.7 In discussion with a number of prisoners there were no issues raised in respect of confidential access to Solicitors or complaints bodies. A small number of prisoners commented on the lack of facilities to meet with their legal agents.

20.8 At the time of inspection all four foreign prisoners held within HMP Inverness were European Union nationals. They confirmed that they were aware of their rights of access to Consular Officials, however none expressed a wish to do so at the time of inspection. These prisoners all reported that they had family support from within the United Kingdom.

20.9 A selection of pre-trial prisoners were interviewed who confirmed that assistance was offered and given by staff in accessing legal agents. They also noted that they could access the Citizens Advice Bureau via the Links Centre.

20.10 Orderly room adjudications in HMP Inverness take place in the Residential Manager's Office, adjacent to B Hall. This room is not suitable for the Orderly Room process in terms of layout, size and levels of staff supervision. HMIPS welcomes the decision taken by management at HMP Inverness regarding the planned relocation of the Orderly Room to a more suitable area within the prison.

20.11 During one Orderly Room process observed, the Adjudicator confirmed the prisoner understood the charge he faced, that he had received notification of the charge within agreed timescales and asked if he wanted to call witnesses or seek legal assistance. Examination of historical adjudication paperwork confirmed this practice.

20.12 During the inspection all prisoners appearing in the Orderly Room pled guilty to the charges they faced. Prior to awarding any punishment, the Adjudicator asked the prisoner if he wanted to make any plea in mitigation. The Adjudicator also informed the prisoner of the punishment awarded, his right to appeal, and how to do this. Paperwork for a number of historical adjudications confirmed this happened as a matter of course. This paperwork also showed that when a prisoner pled not guilty, the Adjudicator considered all available evidence prior to making a decision.

20.13 Punishments awarded during the adjudications observed were fair and reasonable. Similarly, records of historical punishments awarded were commensurate with the charges made.

## **STANDARD 21**

**Staff are aware of their duty to observe the Human Rights of prisoners. They know what these rights are. They accept the legitimacy of that duty and meet their obligations under it promptly.**

21.1 There were no records found of prisoners contacting or requesting to communicate with the European Court of Human Rights. Staff spoken with knew how to access the relevant information if required.

21.2 SPS Confidential Racial Incident Report Forms are available throughout the prison. These are for prisoners, visitors or members of staff to report any racial

incident, as an observer or victim. Staff and prisoners spoken with were aware of the process for reporting racial incidents. Quarterly Equality and Diversity management meetings are held and an Action Plan is in place. There were no live reports in respect of racial incidents at the time of inspection.

## **STANDARD 22**

**Staff are aware of their duty to treat prisoners in accordance with fairness and natural justice. They know what this involves. They accept the legitimacy of that duty and meet their obligations under it promptly.**

22.1 Prisoners have a clear avenue of appeal against a response to a request or complaint. An Internal Complaints Committee met and was observed during the inspection. This was conducted in accordance with SPS policy and procedures. The prisoner was fully appraised of the proceedings and aware of the avenue of appeal. However, the meeting took place in the same room used for the Orderly Room which is not fit for this purpose.

22.2 There was a perception held by prisoners in the Focus Groups and expressed by those spoken with during the inspection that should they make a complaint they would be transferred to another establishment. It is noted that due to routine overcrowding prisoners are regularly transferred out of HMP Inverness, however there is no evidence to support that submitting a complaint and being transferred to another establishment are in any way connected.

22.3 At the time of inspection the Library had a copy of The Prisons and Young Offenders Institutions (Scotland) Rules 2011 available in a variety of languages, however these were held in a locked cabinet and are not readily available to prisoners. The European Prison Rules were not available but could, it was stated, be accessed by staff if requested. There was a selection of up-to-date legal texts available which were retained by the Officer who oversaw the Library.

**Recommendation 36: HMP Inverness should ensure that copies of the Prison Rules and legal texts are readily available to all prisoners.**

22.4 Evidence exists to demonstrate prisoners' requests and complaints are responded to without undue delay. The number of complaints submitted in HMP Inverness is relatively low. A sample examined showed that some complaints were submitted on the wrong paperwork. Over half of the complaints submitted on Prisoners Complaint Form 2 (PCF 2) should have been submitted on a PCF 1 or NHS complaint form. This suggests that awareness of the complaints procedure requires to be raised.

22.5 A number of staff and prisoners spoken with during the inspection confirmed that attempts were made to resolve complaints informally. It was observed that there appeared to be good positive relationships between staff and prisoners.

22.6 Staff spoken with stated they would attempt to discuss and resolve any issues with prisoners prior to placing them on a disciplinary report. Observation of staff and prisoner relationships and interaction supported this. **This is positive.**

22.7 During January 2014 there were 27 recorded instances of breaches of discipline resulting in prisoners being placed on report. This is not an excessive number and would support the position that discipline reports are not used as a matter of course.

22.8 During Focus Groups prisoners did not comment negatively on the use of the disciplinary process in HMP Inverness.

### **STANDARD 23**

#### **Segregation is used sparingly and in accordance with procedures.**

23.1 HMP Inverness does not have a recognised Separation and Reintegration Unit (SRU). Instead, prisoners who are segregated from others are held in one of two 'separate cells'. Management of HMP Inverness accept the conditions in these cells are poor and state that they are used sparingly. However, records show that between 1 April 2013 and 31 January 2014 these cells were used on 65 occasions. The length of time prisoners spent in these cells during this period ranged from one to 19 days.

23.2 Management note that, where possible, prisoners who incur cellular confinement as part of an Orderly Room award do so within their own cell. They further state that prisoners removed from association under Rule 95 of the Prisons and Young Offenders Institutions (Scotland) Rules 2011 are only held in the Separate Cells for a short period and should they require to be managed under Rule 95 conditions for a prolonged period they are transferred to a SRU in another establishment. Documentation reviewed supports this position.

23.3 A number of prisoners held in the SRU were detained under the Refusal to Return to Mainstream Condition process. During the inspection one prisoner was subject to this process and located in a 'Separate Cell'. He was aware of the reasons why he was being held in those conditions and the supporting paperwork confirmed this.

23.4 A file review showed that the Risk and Conditions field within PR2 which notes the reasons why a prisoner is held in segregation was not completed in all cases.

#### **Recommendation 37: HMP Inverness should ensure all relevant electronic records are maintained for those prisoners held within the Separate Cells.**

23.5 The regime for prisoners located in the 'Separate Cells' is basic. A diary recording the daily activity for these prisoners is completed by B Hall staff responsible for their management. The quality of the narrative is variable. On some occasions the narrative provides a comprehensive overview of interaction between the prisoner and staff and records details of his access to showers, periods of time in the open air, visits by medical staff, etc. On other occasions there is very little information recorded, meaning it is impossible to confirm if the prisoner has been offered his basic entitlements.

**Recommendation 38: HMP Inverness should ensure that a comprehensive record is maintained of all daily activity for those prisoners held within the Separate Cells.**



## **PART 3 - OPPORTUNITIES FOR SELF-IMPROVEMENT AND ACCESS TO SERVICES AND ACTIVITIES**

### **OUTCOME 7**

**Prisoners take part in activities that educate, develop skills and personal qualities and prepare them for life outside prison.**

#### **Overview**

Twice weekly delivery of the SPS National Induction Programme is carried out proficiently.

While some attempts have been made to broaden Integrated Case Management processes, the prison has had greater success in implementing the Personal Officer Scheme with built-in staff cover to allow Personal Officers dedicated time to spend with prisoners including opportunities to administer Core Screen Assessments. Prison management should enhance the range and frequency of formal opportunities to consult and engage with prisoners about issues that impact on their lives while in custody.

Out of cell activity for untried prisoners has recently increased however the range of recreational activity for all prisoners is limited and unattractive.

Work and training opportunities are few with approximately 45 spaces available daily. Despite restricted space, the PT programme is popular and caters for all the prisoner population needs. Education and learning activities can be accessed by all prisoners however take-up is limited to one-third of the population. Disappointingly, vocational training candidates and prisoner learners are transferred out to other establishments whilst undertaking education and training programmes. Access to the Library is limited with some prisoners having no access whatsoever. Better links between the Learning Centre and the Library should be established.

Action to identify and address offending behaviours are in place and relevant pre-release work with prisoners is delivered. Unique, joint working between Apex Scotland, Community-Based Social Work and the prison takes place in HMP Inverness and in the local community to deliver offending behaviour interventions.

Arrangements are in place to allow prisoners to have access to a representative of their chosen faith and to attend and participate in the appropriate religious service.

#### **STANDARD 24**

**The regime of the prison encourages prisoners to make the most of their time there and to exercise responsibility.**

24.1 The SPS National Induction Programme is delivered twice weekly in the Links Centre to all new admissions. This provides opportunities for prisoners to shape their time in custody.

24.2 An SPS audit of Integrated Case Management (ICM) carried out in HMP Inverness during May 2012 recommended that the prison broaden its base knowledge of ICM and introduce a Personal Officer Scheme. While the latter has been fully achieved, the former has only been partially addressed.

24.3 All convicted prisoners sentenced to 12 months and over are allocated a Personal Officer on admission by the residential FLM. On average, a Residential Officer acts as Personal Officer to four prisoners. In some instances, where staff are new to the Personal Officer role, they may shadow an Officer experienced in carrying out this role in order to gain insight and understanding. A local SharePoint database records the allocation and provides the relevant details relating to the prisoners' case management. There is also evidence of untried prisoners who are subject to a longer period of remand being included in the Scheme and allocated a Personal Officer.

24.4 The residential roster provides relief cover during two two-hour periods each weekday to allow staff to carry out Personal Officer specific work. In addition, interview rooms located in the Links Centre can be booked by the Officers to conduct this work with their allocated prisoners, providing a dedicated, confidential area in which to carry out this function including completion of the core screen process. **This is positive.** This provision also helps mitigate the difficulty encountered by staff in some residential areas of the prison where their access to a SPIN computer terminal is limited.

24.5 The prison has only one Officer with responsibility for ICM co-ordination who, on average, manages five case conferences each month. The co-ordinator himself has visited a larger prison to gain hands-on experience and to learn from more experienced co-ordinators. He has also arranged for staff from that prison to deliver training in ICM to Personal Officers in HMP Inverness. In addition, he has adapted some of the related systems and paperwork used in the larger prison for use in his home establishment. While the work of this individual is to be applauded, it demonstrates an absence of formal, national training in this area.

**Recommendation 39: The Scottish Prison Service should consider developing a Personal Officer training package.**

24.6 A random check of Community Integration Plans for prisoners in HMP Inverness demonstrate appropriate referrals are being made and properly recorded on PR2.

24.7 There are no formal Prisoner Information Action Committees held within HMP Inverness. As noted in the December 2012 Audit of Catering Standards undertaken by the SPS Audit and Assurance Services, a timetable for prisoners' food Focus Groups to be held was not in place and such a schedule might assist. HMIPS support this recommendation. It was noted that the last group meeting dealing specifically with catering was held in June 2013.

24.8 Prisoners representing each area, including the CIU, attend Common Good Fund meetings, which are held up to twice per year, with the last meeting being held in November 2013. Minutes of the meetings are displayed within Residential Areas, as are statements of income and expenditure. The topics discussed at these meetings include food and canteen as well as recording decisions on how the funds should be spent. It was noted that at the November meeting it had been agreed to give a donation to the Children's Ward and Special Care Unit for Babies at Raigmore

Hospital. At the previous meeting in July it was agreed to give a donation to a cancer charity for children.

**Recommendation 40: HMP Inverness should ensure that a structured process of prisoner consultation is in place.**

#### **STANDARD 25**

**A full day's out of cell activities, such as work, education, leisure and cultural pursuits, is available for seven days of the week.**

25.1 Out of cell time has recently been increased for remand prisoners as a result of an accommodation and regime review. While this is positive, unfortunately the volume and range of out-of-cell activities available to all prisoners in HMP Inverness is limited. Furthermore, many of the prisoners expressed the view that what was on offer was not attractive.

25.2 With the exception of a small textile work party, work-based activity is restricted to service-related jobs in catering, laundering, recycling, Industrial cleaning and general housekeeping, employing a maximum of 45 prisoners.

25.3 The physical education staff provide as good a programme of sport and fitness activities as is possible within the restricted space available to them. Their flexible approach caters for the differing abilities of each of the prisoner groups.

#### **STANDARD 26**

**The programme of work and related training focuses on equipping prisoners for employment on release.**

26.1 Opportunities for work and training are very limited. There are well advanced plans to introduce bike maintenance work opportunities this year. Some tools and equipment have already been purchased and contacts have been explored with community partners to support this development. This initiative will potentially provide six prisoner work places.

26.2 Staff have previously created additional ad hoc work opportunities for prisoners through small scale projects such as building internal offices. These activities develop prisoner painting, joinery and construction skills.

26.3 Activities staff work very effectively with each other to ensure opportunities are maintained despite limitations of space and reduced numbers of staff. They have a supportive and flexible approach to team working. Within the Vocational Training work environment there are very good relationships between staff and prisoners.

26.4 There are some qualifications available through the prison's partnership with the training provider Apex Scotland who offers certification in SMART recovery, Construction Site Skills Certificates and Heartstart. However prisoners did not achieve any work skills qualifications at Scottish Credit and Qualification Framework Level 5 or above during 2013. Vocational qualifications gained by prisoners between

April to December 2013 numbered 53 in comparison to the previous year where only 13 were attained in total.

26.5 Prisoners work in the kitchen, however, currently, do not acquire vocational qualifications whilst undertaking food preparation duties. **This is a weakness.**

**Recommendation 41: HMP Inverness should introduce a greater range of vocational qualifications to support the development of prisoners' skills.**

26.6 The limited number of work or training opportunities for prisoners are relevant to the current labour market. A few prisoners engage in recycling and textile work while others work in the laundry or canteen. Previously, prisoners worked in the prison gardens but currently do not do so.

**Recommendation 42: HMP Inverness should extend work and training opportunities which reflect the current labour market.**

## **STANDARD 27**

**A broad and relevant education programme is available.**

27.1 All prisoners, including those on remand, have good access to education and learning activities. Monthly Prisoner Learning Hours (PLHs) have varied over the current year from a high of 930 PLHs in August to a low of 440 PLHs in December. The range of available courses offered at SCQF Level 2 to 5 includes Communication and Literacy, Information and Communications Technology (ICT), numeracy and mathematics, distance learning and Big Plus courses, Communications, Creative Writing and working with others. Over the period August 2013 to January 2014 prisoners were successful in attaining an overall total of 85 awards. Distance learning opportunities included successes in Sociology, Psychology, Biology, Mechanical Engineering, Biotechnical Industries, Photography, Essential Book-Keeping, Food and Hygiene modules and Health and Safety modules. **Overall this is positive.**

27.2 Meaningful links between the Learning Centre, vocational training opportunities and the Library are not established.

27.3 Prisoners' attendance at the Learning Centre is monitored each month including instances of where prisoners refuse to attend some classes, self-deselection and where they have been prevented from attending for any other reason.

27.4 Staff in the Learning Centre feel that while there have been improvements in attendance, staff in the residential areas could be more supportive, ensuring prisoners attend education classes when wishing to do so.

**Recommendation 43: HMP Inverness and Fife College should ensure that education and learning activities are positively promoted within the residential halls.**

27.5 The Learning Centre, which has recently been refurbished, provides a welcoming learning environment. However, on occasions it was reported that it can be cold which has a detrimental impact on prisoners at their activities.

27.6 Learning Centre staff are enthusiastic about the recent improvements in communication and collaborative approaches to discussions and decision making between themselves and prison management, stating they feel more included in decisions about their future. **This is positive.**

27.7 Recently introduced timetable changes provide more frequent access to learning activities for prisoner groups through the introduction of one hour learning slots. However, on a number of occasions, due to the delayed arrival of some prisoner groups learning sessions have been reduced.

27.8 Learning Centre staff compile lists of prisoners scheduled for attendance on education programmes daily and post these onto the prison's SharePoint system for prison staff to view and follow-up. However, attendance rates vary with, on average, approximately 50% of prisoners attending scheduled provision. This impacts adversely on the number of qualifications achieved by prisoners. **This is a weakness.**

**Recommendation 44: HMP Inverness and Fife College staff should ensure prisoner attendance at the Learning Centre is maximised.**

27.9 Untried prisoners benefit from provision of education programmes throughout the week. At the time of inspection about one-third of the population of HMP Inverness are untried prisoners. To support their education needs Learning Centre staff deliver ten one hour units and an appropriate range of short duration programmes. **This is positive.**

27.10 The Learning Centre Manager and a number of part-time tutors deliver education programmes. All staff are vocationally qualified and most have attained teaching qualifications. Staff work collaboratively and support prisoners effectively when attending programmes delivered in the Learning Centre. Learning Centre staff enjoy good relationships with prisoners and support them well during learning activities. Learning Centre staff adopt, where appropriate, the practices and approaches outlined in Curriculum for Excellence by integrating literacy and numeracy activities with topics which appeal and interest prisoners. This approach appears to help motivate prisoners to learn and keeps them engaged during teaching sessions. **This is positive.**

27.11 The range of programmes delivered in the Learning Centre include: Numeracy, Maths, Communications, Literacy, ICT and Creative Arts (painting). Currently, at the time of inspection, there are no waiting lists.

27.12 Through Fife College's Moodle<sup>2</sup> for Offender Learning Environment (MOLE), prisoners undertake Health and Safety online learning activities.

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<sup>2</sup> Modular Object-Oriented Dynamic Learning Environment – an e-learning platform

27.13 Prisoners commencing education programmes complete the Big Plus Challenge initial assessment to identify existing literacy and numeracy skills and inform learning provision. Education staff compile Individual Learning Plans (ILPs) which identify short-term improvement targets. Where prisoners present below Access Level 3 for literacy or numeracy, and when entering the prison for the first time refuse to engage in education provision, a follow-up meeting is scheduled four weeks later.

27.14 At the time of inspection there was no education peer support prisoners to support more widely the development, promotion and engagement of prisoners in education.

27.15 The Learning Centre has a small number of books and contains a limited range of donated history, sport and entertainment magazines which prisoners can borrow for personal reading.

27.16 Currently, approximately one third of the prison population benefit from attendance at education programmes.

27.17 Accredited programmes include those delivered through Scottish Qualifications Authority (SQA) and distance learning programmes devised by Dumfries and Galloway College. During 2012-13, nine prisoners attained certification through completion of distance learning programmes.

27.18 The Learning Centre annually completes a self-evaluation report which identifies progress made on improvement targets.

27.19 Prisoners in HMP Inverness who attend the Learning Centre are paid in accordance with the SPS National Wage Earning Policy and therefore do not suffer any financial disadvantage for taking part in educational activities. Untried prisoners are encouraged to attend the Learning Centre and are paid 50 pence for each session completed. **This is positive.**

27.20 There are a few opportunities for creativity and self-development within the education programme; while prisoners can access art classes and creative writing classes there are no regular opportunities for music or drama type learning.

27.21 Prisoners' completed art work is promoted nationally through displays held at the Koestler Arts Centre in London where a number of paintings received commended or highly commended awards. Inverness Museum and Art Gallery has for the last three years exhibited Inverness prisoners' sculpture and art work as part of Fife College Learning Programmes. **This is positive.**

27.22 To promote and encourage active healthy lifestyles prison staff devised and delivered a Health and Fitness Week in 2013. This included; mini-football competitions, fitness testing, yoga and Tai-Chi, carpet bowls, cookery skills workshops and a well-man clinic. The activities were popular and included contributions from the Learning Centre, the prison, NHS and Link Centre staff as well as external agencies such as Apex Scotland, Heartstart and the NHS Oral Health

team. The promotion was successful and over £200 was raised for charitable causes. **This is positive.**

27.23 To support and promote literacy and to highlight that learning can be useful and enjoyable Learning Centre staff recently held a literacies week. It included: a creative writing workshop delivered by an external speaker, a Gaelic taster session, numeracy life skills and Twitter fiction – writing a story in no more than 140 characters. The event was well received and prisoners stated they found the activities motivating and rewarding. **This is positive.**

27.24 Prisoners benefit from creative input provided by external speakers. A Performance Poet recently delivered a well-received poetry session to 25 prisoners. Through support from staff based at Inverness Eden Court Theatre, six prisoners wrote and performed their own songs to other prisoners. **This is positive.**

27.25 Registers and documentation from the Learning Centre suggests that there are instances where learners are transferred in the middle of their courses and discussions with the vocational trainer suggest that this also happens from a Vocational Training perspective. While it is not the norm, the situation is reflective of the high proportion of prisoners transferred out of the establishment.

27.26 It was reported that there had been no Education classes cancelled in recent times.

27.27 There is very good access to PT should prisoners want it. They can access the gymnasium each day and have the opportunity in addition for an evening session and one weekend session. While the area is tight for space, it is well organised and prisoners on the whole are content with what is offered. Currently 55 out of 130 prisoners benefit from attendance each week on gym-related activities. Other sessions organised across each week include circuit training and football with volleyball as a better weather option. Staff are flexible in meeting the requests of individual prisoners should they require access to other interventions to ensure they can continue to access the gymnasium each day. Relationships between staff and prisoners are good and prisoners work well with each other in, for example, spotting to ensure safe use of equipment, particularly free weights. There have been few incidents as a result of improper use, no violent incidents and any minor injuries that have occurred have been down to accidents as a result of a lack of concentration or poor judgement. **Overall this is positive.**

27.28 Prisoners value the gymnasium, its equipment and the support received from staff. They can attend up to seven sessions each week and make good use of the facilities to stay fit and remain healthy. There are good relationships evident between staff and prisoners when exercising in the gymnasium.

27.29 There are currently no opportunities for prisoners to gain accredited awards in the gymnasium. These used to be offered but have been withdrawn recently. **This is a weakness.** It is noted that plans are in place for the gymnasium to be relocated.

## **STANDARD 28**

### **A range of interventions is in place to encourage prisoners to address those behaviours which may contribute to their offending.**

28.1 There are appropriate and sufficient assessment processes in place in HMP Inverness to meet the needs of the prisoner population. All prisoners, irrespective of classification, undertake a Core Screen Assessment as part of their induction. Residential staff carry out this assessment and those prisoners sentenced to 12 months and over have their Core Screen Assessment completed by their allocated Personal Officer. Prisoners who fall into this latter group are also subject to a Generic Programme Assessment (GPA), carried out by staff in the Links Centre. As there is no psychology resource in place in the prison, the completed GPAs are currently forwarded to a psychologist at SPS HQ for quality assurance. The same psychologist attends the prison on a monthly basis to chair the Programme Case Management Board and to contribute to the Risk Management Team (RMT) meeting. These arrangements work well.

28.2 Prisoners can also make application for assistance with perceived needs via their Personal Officer or by completing a self-referral form available in all residential areas. Subsequent contact with the relevant service provider enables further assessment leading to interventions including straightforward signposting, advice, one-to-one work, and inclusion in programmed activities. Much of this work is delivered in the Links Centre or facilitated through the Links Centre staff and includes in-prison and external partnership working with a range of providers such as Jobcentre Plus, Prison-Based Social Work, Citizens Advice Bureau, Local Authority Housing Department, Chaplaincy Team, NHS addictions and mental health professionals, Apex Scotland, Family Contact Officers, Alcoholics Anonymous, Turning Point Scotland and SPS offending behaviour programme facilitators.

28.3 Programme facilitators work with Personal Officers in order to promote the programme interventions available in HMP Inverness and offending behaviour leaflets explaining the aims of the courses are available. Personal Officers are also encouraged to attend PCMB meetings which helps them to communicate to prisoners the rationale behind the decisions made by the Board. **This is positive.**

28.4 At the time of the inspection, the prison was delivering three programmed interventions aimed at addressing offending behaviour; Alcohol Awareness, Drug Action for Change and SMART Recovery. Uniquely, HMP Inverness are delivering the SMART Recovery Programme on a rolling basis and co-deliver the Programme with Apex Scotland and Community-Based Social Work both in prison and in the local community. **This is an area of good practice.**

28.5 Due to the size and nature of the prison, a great number of the prisoner population are known to both prison staff and partner agencies and a weekly meeting of these service providers takes place in the prison which allows for an additional opportunity to consider those individuals each partner is working with and, where appropriate, make further cross-referrals. **This is an area of good practice.**

28.6 The prison does well to facilitate all the work undertaken in the Links Centre. While the range and quality of the interventions available is good, the facilities are



basic and the limited number of room 'spaces' requires tight scheduling. The Links Centre is currently located in what was previously a large industrial-type work shed in which a number of smaller rooms have been erected, many of which have no ceiling thereby offering limited privacy. Two larger multi-purpose rooms are used for a variety of purposes such as the delivery of programmed interventions, Roman Catholic Church Services and prisoner induction. Despite its poor fabric and design and its limited size, it is one of the busiest and best used Links Centre HMIPS has recently encountered. The management and staff in the Links Centre are to be commended for their efforts. Plans are in place which will see the relocation of the Links Centre services to a 'portacabin' facility soon to be transferred into the prison from the now closed HMP Aberdeen. Once empty, the current Links Centre will be reopened as a gymnasium, replacing the current, smaller facility. It is hoped that the transfer of these services provides an improved environment for both prisoners and those engaged in working with them and that the present high level of engagement is not reduced or diminished in any way. HMIPS will monitor progress.

## **STANDARD 29**

### **There is a programme of cultural and voluntary activities.**

29.1 All prisoners have access to a television in their cell which provides a range of television and radio channels. Newspapers, magazines and periodicals can also be purchased by prisoners.

29.2 The Library is located in a corner of the main recreation area. Prisoners have restricted access during scheduled recreational sessions. Some prisoner groups do not routinely have any timetabled access to the Library. **This is a weakness.** A prisoner, employed as the Librarian, issues and receives returned books sporadically throughout the week. Prisoner access to DVDs is dependent upon proactive promotion by prison staff or allocated passmen within the residential areas which is variable across the prison.

### **Recommendation 45: HMP Inverness should improve access to both the Library and media resources.**

29.3 The Library contains a limited range of donated books and has very few books to meet the reading needs and interests of prisoners from other countries and cultural backgrounds. It is under-utilised and few prisoners borrow books for personal reading.

29.4 There is no meaningful communication between the Library and the Learning Centre. There is insufficient liaison between the Officer with additional Library duties and the Learning Centre staff to agree suitable reading materials to support the needs of those undertaking learning programmes or the wider interests of the prison population.

### **Recommendation 46: HMP Inverness and Fife College should ensure that there is appropriate communication between the Library and Learning Centre staff to identify how best they can support offenders' literacy levels.**

29.5 Currently, most of the prison's Library budget is spent on translation dictionaries for a wide range of prisoner nationalities. Prisoners are restricted to reading the prison's limited Library stock as there are currently no arrangements to access local authority Library stock located in Highland Council's libraries.

29.6 The arrangements in place for prisoners to access DVD and media material are not satisfactory. Passmen from each of the residential areas are charged with collecting DVD material from the Library and bringing this back to each residential area but prisoners consider this arrangement to be ineffective with a lack of variety in what is selected and therefore viewed. **Overall this is a weakness.**

29.7 Prisoners have regular access to evening and/or afternoon activities or recreation every day depending on their location and classification. This comprises traditional prison pastimes such as pool, table tennis, card games and darts. In HMP Inverness, cell association is allowed where prisoners may choose to spend time in each others cell during recreation periods, to watch television or listen to music. In addition, there is limited access to a small number of electronic games consoles. During the summer months, the PT programme includes access to the football pitch for a small number of prisoners during the evening and weekend recreation periods.

29.8 Recent regime changes have allowed for an increase in the time remand prisoners can spend engaged in recreational pursuits. While this is seen as a positive change, many of the prisoners from this group spoken with during the inspection stated that they chose to return to their cells after having used the telephone to watch television rather than take part in prolonged recreation. Staff confirmed this. One possible reason for this situation put forward by both staff and prisoners is that the recreational activities on offer are limited and unattractive.

**Recommendation 47: HMP Inverness should review the range and quality of their recreational activities.**

29.9 There was no evidence of opportunities being afforded to prisoners in HMP Inverness to do voluntary work for the benefit of others.

### **STANDARD 30**

**Opportunities to practise their religion are available to all prisoners.**

30.1 There are currently four part-time Chaplains who work, in general, on an ecumenical basis. This arrangement delivers, in total, just under 20 hours per week of paid Chaplaincy provision. There are also a number of Prison Chaplaincy volunteers from the local community who provide assistance. Training for these individuals, led by the National Chaplaincy Advisors, was held in the prison in October 2013.

30.2 Prisoners can have access to a Chaplain by entering their details in one of the request books located in each of the residential areas. The Chaplaincy Team also check PR2 records regularly for referrals for prisoners made by Prison Officers.

30.3 Christian services are held on Sundays with the Reformed Church service taking place within the recreation room at 09:00, and a Roman Catholic (RC) service being held within the Links Centre at 09:45. Numbers attending these services was stated as varying from nine to 19 and two to six respectively. It was observed during the inspection that one prisoner attended both these services. While both offence protection and mainstream prisoners attend services at the same time, Prison Fellowship sessions for the same groups are held separately. A prayer service for Muslim prisoners is delivered as and when required on Fridays. A study group considering the Gospels is also currently running.

30.4 The Chaplaincy Team have good links with a number of projects and organisations. These include a local Homeless Project and the addictions recovery project Road to Recovery as well as Families Outside. Prison Fellowship delivered the Sycamore Project in 2013 as well as the Alpha Course. Tough Talk, a group of powerlifting Christian ex-offenders have also visited the establishment. Last year the Chaplaincy Team invited Scottish Opera and the Inverness Male Voice Choir to perform in the prison.

30.5 Until recently RC services were held in the Learning Centre. However when the area was converted into a computer suite, the services were relocated to the Links Centre. The Reformed Tradition services are held in the recreation room. Neither of these areas prove to be wholly appropriate as the recreation room also contains the Library, pool tables and a barber's shop while the room used for the RC service is normally designated for programme delivery and prisoner induction. It should be noted however that prison management, Chaplains and prisoners made no complaints about the facilities throughout the inspection.

### **STANDARD 31**

**Suitable arrangements to enable prisoners to buy a range of personal and other items that meet prisoners' needs are in place and available and accessible as necessary.**

31.1 HMP Inverness provides prisoners with the opportunity to purchase goods from a canteen which operates on a 'Bag and Tag' basis. Prices are comparable with other establishments.

31.2 Convicted prisoners can access the canteen once per week and with effect from January 2014 untried prisoners can make purchases twice weekly.

31.3 The range of goods held in stock do not cater for prisoners with an ethnic background, however such items are sourced locally if required. A similar arrangement is in place for greetings cards.

31.4 In addition to the items provided by the canteen a list of sundry purchases is available with fruit being reported as a popular request.

31.5 As noted in paragraph 24.7 there are no PIACs held in HMP Inverness, however the list of canteen items is discussed at the Common Good Fund meetings which is attended by prisoners representing all residential areas within the prison. The last meeting was held on 26 November 2013 with copies of the minutes displayed in the residential areas. All canteen order forms contain a comments/suggestions box.

## **OUTCOME 8**

**Healthcare is provided to the same standards as in the community outside prison, available in response to need, with a full range of preventative services, promoting continuity with health services outside prison**

### **Overview**

While prisoners in HMP Inverness have unfettered access to healthcare professionals, the self-referral process in place and the unsuitability of the dispensing area does not always guarantee confidentiality. The VISION terminal in Reception is seldom used which may result in vital information being missed at the time of the admission assessment taking place.

A wide range of medical and other health-related services are available in the prison or can be accessed in the community. Good working relationships between HMP Inverness and NHS Highland are evident with a supportive General Practitioner network service in operation. However, prisoners may experience delays in accessing some nursing services due largely to the small complement of nursing staff, many of whom are person-specific specialists, and the absence of healthcare/pharmacy assistants.

As previously recorded in other HMIPS inspection reports, prisoners healthcare records do not routinely accompany the prisoner on transfer between prisons. This situation also relates to HMP Inverness.

Pre-release and throughcare interventions are positive.

Living arrangements for prisoners with a disability require to be reviewed.

## **STANDARD 32**

**Health services of a high quality are available to all who need them.**

32.1 Prisoners have access to healthcare provision through a self-referral process. Referral forms are issued on request by Hall staff. Once completed, referrals are deposited in a locked post box which can then only be accessed by healthcare staff. Referrals are collected several times throughout the day allowing healthcare staff to prioritise need through appropriate triage arrangements. **This is an area of good practice.**

32.2 For those prisoners who have no direct access to the post box which is situated in the corridor outside B Hall, their referrals are passed to an officer on their behalf. In many instances, prisoners will not have an envelope in which to seal their referrals thus presenting a risk that their confidential medical requests are seen by non-clinical staff.

**Recommendation 48: HMP Inverness and NHS Highland should ensure that all prisoners have confidential access to medical personnel.**

32.3 Some of the blank referral forms seen during the inspection were printed in a size six font which makes them very difficult to read and accurately complete. This may impede prisoners' access to appropriate healthcare. In addition to the self-referral process described above, where concern is noted, health referrals can be made orally by others, most commonly Officers, Chaplains and prisoners' families.

32.4 Medical services are provided from within a group of six Doctors from a local medical practice. They are scheduled to deliver medical services between 08:00 and 18:00 Monday to Friday. Clinics are facilitated every weekday between 09:00 and 11:00 with additional attendance every Saturday morning to provide medical assessments for those prisoners admitted on the previous evening.

32.5 Provision of out-of-hours medical cover both throughout the night and on Sundays is delivered by an on-call Doctors' service managed by Raigmore Hospital (Professional line access). Emergency medical services are accessed through a '999' request.

32.6 Waiting time for a routine, non-emergency Doctor's appointment is on average one week.

32.7 The small complement of Nurses results in delays in prisoners being able to access nursing services. The level of service available is further reduced in the event of any medical crisis. This also impedes delivery of other daily planned activities such as dispensing medication. On such occasions, healthcare provision and the general day-to-day prison regime are adversely affected.

32.8 Furthermore, as a result of the absence of any Healthcare or Pharmacy Assistants, Nurses are required to carry out administrative functions including checking and organising 'in-possession' medication prior to dispensing. This detracts from their clinical activity and is a contributory factor in delays in providing prisoner care and treatment.

32.9 Some prisoners may also experience delays in accessing Mental Health Services due to the limited provision available. There is only one whole-time equivalent (WTE) Mental Health Nurse on the nursing complement and as the service is person-specific there is no cover for time off, annual leave, sickness or any other absence. The Mental Health Service is supported by a Consultant Psychiatrist who conducts a weekly clinic and, in the event of urgent referrals, can be contacted for advice.

32.10 Addictions Nurse duties are supported by the Mental Health Nurse. This places additional pressures on delivering a wide range of therapies and often results in the delivery of assessment and crisis management interventions at the cost of prevention and maintenance interventions and health promoting activities.

**Recommendation 49: NHS Highland should undertake a review of the workforce and skill mix, using national workforce tools, in order to ensure they have the capacity to deliver the relevant level of care to meet the needs of the prisoner population.**

32.11 For prisoners transferring in to HMP Inverness from other prisons, their health records usually, but not always, accompany them. For those admitted directly from Court, their health information is verified through contact with Doctors' services and other care providers as soon as is practicable. A formal request for healthcare records is made to the prisoner's community Doctor for all those sentenced to over six months imprisonment.

32.12 The electronic health records system 'VISION' is in place within HMP Inverness. This allows healthcare staff to access the health information of those prisoners who have an already established electronic record in the community. A VISION terminal is situated at a secure desk unit in the interview room in Reception, however due to the cramped nature of the room, nursing staff, in order to access the terminal, need to turn their back on the prisoner to read or enter any data. As a result the terminal is seldom used during admission interviews and medical information is therefore not always accessed at the point of assessment. **This is a weakness.**

**Recommendation 50: HMP Inverness should ensure that the VISION terminal in Reception is accessible to nursing staff and situated in such a way as to ensure the safety of the user.**

32.13 There is access to the Doctor-based Emergency Care Summary on admission, however healthcare staff report that this information is often out-of-date and has limited use.

32.14 There are good processes in place in relation to communicating health-related information at the point of the prisoner's release. On liberation, prisoners are provided with a health-related discharge letter and information is also sent directly to the prisoner's community healthcare provider. Where appropriate, community-based providers visit the prisoner to establish contact prior to release. This pre-release contact can also be accommodated through the use of video conferencing, for example with a Community Practice Nurse or Community Addictions Worker. **This is an area of good practice.**

32.15 Often, those health records that accompany a prisoner on transfer into HMP Inverness are found to be sent in a brown envelope instead of the approved sealed transfer bag. This presents a risk to the level of confidentiality afforded to the prisoners' medical data.

**Recommendation 51: The NHS should ensure that all medical notes are securely transferred.**

32.16 All parts of the Health Centre are cleaned by prisoners and while healthcare staff report that these prisoners are never left unsupervised, it is possible for them to read health-related information from documents that are left unattended and within view including for example, Kardex, prescription sheets, etc.

**Recommendation 52: NHS Highland should ensure confidential information is appropriately managed.**

32.17 There are no records of unacceptable or unnecessary delay in transferring mentally ill prisoners to more appropriate settings. For those prisoners being transferred to the local facility at New Craigs, arrangements are made easier as the prison's Consultant Psychiatrist also practices at the hospital. This has resulted in greater consistency of approach and improved communications and decision making. **This is an area of good practice.**

32.18 Clinics dealing with Sexual Health and Blood Borne Virus (BBV) are provided once per week. Ophthalmology and Podiatry services are available on an as required basis with an on-site provision taking place approximately once every three weeks and priority given to those prisoners with diabetes.

32.19 Dental clinics operate twice weekly with a maximum waiting time for routine appointments currently sitting at approximately two weeks. There is no dental hygienist service available.

32.20 Chronic disease management is provided from a combination of on-site healthcare staff and specialist services at the local general hospital.

32.21 There is a specially adapted cell in F Wing which can hold two prisoners with physical disabilities, which is fit for purpose. This room is accessible by a wheelchair, is large enough for two prisoners to move around in and live comfortably and has a fully accessible integral wet room. However the area requires a degree of cleaning and repair, for example the shower curtain is stained and frayed and the wet room flooring would benefit from deep cleaning or replacement. Whenever possible prisoners with a physical disability will be held in this cell.

32.22 In addition A and B Hall and E Wing each have a cell that would be used to house a prisoner with physical disabilities if required, however these cells are not fit for purpose. The doors on the cells in A and B Hall have been widened to allow wheelchair access, however there have been no modifications to the toilet. The toilet in the cell in E Wing has been adapted to allow wheelchair access, however a wheelchair user would have difficulty entering or moving around the cell.

32.23 The communal showering facilities in A and B Hall and E Wing are not adapted for wheelchair use.

32.24 When a female prisoner is temporally lodged in HMP Inverness to attend Court, she will be located in the adapted cell in F Wing. Should a male prisoner be located in this cell he will be temporarily relocated to one of the other designated disabled cells in A or B Hall or E Wing. **This is weakness.**

**Recommendation 53: HMP Inverness should ensure there is adequate and appropriately adapted cells in place to accommodate prisoners with a disability.**

### **STANDARD 33**

**Addictions are dealt with the way most likely to be effective and when they conflict, treatment takes priority over security measures as far as possible.**

33.1 Prisoners can self-refer or be referred to Addiction Services. There is one whole time equivalent Addictions Nurse with a second, vacant Addictions Nurse post being advertised at the time of inspection. There is additional addictions support from an Addiction Support worker, formerly Phoenix Futures, and the attending Doctor service for prescribing support.

33.2 Harm Reduction sessions are facilitated once per week by The Harm Reduction Service, part of the wider NHS Substance Misuse Service. There is evidence of health promotion activities in relation to substance misuse taking place within the prison.

33.3 Prisoners identified as having an addictions problem but who are refusing to take up the offer of active treatment are reviewed by the addictions worker every two to four weeks and more frequently when approaching their release date.

33.4 Interventions are closely linked to those available in the community. These include one-to-one interventions and counselling, group work and structured programmes. The Addictions Team are involved in the induction process promoting involvement with BBV, harm reduction and overdose management. Many of the interventions take place in the Links Centre in small interview rooms with open ceilings which is not conducive to maintaining confidentiality.

**Recommendation 54: HMP Inverness and NHS Highland should ensure that addiction interventions take place in confidential surroundings.**

33.5 Training in the use of Naloxone is delivered in HMP Inverness and those who have received the training are provided with a Naloxone pack on release.

33.6 In accordance with a Patient Group Directive, the model employed by NHS Highland allows for prisoners in HMP Inverness to be trained in the use of both Intramuscular and Intranasal Naloxone delivery methods.

33.7 On liberation, prisoners being released to an address in the Highlands are offered a choice between the two types of application while prisoners released to all other areas are only provided with the Intramuscular delivery system.

33.8 Concerns have been expressed by the National Naloxone Group and echoed by the National Prisoner Healthcare Network regarding the practice of training in both delivery systems. In particular concerns include potential inconsistencies in approach and understanding of the application, its availability out with the Highland area and other possible issues arising from further imprisonment in another establishment.

33.9 Healthcare staff report limited levels of clinical drug testing taking place in HMP Inverness and cite limited staff availability as the reason. However there is insufficient evidence available to support or refute this assertion.

33.10 Providing a clinical environment which ensures confidentiality and appropriate safety for those receiving substitute prescribed medication is challenging in HMP Inverness; substitute prescribed medication is dispensed from a hatch at the entrance to the Health Centre in full view of other prisoners who are also queuing for their medication. In addition, identification checks of the prisoner recipients were observed to be cursory in nature. This may be due to the fact that the prison is small and the majority of prisoners are well known to the Healthcare staff. It is also difficult for the dispensing Nurse to ensure medication such as methadone is fully consumed prior to the prisoner returning to the Hall due mainly to the design of the dispensing



area and the inconsistent approach by the operational staff supervising the prisoners. In some instances, the supervising Officer, rather than stand near to the dispensing hatch, was positioned at the entrance to the Health Centre ensuring that prisoners passing through the main thoroughfare did not attempt to gain access.

**Recommendation 55: NHS Highland should ensure that dispensing of medications is carried out in line with professional protocols, policy and guidance.**

33.11 The issue is compounded by the apparent inconsistent management of prisoners' attendance at the Health Centre and the absence of a dedicated operational staff presence in the area. These circumstances, when combined, often result in a lack of control over when and in what numbers prisoners arrive for treatment.

**Recommendation 56: HMP Inverness should ensure that the management of prisoners' attendance at and their supervision in the Health Centre is safe and efficient.**

33.12 In addition to NHS addiction services, there is a wide range of further Throughcare services and systems in place to provide the continuation of addiction support from prison into the community. These include organisations and programmes such as Apex Scotland, TAS, SMART Recovery and Turning Point Scotland who deliver referrals, pre-release information and intervention options and who take part in multi-agency discussions as part of case conference arrangements. Staff from support organisations regularly attend the prison in person or make contact through video conferencing facilities to establish a contact with prisoners prior to release. **This is an area of good practice.**

33.13 In the event where a prisoner is liberated from Court unexpectedly, procedures are in place to allow the transfer of relevant information, by fax, from the prison to community-based prescribers. **This is an area of good practice.**

## **OUTCOME 9**

**Appropriate steps are taken to ensure that prisoners are integrated safely into the community and where possible into a situation less likely to lead to further crime.**

### **Overview**

Greater emphasis placed recently on prisoners' ability to make and maintain family and community links is encouraging. Constructive pre-release arrangements are delivered frequently with regular opportunities for prisoners to meet with a range of in-prison and community service providers. Although still in its infancy and with limited prisoner involvement, the throughcare service provided by the prison is showing signs of success.

Appropriate risk assessments are in place for prisoners prior to release including those subject to Multi-Agency Public Protection Arrangements (MAPPA) and Home Detention Curfew (HDC). The number of new applications being considered for HDC is low and has reduced in direct correlation with the high number of prisoners being transferred out of the establishment as a result of overcrowding.

### **STANDARD 34**

**The prison has a policy on links with families and with the local community and allocates staff time to implement it.**

34.1 HMP Inverness has recently developed its Children and Families Strategy Group and actively encourages links with local community service providers and voluntary groups.

34.2 The prison has formed positive relationships with local schools and host 'Apprentice Days'; a Council sponsored youth programme for older teenagers from the local community.

34.3 The prison regularly engages with organisations including the local Probus, the Eden Court Theatre and the local radio station.

34.4 Prisoners have participated in one-off projects for local charities, ranging from engaging in book sorting to dog bed production.

### **STANDARD 35**

**Arrangements are made for prisoners to leave with somewhere appropriate to live, healthcare, continuity assured, a chance to find work and build social links.**

35.1 There are good pre-release arrangements in place.

35.2 For those prisoners sentenced to 12 months and over, a meeting with their Personal Officer takes place six weeks before their release date to ensure that all issues identified from their core screen assessment have been addressed.

35.3 A pre-liberation group is convened every week for those prisoners whose release dates fall within the following ten days to two weeks. The group is facilitated

by a Residential Officer and a member of the NHS team and allows prisoners to reflect on their offending behaviour. It also provides useful information packs regarding harm reduction and addictions and delivers awareness around tolerance, BBV, Naloxone treatment, and dealing with overdose. The group also offers opportunities for one-to-one interviews with relevant service providers to discuss discharge grant applications, housing arrangements and benefits and travel requirements.

35.4 A multi-disciplinary weekly meeting takes place in the Links Centre, attended by service providers, in order to discuss their clients and ensure that the services provided are meeting the needs and throughcare requirements of the individual. Additionally, this meeting affords providers the opportunity to share information and ensure that there is no duplication of services. **This is positive.**

35.5 The prison operates a throughcare service based on the model currently being piloted in HMP Greenock. Three officers are involved in delivering the service, which has been in operation since July 2013, and have worked with two prisoners to date. This service supports individuals on liberation and provides them with support and advice for up to six weeks post custody. The target group is those prisoners over the age of 25 who are motivated and have responded positively while in custody and who, due to their age, would not be eligible for inclusion in the throughcare Public Social Partnership (PSP), 'New Routes' delivered in HMP Inverness by Turning Point Scotland.

35.6 The prison maintains a Home Detention Curfew (HDC) tracker on their local SharePoint site to ensure that applications for this early release scheme are properly managed within the required timescales. The scheme is well administered with overall management responsibility sitting with the Residential Unit Manager. At the time of the inspection, there were three prisoners subject to HDC in the community from HMP Inverness. The number of new applications being considered by the prison has reduced as the number of prisoners transferred out has increased with the monthly applications now averaging only six.

35.7 The number of prisoners subject to Multi-Agency Public Protection Arrangements in the prison is relatively low. The procedures in place to manage such cases include identification of MAPPAs offenders, completion of relevant documents including electronic records and appropriate attendance at MAPPAs meetings. The quality of information sharing with other interested agencies is good and reflects the value the prison places on positive working relationships with its community partners.

## RECOMMENDATIONS

### PART 1: SAFETY

#### STANDARD 1

**Prisoners are safe at all times; while being escorted to and from prison, in prison and while under escort in any location.**

**Recommendation 1:** HMP Inverness should ensure that the clinical interview room in Reception is clean and fit for purpose.

**Recommendation 2:** HMP Inverness should ensure that prisoners are supervised when providing a urine sample for the purpose of drug screening.

**Recommendation 3:** HMP Inverness should ensure that all prisoners sit on the Body Orifice Security Scanner (BOSS) chair prior to being interviewed by staff.

**Recommendation 4:** HMP Inverness should ensure confidentiality is maintained during prisoner interviews in Reception.

**Recommendation 5:** HMP Inverness should ensure that all information contained in the Prisoner Escort Record (PER) form is passed to the relevant functions.

**Recommendation 6:** HMP Inverness should ensure that prisoners are not located in a cell until the ACT 2 Care admission interviews have been completed.

**Recommendation 7:** HMP Inverness should ensure signage is in place for prisoners whose first language is not English to identify their preferred language.

**Recommendation 8:** HMP Inverness should ensure First Night and First Morning in Custody Checklist discussions are conducted in private.

**Recommendation 9:** HMP Inverness should ensure that prisoners are held safely within Reception.

**Recommendation 10:** HMP Inverness should ensure that all Contingency Plans are version controlled and up-to-date.

**Recommendation 11:** HMP Inverness should ensure that the relevant, complete and up-to-date 'Orders' are issued to all patrol staff.

**Recommendation 12:** HMP Inverness should develop and implement a robust cell call response protocol.

**Recommendation 13:** HMP Inverness should ensure that Senior Managers' visits out with normal working hours are recorded in the occurrence book.

**Recommendation 14:** HMP Inverness should ensure 'Safer Cells' are upgraded to full 'Anti-Ligature' Cells.

**Recommendation 15:** HMP Inverness should ensure that a protocol is in place for use in the event of a women prisoner being held in the 'Safer Cell' in F Wing.

**Recommendation 16:** HMP Inverness and NHS Highland should ensure that infection control policies are applied correctly across the prison to control and prevent the spread of contagious diseases.

**Recommendation 17:** The Scottish Prison Service should ensure a national policy for the management of prisoners on dirty protest is designed and implemented across the estate as a matter of urgency.

**Recommendation 18:** HMP Inverness should ensure that approved infection control compliant hand washing sinks and seamless skirting are installed in the Health Centre and Dental Suite.

## **STANDARD 2**

**Force is only used as a last resort and then strictly according to law and procedures.**

**Recommendation 19:** HMP Inverness should ensure all parts of the Control and Restraint removal documentation are completed in all cases.

**Recommendation 20:** HMP Inverness should ensure that consideration is given to the video-recording of all planned Control and Restraint removals.

## **STANDARD 3**

**Prisoners are protected from violence and harm by other prisoners.**

**Recommendation 21:** HMP Inverness should consider implementing a Violence Reduction Strategy to analyse all acts of violence and support the work done by the Tactical Tasking Co-ordination Group.

**Recommendation 22:** HMP Inverness should ensure their regime and staff deployment are fully risk assessed.

**Recommendation 23:** HMP Inverness should use the recognised Scottish Prison Service Anti-Bullying Strategy.

## **STANDARD 4**

**Security levels for individuals are no higher than is necessary to meet the risk presented by the prisoner.**

No recommendations.

## **STANDARD 5**

**Procedures for deciding security levels are as transparent as is compatible with the sensitivities of the decision.**

**Recommendation 24:** HMP Inverness should ensure that Prisoner Supervision System (PSS) Reviews are completed in accordance with Scottish Prison Service guidelines.

## **PART 2: DECENCY, HUMANITY AND RESPECT FOR LEGAL RIGHTS**

### **STANDARD 6**

**The standards that apply to the treatment of prisoners in prison extend to all other places where they are held.**

No recommendations.

### **STANDARD 7**

**The accommodation is clean and provides a reasonable amount of space for each prisoner, with space for personal belongings, ventilation, a reasonable temperature, natural light.**

**Recommendation 25:** HMP Inverness should ensure that the population in all residential areas does not exceed its design capacity.

**Recommendation 26:** HMP Inverness should ensure cell and dormitory furniture and fittings are of an acceptable standard.

**Recommendation 27:** HMP Inverness should take immediate action to upgrade the 'Separate Cells'.

### **STANDARD 8**

**Prisoners are allowed into the open air for at least one hour a day every day.**

**Recommendation 28:** HMP Inverness should ensure proper storage and drying facilities are available for clothing used by prisoners during inclement weather.

### **STANDARD 9**

**Personal clothing is in decent condition, washed frequently and fits.**

**Recommendation 29:** HMP Inverness should ensure that prisoners are issued with new underwear and socks.

**Recommendation 30:** HMP Inverness should consider allowing prisoners to retain the footwear they are wearing on admission, if appropriate and suitable.

### **STANDARD 10**

**Bedding is supplied and laundered at frequent intervals.**

No recommendations.

### **STANDARD 11**

**Sanitary arrangements take account of health, hygiene and human dignity.**

No recommendations.

### **STANDARD 12**

**Food is adequate for health, varied and religiously and culturally appropriate.**

**Recommendation 31:** HMP Inverness should review the system for washing prisoners' cutlery.

**STANDARD 13**

**Respect is the underlying basis of all interactions between staff and prisoners**

No recommendations.

**STANDARD 14**

**Security measures such as searching are carried out with regard to the protection of human dignity.**

**Recommendation 32:** HMP Inverness should ensure that all searching is carried out with regard to the protection of human dignity.

**STANDARD 15**

**Family visits are given high priority in terms of frequency, length and quality and are not restricted as part of any disciplinary or control process.**

**Recommendation 33:** HMP Inverness should ensure that prisoners can access and understand the purpose of and criteria for 'family' visits.

**Recommendation 34:** HMP Inverness should consider extending the duration of prisoners' visits.

**Recommendation 35:** HMP Inverness should ensure that all prisoners are afforded equal time with their visitors.

**STANDARD 16**

**Visitors are well treated**

No recommendations.

**STANDARD 17**

**Visits take place in the most relaxed environment compatible with security.**

No recommendations.

**STANDARD 18**

**Telephone contact is made as easy as possible.**

No recommendations.

**STANDARD 19**

**Letter contact is made as easy as possible**

No recommendations.



**STANDARD 20**

**Staff are aware of their duty of care to give prisoners their legal rights. They know what these rights are. They accept the legitimacy and meet their obligations under it promptly.**

No recommendations.

**STANDARD 21**

**Staff are aware of their duty to observe the Human Rights of prisoners. They know what these rights are. They accept the legitimacy of that duty and meet their obligations under it promptly.**

No recommendations.

**STANDARD 22**

**Staff are aware of their duty to treat prisoners in accordance with fairness and natural justice. They know what this involves. They accept the legitimacy of that duty and meet their obligations under it promptly.**

**Recommendation 36:** HMP Inverness should ensure that copies of the Prison Rules and legal texts are readily available to all prisoners.

**STANDARD 23**

**Segregation is used sparingly and in accordance with procedures.**

**Recommendation 37:** HMP Inverness should ensure all relevant electronic records are maintained for those prisoners held within the Separate Cells.

**Recommendation 38:** HMP Inverness should ensure that a comprehensive record is maintained of all daily activity for those prisoners held within the Separate Cells.

### **PART 3: OPPORTUNITY FOR SELF-IMPROVEMENT AND ACCESS TO SERVICES AND ACTIVITIES**

#### **STANDARD 24**

**The regime of the prison encourages prisoners to make the most of their time there and to exercise responsibility.**

**Recommendation 39:** The Scottish Prison Service should consider developing a Personal Officer training package.

**Recommendation 40:** HMP Inverness should ensure that a structured process of prisoner consultation is in place.

#### **STANDARD 25**

**A full day's out of cell activities such as work, education, leisure and cultural pursuits, is available for seven days a week.**

No recommendations.

#### **STANDARD 26**

**The programme of work and related training focuses on equipping prisoners for employment on release.**

**Recommendation 41:** HMP Inverness should introduce a greater range of vocational qualifications to support the development of prisoners' skills.

**Recommendation 42:** HMP Inverness should extend work and training opportunities which reflect the current labour market.

#### **STANDARD 27**

**A broad and relevant education programme is available.**

**Recommendation 43:** HMP Inverness and Fife College should ensure that education and learning activities are positively promoted within the residential halls.

**Recommendation 44:** HMP Inverness and Fife College staff should ensure prisoner attendance at the Learning Centre is maximised.

#### **STANDARD 28**

**A range of interventions is in place to encourage prisoners to address those behaviours which may contribute to their offending.**

No recommendations.

#### **STANDARD 29**

**There is a programme of cultural and voluntary activities.**

**Recommendation 45:** HMP Inverness should improve access to both the Library and media resources.

**Recommendation 46:** HMP Inverness and Fife College should ensure that there is appropriate communication between the Library and Learning Centre staff to identify how best they can support offenders' literacy levels.

**Recommendation 47:** HMP Inverness should review the range and quality of their recreational activities.

### **STANDARD 30**

**Opportunities to practise their religion are available to all prisoners.**

No recommendations.

### **STANDARD 31**

**Suitable arrangements to enable prisoners to buy a range of personal and other items that meet prisoners' needs are in place and available and accessible as necessary.**

No recommendations.

### **STANDARD 32**

**Health services of a high quality are available to all who need them.**

**Recommendation 48:** HMP Inverness and NHS Highland should ensure that all prisoners have confidential access to medical personnel.

**Recommendation 49:** NHS Highland should undertake a review of the workforce and skill mix, using national workforce tools, in order to ensure they have the capacity to deliver the relevant level of care to meet the needs of the prisoner population.

**Recommendation 50:** HMP Inverness should ensure that the VISION terminal in Reception is accessible to nursing staff and situated in such a way as to ensure the safety of the user.

**Recommendation 51:** The NHS should ensure that all medical notes are securely transferred.

**Recommendation 52:** NHS Highland should ensure confidential information is appropriately managed.

**Recommendation 53:** HMP Inverness should ensure there is adequate and appropriately adapted cells in place to accommodate prisoners with a disability.

### **STANDARD 33**

**Addictions are dealt with the way most likely to be effective and when they conflict, treatment takes priority over security measures as far as possible.**

**Recommendation 54:** HMP Inverness and NHS Highland should ensure that addiction interventions take place in confidential surroundings.

**Recommendation 55:** NHS Highland should ensure that dispensing of medications is carried out in line with professional protocols, policy and guidance.

**Recommendation 56:** HMP Inverness should ensure that the management of prisoners' attendance at and their supervision in the Health Centre is safe and efficient.

**STANDARD 34**

**The prison has a policy on links with families and with the local community and allocates staff time to implement it.**

No recommendations.

**STANDARD 35**

**Arrangements are made for prisoners to leave with somewhere appropriate to live, healthcare, continuity assured, a chance to find work and build social links.**

No recommendations.

## **GOOD PRACTICE**

### **PART 1: SAFETY**

None.

### **PART 2: DECENCY, HUMANITY AND RESPECT FOR LEGAL RIGHTS**

**Good Practice 1:** The laundry process in HMP Inverness is excellent with prisoners able to send prison issue clothing for laundering on a Monday, Wednesday and Friday and personal clothing on a Thursday. There are no recorded complaints from prisoners in relation to the quality of the laundry service or of items of clothing being damaged or lost. Personal clothing held in Reception can also be laundered on request. Prisoners value this service. Overall the laundry in HMP Inverness is an **area of good practice.**

**Good Practice 2:** On admission to HMP Inverness prisoners are issued with a duvet cover, sheet and pillow case. A selection of prisoners bedding was checked and found to be in good condition. The Laundry Officer holds a stock of bedding and will replace any items that are in poor condition. Additionally there is a system to replace all bedding in the establishment on an annual basis. **This is an area of good practice.**

**Good Practice 3:** Each time a cell is vacated the duvet is laundered ensuring all admissions receive a freshly laundered duvet. Additionally there is a system to ensure all duvets are laundered on a quarterly basis. **This is an area of good practice.**

**Good Practice 4:** There is a shower in Reception. During observation all prisoners were offered and accepted a shower on admission. **This is an area of good practice.**

### **PART 3: OPPORTUNITIES FOR SELF-IMPROVEMENT AND ACCESS TO SERVICES AND ACTIVITIES**

**Good Practice 5:** At the time of the inspection, the prison was delivering three programmed interventions aimed at addressing offending behaviour; Alcohol Awareness, Drug Action for Change and SMART Recovery. Uniquely, HMP Inverness are delivering the SMART Recovery Programme on a rolling basis and co-deliver the programme with Apex and Community-Based Social Work both in prison and in the local community. **This is an area of good practice.**

**Good Practice 6:** Due to the size and nature of the prison, a great number of the prisoner population are known to both prison staff and partner agencies and a weekly meeting of these service providers takes place in the prison which allows for an additional opportunity to consider those individuals each partner is working with and, where appropriate, make further cross-referrals. **This is an area of good practice.**

**Good Practice 7:** Prisoners have access to healthcare provision through a self-referral process. Referral forms are issued on request by Hall staff. Once completed, referrals are deposited in a locked post box which can then only be accessed by healthcare staff. Referrals are collected several times throughout the day allowing healthcare staff to prioritise need through appropriate triage arrangements. **This is an area of good practice.**

**Good Practice 8:** There are good processes in place in relation to communicating health-related information at the point of the prisoner's release. On liberation, prisoners are provided with a health-related discharge letter and information is also sent directly to the prisoner's community healthcare provider. Where appropriate, community-based providers visit the prisoner to establish contact prior to release. This pre-release contact can also be accommodated through the use of video conferencing, for example with a Community Practice Nurse or Community Addictions Worker. **This is an area of good practice.**

**Good Practice 9:** There are no records of unacceptable or unnecessary delay in transferring mentally ill prisoners to more appropriate settings. For those prisoners being transferred to the local facility at New Craigs, arrangements are made easier as the prison's Consultant Psychiatrist also practices at the hospital. This has resulted in greater consistency of approach and improved communications and decision making. **This is an area of good practice.**

**Good Practice 10:** In addition to NHS addiction services, there is a wide range of further throughcare services and systems in place to provide the continuation of addiction support from prison into the community. These include organisations and programmes such as Apex, TAS, SMART Recovery and Turning Point who deliver referrals, pre-release information and intervention options and who take part in multi-agency discussions as part of case conference arrangements. Staff from support organisations regularly attend the prison in person or make contact through video conferencing facilities to establish a contact with prisoners prior to release. **This is an area of good practice.**

**Good Practice 11:** In the event where a prisoner is liberated from Court unexpectedly, procedures are in place to allow the transfer of relevant information, by fax, from the prison to community-based prescribers. **This is an area of good practice.**

## Acronyms

ABS	Anti-Bullying Strategy
ACT 2 Care	Scottish Prison Service Suicide Risk Management Strategy
BBV	Blood Borne Virus
BOSS	Body Orifice Security Scanner
CoS	Church of Scotland
CCTV	Close Circuit Television
CIU	Community Integration Unit
CfE	Curriculum for Excellence
CSRA	Cell Sharing Risk Assessment
C&R	Control and Restraint
FCO	Family Contact Officer
FLM	First Line Manager
FNC	First Night Centre
GPA	Generic Programme Assessment
HMP	Her Majesty's Prison
ICM	Integrated Case Management
ILPs	Individual Learning Plans
MAPPA	Multi-Agency Public Protection Arrangements
PCF	Prisoners Complaint Form
PEEP	Personal Emergency Evacuation Plan
PER	Prisoner Escort Record
PIACs	Prisoner Information Action Committees
PLHs	Prisoner Learning Hours
PR2	Prisoner Records Version 2
PSS	Prisoner Supervision System
PT	Physical Training
RC	Roman Catholic
RMT	Risk Management Team
SCQF	Scottish Credit and Qualification Framework
SQA	Scottish Qualifications Authority
SPS	Scottish Prison Service
SRU	Separation and Reintegration Unit
TTCG	Tactical Tasking Co-ordination Group
WTE	Whole Time Equivalent

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