

COVID-19 PANDEMIC EMERGENCY

LIAISON VISITS – PRISONS AND COURT CUSTODY UNITS

REPORT ON A LIAISON VISIT TO HMP EDINBURGH

FRIDAY, 1 MAY 2020

Inspecting and Monitoring
<https://www.prisoninspectorscotland.gov.uk/>

DO NO HARM - STAY SAFE - TAKE PERSONAL RESPONSIBILITY

Introduction

This report is part of a programme of liaison visits of prisons to be carried out by HM Inspectorate of Prisons for Scotland (HMIPS) during the COVID–19 pandemic emergency and was conducted under HMIPS' new, albeit temporary, [Liaison Visits Framework for Prisons and Court Custody Units published in April 2020](#).

Background Information

The adapted inspection methodology incorporated into the design of the prison liaison visits, will contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies; known as the National Preventive Mechanism (NPM); which monitor the treatment of and conditions for detention. HMIPS is one of several bodies making up the NPM in the UK.

HM Chief Inspector of Prisons for Scotland (HMCIPS) assesses the treatment and care of prisoners across the Scottish Prison Service (SPS) estate against a pre-defined set of Standards. These Standards are set out in the document [Standards for Inspecting and Monitoring Prisons in Scotland](#).

Process

Prior to undertaking a liaison visit, HMIPS will undertake a risk assessment to determine both the selection of the prison to visit but also the priority areas or focus to discuss with the Governor–in-Charge (GIC). As these are one day visits, core elements of each of the nine Standards as set out in HMIPS' [Standards for Inspecting and Monitoring Prisons in Scotland](#) will be reflected in the COVID-19 commentary and are designed to provide information to prisoners, prison staff, and the wider community on the areas that have been looked at during the course of a liaison visit.

These liaison visit reports will also provide assurance to Ministers and the wider public that scrutiny of the treatment and conditions in which prisoners are held has been continued during the pandemic.

The findings of these liaison visits will be reported to the appropriate bodies for information and action and published on our website.



REPORT ON A LIAISON VISIT TO HMP EDINBURGH UNDERTAKEN ON FRIDAY, 1 MAY 2020 BY HMIPS

HMP Edinburgh was chosen as a pilot site to determine if our adapted methodological approach to scrutiny was likely to be effective.

On entering HMP Edinburgh, HMIPS met with the GIC and his informative briefing highlighting the challenges and successes of managing a complex prison in a crisis, was both detailed and thorough. We welcomed his transparent and honest approach.

Overall findings of visit under Participation, Accountability, Non-discrimination and equality, Empowerment, and Legality (PANEL) principles

The prison management, staff and prisoners are to be congratulated on providing a calm and safe environment during these difficult times. In terms of the PANEL principles:

Participation. Given the context of COVID-19 and the advice received from Health Protection Scotland the establishment was running an extremely limited regime. There were very few options for prisoners to participate in purposeful activity. However, the establishment were providing a range of in-cell activities. The arrival of mobile phones and video visit technology will radically improve participation in family life.

Accountability. There was a clear sense of a prison responding speedily and purposefully, with commitment and integrity, to each new change and development in terms of guidance and protocols around COVID-19 and of considerable efforts being made by SPS and the local GIC to communicate clearly with both staff and prisoners. Prisoners spoke about the positive relationships between staff and prisoners assisting with the transition to a different regime.

Non-discrimination and equality. Ramadan was being observed and Inspectors were content that there was good access to food and worship in line with the Muslim religion. The first prisoner newsletter had been translated into Polish, the highest number of foreign nationals in the establishment.

Empowerment. The more limited regime that the prison has been required to operate to remain within Health Protection Scotland guidelines on COVID-19 inevitably impacted on opportunities in this area. However, the range and quantity of information provided to prisoners on developments was good. More could be done to promote self-learning opportunities.

Legality. In general, the prison is to be commended for doing what it can to stay in line with human rights legislation and OPCAT protocols in what are undoubtedly extremely challenging times for the SPS. However, the challenge for prisoners in being able to access both phones and showers during 30 minute blocks of time out of cell was a concern. Access to legal representation was satisfactory. Access to fresh air was satisfactory for those not isolated, but

inspectors were concerned that, at the time of our visit, those isolated under Rule 41 were not getting any access to phones or fresh air. The prison was implementing Health Protection Scotland guidance on minimising COVID-19 related risks when restricting access to fresh air for those on Rule 41, but this sits uncomfortably with human rights legislation. HMIPS welcomes the fact that SPS guidance on access to phones, showers and fresh air for those in isolation has now changed, but those isolated under rule 41 will still not get access to virtual visit technology, which does not sit comfortably with the principle of equality of access. Implementation of the revised guidance will be monitored by the Independent Prison Monitors (IPMs).

A full list of Action Points from this report can be found at Annex A; and Annex B lists all acronyms used in this report.



COVID-19 commentary

1. COVID-19 updates: HMIPS seeks to understand any issues, challenges or good practice from the impact of COVID-19 that includes testing and tracing, numbers of prisoners tested positive for COVID-19 and the regime for those shielding, isolating or being isolated. Prior to the visit, HMIPS has been in discussion with the Single Point of Contact (SPOC) and received significant information from the SPS to inform their discussion with the GIC. On entering HMP Edinburgh, HMIPS met with the GIC and his informative briefing was detailed and thorough. We welcomed his transparent and honest approach. The proof of concept visit clearly indicated that an invitation should be extended to Healthcare Improvement Scotland (HIS) to join our future liaison visits.

Visit findings

A number of prisoners had been tested for COVID-19, but only one had tested positive when admitted to hospital. The GIC explained the circumstances relating to the death of the one prisoner who had been confirmed as having COVID-19, and the steps that were taken to protect the SPS and NHS staff in the prison who attended to him.

As a result of COVID-19 related restrictions, a Death in Prison Learning, Audit and Review (DIPLAR) was still to take place in relation to the death of this prisoner, and it was not the role of this inspection team to investigate the circumstances of his death. The GIC provided a helpful explanation of the events and actions taken in response to the emergency. It appeared that all NHS and SPS protocols in relation to protecting staff safety and testing had been followed appropriately when attending to this prisoner. The GIC noted that, while the death of the prisoner had been deeply distressing for staff and fellow prisoners, it had brought home to everyone the severity of the risks and the importance of action to minimise the risk of transmission of the virus.

It was highly commendable that at the time of our visit, only one prisoner had tested positive, particularly given the size of the prison population, which indicated that arrangements to control the risk of transmission and suppress the virus in the prison were working well. The GIC recognised the need to maintain vigilance at all times to minimise risks and maintain strong messages around hand washing and social distancing (SD) (which he knew was an ongoing challenge).

At the time of our visit the prison was seeking to work with NHS Lothian to introduce testing of all new admissions. However, the latest advice from Health Protection Scotland on the value of testing people who are not displaying COVID-19 symptoms may dictate against testing all admissions.



COVID-19 commentary

2. Staff absence: we will seek to understand the SPS/NHS staff absence numbers and their impact (some of this information is supplied by SPS HQ on a daily basis).

Visit findings

The GIC gave a very helpful and comprehensive summary at the start of the visit on the number of staff who were on sick leave or special leave isolating or shielding in relation to COVID-19.

At the time of our liaison visit the number of staff on sick leave for non COVID-19 related issues was lower than it had been for several months. Four staff were self-isolating and 57 were social distancing/shielding, with a number of administrative staff working reduced hours and others on special leave related to COVID-19.

At the time of our visit, 28 members of staff had been tested for COVID-19, with six positive results and 22 negative results.

The GIC was confident, however, that the staffing levels were sufficient to safely operate the reduced core day and more restricted daily regime, and the conversations that the inspection team had with both staff and prisoners confirmed that view.

The overwhelming impression was of a calm and orderly atmosphere in the prison, and a regime that was restricted but safe.

Although the reduction in the number of incidents of violence may have been partly linked to the more limited time out of cell, the reduction is nevertheless a welcome development. Similarly, a number of statistics provided by the GIC suggested recent initiatives had at least temporarily helped reduce the circulation of illegal drugs within the prison. Conversations with staff suggested that was their perception too, and that after a difficult first couple of weeks of lockdown things were much calmer.

The next major staffing challenge will come when Scottish Government and Health Protection Scotland guidance shifts to the point that they could consider moving back towards a more normal regime, which would require more staff to return to work. It was recognised that further planning needs to take place to prepare for a gradual return to normality.

The NHS prison health care team had four staff absent due to sick leave or COVID-19 related absences, which represented 10% of the total healthcare team of 40. While this added to the pressures on the rest of the team it was manageable with other members of staff doing extra hours. The reduced core day and fewer admissions was also helping them manage the situation.



HMIPS Standard 1 - Lawful and Transparent Use of Custody

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

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

COVID-19 commentary

3. Social distancing: we will check how social distancing is being managed in areas such as dining halls, recreation, reception, time in the fresh air, and especially admissions and cell sharing. This will also include looking at preventative measures being enacted, such as screening on admission and liberation. We are particularly interested in the measures to mitigate the detrimental effects of social isolation or quarantine.

Visit findings

It was clear that Social Distancing (SD) is extremely difficult to adhere to at times, for example when staff have to deal with spontaneous acts of violence. The main corridor running the length of the prison and the main thoroughfare is not wide enough to allow people to pass two metres apart. Inspectors witnessed staff attempting to maximise the distance they could when passing each other by facing away.

Inspectors witnessed meal times, where prisoners were unlocked in a controlled manner to adhere to SD guidelines, although SD sometimes broke down at the serving hatch. Due to SD guidelines there was no communal dining allowed. Some of the older, more infirm prisoners had their meals delivered to their cells by pass men wearing pantry whites and gloves. Whilst HMIPS recognise the HPS advice, we would recommend that the SPS consider taking the extra precaution of these passmen being asked to wear masks.

Fresh air is offered throughout the day in small groups for approximately 30 minutes. This was generally facilitated in a controlled SD fashion; however, inspectors witnessed female prisoners in Ratho congregating in a group at the exit to the exercise yards. Those prisoners that inspectors spoke to indicated they were more worried about others bringing in the COVID-19 virus than contracting it from each other. They had formed an opinion that their area was safe from COVID-19 due to the lack of prisoners being transferred in from other prisons since lockdown, and that they treated their living areas as one big household.

Inspectors witnessed staff in reception dealing with prisoners leaving the prison for appointments dressed in full Personal Protective Equipment (PPE) when searching. Lines were marked on the floors to allow for SD. Those identified as having COVID-19 symptoms on admission were taken directly to an area in the prison for

isolation purposes, bypassing reception. Speaking to a number of prisoners it was clear that the restrictions in place were difficult for them to deal with, but they understood the necessity. There were good examples of in-cell activity to minimise boredom with the use of crosswords, Sudoku's, colouring in books, reading material, and the prison TV channel which offered a number of topics of information including good mental and physical health.

Action Point 1: the GIC to continue to reinforce messaging to staff and prisoners on importance of maintaining social distancing



HMIPS Standard 2 - Decency

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

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

COVID-19 commentary

4. Meals: we will check if meals are of good quality, whether there is an appropriate choice in particular on religious grounds, and that food hygiene standards and dietary needs of prisoners are adhered to.

5. Regimes: we will look to obtain detail of the continuation of daily regimes, including access to showers where there are no in-cell shower facilities, access to time in the fresh air and access to family contact.

Visit findings

Inspectors visited the kitchen and spoke to staff. A reduced number of prisoners were working in the kitchen, but a full menu was being offered on the weekly cycle. The serving of meals was also observed in Ratho, Glenesk and Hermiston. Prisoners spoken to were content that there had been no noticeable variation in the quality or offerings for meals. Some prisoners explained that due to the lack of activity, meal times had taken on added significance.

Prisoners who wished to observe Ramadan appeared to be able to do so, being provided meals in flasks and packs to break their fast in the morning. Inspectors did not speak to any prisoners observing Ramadan, but a prisoner working in the servery on one of the halls stated he was not aware of any problems.

Prisoners across the residential areas stated that they had access to cleaning materials to keep their cells clean. They were also able to get personal hygiene products from the prison if required or were able to buy toiletries from the canteen. One prisoner complained about having less time to clean the food service area in their hall as a result of the more restricted core day, but the area was clearly being thoroughly cleaned.

Only essential services were being run in the prison. All prisoners, except those in isolation, were being offered a minimum of one hour out of their cells each day. This comprises 30 minutes to use the phone and have a shower, and 30 minutes for fresh air if they wish. Prisoners were let out in small groups which act as 'households'. Prisoners reported that due to the lack of time out of cell there could be tensions when accessing the phones or showers. Prisoners verified that staff would try to

facilitate other opportunities out of cell for people who had not been able to get on the phones during their period of unlock.

Prisoners were pleased to hear of plans for mobile phones (in-cell telephony) to be provided and in the main grateful for the GIC's communications about these issues, but mobile phones were still to arrive.

Action Point 2: whilst HMIPS welcome the fact that the roll out of in-cell telephony and virtual visits had now begun, this must be completed as quickly as possible to ensure improved and supportive family contact.

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

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

COVID-19 commentary

6. Talk to Me live cases: we will check that there is an appropriate and ongoing process in place for people subject to Talk to Me procedures and prisoners and staff are using referral systems.

7. Rule 41 paperwork: we will check that the revised process for people being detained under Rule 41 due to COVID-19 are being adhered to. We will enquire into processes in place to ensure in-cell activity is available, and a television is available to those who are isolated. We will also be interested in the numbers of people on Rule 41 and the length of time held under this Rule.

Visit findings

Inspectors spoke to a number of prisoners who were on Talk to Me (TTM). All confirmed that they had been treated well and understood the process. Paperwork was checked and found to be of a good standard, with case conferences held timeously. One individual indicated that although she had been on TTM on a number of previous occasions, where she would end up in a safe cell, this time the case conference had looked at a different approach. By using more distraction techniques, such as the material produced by the prison to alleviate boredom, they had been successful in breaking her cycle of normal deterioration. The prisoner also noted that staff seemed to have more time to chat and deal with her problems during this period of lockdown than previously. The latest TTM figures indicated that there had not been an increase of cases during this period, with figures being similar to those months pre COVID-19. However, it is important to note that staff spoke of the difficulties in identifying the more vulnerable, due to the lack of opportunity to observe prisoners as they were spending less time out of cell.

There were no prisoners on Rule 41 due to COVID-19. Two prisoners had previously been isolated due to contact or suspected contact with COVID-19 people. One prisoner had shared a cell with a suspected COVID-19 carrier in a Police cell, and the other shared a cell with a prisoner who subsequently died in hospital of suspected COVID-19 symptoms.

Inspectors were content that those in isolation had been given in-cell activity including a TV. At the time of the liaison visit, the COVID-19 Rule 41 guidance did not allow those in isolation out of their cells for a shower or use of a phone or for fresh air. HMIPS welcomes the fact that the guidance has now changed so that those in isolation must be given access to the fresh air, showers and the communal phone. However, only with the arrival of mobile phones will they get easy access to their families and, unlike other prisoners, they are still denied access to virtual visit

technology, which does not sit comfortably with equality of access under human rights legislation.

Action Point 3: SPS to ensure that those in isolation are quickly provided with a phone when rolling out in-cell telephony locally and review scope to provide access to virtual visit technology for those in isolation



HMIPS Standard 4 - Effective, Courteous and Humane Exercise of Authority

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

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

COVID-19 commentary

8. Rule 95 paperwork: we will check that those under this Rule are treated lawfully and with humanity, and there is a sufficient regime in place and adhered to. The Separation and Reintegration Unit (SRU) is a default check by HMIPS at all times.

Visit findings

Inspectors visited the SRU during the visit. The Unit was almost at full capacity with 12 prisoners located. All were held lawfully with two prisoners held on Rule 95(1), three prisoners held on Rule 95(11), five prisoners held on Rule 95(12), one prisoner was refusing to return to circulation after his Rule had been completed and one prisoner was on Rule 41 due to their mental health. The SRU ran a good regime with all prisoners given the opportunity for daily access to fresh air, a shower, and the use of the phone. Due to COVID-19 restrictions the SRU gym was closed at this time.

It was noted that staff were not adhering to SD within the team. However, due to the roster, generally it was the same staff working together and they appeared to feel safe. When attending each cell as per SRU guidelines (minimum of three persons), staff were in close proximity without the use of PPE other than gloves. The SRU stored their own basic PPE supplies but full PPE had to be sourced from elsewhere in the prison. Inspectors spoke to a team of first responders whose responsibility was to attend violent incidents, who confirmed that they did not attend these incidents in PPE unless they were informed that the prisoner(s) showed signs of COVID-19, as per SPS policy. Given the close proximity required of first responders and the subsequent potential for transmission risk, HMIPS recommends that the SPS policy indicates the use of PPE as the default position.

Action Point 4: SPS HQ to review the protocols around the use of PPE in the SRU and for first responders and consider whether they need updating in the light of COVID-19 guidance on SD.



HMIPS Standard 5 - Respect, Autonomy and Protection Against Mistreatment

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

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

COVID-19 commentary

9. Access to families contact: we will look at what access prisoners have to telephones or other measures (for example, email a prisoner, video link, mobile phones, etc) in order to keep in contact with friends and family. Monitoring the implementation and impact of agreed actions such as increased availability of virtual visits or the provision of access to mobile telephones, tablets, and incoming and outgoing mail is a default position for HMIPS.

10. Access to recreation: we will check what type of social interaction takes place, and opportunities for fitness, distraction, and learning.

11. Access to legal representative: we will check that agents and other statutory visits are being facilitated even when prisoners are isolated under medical grounds for COVID-19.

12. Access to information: we will look at the access to books, DVDs, CDs, including reference material. In particular, we will look at the complaints system and the quantity and quality of prisoner information on COVID-19 and the prison's response.

Visit findings

Inspectors spoke to prisoners in all the residential areas. Whilst all prisoners, except those on Rule 41, were given the opportunity to access a phone and a shower within a 30 minute period this did not mean that this timeframe met the needs of the population. Prisoners reported frustration that some took longer than others to shower and use the phone with staff appearing reluctant to intervene. This was a common theme across all the residential areas as the number of existing phones is limited. As stated elsewhere, the roll out in-cell telephony by SPS must be expedited quickly.

The only other method of family contact currently was through mail or email a prisoner services. Female prisoners on Ratho were concerned about a recent

change in policy whereby incoming mail is photocopied to try to reduce the levels of drugs within the prison. Whilst they understood the rationale, they felt they were being unfairly targeted, and the system was not being implemented on the other halls. While sympathetic to their concerns, inspectors believe the action is proportionate to the risk, and they were reassured that the photocopying happens in all residential areas.

Access to DVDs and books was more restricted for prisoners in one hall, apparently due to a misunderstanding by staff around protocols to restrict transmission of COVID-19. When this was brought to his attention, the GIC undertook to address this speedily.

Action Point 5: HMP Edinburgh to provide evidence that measures to photocopy correspondence are being applied in an equitable way across all halls.

Action Point 6: HMP Edinburgh to ensure that all prisoners can access books and DVDs from the hall libraries.

HMIPS Standard 6 - Purposeful Activity

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

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

COVID-19 commentary

13. Access to fresh air: we will look at the provision for fresh air for all prisoners and note where access is denied and the authority to do so.

14. Communication: we will look at the communications/information that is in place regarding any changes to the regime, or other functions within the prison, for all relevant parties including prisoners, their families, and other relevant agencies regarding the COVID-19 pandemic, ensuring that all communications/information is in a format/language people can understand.

15. Access to education: we will look at what access prisoners have to education, and if prisoners are able to continue with their current education or start new ones. Initiatives in education and learning will be documented.

16. Access to religious services: we will look at any initiatives involving religious services including pastoral visits, remote linked services, information loops on in-house media, or religious information pamphlets.

17. Access to gym and fitness: we will look at what the establishment has in place for fitness. In particular, we will inspect any alternative fitness initiatives, for example in-cell fitness activities, circuit training, satellite gyms, etc.

Visit findings

All prisoners had access to 30 minutes of fresh air, unless on Rule 41. Inspectors observed exercise sessions from Hermiston, Ingliston and Ratho, and spoke to prisoners during their sessions who confirmed that exercise was offered every day.

As noted previously, satellite gyms were closed, but inspectors observed laminated exercise sheets on display on some exercise yards. The prison informed inspectors of plans to deliver opportunities for fitness sessions in the fresh air using physical exercise instructors.

Prisoners on all halls stated they had appreciated the information provided by the GIC and by hall staff. There was some frustration that some of the things the GIC

had informed them of had yet to be realised, for example the in-cell telephony and virtual visits. Inspectors were pleased to see that HMP Edinburgh had converted the first prisoner newsletter into Polish, as this was the most common foreign language in the prison.

Prisoners were able to observe Ramadan, in the normal fashion. Religious services were being provided through the prison TV channels and limited pastoral care was available where required.

There was no formal education provision being provided as a result of the need to comply with Health Protection Scotland guidelines. In-cell activities were being created, but these seem to have been done by hall staff. Although self-learning packs had apparently been provided by Fife College, inspectors did not see evidence of them in HMP Edinburgh.

Action Point 7: HMP Edinburgh to ensure in-cell learning packs are available for all prisoners, and SPS and Fife College to explore how self-learning opportunities can be developed further.



HMIPS Standard 7 - Transitions from Custody to Life in the Community

Prisoners are prepared for their successful return to the community.

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

COVID-19 commentary

18. Prisoners on release: we will look at the plans developed with those leaving custody regarding access to services, that is housing, healthcare, welfare services, and opportunities to utilise their time constructively.

Visit findings

Inspectors spoke with the team working on release plans for those expected to get released under the emergency early release scheme (EER), along with those already scheduled for liberation, however it was not yet possible to confirm the exact criteria and therefore who would be released under the EER. The team were acutely aware of the need to be extremely careful in their communication with those who might be released under EER, while still working with them on their release plans.

Staff felt they had been given sufficient time to prepare adequately for these releases and arrangements were in hand. They were dependent as always on the support and co-operation of other agencies such as the Department for Work and Pensions and housing advice services. These arrangements did not appear to have suffered as a result of COVID-19 pressures; indeed, in the case of one local authority co-operation might even improve as a result of an information sharing agreement having recently been signed. This is good practice.

The team were aware of the need to consider any health care support needs that might be required in relation to anyone due to be released who might exhibit COVID-19 related symptoms close to their release date.

While arrangements appeared satisfactory, the sheer range of inter-dependencies and risks around release plans imply further monitoring by HMIPS and an invitation to HIS to look at the healthcare arrangements would be appropriate.

Action Point 8: HMIPS to continue to monitor release planning carefully.

Action Point 9: HMIPS to invite HIS to take part in future Liaison Visits.



HMIPS Standard 8 - Organisational Effectiveness

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

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

COVID-19 commentary

19. Staffing and regime: we will look to establish if staff understand their roles and what is expected of them. Are staff updated on any changes and are knowledgeable of the present position of the establishment.

Visit findings

Inspectors interacted with a wide range of staff during the visit, all of whom confirmed that they felt fully informed of developments within the prison in relation to COVID-19 and other matters. All staff with whom inspectors spoke expressed confidence in their understanding of the role expected of them; indeed some said that the move to a more restricted regime that was more in line with the normal weekend regime actually made life easier for them.

A few exceptions to the clarity expressed above emerged in relation to the following:

- SD – it was observed that both staff and prisoners were not always following the requirement to maintain two metres distance.
- Uncertainty around guidance from SPS HQ on access to phones for those in isolation for confirmed or suspected COVID-19.
- Confusion amongst staff in Ingliston around instructions regarding the borrowing of DVDs by prisoners and action to minimise transmission of the COVID-19 virus.

The GIC was already aware of the challenges in relation to maintaining SD and working to reinforce messages on that, and undertook to respond swiftly to the other issues when they were drawn to his attention in the debrief at the end of the visit.

Morale and motivation amongst staff appeared to be very high, and both SPS HQ and local management are to be congratulated on that. The only issue raised with Inspectors related to frustration that staff who were currently on COVID-19 related special leave would have the option to retain holidays to take when the lockdown

ended, or even sell them back to the SPS for additional remuneration. This was contrasted with those staff in work, who were obliged to take leave now and had no option to sell holidays back for additional remuneration. This was perceived to be unfair to those working hard to keep the prison running. The SPS has issued a clear steer that those on paid special leave cannot apply for annual leave buy back. An updated policy steer from SPS HQ has also been issued re taking annual leave whilst on paid special leave, but the presumption is operational and non-operational staff should take leave as planned.



HMIPS Standard 9 – Health and Wellbeing

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

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

COVID-19 commentary

20. Healthcare issues: we will check that there is a daily assessment on wellbeing in a way that maintains the health and safety of all parties, and that there are measures in place to ensure healthcare continues to be managed under the principle of equivalence including health checks on admission, liberation, and transfer and escalation procedures. Checking processes are in place to support people with pre-existing health conditions.

Visit findings

The liaison visit took place without the attendance of HIS inspectors. The inspectors met with one of the Healthcare Managers to discuss issues with healthcare due to the COVID-19 restrictions.

The majority of the clinics have been stopped. The Blood Borne Virus Clinic was stopped as a result of laboratories prioritising COVID-19 testing. This has caused a reduction in referrals to addictions. Healthcare have continued to administer vaccinations to those that require them and also looked to fill the gaps left from other cancelled clinics. However, there has been continued support from the specialist GP on addictions and the addictions psychologist who attends the prison on a regular basis.

Other areas such as the therapeutic service, and Change, Grow, Live (CGL) which deals with mental health, have also been cutback, reducing the referrals to the mental health team. The mental health team have looked to pick up on some of the work missed by these cutbacks which has been made easier due to fewer clinics running on a weekly basis and therefore more time to deal with shortfalls in provision.

Due to the restrictions, medications have been easier to administer. An additional dispensary, which was planned before COVID-19, is now running in Ingliston Hall. This has halved the medication time for those on methadone. NHS are confident that this will still be the case when the prison eventually returns to its original regime.

Although appointments for serious complaints are still being attended to at outside hospitals, non-urgent appointments have been cancelled. This will undoubtedly create a backlog when things return to normal.

An unintended consequence of COVID-19 is that, due to the prison being on a core day the Health Centre has more staff. Previously the roster had included a staggered start and finish to deal with the prison regime. This is no longer the case, most staff start together with only two staff assigned for reception cover on a daily basis, who attend to court admissions. However, due to reduced courts this is now a rare occurrence

Action Point 9: HMIPS to invite HIS to take part in future Liaison Visits.

Conclusion

HMIPS would like to thank HMP Edinburgh's GIC, staff and prisoners for their welcome, honesty and co-operation in facilitating the first prison liaison visit in the COVID-19 pandemic.

The prison management, staff and prisoners are to be congratulated on providing a calm and safe environment during these difficult times. Reducing the risk of transmission was an appropriate primary concern and we welcomed the measures taken and the thoughtful considerations that ensued. HMIPS looks forward to the implementation of the expanded family contact opportunities due in June 2020, and the additional regime and activities proposed.

We also welcomed the SPS response to HMIPS' concerns regarding elemental human rights and congratulate the SPS, and in turn the GIC, for their swift and proportionate response to the emergency.



List of Action Points

Action Point 1: the GIC to continue to reinforce messaging to staff and prisoners on importance of maintaining social distancing

Action Point 2: whilst HMIPS welcome the fact that the roll out of in-cell telephony and virtual visits had now begun, this must be completed as quickly as possible to ensure improved and supportive family contact.

Action Point 3: SPS to ensure that those in isolation are quickly provided with a phone when rolling out in-cell telephony locally and review scope to provide access to virtual visit technology for those in isolation

Action Point 4: SPS HQ to review the protocols around the use of PPE in the SRU and for first responders and consider whether they need updating in the light of COVID-19.

Action Point 5: HMP Edinburgh to provide evidence that measures to photocopy correspondence are being applied in an equitable way across all halls.

Action Point 6: HMP Edinburgh to ensure that all prisoners can access books and DVDs from the hall libraries.

Action Point 7: HMP Edinburgh to ensure in-cell learning packs are available for all prisoners, and SPS and Fife College to explore how self-learning opportunities can be developed further.

Action Point 8: HMIPS to continue to monitor release planning carefully

Action Point 9: HMIPS to invite HIS to take part in future Liaison Visits.



Acronyms used in this Report

CGL	Change, Grow, Live
COVID-19	Coronavirus Disease
DIPLAR	Death in Prison Learning, Audit and Review
EER	Emergency Early Release
GIC	Governor-in-Charge
HIS	Healthcare Improvement Scotland
HMIPS	HM Inspectorate of Prisons for Scotland
HMP	Her Majesty's Prison
IPM	Independent Prison Monitor
NPM	National Preventive Mechanism
PANEL	Participation, Accountability, Non-discrimination and equality, Empowerment, and Legality
PPE	Personal Protective Equipment
OPCAT	Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment
SD	Social distancing
SPOC	Single Point of Contact
SRU	Separation and reintegration Unit
SPS	Scottish Prison Service
TTM	Talk to Me

