

HMP DUMFRIES

FULL INSPECTION – 20-31 JANUARY 2020



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The full inspection findings and overall rating for each of the quality indicators

INTRODUCTION AND BACKGROUND

This report is part of the programme of inspections of prisons carried out by HM Inspectorate of Prisons for Scotland (HMIPS). These inspections 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 21 bodies making up the NPM in the UK.

HM Chief Inspector of Prisons for Scotland (HMCIPS) assess 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', published in May 2018 which can be found at <https://www.prisoninspectorescotland.gov.uk/standards>

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. They also provide assurance to Ministers and the public that inspections are conducted in line with a framework that is consistent and that assessments are made against appropriate criteria. While the basis for these Standards is rooted in International Human Rights treaties, conventions and in Prison Rules, they are the Standards of HMIPS. This report and the separate 'Evidence Report' are set out to reflect the performance against these Standards and quality indicators.







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

- obtaining information and documents from the SPS and the prison inspected;
- shadowing and observing SPS and other specialist staff as they perform their duties within the prison;
- interviewing prisoners and staff on a one-to-one basis;
- conducting focus groups with prisoners and staff;
- observing the range of services delivered within the prison at the point of delivery;
- inspecting a wide range of facilities impacting on both prisoners and staff;
- attending and observing relevant meetings impacting on both the management of the prison and the future of the prisoners such as Case Conferences; and
- reviewing policies, procedures and performance reports produced both locally and by SPS headquarters specialists.

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

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

1. A colour coded assessment marker

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

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

This report provides a summary of the inspection findings and an overall rating against each of the nine Standards. The full inspection findings and overall rating for each of the quality indicators can be found in the 'Evidence Report' that will sit alongside this report on our website.

THE COVID-19 PANDEMIC

The findings and recommendations contained in this report relate to the circumstances HMIPS observed and encountered at the time of the inspection. We are acutely aware, however, that like many other organisations the SPS has been forced to adjust how it operates in response to the unprecedented challenges posed by COVID-19. The SPS has introduced a more restricted regime and shortened core day to follow Health Protection Scotland guidelines to restrict the spread of the virus and protect staff and prisoners safety.

HMIPS fully recognises that some of the issues identified in this report have therefore been overtaken, or in some cases exacerbated, by the action the SPS has been obliged to take in response to the COVID-19 crisis and that, as a result, the SPS and the prison will not be in a position to respond immediately to every recommendation we make. HMIPS nevertheless hope that the SPS and the prison management team will reflect on where action might be possible now in response to our recommendations and that, in the fullness of time, when the prison system is able to return to a more normal operating regime, all recommendations can be fully considered and addressed.

HMIPS recognise and commend the SPS and prison staff at every level of the organisation for their commitment and professionalism in keeping our prisons running in these most challenging of times.

Due to COVID-19, HMIPS has had to temporarily suspend its programme of full inspections and weekly visits by our team of Independent Prison Monitors (IPMs). HMIPS has therefore introduced a remote monitoring framework and system of one day prison inspection liaison visits to provide assurance on the conditions and treatment of prisoners. Reports of our prison inspection liaison visits will be published on our website.



Wash your hands.



Use a tissue for coughs and sneezes.



Avoid touching your face.

www.nhsinform.scot/coronavirus

KEY FACTS

Location

HMP Dumfries is located approximately one mile to the west of Dumfries town centre.

Role

HMP Dumfries serves the local courts and community of Dumfries and Galloway, by holding prisoners remanded in custody, those awaiting sentence and a number who are serving sentences of less than four years. Additionally it provides a national facility for both long and short-term prisoners (STPs) that require separation from mainstream prisoners, due to the nature of their offence.

Accommodation

There are five residential halls and no separation and reintegration unit.

Design capacity

At the time of the inspection, the design capacity was 195 and there were 189 prisoner in custody.

Date of last inspection:

11–22 May 2015

Healthcare provider:

NHS Dumfries and Galloway

Learning provider:

Fife College



OVERVIEW BY THE DEPUTY CHIEF INSPECTOR OF PRISONS FOR SCOTLAND

HMP Dumfries was a high performing establishment and inspectors were impressed by many aspects of the way the prison was managed and operated.

Two Standards were assessed as good and seven were assessed as satisfactory. Twenty examples of good practice were identified and 70 recommendations for improvement were made. The recommendations have been summarised under six key areas in **Annex B**.

Given the positive nature of so much that was observed during the inspection, it is perhaps unfair to pick out particular elements, but some aspects do deserve particular praise.

The overall assessment of 'good' for Health and Wellbeing was most encouraging, and HIS inspectors were particularly impressed by the focused work to prevent relapses with drug and alcohol issues, and the support provided pre-liberation. Arrangements for external health appointments were among the six areas of good practice highlighted under Standard 9, Health and Wellbeing.

Staff/prisoner relationships were almost universally considered to be positive, which is the bedrock of any good establishment. Additionally the relationships between the SPS and a wide range of partner agencies, most notably the NHS, were excellent. The Multi-agency Community Integration Board, for example, worked well.

Crucially, prisoners felt safe and incidents of violence were very low indeed. Effective implementation of the SPS Anti-Bullying Strategy – Think Twice, along with effective searching processes and tight control of the daily route movement, undoubtedly contributed to that successful outcome. Mandatory drug testing was also carried out well.

Case management systems were robust, with detailed case conference discussions, and there was a thorough approach to risk management demonstrated during the inspection, including effective communication with HMP Open Estate. Processes for admissions and induction were sound, although the excellent peer mentor scheme operating in the rest of the prison should be extended to support the admission and induction arrangements.

Employment and training opportunities were of a good quality and available to untried prisoners, which is not often the case and most welcome. All prisoner groupings, again including untried, had sufficient opportunities to access educational provision.

Inspectors were also impressed by the 'Let's Cook' life skills programme and the outcomes it achieved. At the time of our inspection, 75% of those who had previously undertaken the course remained outside the prison system. Inspectors also welcomed the innovative work done with a local organisation to support dementia sufferers. There was much to praise too under the Standard 2 – Decency. HMP Dumfries was one of the cleanest prisons HMIPS have ever visited and good quality secure storage safes for prisoners was also a notable feature.

Inevitably inspectors still found a number of areas where further improvements were needed, some as a direct consequence of the age of the buildings. The lack of accessible cells for prisoners with disabilities was deeply concerning and needs addressed as quickly as possible through the SPS capital programme. The lack of natural light in A Hall was regrettable, and the Life Skills and Links Centre also requires significant capital investment and refurbishment. The quality of outdoor exercise areas could also be improved, as could facilities for the chaplaincy services. Development of a visitor centre would be advantageous if resources allow it.

The other major concern for inspectors related to access to assessments and programmes that are essential to progression. No offence focused programmes were delivered locally, and offence focused work in general was very limited. A more systematic approach could be adopted to gathering evidence on the effectiveness of the support given to individuals. The need to transfer to other prisons to secure access to programmes was a frustration for prisoners. Inspectors would like to see more creative approaches adopted by the SPS to providing offending behaviour opportunities locally and, as an interim measure, more research on the impact of having to transfer to access programmes.

Although case management was handled well in HMP Dumfries, further national guidance and training by the SPS to support operation of the Personal Officer Scheme would assist HMP Dumfries and other prisons. Enhanced training for staff in the management of offence protection prisoners would similarly be useful.

The structures for embedding Equality and Diversity (E&D) thinking were not yet embedded, with no robust E&D Action Plan in place at the time of the inspection. As a consequence, more could be done to promote understanding of other cultures and equality issues.

While recognising that the logistics around public transport, which inhibited the ability of families to visit the prison, were not the responsibility of HMP Dumfries, HMIPS encourages exploration with partner organisations of the scope to make more use of video visits. We hope the suspension of physical visits in response to the coronavirus will have intensified action to look creatively at all alternative visit options.


A few smaller issues were also identified, which could be more easily addressed to deliver improvements. These ranged from better information and support to assist prisoners to understand how to make a complaint, promoting mental health and wellbeing support systems, wider support for bereavement and even providing more waterproof jackets to encourage access to outside exercise. Tighter monthly checks on health and safety (H&S) should also not be difficult to implement.


In conclusion, however, there is no doubt that HMP Dumfries was a safe and well run establishment, with strong visible leadership by the Senior Management Team (SMT), supported by dedicated and compassionate staff who can take pride in the positive endorsement of all their efforts that this report represents.


Stephen Sandham
Deputy Chief Inspector


SUMMARY OF INSPECTION FINDINGS


 **Standard 1 Lawful and transparent custody**
Satisfactory

 **Standard 2 Decency**
Satisfactory

 **Standard 3 Personal safety**
Satisfactory

 **Standard 4 Effective, courteous and humane exercise of authority**
Good

 **Standard 5 Respect, autonomy and protection against mistreatment**
Satisfactory

 **Standard 6 Purposeful activity**
Satisfactory

 **Standard 7 Transitions from custody to life in the community**
Satisfactory

 **Standard 8 Organisational effectiveness**
Satisfactory

 **Standard 9 Health and wellbeing**
Good

STANDARDS, COMMENTARY AND QUALITY INDICATORS

HMIPS Standard 1 Lawful and Transparent Custody

The prison complies with administrative and procedural requirements of the law, ensuring that all prisoners are legally detained and provides each prisoner with information required to adapt to prison life.

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. Information is provided to all prisoners regarding various aspects of the prison regime, their rights and their entitlements. The release process is carried out appropriately and positively to assist prisoners in their transition back into the community.

Inspection Findings Overall Rating: Satisfactory performance

In this Standard, all of the quality indicators were rated as satisfactory. There were two recommendation for improvement.

In terms of the **PANEL** principles for this Standard:

Participation: During admission, prisoners were asked questions to ascertain if they could understand English and if not, language sheets were provided. The admission process allowed prisoners to freely voice their concerns and ask for clarification.

Accountability: There were comprehensive records to show that those prisoners who choose not to attend induction had been offered the opportunity, however there was little other than verbal evidence that staff encouraged the prisoner to attend if they refused.

Non-discrimination and equality: There were different language posters on the wall and induction booklets in the four most common languages of those committed to custody who did not speak English. If other languages were required then they would be printed out. Due to the lack of admissions and liberations it was difficult to gauge how staff would deal with reasonable adjustments and manage those considered to be the most marginalised and vulnerable.

Empowerment: Prisoners returning from court or a new admission were given the opportunity to raise any issues through the Reception Risk Assessment (RRA) and with healthcare professionals. The National induction process was delivered by knowledgeable staff and prisoners were able to freely ask questions and given sound advice at all times. Where there was an observed liberation the process was robust and carried out professionally. Admissions were given general information with regards to processes including how the telephone system worked, fire procedures etc.

HMIPS Standard 1 Lawful and Transparent Custody – Continued

Legality: Prisoners had access to the Prison Rules in the residential areas and the library. All warrants checked were lawful and HMP Dumfries had a good secondary assurance process. It was noted that it was over three years since any detain/liberation in error had occurred. Statutory procedures in line with prisoner identification and registration were competent and it is clear that the staff observed had a good working understanding of Prisoner Records 2 (PR2), warrant calculations and processes aligned to this area. To keep those in the appropriate area and in a place of safety, a Cell Sharing Risk Assessment (CSRA) was carried out for all those entering HMP Dumfries. There was a robust secondary assurance process which also included a further 10% monthly assurance check by the Deputy Governor.

Encouraging observations:

- Care was taken to allocate admissions appropriately according to offence, and the regime design allowed for two different populations to remain separate.
- Induction worked well in that a relaxed atmosphere and staff knowledge ensured all who attended received the required information. It was unfortunate that some individuals on admission refused to attend.
- Reception officers were knowledgeable and understanding, taking care to ensure all admitted or departing prisoners were aware of the procedures

Emerging Concerns:

- First Line Managers (FLM) require to play an active process in ensuring all core screen paperwork is completed before sending to Integrated Case Management (ICM)/Link Centre and a robust assurance process should be considered for implementation.
- HMP Dumfries should make greater effort to engage with those that do not wish to attend induction and record this.

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.

Inspection Findings

Overall Rating: Satisfactory performance

In this Standard, one quality indicator was rated as good and four were rated as satisfactory and one was rated as generally acceptable, giving an overall rating of satisfactory performance. There were two examples of good practice identified and 10 recommendations for improvement.

Inspectors found evidence supporting the achievement of this Standard to be consistent. The age and design of the building did not lend itself to a modern prison experience, but it was generally well maintained throughout. The lack of natural light within the prison was detrimental to both staff and prisoners alike.

With regard to the **PANEL** principles for this Standard:

Participation: This was evidenced in some areas, for example there was evidence of discussions with prisoners across the establishment about food and the canteen. Staff prisoner relationships were generally good, although at times, due to the familiarity between both groups, some processes were not carried out in a typically formalised way.

Accountability: This was partially evidenced. For example prisoners and staff were aware of the lack of sizes and poor quality clothing in some halls, and agreed on its impact on prisoners, but remedies had not yet been achieved. Where prisoners raised concerns through Prisoner Information Action Committee (PIAC) meetings, responses from management did not always provide a full explanation of the reasoning, for example with regards to prisoners requesting access to their own bedding.

HMIPS Standard 2 Decency – Continued

Non-discrimination and equality: Inspectors did not witness any direct discrimination during the inspection, and observed staff working well with prisoners who appeared to have complex needs. The terminology used for the job title of the prisoner responsible for the halal food within the kitchen was outdated and should be changed.

Empowerment: People had access to the basics required for a decent life, such as items to maintain personal hygiene and the ability to have clothes laundered.

Legality: Inspectors did not find anything under this Standard that compromised any domestic or international laws.

Encouraging Observations:

- Suntan lotion was available for prisoners throughout the prison.
- The lockable secure storage safes in every cell were noted as being of good quality and tamper resistant. They were better than has been found in other inspections. All those checked were to be found in good condition, and were of a size to allow the storage of personal items and documents.

Emerging Concerns:

- The skylight on A Hall should be cleared of paint to allow natural light into the halls.
- Where windows need to be blocked to stop the overlooking of neighbouring buildings, this should be done with translucent materials to allow light to enter.
- The population of HMP Dumfries should be reduced to ensure no prisoners are made to share a cell.
- A sufficient number of accessible cells to meet the needs of the population must be provided.
- There is a lack of consistency across the SPS estate on whether or not prisoners should be able to purchase their own bedding.
- The prison should take forward plans for hair and body wash dispensers in communal showers.
- The prison should review with prisoners the condiments and drinking options available in the dining hall.
- The job title 'ethnic cook' should be changed to something more in line with current terminology.

HMIPS Standard 3 Personal Safety

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.

Inspection Findings

Overall Rating: Satisfactory performance

The prison performed solidly against this Standard. Six quality Indicators were rated as satisfactory, and one was rated as generally acceptable, giving an overall rating of satisfactory. Accordingly only one recommendation for improvement has been made.

Against the **PANEL** principles, performance was as follows:

Participation: Inspectors interviewed prisoners who had been subject to Talk To Me (TTM) and confirmed they had been treated with care and compassion and felt involved in the decision making process. When discussing their management plan, prisoners were able to share concerns with staff and felt able to participate. All prisoners that inspectors spoke with indicated that they felt well supported and cared for by prison staff. Where bullying occurred an individualised approach was taken to support the victim. Although not ideal, there were examples where the victim was moved to a different location for their own safety but only after all other options were exhausted.

Accountability: TTM documentation was of a good standard but occasionally there were gaps in recording if contact with families had been discussed. However it was clear that quality assurance checks were carried out by the appropriate Unit Manager and actions taken to rectify any issues.

Instances of violence or bullying were carefully monitored and action taken to identify risks and manage them. Alarms were tested regularly and robust processes were in place on issuing alarms. Contingency plans in paper and format for a wide range of potential incidents were available and to ensure an effective response to incidents, training was in place. Although a few key roles in incident command were yet to be filled, planning was in place to fill these gaps with a reserve pool of suitably multi trained staff in place in a temporary basis. H&S is an integral part of keeping HMP Dumfries safe and regular checks were carried out in conjunction with either the Governor or Deputy Governor. Any actions were forwarded to the areas concerned and checked on completion at the H&S meetings. The Inspectors found that most areas had missed at least one monthly check in the previous year with the residential areas being particularly poor. Senior management support the efforts by the H&S Coordinator to promote compliance, but a more assertive approach would be helpful. This is the only recommendation in this Standard.

HMIPS Standard 3 Personal Safety – Continued

Non-discrimination and equality: Offence-protection prisoners, along with others, expressed confidence in their own safety and the support provided by staff. Policies such as Think Twice (The SPS Anti-Bullying Strategy) had been translated into a number of different languages including Polish and Albanian.

Empowerment: Where risks surrounding vulnerable prisoners were identified there was clear evidence of individualised support for those requiring extra assistance and this was provided in a considered and compassionate manner. Recorded levels of violence in the past year was low in comparison to other prisons and action was taken to promote awareness of anti-violence strategies and what to do if concerned for your safety. All prisoners and staff who met inspectors reported feeling safe.

Legality: No issues were identified for this Standard. The SPS TTM and Think Twice Anti bullying Strategy was applied effectively within HMP Dumfries. Recently, the role of the H&S manager was made a permanent position. There was clear evidence of effective record keeping, safety campaigns and regular H&S checks in line with SPS policy.

Encouraging observations:

- Implementation of the Think Twice Strategy was handled well with good sharing of information within the Violence Reduction Group (VRG).
- Prisoners felt safe and incidents of violence were low in comparison to most other prisons.

Emerging concerns:

- While H&S issues were identified and addressed in a structured way by the H&S Coordinator, they would benefit from further monitoring at a senior management level to ensure that monthly checks were carried out by all functions within the prison.
- There was some slippage with compulsory staff training on Think Twice, but action was in hand to address that.

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.

Inspection Findings Overall Rating: Good Performance

In this Standard, five quality indicators were rated as good and five were rated satisfactory, giving an overall rating of good. There were four recommendations for improvement and three examples of good practice identified.

With regard to the **PANEL** principles:

Participation: Inspectors observed participation in the orderly room process and an opportunity was given to prisoners to provide any mitigating circumstances. However, it was noted that in some instances, the paperwork did not reflect this level of participation by prisoners.

Accountability: There were well established processes in place to ensure that there was accountability for the Use of Force (UoF), searching and escorting of prisoners, with these processes being audited regularly by the Head of Operations.

Non-discrimination and equality: There was evidence of individual risk assessments for escorting prisoners' outwith the prison. There were established processes in place to record testing of prisoners for controlled drugs. There was a consistent approach to recording evidence at adjudications.

Empowerment: Posters were in place within reception to advise on language requirements. The prison has a structured regime in place for prisoners to participate in, with established security processes in place that were not overly restrictive.

HMIPS Standard 4 Effective, Courteous and Humane Exercise of Authority – Continued

Legality: UoF forms were accurately completed and audited by the Head of Operations. Inspectors did not find anything to suggest that the establishment was acting illegally.

Inspectors observed 10 quality indicators within this Standard. In general, there were positive practices within HMP Dumfries to provide evidence for this Standard and staff were knowledgeable about rules and policies.

The safety and security of the prison was maintained while balancing the needs and treatment of prisoners in a humane setting. The prison was secure, safe, and clean. Systems and processes were operating effectively to ensure the safety and security of the prison.

The UoF was used minimally within HMP Dumfries and in accordance with the rules and policies which govern this. There was an effective management information database to capture information and staff within the Intelligence Management Unit (IMU) were knowledgeable about the recording processes. UoF forms were completed accurately and sufficiently detailed to evidence de-escalation when it had been appropriate to do so.

Encouraging observations:

- The route was observed by inspectors and was extremely well organised and efficient.
- Searching of prisoners leaving the residential areas was carried out to a high standard.
- Positive staff relationships within the reception area upon admission were observed by inspectors.
- Mandatory Drug testing was well co-ordinated and staff were very knowledgeable.
- Area and cell searches were carried out and evidenced through a database for all senior management to review.

Emerging concerns:

- It was observed by inspectors that FLM were consistently authorising Rule 95 in the majority of instances. This was reviewed by the prison during the inspection and the policy is now being strictly adhered to.

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.

Overall rating: Satisfactory performance

All eight quality indicators were assessed as satisfactory therefore the overall Standard was assessed as satisfactory. There were 8 recommendations for improvement.

Under terms of the **PANEL** principles:

Participation: This was fully evidenced with regards to sharing information. Families attended open days as well as adapted visit sessions. The opportunity to attend TTM case conferences was presented but there was no recent evidence that families attended.

Evidence existed that those in the care of HMP Dumfries were consulted regularly through PIAC, and various other user voice focus groups. This approach ensured that changes to areas such as canteen and/or sundry purchases were dealt with quickly, and the adapted family visit sessions and family events were developed by including prisoner consultation.

The prisoner complaints system operated from initiation of Prisoner Complaint Form 1 (PCF1) to Internal Complaints Committee (ICC) and Scottish Public Services Ombudsman in line with policy and process. Access to complaint forms was acceptable but this could be better signposted and more accessible to prisoners.

The relationship between staff and prisoners appeared comfortable and positive throughout the establishment. Interaction between all groups happens frequently with the opportunity to communicate openly and in a relaxed manner.

Throughout the inspection examples of support and empathy were observed.

Prisoners were positive about their circumstances and the feeling of safety was a predominant factor.

HMIPS Standard 5 Respect, Autonomy and Protection Against Mistreatment – Continued

Accountability: This appeared acceptable and reasonable. The establishment provided opportunities for employment and activity within their regime. Access to evening visit sessions presented an ongoing difficulty for HMP Dumfries and attempts to address this situation were ongoing. Agents visits and virtual court access was available on a daily basis.

Non-discrimination and equality: This was obvious within HMP Dumfries. Age demographic and index offences did not influence treatment and no one group within HMP Dumfries was disadvantaged due to their characteristics. Although it was infrequently required, there was evidence of use of translation services and staff had a good understanding of the services available.

Empowerment: HMP Dumfries had a detailed list of privileges which outlined entitlements. The use of regular PIACs has been enhanced by the development of separate canteen and food focus groups. These user voice events appeared to have generated positive results.

Legality: Each residential area within HMP Dumfries had a copy of the Prison Rules available to all prisoners. They were not prominently displayed but were available on request. No prisoners were disadvantaged legally. Legal contact was available daily via an easily accessible booking system which allowed agents to book daytime visits or request evening appointments. Information about IPMs was displayed on all notice boards but the information posters were out-of-date. Request forms were available in all residential areas with a post-box within the central assembly area. Access to Independent Prison Monitors (IPMs) was minimal.

Encouraging Observations:

- The relationship between staff and prisoners was comfortable and positive throughout the establishment, leading to all prisoners commenting that they felt safe.
- Open days and adapted visits offered families opportunities to engage.

Emerging concerns:

- There was information on data protection within the hall information packs and displayed on some hall notice boards. However, it did not appear in any translated formats.
- Dates for future PIAC groups were scheduled but there was no evidence of publishing the dates for general awareness.
- Although there was no evidence of prisoners being denied access to the complaints paperwork, there should be more obvious signposting and information holders.

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.

Overall rating: Satisfactory performance

In this Standard, four quality indicators were assessed as good, six were assessed as satisfactory and five were assessed as generally acceptable, giving an overall rating of satisfactory. There were six examples of good practice and 24 recommendations for improvement.

HMP Dumfries holds a very specific and potentially high risk national population of offence related protection prisoners as well as its local short-term population and there was evidence of careful (and in some areas innovative) consideration in respect of the activity needs of these very different groups. The dynamics of a small local establishment supported excellent relationships both between prisoners and staff, staff and the SMT, and with partners. Learning about the factors which improve relationship quality in small community establishments should be a national priority for future prison design.

In relation to **PANEL**:

Participation: Where practical, work opportunities were available to untried prisoners. HMIPS were pleased to see this, as it is not regularly evidenced during inspections. Prisoners were given useful and clear information on their arrival in the prison regarding the work options open to them, and were consulted on the activities offered. A review was underway to ensure that work experience and qualifications continued to be relevant for prisoners to use on release. All prisoner groupings, including untried, had sufficient opportunities to access educational provision. Although there was a limited range of good quality educational programmes, they covered a variety of subject areas including art, Information and Communications Technology (ICT), history, creative writing, maths and communications.

Courses provided opportunities to attain awards at SCQF levels 4 & 5 and a mixture of Scottish Qualification Awards (SQA), and Royal Society for the Prevention of Accidents (ROSPA) units of accreditation through Fife College, the recognised education provider. Some prisoners had the opportunity to study distance learning qualifications at an advanced level through Dumfries and Galloway College and the University of the Highlands and Islands (UHI). Adult basic education provision was delivered through one-to-one support sessions held in the Link Centre and supported by council staff. In addition, prisoners with no experience of using a computer were supported to engage in making use of technology. Two peer mentors supported individual prisoners with their learning in their residential halls.

HMIPS Standard 6 Purposeful Activity – Continued

Prisoners described a desire to access the prison gardens area more frequently than was currently possible for the purposes of relaxation and time in the open air, and this merits further consideration. Participation levels at exercise were generally good and access arrangements were straightforward. Long-term prisoner's (LTPs) were split into two sessions and whilst two sessions of shorter length appeared more appropriate for the age range and mobility issues it has been recommended to monitor this in case the shorter time inhibits this group. Prisoners reported feeling safe at exercise, and attendance of different population groups was managed in such a way as to ensure offence-protection prisoners were not subject to abuse.

Accountability: Employment and training opportunities were of good quality. Work parties comprised of a pool of around 18 prisoners, with around 12 who could be taken and supervised at each session in order to maximise attendance.

A number of national changes in programme/psychology provision, Home Detention Curfew (HDC) and the withdrawal of Through care Support Officers had impacted on service delivery, though the establishment had made adaptations to manage these pressures appropriately as best they could. The long wait for access to assessments and programmes which are essential for progression should be monitored by Scottish Prison Service Headquarters (SPS HQ) with increased resources allocated where required to reduce waiting times. HMP Dumfries had robust primary and secondary assurance arrangements for parole dossiers in place. New changes for inter-prison phone calls which now required the signature of both Governors were in place.

Non-discrimination and equality: To meet the needs of short and LTPs, the prison had two separate libraries, sited in different locations. The LTP library contained large numbers of fiction texts and some non fiction books including history and autobiographical texts. This library also had large print texts and publications designed to appeal to prisoners with low levels of literacy or reluctant learners. However, the STP library was less well stocked. It only contained fiction texts and did not contain a range of other books to meet the reading needs and interests of the STP population.

Inspectors saw no issues around discrimination or a lack of equality. Observations in case conferences and sampling of closed visit reviews revealed that those involved in the processes were treated fairly.

HMIPS Standard 6 Purposeful Activity – Continued

Empowerment: Projects engaging in local community activities or events gave prisoners a real sense of purpose, pride and achievement. Examples included the work in the joinery shop to support local community groups and the hospital being recognised and publicised. Another example was the waste management party recycling old wood into fire kindling which was then distributed to almost 300 older residents in the community. These gave prisoners a sense of contributing positively to the local area. There was also some excellent work being undertaken by the garden party, where they had helped establish a project for people in the community suffering from Dementia, preparing activities and tasks for them to do which also gave a strong sense of purpose and community connection.

Case management services and supports were excellent and demonstrated a detailed knowledge and care in respect of the circumstances of individual prisoners. There was good evidence of individual prisoners being meaningfully involved in case management decisions, though peer support systems were underdeveloped and could be further enhanced.

Legality: All prisoner groups had access to safeguarding and individual rights texts which could be found in the libraries. HMP Dumfries ensured that all prisoner groups were afforded at least one hour of fresh air a day as per Prison Rules.

Encouraging observations:

- The 'Lets Cook' programme that offered a useful introduction to personal and professional cookery, as well as developing employability and life skills. Over the three year period, 75% of those undertaking the programme have remained outside the prison system.
- The innovative work to prepare staff for working with prisoners with dementia in partnership with a local organisation.
- A method to better plan personal officer attendance at ICMs was in place, with the ICM Co-ordinator attending the weekly FLM staffing meeting, and complement variables had been moved to better facilitate case management requirements.
- Detailed discussion at Risk Management Team (RMT) took place direct with a Castle Huntly staff representative by video link.
- A Multi-Agency Community Reintegration Board operated for the short-term population. A number of establishments now operate similar support processes and these should be considered for embedding into a national STP case management practice.

HMIPS Standard 6 Purposeful Activity – Continued

Emerging concerns:

- Further opportunities should be offered to promote and support wellbeing and, in particular, mental health.
- Prison managers should actively promote a wider knowledge of equality-related issues and an understanding of other cultures in line with the requirements on public bodies.
- Consideration should be given to further enhancing existing exercise areas and improving access to the gardens facility.
- Levels of service need to support bereavement and loss to supplement those offered by the Chaplains should be assessed and actioned.
- Attendance at Chaplaincy events should be monitored to ensure that individuals from either population group do not feel inhibited from participating.
- Adequate additional Chaplaincy facilities which reflect the value they add to HMP Dumfries should be provided.
- The long wait for access to assessments and programmes which are essential for progression should be monitored by SPS HQ with increased resources allocated where required to reduce waiting times.
- Research should be commissioned to better understand the impact of transfer to undertake programmes, and the extent of withdrawal from progression by individual prisoners as a consequence.
- Additional options for on-site delivery should be considered in light of any conclusions from the commissioned options paper.
- The need for Occupational Therapy support to inform activity provision, similar to that operating in HMP Grampian should be formally assessed by NHS partners.
- Peer support services should be expanded and embedded.
- The life skills area and the links centre both require significant refurbishment to maximise use of space and provide up-to-date facilities.
- Further training and development in respect of the challenges faced in the management of sex offenders and their needs would be of benefit to staff.
- Further national guidance and training to support the development of consistent and effective case management practice by personal officers is required.

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

Overall rating: Satisfactory performance

In this Standard, three quality indicators were rated as satisfactory and two were rated as generally acceptable, giving an overall rating of satisfactory. There were four recommendations for improvement.

In respect of the **PANEL** principles for this Standard:

Participation: Prisoners serving long-term sentences and subject to statutory supervision on their release experienced inclusive case planning. For STPs their experience was varied. Prisoners and their families were encouraged to participate in case conferences. Some reports from prisoners suggested that the meaningful involvement of individuals was not always assured by the existence of clear systems and processes.

Accountability: Oversight processes were monitoring the progress of plans, identifying delays and tracking individual cases. The quality and content of plans was still dependant on staff input and as such quality was varied. Relevant training for staff was underway. Despite monthly multi-agency meetings, some individuals did not get the agreed transition support and others relied on ad hoc arrangements. Lack of provision and accessibility challenges in relation to programmes and offence focused work, meant that the prison was not always meeting the identified needs of their population.

Non-discrimination and equality: All prisoners benefitted from an improved approach to individual case planning and the prison was committed to making sure that all staff were aware of their role in the successful transition of prisoners to the community. Well established relationships with partner agencies were key in ensuring ongoing support for the most vulnerable returning to the community. Services were well informed about needs, potential risks and concerns. Approaches to evaluation were underdeveloped so it was difficult for the prison to confidently assess the adequacy of arrangements for the most vulnerable.

HMIPS Standard 7**Transitions from custody to life in the community – Continued**

Engagement: Engagement of prisoners in any planning for release or with agencies that were there to support them, depended on the ability of staff to develop trusting respectful relationships with prisoners. The consistent message inspectors received from prisoners was that staff were approachable and treated them with respect. Some prisoners felt well informed about case management processes, but others reported unexplained delays. This caused some frustration for individuals. The busy link centre was effectively providing a base for prisoners to access services that would help with their return to the community. However, confusion about the range of services may be affecting engagement by some prisoners and the ability of frontline staff to provide informed advice.

Legality: Case management for prisoners subject to statutory supervision on release was robustly delivered by knowledgeable and experienced staff. Case conferences clarified expectations of community-based services in meeting the needs of the individuals and the multi-agency management of risk. The quality of assessments and reports was good and enabled coherent decision making.

Encouraging observations:

- Processes for discussing and agreeing individual plans were robust for LTPs.
- The improved use of prisoner recording systems from the point of induction was helping to ensure that all individuals had a written integrated case management plan.
- Case conference were well attended by prisoners, residential staff and other professionals.
- Established relationships between prison-based statutory services and their community-based colleagues were a key strength in supporting community integration needs of individuals.
- Close working relationships with key agencies around addictions was encouraging prisoners to engage with these services post release.
- Prison management had developed strong relationships with individual agencies.
- Well attended monthly meetings with partner agencies were properly considering the needs of those prisoners who will be released soon.
- Pro active efforts were made by the prison to increase the profile of services with prisoners and their families for example 'summer open day'.
- Prison management were involved in local area strategic groups for example community justice partnership and housing forum.

Emerging Concerns:

- The prison was not delivering any accredited programmes and offence focused work was very limited. This affected all prisoners regardless of length of sentence.
- The number and accessibility of services was confusing for some prisoners and staff.
- Prisoners reported confusion about their plans and the role of residential staff.
- The quality and availability of written information about services was mixed and not always in an easy read format.

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.

Inspection Findings

Overall rating: Satisfactory performance

In this Standard, two quality indicators were rated as good, four were rated as satisfactory, one was rated as generally acceptable and one as poor, giving an overall rating of satisfactory. There was three examples of good practice and eight recommendations for improvement.

In terms of the **PANEL** principles:

Participation: HMP Dumfries did not ordinarily seek the views of prisoners with regards to their relationships with staff. However, through pre-inspection focus groups, speaking to prisoners and noting the lack of complaints, it appeared that there was a good relationship between staff and those in their care. Staff were rewarded for good performance by being offered opportunities to represent the prison in for example rewarding bodies such as The Butler Trust. There were many examples of emails of appreciation for staff work from the SMT. Examples of thank you cards sent in by visitors were published to staff at the front entrance. A planned staff recognition information board, for service to the SPS, was in the final stages of being erected. Good practice was highlighted with staff engagement events allowing staff a voice. Staff had recently attended coffee cup meetings with the Governor so they could share their views in a safe environment.

Accountability: Staff were informed of changes and future developments by email or meetings, and the annual delivery plan and action plan were available to all staff through SharePoint. Although staff were invited to the monthly business meeting, uptake was low, but all information from that meeting could be found on SharePoint. Core competencies, particularly in C&R and TTM, were not at the expected level and should be brought up to compliance as soon as practical. However the prison had generally made good progress in addressing the main concerns raised during the last inspection in 2015 (see Annex D).

HMIPS Standard 8 Organisational Effectiveness – Continued

Non-discrimination and equality: This was not fully embedded in HMP Dumfries and disappointingly no action plan had yet been developed. Despite this, inspectors observed that staff were understanding of the needs of those most vulnerable and dealt with them in a professional, sensitive and common sense manner rather than through training. Language line or translation services were not regularly used and, although there was only a small number affected by this, it is still important that all those passing through HMP Dumfries are given equal access to information and opportunities.

Empowerment: Inspectors found that the flexibility and motivation of staff volunteering to work outwith their bandings ensured that the prison was less restrictive than if the staff shortage protocol was more strictly enforced, and therefore allowed more opportunities for prisoners to engage with staff and the regime. Prisoners did not have a voice with regards to their treatment under E&D. HMIPS have agreed to return in six months to review progress against an E&D plan.

Legality: HMP Dumfries upheld the rights of prisoners through the Prison Rules and human rights. There was good evidence that staff treated those with protected characteristics sensitively. There was no evidence of high levels of complaints by those with a protected characteristic. However, issues about the right form being used for a complaint may account for only one E&D form in the last 12 months being submitted.

Encouraging observations:

- The Governor's open letter to all staff reminding them of the No Bystanders campaign.
- Appropriate action had been taken in response to some of the previous recommendations from the 2015 full inspection and also actions from other scrutiny authorities that have reported on the performance of the prison.
- Workshops designed to formulate views on staff roles and responsibilities and to look at any changes the Senior Management Team (SMT) might make.
- Staff recognition group reinvigorated with plans to include a recognitions board for long service.

Emerging issues:

- The E&D structure and prisoner engagement was not embedded into HMP Dumfries and had yet to develop an E&D action plan.
- The use of the translation and interpreter services was minimal.
- Following the publication of the last HMIPS full inspection report, the Audit & Assurance Unit at SPS HQ awarded 'substantial assurance', however it was noted that 11 actions were not completed until after substantial assurance was awarded, and two have still to be resolved.

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.

Inspection Findings

Overall rating: Good Performance

In this Standard, seven quality indicators were rated as good, five were rated as satisfactory and four were rated as generally acceptable. There was six examples of good practice and eight recommendations for improvement.

Overall, this was a positive inspection. The healthcare team at HMP Dumfries was committed to providing high quality care to their patients. All interactions observed between healthcare staff and patients were professional, positive and non judgemental. Staff spoken with had a good understanding of the health inequalities faced by their patients and all staff observed demonstrated a human rights and person centred approach to care.

Prison healthcare sat within the NHS Dumfries & Galloway Mental Health Directorate, and the agreed reporting structure was via the mental health general manager who reported to the Senior Health and Social Care Management team and Integrated Joint Board.

NHS Dumfries & Galloway had commissioned a health needs analysis to inform the needs of the prison population and help to design and develop the service, including health promotion provision. Work with this was still ongoing at the time of the inspection.

There was one Whole Time Equivalent (WTE) band five vacancy within the Primary Healthcare Team. However this was not impacting on the safe delivery of patient care. Contingency to support the team came from other specialities and from the health centre manager who was visible and worked clinically to support teams.

At the time of the inspection, the prison healthcare team did not have any non-medical prescribers or advanced nurse practitioners. However this did not compromise the delivery of a robust healthcare service. The prison healthcare team told inspectors that they were looking at this option to provide development opportunities for staff, and that it would be considered alongside the outcome of the health needs analysis.

Patients were assessed for immediate healthcare needs as well as planning for long-term health conditions. Timely referrals were made for patients requiring immediate support and follow-up.

Positive partnership working and communication was excellent between the SPS and the healthcare team. This was demonstrated by regular well attended governance meetings where senior management from both the SPS and healthcare attended as well as the GP, nursing staff from primary care and mental health. Overall observations indicated a team approach to the running of the health centre. This was an area of strength.

HMIPS Standard 9 Health and Wellbeing – Continued

Primary care

Patients were supported by a GP service from Monday to Friday, and in the out-of-hours period on an on-call basis by a community GP partnership. This worked well within HMP Dumfries. The GP was supported by nursing staff at the daily nursing triage clinic, treatment plans were conveyed to nursing staff and care was scheduled by the primary care team.

Patients could access the daily nursing triage clinic to discuss any concerns and issues they had regarding their healthcare. When seen, the primary care nurse would triage and signpost to the most appropriate service. This could result in the patient seeing a GP, referral to the mental health nurse or the substance misuse team. This process worked well within the establishment.

Patients who required referral to secondary care were well managed and were receiving a service equitable to that of primary care in the community setting. Patients were supported to attend appointments outwith the establishment and were informed 24 hours before that they would be attending appointments, to allow them to prepare. This process did not compromise confidentiality but supported patients to prepare for the following day.

A pharmacist visited the prison once a month. An NHS Dumfries & Galloway pharmacist provided advice on an ad hoc basis to staff within the health centre.

Issues were noted with the administration times of some medications. Staff were observed to administer medication safely, and prescription kardexes and controlled drug registers were completed and signed at the time of administration. However, as the prescription chart only stated morning, afternoon, evening and night time, it was not possible to determine the exact times medicines had been administered to patients.

Long-term conditions, palliative and end of life care

There were systems and processes in place to ensure the delivery of a comprehensive approach to managing long-term conditions within HMP Dumfries. Health needs were identified at reception and followed-up where necessary.

Care plans were available for more complex patients and there was evidence of the roll-out of anticipatory care plans. These were discussed with patients who had ownership of these.

The requirement for care plans within HMP Dumfries was minimal due to the generally good health of the prison population. Existing care plans reviewed were not person-centred or outcome-focused. There was no evidence of a collaborative approach between nursing staff and patients, or evidence of review of ongoing care.

There was only one accessible cell available within the prison. On discussion with SPS senior management and healthcare staff, inspectors were told that this cell had been identified as not fit-for-purpose as it did not have appropriate adaptations. This had been highlighted on the SPS corporate risk register.

There were no patients requiring palliative or end of life care at the time of the inspection. Although staff had little exposure to patients with palliative or end of life care needs, all staff demonstrated an awareness of the principles that underpin care for any patient who may require this in the future.

HMIPS Standard 9 Health and Wellbeing – Continued

Mental health and substance misuse

The mental health team consisted of one registered mental health nurse and a consultant psychiatrist. Access to clinical psychology was via the wider NHS forensic clinical psychology service and they provided limited input into the prison. Through Action 15 money, which is part of the Scottish Government Mental Health Strategy 2017-2027, an additional band 6 mental health nurse post had been secured to support the development of psychological therapies within the prison. The psychiatrist attended the prison one afternoon a fortnight. There was an acknowledgement by managers that there were gaps in the range of psychological interventions being provided. This was also identified in the self-evaluation provided in advance of the inspection.

The mental health nurse within the prison provided a responsive and proactive mental health service within the prison, and patients with a mental health condition were seen very quickly.

There was limited opportunity for the clinical psychologist to provide complex case discussion to the team. There was no clinical multi-professional meeting that met on a regular basis for triaging and case discussions of patients referred to the service in place.

The relationship between the primary care and substance misuse team was informal but effective, with staff working together when required to provide a joined-up service to patients.

The substance misuse team comprised of one WTE learning disabilities/registered general nurse and one caseworker. Inspectors observed the team taking a person-centred and compassionate approach to care for patients with addictions. Despite the small size of the team they were well motivated and delivered a full range of interventions and treatments such as the self-management, harm reduction and Naloxone training.

For new patients wanting to commence opiate replacement therapy (ORT), there were no delays. Inspectors were told that methadone was the first line of treatment offered to patients and that the prescribing of Buprenorphine was based on clinical need and not patient preference.

The healthcare team did not have a Home Office Controlled Drugs Licence in place, however inspectors were given an assurance that they had started the process of applying for this.

HMIPS Standard 9 Health and Wellbeing – Continued

Culture

There was evidence of strong and supportive leadership within the healthcare team. There was a cohesive and positive culture within the establishment and working relationships between both the SPS and health were embedded as part of this culture.

Staff demonstrated an understanding of reporting structures within the prison. There were clear and visible line management and governance structures in place through the Health and Social Care Partnership and Integrated Joint Board. There were robust systems in place and representation of prisoner healthcare in many forums within this structure and the wider NHS board.

Complaints, comments and feedback about healthcare services were managed in line with the local NHS complaints handling policy.

Staff who commenced employment were supported through induction and mentored. Turas was not currently available for staff appraisals, however teams were being supported to roll it out by April 2020. An alternative appraisal process was in place.

Monthly line management and clinical supervision was diarised for staff and worked through a rolling agenda. Regular team meetings ensured continued communication. The team was small but staff described a supportive culture amongst colleagues and leadership teams both within health and the SPS.

HUMAN RIGHTS-BASED APPROACH OVERVIEW

An overview to the inspection is included below which follows the PANEL¹ headings aimed to illustrate how human rights applied to the inspections as a whole. This is not exhaustive of all rights engaged or the inspection, but is intended as a brief overview of the implementation of the Standards taking a human rights-based approach.

HMIPS approach is crucial for ensuring both that the human dignity of the prisoner is upheld and that prisons are places of productive, positive and useful education, work and interaction leading to better outcomes in reducing recidivism and keeping our communities safer.

PANEL:

PARTICIPATION

“Prisoners should be meaningfully involved in decisions that affect their lives”

Participation within the prison can be characterised as a mixed picture. It was apparent that there had been a lack of E&D strategic leadership and oversight for some time. The current E&D strategy was below normal standards of good practice and staff appeared generally unaware of E&D as an issue. A member of the SMT had recently been named E&D manager. It was positive that responsibility for E&D had been left with a senior member of staff and inspectors recommend that this responsibility is made clear on staff structure charts to maximise visibility. The E&D manager made inspectors aware of plans to create an equality, diversity and human rights action plan, engaging prisoners in the design process and at future E&D meetings. Inspectors recommend that the prison pay particular attention to the essential components of participation in developing their E&D processes; these include that participation must be active, free and meaningful and give attention to issues of accessibility. Some prisoners will require more support to enable them to fully, actively and meaningfully participate. HMIPS expect that any barriers to participation would be identified and that those prisoners would be supported to overcome them in order to participate. Inspectors will be interested to learn of progress in this area; however, at present, E&D practices and strategy within the prison were below normal standards.

Translation services were not being widely used. Information was available in a limited number of languages at reception; the languages were those spoken by foreign national prisoners who had entered HMP Dumfries in the last four months. Inspectors noted that information screens in the waiting areas in reception contained useful information (in English); however, inspectors would recommend the speed the slides are shown at is slowed significantly.

PIACs were held regularly and prisoners were generally aware of how to raise issues through the PIAC process. Inspectors noted that there had been subject-specific PIACs, for example on items available to purchase on the canteen. There were also plans to hold a PIAC specifically focused on the needs of older prisoners, which was an area of emerging good practice. Although PIACs were held regularly, inspectors believe there could be better processes in place to feedback to prisoners on the outcome of discussions. PIAC minutes were comprehensive and included actions, which made it possible to track issues; however, the prison could improve triangulation of PIACs to detect themes and respond more quickly.

¹ See pg. 5 of the Standards.

ACCOUNTABILITY

“There should be monitoring of how prisoners’ rights are being affected, as well as remedies when things go wrong”

There was a framework of administrative accountability in the prison. However, effective accountability based on human rights standards was not consistent at the time of the inspection. This is not to say that human rights were readily ignored; however reference to standards, rules and human rights-based criteria were minimal.

Prisoner complaints were an important aspect of the framework for prison accountability. Inspectors reviewed a cross section of randomly selected complaints and found that:

- Prisoners were able to use both the PCF1 and PCF2 system.
- Some responses to the complaints resulted in a hearing of the Internal Complaints Committee (ICC), with equal numbers of complaints being upheld and dismissed.
- One of the responses was initially dismissed based on a finding by a manager that there were no legal standards relating to the sizes of cells. Inspectors were concerned by this, particularly as the complaint itself had correctly detailed several sources for these standards.
- Only one E&D complaint was recorded in the past year. That said, inspectors found amongst the general complaints a number of complaints that related to E&D issues. The prison does not treat these any differently from ordinary complaints or capture information on them reflecting E&D aspects.
- Prisoner complaint forms were generally available in their designated place within the halls.

One complaint in the sample reviewed related to a failure to acknowledge or respond to previous complaints. The response to this complaint was comprehensive and apologetic and its outcome had led to a review of the Standard Operating Procedure (SOP) of the complaints system. This will be in order to ensure that all complaints are logged regardless of how they are resolved. There was a culture within the prison of attempting to resolve complaints as soon as possible. While the aspiration was commendable, it is difficult to record how complaints were dealt with if accurate records regarding complaints, even minor ones, are not kept. These records allow for constructive learning and tracking of progress. This also reduces any perception of discouragement or intimidation in pursuing complaints. Inspectors look forward to the outcome of the review.

Although the prison appeared to house a small number of non-English speaking prisoners, no additional resource was in place to ensure that these prisoners had access to the complaints system. No additional encouragement was given to non-English speaking prisoners and prisoners had to rely on other prisoners in order to overcome literacy issues, in turn divulging personal details in order to access the complaints process. It was clear that the staff also had difficulty communicating with non-English speaking prisoners and were using casual interpretation on a day-to-day basis.

NON-DISCRIMINATION

“All forms of discrimination must be prohibited, prevented and eliminated. The needs of prisoners who face the biggest barriers to realising their rights should be prioritised.”

The prison should ensure that reasonable adjustments are promptly provided for prisoners with disabilities. Records showed a lack of checks for reasonable adjustments for prisoners in need of them, even where these prisoners' disability was known. Such adjustments should be recorded and updated systematically. Inspectors noted that there was only one cell that could accommodate a wheelchair user and this cell was currently occupied. While inspectors acknowledged this issue related to the physical restrictions of the building, they were concerned that the prison was presently unable to accommodate more than one wheelchair user. Further, inspectors were concerned that certain prisoners may currently be in a vulnerable position and require further support. For example, inspectors met a prisoner with clear mobility issues, yet the documentation they were shown did not appear to have taken account of the risks presented, nor were adequate measures in place to minimise them. Aside from safety, prisoners risk experiencing additional isolation as a result of present circumstances. Inspectors accept that complications may arise where responsibility falls between the NHS and SPS; however, the prison must ensure that matters are identified as quickly as possible and that prisoners' safety is not jeopardised. Related to this, inspectors noted that bunk beds were in place in a section housing predominantly older prisoners (above the age of 55). Inspectors recommend that every effort is made to avoid placing older prisoners in bunk beds.

There should be parity with the community in terms of access to medical care.² It was noted for example, that the emergency dentist was seen as a viable 2nd opinion despite the role being filled by the same person who was the regular prison dentist.

Prisoners and staff reported positive relationships and a general feeling of safety. Inspectors were concerned that the identification of particular needs was too dependent on either the prisoner identifying issues themselves or the approach of individual staff members. Without a systematic approach, there was a risk that E&D matters were not being recognised as such, and were being dealt with directly by staff as and when they arose. While this may lead to individual issues being resolved (prisoners told us that staff did their best to help and resolve issues), the current system relied on the quality of individual relationships and the responses of individual staff members. Inspectors recommend that a more proactive and consistent approach to E&D issues be adopted. Staff indicated that they had not received recent training in dealing with E&D matters and said they would like to update their skills in this area. There should also be oversight by the E&D manager to ensure that common or systemic issues are captured and responded to appropriately.³

More could be done to raise the profile of E&D within the prison. Prisoners told us that, while there was no atmosphere of hostility towards particular groups, they felt more could be done to raise awareness of issues affecting marginalised groups. Inspectors noted that different religious festivals and events were celebrated, with members of different faiths being encouraged to participate in events. Prisoners should be consulted and involved in the identification of important events and decisions around how they should be marked. Meaningful prisoner involvement in regular E&D meetings could go some way to achieving this.

² NMR Rule 24

³ NMR Rule 75. See Also EUPR Rule 81.

EMPOWERMENT

“Everyone should understand their rights, and be fully supported to take part in developing policy and practices which affect their lives”

The information provided in the induction leaflet was comprehensive and largely accessible. The induction leaflet was routinely given to prisoners. It was available in three other languages other than English, and this reflected the diversity of nationalities amongst prisoners. Inspectors were informed that if prisoners arrived who spoke other languages the induction booklet could be printed out in other languages, and this was how the prison operated when they were informed of a need. Translation services were available however were not widely used.

There were concerns raised that the prison had engaged external agencies to conduct training such as cookery courses, the terms of which had been modified to exclude offence-protection prisoners. The prison had attempted to provide equivalent training to offence-protection prisoners, although this was reported to be of a poorer standard. In addition to being discriminatory, it is disempowering to be excluded from progressive training which was designed to assist progression from the prison estate.

Inspectors highlight the important role which can be played by independent advocacy to support those with additional needs to access processes and protect their rights. There was no evidence of an advocacy service available to prisoners. This was of concern given that there were a significant number of older prisoners and some prisoners with mental health concerns who would be entitled to access these services in the community.

Peer mentoring in the prison requires improvement. There were two peer mentors in the prison, both of whom were LTPs. There were therefore limitations as to who had access to them because of their status, and access to them was only ever by request. Peer mentors were not present in reception, which is an area where they could add real value.

It is also important to empower staff in their duties. Awareness should be raised among staff of the mechanisms which are available to assist prisoners and the role they play in facilitating these, such as the existence of interpretation services and funds for phone calls outside the UK. Inspectors also recommend that updated training on E&D issues is provided to staff. This would allow them to recognise E&D issues and ensure the prison responds appropriately and in a consistent manner.

A key aspect of empowerment is having formal mechanisms that are capable of addressing systematic concerns, in addition to individual ones. This is an area where the prison required improvement. It had been suggested that the prison functioned well and safely was a result of good relationships between staff and prisoners, particularly given the overcrowding and short-staffing across the prison estate. Inspectors were concerned, however, that officers were frequently alone supervising prisoners particularly those staff on singleton posts. In some instances inspectors struggled to locate officers on the halls for some time. Due to short-staffing, officers often covered areas they were not particularly familiar with at short notice, for example an officer covering a busy reception. While this was unavoidable, at times this approach could lead to inconsistencies and inspectors were concerned at how frequently this appeared to happen.

There is a public expectation that prisoners spend their sentences constructively and are released from prison with some attempts at rehabilitation being made.⁴ In all cases, as soon as prisoners are sentenced and periodically after this, they are assessed for risk and recommendations are made regarding their education, psychology and offender management. There is a lack of availability of offender management programmes on a national level. As a result, prisoners are unable to complete programmes that are assessed as required for their parole and progression. Some prisoners served their entire sentence from this prison without being able to complete their recommended rehabilitative work, and some prisoners could not progress to the open estate because these programs had not been completed. This was acutely obvious in this prison with its large population of offence-protection prisoners. Offender management treatment programmes were no longer delivered there and required the prisoners to be transferred to other prisons. Many prisoners were reluctant to do so because of their protection status and also because of their perception that other prisons may operate a less favourable regime. Inspectors recommend that the prison highlight to the SPS that this is likely to increase the challenges of overcrowding and additionally frustrate prisoners. There is the added risk that sometimes individuals were being released into the community after long sentences without rehabilitation having taken place.

LEGALITY

“Approaches should be grounded in the legal rights that are set out in domestic and international laws”

A human rights-based approach requires the recognition of rights as legally enforceable entitlements and is linked to national and international human rights law. The UK is bound by the UN Standard Minimum Rules for the Treatment of Prisoners (Nelson Mandela Rules); the European Prison Rules; The Convention against Torture, including the Optional Protocol and others. It is important that all categories of prisoners enjoy the full range of human rights and that staff are adequately supported. Inspectors have identified areas where they believe further action is required, in particular to ensure that more marginalised prisoners do not fall through the gap.

The realisation of human rights is facilitated in practice by both the provision of information and the need for proactive action to be taken to ensure prisoners are accessing their rights in practice. A human rights-based framework would be concerned with anticipating areas of prison life where problems are likely to arise, responding to prisoners needs as they are raised and building in monitoring mechanisms to ensure systems are improved through experience.

Inspectors have identified issues with how complaints are dealt with, and the lack of E&D processes in place within the prison. Inspectors have underlined the importance of formal processes for safeguarding the interests of staff and prisoners. While inspectors are sure many problems were being dealt with on an individual level, a lack of overarching monitoring meant that systemic issues may be being missed.

⁴ NMR 58. The purpose and justification of a sentence of imprisonment or a similar measure derivative of liberty is ultimately to protect society against crime. This end can only be achieved if the period of imprisonment is used to ensure, so far as possible, that upon his return to society the offender is not only willing, but able to lead a law-abiding and self-supporting life.

⁵⁹. To this end, the institution should utilize all the remedial, educational, moral, spiritual and other forces and forms of assistance which are appropriate and available, and should seek to apply them according to the individual treatment needs of the prisoners. See also EUPR 106.1.

ANNEX A

SUMMARY OF GOOD PRACTICE

1. **QI 2.1:** Suntan lotion being available in muster areas for all prisoners.
2. **QI 2.1:** The quality, availability and size of the cell safes.
3. **QI 4.6:** All valuable property received during the admissions process was photographed in front of the prisoner.
4. **QI 4.6:** Valuable property bags were opened and accounted for, photographed and sealed in a new bag with an identity number.
5. **QI 4.9:** Any items carried on the route by prisoners were searched.
6. **QI 6.1:** Helpful vocational training was offered within the life skills area with a focus on the hospitality industry. “Let’s Cook” was a programme that had been offered for three years and, with the support of an external partner, it offered a useful introduction to personal and professional cookery, as well as developing employability and life skills. Over the three year period, 75% of those undertaking the programme have remained outside the prison system.
7. **QI 6.6:** Organised events including Holocaust and Genocide Awareness activities and event, Wigtown Book Festival, Recovery Café, prisoners week, prisoner training in dementia awareness; yoga available in PT schedule, Recover week series of events.
8. **QI 6.13:** The establishment had been undertaking some innovative work to prepare staff for working with prisoners with dementia in partnership with a local organisation.
9. **QI 6.14:** A method to better plan personal officer attendance was in place with the ICM Co-ordinator attending the weekly FLM staffing meeting. Complement variables had been moved to better facilitate case management requirements. These simple but effective practices should be regarded as good practice and commended to other establishments.
10. **QI 6.14:** Detailed discussion at RMT took place direct with a Castle Huntly staff representative by video link (a good practice to be commended to other establishments).
11. **QI 6.14:** A Multi-Agency Community Reintegration Board operated for the short-term population and this should be regarded as good practice to be commended to other establishments. A number of establishments now operate similar support processes and these should be considered as part of embedded national STP case management practice for consistency.
12. **QI 8.2:** Staff workshops taking place to seek views and review the needs of the staff and the prison.
13. **QI 8.4:** An example of good practice was a workshop delivered by the BIM and Senior HR officer to staff, designed to formulate views on staff roles and responsibilities and to look at any changes the SMT might make.

14. **QI 8.5:** The handover briefings that took place at the start and end of shifts, where information was passed to all staff, regardless of their role for that day, to give all those working an understanding of the issues and priorities of the day.
15. **QI 9.2:** Patients were supported to attend appointments outwith the establishment and were informed 24 hours before that they would be attending appointments to allow them to prepare. Details of what the appointment was or where was not disclosed. Statistics presented for this inspection demonstrated attendances at secondary care were very rarely missed.
16. **QI 9.3:** The recently set up armchair aerobics for the more aged and/or infirm prisoners.
17. **QI 9.5:** A poster was in place in the visits room with contact details for the mental health team, and the prisoners families could contact if they had concerns about their family members.
18. **QI 9.7:** There was a strong emphasis on alcohol/drug relapse prevention where patients were provided with strategies and coping mechanisms for dealing with triggers and difficult situations, as well as guidelines for establishing healthy habits and routines.
19. **QI 9.7:** Pre-liberations groups were open to all prisoners. The focus of the groups was on harm reduction and Naloxone training.
20. **QI 9.13:** When acknowledging a complaint, patients were given information on the “patient’s advice and support service” which could support prisoners with their complaint.

ANNEX B

SUMMARY OF RECOMMENDATIONS

We have made 70 recommendations in total, which for ease of reference we have split into different categories – those for the Scottish Government, the Scottish Prison Service (Headquarters), the NHS and those for the Governor of HMP Dumfries to address locally. We summarise below six key areas where action should be prioritised:

Key recommendation area 1: Infrastructural improvements (SPS HQ)

The most pressing priority for capital investment by the SPS is the lack of accessible cells for disabled prisoners. However, there are other areas where refurbishment and improvement requiring capital investment would be valuable – the Life Skills and Links Centre, the rather sterile exercise areas, the lack of separate facilities for the chaplaincy services and, the development of a visitor centre.

Key recommendation area 2: Progression and management of offenders (SPS HQ and HMP Dumfries)

The SPS should address the lack of local delivery of offence management programmes, requiring prisoners to transfer to other prisons to secure progression. The SPS should improve access to assessments and programmes that are essential to rehabilitation and progression. As an interim measure, the SPS should commission research on the impact of having to transfer to other prisons to secure progression. HMP Dumfries should introduce more systematic gathering of evidence on the effectiveness of the support given to individual prisoners. Enhanced national training for staff in the management of offence protection prisoners and the operation of the personal officer scheme should be developed by the SPS.

Key recommendation area 3: Equality and Diversity (HMP Dumfries)

HMP Dumfries should take further steps to embed its structures around promoting E&D, developing and implementing a robust E&D Action Plan, and using education and other services to promote understanding of other cultures and equality issues.

Key recommendation area 4: Information for prisoners (HMP Dumfries)

HMP Dumfries should improve the information available to prisoners for example the services available to prisoners, operation of PIACs, the promotion of mental health and wellbeing, how to make a complaint etc. Information on notice boards should be regularly updated. Advocacy services for prisoners should be reviewed and continued efforts made to support prisoner participation and engagement. Use of translation services should be maximised.

Key recommendation area 5: Decency (HMP Dumfries)

The shortage of waterproof jackets should be addressed to encourage access to exercise and fresh air. Where possible access to natural light in Halls A and C should be improved through the removal of paint from skylights etc.

Key recommendation area 6: Health and wellbeing (NHS)

While many positives were identified around health and wellbeing, and the service was assessed as 'good' overall, the criticality of the services provided means the implementation of recommendations in this area will always remain a priority.

The full list of recommendations:**For the Governor**

1. **QI 1.2:** First Line Managers require to play an active role in the core screen process by ensuring all paperwork is completed before sending it to the ICM team/Link Centre, and a robust assurance process should be implemented and tested through Prison Resource Library (PRL).
2. **QI 1.8:** HMP Dumfries should make greater effort to engage with those that do not wish to attend induction and record this.
3. **QI 2.1:** The skylight on A Hall should be cleared of paint to allow natural light into the halls; this should be expedited.
4. **QI 2.1:** Where windows need to be blocked to stop the overlooking of neighbouring buildings, this should be done with translucent materials to allow light to enter.
5. **QI 2.1:** A sufficient number of accessible cells to meet the needs of the population must be provided.
6. **QI 2.4:** The prison should take forward plans for hair and body wash dispensers in communal showers.
7. **QI 2.4:** The prison should review the barbering availability across all prisoners.
8. **QI 2.5:** Good quality, easily accessible waterproof jackets in sufficient number should be provided.
9. **QI 2.6:** The prison should review with prisoners the condiments and drinking options available in the dining hall.
10. **QI 2.6:** The job title 'ethnic cook' should be changed to something more in line with current terminology.
11. **QI 3.7:** Senior Management should provide more direct support for efforts to promote compliance with monthly H&S checks, and consider whether relocation of the office of the H&S Co-ordinator would also be beneficial.
12. **QI 4.1:** The reporting of incidents should be reviewed within 72 hours as per the new SPS policy.
13. **QI 4.2:** Safer cells required to be reviewed in relation to potential ligature points. SPS HQ should have in place a consistent specification in relation to potential ligature points.
14. **QI 4.2:** SPS HQ should have in place a consistent approach to MORS Policy and safer cells across the SPS Estate.
15. **QI 4.6:** HMP Dumfries should ensure that prisoners are informed about the cost of calls to mobile phones upon admission.
16. **QI 5.1:** HMP Dumfries should adjust their SOP regarding the death or serious illness of a relative to reflect the practice in place.
17. **QI 5.5:** HMP Dumfries to publish the PIAC schedule to all prisoners.

18. **QI 5.5:** HMP Dumfries to develop their excellent peer mentor role to support induction and admissions.
19. **QI 5.6:** HMP Dumfries should provide more obvious and accessible holders for complaints information. No prisoner was denied access to the complaints paperwork but there should be more obvious signposting and information holders.
20. **QI 5.8:** HMIPS should work with HMP Dumfries to ensure all IPM notices are up-to-date and noticeboards are well signposted.
21. **QI 5.8:** HMP Dumfries should ensure that the one IPM post-box is more adequately signposted within the assembly area.
22. **QI 6.4:** Further opportunities should be offered to promote and support wellbeing and, in particular, mental health.
23. **QI 6.6:** Prison managers should actively promote a wider knowledge of equality-related issues and an understanding of other cultures in line with the requirements on public bodies.
24. **QI 6.7:** Consideration should be given to further enhancing existing exercise areas and improving access to the gardens facility.
25. **QI 6.7:** As per the recommendation in QI 2.5, Good quality, easily accessible waterproof jackets in sufficient number should be provided.
26. **QI 6.8:** Attendance at Chaplaincy events should be monitored to ensure that individuals from either population group do not feel inhibited from participating.
27. **QI 6.8:** HMP Dumfries should continue to seek opportunities to expand and enhance the Chaplaincy facilities.
28. **QI 6.9:** HMP Grampian have undertaken work with local authority providers to improve transport links; there may be some value in sharing experience between the two sites.
29. **QI 6.9:** Funding routes should be explored to enhance parenting and play supports.
30. **QI 6.10:** Enhanced décor to deinstitutionalise the agents and closed visit areas should be considered where possible.
31. **QI 6.10:** Arrangements to ensure adequate cleaning of all toys in the visit area should be explored.
32. **QI 6.11:** The potential to establish video visits as a routine part of visit provision at HMP Dumfries should be actively explored at local and national level.
33. **QI 6.13:** Peer support services should be expanded and embedded.
34. **QI 6.13:** The life skills area and the links centre both require significant refurbishment to maximise use of space and provide up-to-date facilities.
35. **QI 6.14:** Some practical alterations to facilities to more directly connect the 'hub' with the Case Management Officer's office and create a shared space would be advantageous.

36. **QI 6.14:** Consideration should be given to how the Tribunal/ICM case conference area could be further enhanced, or incorporated potentially into a refurbished links centre.
37. **QI 6.14:** Further training and development in respect of the challenges faced in the management of sex offenders and their needs would be of benefit to staff.
38. **QI 7.1:** To ensure that prisoners are empowered to engage with services, the Governor should ensure that good information on services is freely available and in an accessible format.
39. **QI 7.3:** To help prisoners receive the support they need in preparation for transition from custody, the Governor should take steps to improve the timely completion of generic programme assessments and develop a strategy to improve access to offence-focused interventions.
40. **QI 7.4:** To maximise prisoner participation, the Governor should ensure that awareness sessions with prison staff continue and include how all staff empower prisoners to be meaningfully involved in the development and review of co-ordinated plans for their release.
41. **QI 7.5:** To enable coherent continuing improvement, the Governor should, in partnership with other agencies and third sector providers, undertake a systematic review of services offered to prisoners after their release.
42. **QI 8.1:** HMP Dumfries should develop an action plan that allows E&D to be embedded into the daily life of the prison.
43. **QI 8.1:** HMP Dumfries should ensure all actions from PRLs are addressed to support E&D.
44. **QI 8.1:** HMP Dumfries to consider introducing supplementary classroom-based awareness sessions for E&D.
45. **QI 8.1:** HMP Dumfries should encourage the use of translation and interpreter services more regularly to meet the needs of the population. In addition, more information about the service should be available to encourage individuals to use it.
46. **QI 8.1:** The E&D manager may wish to consider contacting HMP Edinburgh to get a copy of their E&D signposting manual, that gives comprehensive information on how to manage those under the protected characteristics.
47. **QI 8.2** HMP Dumfries should ensure that, where possible, PRL audits are carried out by staff from other areas.

For the SPS

48. **QI 2.1:** The population of HMP Dumfries should be reduced to ensure no prisoner is made to share a cell.
49. **QI 2.3:** The SPS should address the lack of consistency across the SPS estate on whether or not prisoners are able to purchase their own bedding.

50. **QI 5.3:** The SPS should consider methods which ensure that up-to-date information is available for prisoners in translated formats.
51. **QI 5.7:** In relation to prisoners submitting a confidential PCF, the SPS should consider creating a system which provides a receipt for such submissions, which would provide a track of each complaint.
52. **QI 6.8:** The SPS should look at the levels of service needed to support bereavement and loss to supplement those offered by the Chaplains.
53. **QI 6.10:** Investment in a visitor centre, and additional information, advice and guidance services for families should be considered by the SPS.
54. **QI 6.13:** The long wait for access to assessments and programmes which are essential for progression should be monitored by SPS HQ with increased resources allocated where required to reduce waiting times.
55. **QI 6.13:** Research should be commissioned by the SPS to better understand the impact of transfer to undertake programmes, and the extent of withdrawal from progression by individual prisoners as a consequence.
56. **QI 6.13:** Additional options for on-site delivery of programmes should be considered in light of any conclusions from the commissioned options paper.
57. **QI 6.14:** Further national guidance and training to support the development of consistent and effective case management practice by personal officers is required.
58. **QI 6.15:** National decisions in respect of Through Care Support Officers should be progressed, and communication made to staff to inform their understanding of estimated timescales for reinstatement.
59. **QI 8.3:** The SPS should review their audit process to ensure all action or mitigations have been completed prior to Substantial assurance being awarded.
60. **QI 8.4:** HMP Dumfries should introduce Mental Health Awareness training to all staff.
61. **QI 8.4:** HMP Dumfries should ensure acceptable levels of compliance in staff training in critical areas such as C&R/PPT, H&S for managers and TTM.

For the NHS

62. **QI 6.13:** The need for Occupational Therapy support to inform activity provision, similar to that operating in HMP Grampian should be formally assessed by NHS partners.
63. **QI 9.2:** The Partnership must ensure that information is available in different formats and different languages.
64. **QI 9.5:** The Partnership must review workforce planning to ensure the full range and skill mix of appropriate professionals are available within the mental health multi-disciplinary team to offer and deliver the assessment interventions and reviews.

65. **QI 9.5:** The Partnership must implement written procedures and pathways of care to ensure that there is a clear and consistent approach for staff working in the prison.
66. **QI 9.6:** The Partnership must ensure that care plans are person-centred and outcome-focused. Staff must work jointly with patients in the writing of their care plans and setting of goals. Patients should be given a copy of their agreed care plan.
67. **QI 9.7:** The Partnership must put in place a process for the multi-disciplinary team/professionals to review and discuss people referred to the substance misuse team.
68. **QI 9.8:** The Partnership must ensure that the timings of administration on the prescription kardexes are clearly recorded and ensure that the appropriate gap between medication administrations is provided.
69. **QI 9.8:** The Partnership must ensure that there is a mechanism in place to allow the visiting pharmacist to liaise with the GPs in relation to the safe and effective use of medicines.
70. **QI 9.8:** The Partnership must ensure that a Home Office Controlled Drug License is put in place as a priority, for the holding and management of controlled drugs within the prison.

ANNEX C

SUMMARY OF RATINGS

Standard/QI	Standard rating/QI rating
Standard 1 – Lawful and Transparent Custody	Satisfactory
QI 1.1	Satisfactory
QI 1.2	Satisfactory
QI 1.3	Satisfactory
QI 1.4	Satisfactory
QI 1.5	Satisfactory
QI 1.6	Satisfactory
QI 1.7	Satisfactory
QI 1.8	Satisfactory
QI 1.9	Satisfactory
Standard 2 – Decency	Satisfactory
QI 2.1	Satisfactory
QI 2.2	Good
QI 2.3	Satisfactory
QI 2.4	Satisfactory
QI 2.5	Generally acceptable
QI 2.6	Satisfactory
Standard 3 – Personal Safety	Satisfactory
QI 3.1	Satisfactory
QI 3.2	Satisfactory
QI 3.3	Satisfactory
QI 3.4	Satisfactory
QI 3.5	Satisfactory
QI 3.6	Satisfactory
QI 3.7	Generally acceptable
Standard 4 – Effective, Courteous and Humane Exercise of Authority	Good
QI 4.1	Satisfactory
QI 4.2	Generally acceptable
QI 4.3	Satisfactory
QI 4.4	Satisfactory
QI 4.5	Good
QI 4.6	Good
QI 4.7	Satisfactory
QI 4.8	Good
QI 4.9	Good
QI 4.10	Good

Standard 5 – Respect, Autonomy and Protection Against Mistreatment	Satisfactory
QI 5.1	Satisfactory
QI 5.2	Satisfactory
QI 5.3	Satisfactory
QI 5.4	Satisfactory
QI 5.5	Satisfactory
QI 5.6	Satisfactory
QI 5.7	Satisfactory
QI 5.8	Satisfactory
Standard 6 – Purposeful Activity	Satisfactory
QI 6.1	Good
QI 6.2	Good
QI 6.3	Good
QI 6.4	Generally acceptable
QI 6.5	Satisfactory
QI 6.6	Generally acceptable
QI 6.7	Satisfactory
QI 6.8	Generally acceptable
QI 6.9	Generally acceptable
QI 6.10	Satisfactory
QI 6.11	Satisfactory
QI 6.12	Satisfactory
QI 6.13	Generally acceptable
QI 6.14	Good
QI 6.15	Satisfactory
Standard 7 – Transitions from Custody into the Community	Satisfactory
QI 7.1	Satisfactory
QI 7.2	Satisfactory
QI 7.3	Generally acceptable
QI 7.4	Satisfactory
QI 7.5	Generally acceptable
Standard 8 – Organisational Effectiveness	Satisfactory
QI 8.1	Poor
QI 8.2	Good
QI 8.3	Satisfactory
QI 8.4	Generally acceptable
QI 8.5	Satisfactory
QI 8.6	Satisfactory
QI 8.7	Good
QI 8.8	Satisfactory

Standard 9 – Health and Wellbeing	Good
QI 9.1	Good
QI 9.2	Satisfactory
QI 9.3	Satisfactory
QI 9.4	Good
QI 9.5	Generally acceptable
QI 9.6	Generally acceptable
QI 9.7	Generally acceptable
QI 9.8	Generally acceptable
QI 9.9	Satisfactory
QI 9.10	N/A
QI 9.11	Satisfactory
QI 9.12	Satisfactory
QI 9.13	Good
QI 9.14	Good
QI 9.15	Good
QI 9.16	Good
QI 9.17	Good

ANNEX D

UPDATE SINCE LAST INSPECTION

The following is an update on the six areas rated as poor and one rated as unacceptable, that were identified during the last full inspection of HMP Dumfries, 11-22 May 2015, as part of QI 8.3. As explained, the Standards have been redesigned and where the markings of poor or unacceptable related to a particular QI this has been changed.

QI	Rating	Description	Evidence for marking	HMIPS Comment	Evidence
2.8 Previously 2.5	Poor	All prisoners have supplied to them or are able to obtain for themselves a range of clothes suitable for the activities they undertake. The clothes available to prisoners are in good condition and allow them to maintain a sense of personal identity and self-respect. Clothing can be regularly laundered.	Prisoners should be allowed to wear their own clothes when not at work and that the criteria to do so was too restrictive, and concerns were raised that prisoners should be allowed to wear their own clothes when in the residential units.	Not met	There were unnecessary restrictions placed on prisoners being able to wear their own clothing, without a sound rationale in place. This was the case at time of this inspection. However, it has since changed and prisoners are now permitted to wear their own clothing within residential areas.
4.5 Previously 5.12	Poor	The law concerning the searching of prisoners and their property is implemented thoroughly:	Inconsistency of searching prisoners where there was a lack of a robust procedure	Met	Inspectors observed several searches being carried out on prisoners within the prison reception. The searches were carried out professionally and in accordance with the rules and policy as well as the SOP in place for searching.

QI	Rating	Description	Evidence for marking	HMIPS Comment	Evidence
4.6 Previously 5.22	Unacceptable	Prisoners personal property and cash are recorded and where appropriate, stored. the systems for regulating prisoners access to their own money and property allow for the exercise of personal choice:	Prisoners property and valuables were being checked without the prisoner being present, transportation of said items in unsealed bags and irregularities in accounting for prisoners cash. The inspection report identified that prison management had addressed these issues promptly during the inspection.	Met	Now rated this as two areas within this QI as good practice. All valuable property received during the admissions process was opened and accounted for photographed and sealed in a new bag with an identity number in front of the prisoner.
4.7 Previously 5.6	Poor	The risk assessment for any prisoner leaving the prison under escort is thorough and implemented appropriately. Any restraint imposed upon the prisoner is the minimum required for the risk presented.	Personal Escort Records (PERS) were no always completed with regards to risk assessment.	Met	Inspectors did not find any incomplete PERS. The PERS and risk assessments were individualised to the prisoner under escort and the risk that they posed.
4.10 Previously 5.2, 5.5, 5.14	Poor	The procedures for monitoring the prison perimeter, activity through the vehicle gate and for searching of buildings and ground are effective	The walkways were overgrown. Not all parcels were checked on arrival or x-rayed. Lack of evidence of the searching of buildings and no assurance provided.	Met	All walkways around the perimeter were seen to be clear of all obstacles. A process was in place where all parcels are checked and x-rayed. Evidence of searching of buildings took place during internal and external patrol and records kept.

QI	Rating	Description	Evidence for marking	HMIPS Comment	Evidence
5.6 Previously 6.2. 6.3 and 6.25	Poor	Prisoners have access to information necessary to safeguard themselves against mistreatment. This includes unimpeded access to statutory bodies, legal advice, the courts, state representatives and members of national or international parliaments.	There was a lack of information on how prisoners could gain access to their parliamentarian and information on gaining a call abroad was not promoted.	Met	Prisoners had access to copies of Prison Rules and a number of legal periodicals. The prison librarian described how he could access further items when requested. The main office contacted the appropriate embassy when a Forgiven National prisoner was admitted. Those that fitted the criteria had money placed in their phone credit to phone abroad.
5.7 Panel Principles Previously 9.1	Poor	The prison complaints system works well and Panel principles.	Equalities & Diversity form process was incomplete so unable to follow the complaints process.	Partially met	Prisoner had access to complaint forms but the E&D form was only used once in last 12 months. SHRC observed that inspectors found amongst the general complaints a number of complaints that related to E&D issues. The prison does not treat these any differently from ordinary complaints or capture information on them reflecting E&D aspects.

QI	Rating	Description	Evidence for marking	HMIPS Comment	Evidence
5.6 & Panel Principles previously 6.16, 6.17 & 9.8	Poor	Prisoners have access to information necessary to safeguard themselves against mistreatment. This includes unimpeded access to statutory bodies, legal advice, the courts, state representatives and members of national or international parliaments.	Information in foreign languages and use of the translation services within HMP Dumfries was lacking.	Partially met	Translations services were widely available and easily accessed but the use of the service was infrequent and minimal. Although there was limited use of the translation service, managers and staff interviewed could provide detail and method on how to access the service. A number of translated hard copy induction packs were located within reception. The hard copies available were prepared on the basis of the frequency and nationality of the most recent admissions.

ANNEX E

INSPECTION CASE STUDY – ‘LET’S COOK’ – ONE MAN’S JOURNEY

Whilst carrying out the inspection of HMP Dumfries, the Inspector of Prisons was delighted to meet with an ex-prisoner referred from here on in as ‘C’, who had served a short-term prison sentence at HMP Dumfries in 2017.

‘C’ talked about the circumstances that led up to his crime and the poor decisions he had made. ‘C’ went on to tell the Inspector of his experiences in prison as a first offender, how he felt during the first few days and nights in custody, his apprehension of mixing with other prisoners, being separated from his family and what it felt like to be locked up at night with no control of when he could leave his cell.

‘C’ spoke highly of prison staff who helped him and offered him advice and how he began to acclimatise himself to prison life. ‘C’ looked for opportunities to both ‘keep himself occupied’ and ‘better himself’, and part of this was applying to be a participant on a course called ‘Lets Cook’.

‘Let’s Cook’ is delivered within the prison in conjunction with Spring Board, a charity from the Dumfries area. The course is designed to give prisoners some experience and knowledge of working within the hospitality industry. Participants gain a number of qualifications and skills around Health & Safety in the workplace, interviewing skills and team working. The course is modular-based and in some cases allows prisoners the opportunity to attend outside placements to work alongside hospitality professionals. Where it is not possible to allow prisoners out to attend these placements due to risk, professional chefs attend HMP Dumfries to give cooking demonstrations and pass on their experiences to the class.

‘C’ spoke about how the course made him re-evaluate his life, look at the changes he needed to make to turn his life around, and also gave him the confidence to do so. ‘C’ completed his sentence whilst on HDC and spoke about his pride in being able to cook for his family, which was something he had not been able to do prior to ‘Lets cook’. He said that it helped the family to reconnect. ‘C’ has now got his life back on track and, after a number of failed business ventures prior to imprisonment, is successfully running a green energy company.

‘C’ still attends HMP Dumfries to speak to those attending the ‘Let’s Cook’ programme, where he highlights the benefits he gained from the programme. ‘C’ is hopeful that funding can be found to deliver more courses than is currently planned.

It was interesting to note that of those that had attended the course since 2017, which stood at 2,418, 75% had not re-offended, which is well above the national average of re-offending rates.

The Inspector would like to thank ‘C’ for sharing his journey with him and wishes him and his family well for the future.

ANNEX F

DEVELOPMENTS IN THE MAPPA PROCESS – A NEW APPROACH

Whilst carrying out the inspection of HMP Dumfries, the Inspector of Prisons was delighted to meet up with two members from the South West Scotland Multi-Agency Public Protection Arrangements (MAPPA). Allan Woods, the MAPPA Coordinator, and DI Robbie Scott of Police Scotland Ayrshire Division.

Allan and Robbie spoke passionately about their work within MAPPA. They had a strong interest in making a difference to those persons who are managed under these arrangements, and had concluded that to minimise the numbers returning to prison as a result of re-offending, alternative approaches should be considered.

It was interesting to hear their plans to seek the views of prisoners on their perception of the Risk Management process, with a view to identifying those components of the process which assisted them in desistance.

Allan and Robbie felt that by encouraging prisoners to engage in the risk management process, and allowing them more of a voice in the development of their risk management plans, they could be better supported in lowering their risk to others and encourage buy in and ownership from the prisoner, and therefore reduce re-offending. By engaging prisoners and encouraging their participation in the identification of risks and the plans developed through MAPPA to mitigate, this sits nicely within the PANEL principles which underpin our inspection Standards.

HMIPS would encourage any approach where the prisoner is at the centre of decisions that are made about them, and would be interested in any updates as to Allan and Robbie's progress. Prior to publication Allan and Robbie informed HMIPS that Dr Beth Weaver of Strathclyde University had agreed to be part of this work, and is currently working to further develop the initial questionnaire that prisoners will be asked to complete regarding their involvement with MAPPA.

ANNEX G

PRISON POPULATION PROFILE AS AT 17/12/2019

Status	Number of prisoners	%
Untried Male Adults	19	10%
Untried Female Adults	0	0%
Untried Male Young Offenders	0	0%
Untried Female Young Offenders	0	0%
Sentenced Male Adults	160	85%
Sentenced Female Adults	0	0%
Sentenced Male Young Offenders	0	0%
Sentenced Female Young Offenders	0	0%
Recalled Life Prisoners	1	1%
Convicted Prisoners Awaiting Sentencing	6	3%
Prisoners Awaiting Deportation	3	2%
Under 16s	0	0%
Civil Prisoners	0	0%
Home Detention Curfew (HDC)	0	0%

Sentence	Number of prisoners	%
Untried/Remand	19	10%
0 – 1 month	0	0%
1 – 2 months	0	0%
2 – 3 months	0	0%
3 – 4 months	0	0%
4 – 5 months	0	0%
5 – 6 months	4	2%
6 months to less than 12 months	5	3%
12 months to less than 2 years	12	6%
2 years to less than 4 years	21	11%
4 years to less than 10 years	71	38%
10 years and over (not life)	35	19%
Life	21	11%
Order for Lifelong Restriction	0	0%

Age	Number of prisoners	%
Minimum age: 22	3	2%
Under 21 years	0	0%
23 years to 29 years	31	16%
30 years to 39 years	55	29%
40 years to 49 years	33	17%
50 years to 59 years	28	15%
60 years to 69 years	24	13%
70 years to 75 years	11	6%
76 years to 80 years	2	1%
Maximum age: 84	2	1%
Total Number of prisoners	189	

ANNEX H

INSPECTION TEAM

Stephen Sandham, HMIPS

Paula Arnold, HMIPS

Calum McCarthy, HMIPS

Ewan Mackenzie, HMIPS

Kerry Love, HMIPS

Sue Brookes, SPS

Scott Cringles, SPS

Bryan Wallace, SPS

Dr John Laird, Education Scotland

Andrew Brawley, Education Scotland

Neil Gentleman, Care Inspectorate

Lindsay MacPhee, Healthcare Improvement Scotland

Cath Haley, Healthcare Improvement Scotland

Laura Wilson, Healthcare Improvement Scotland

Tatora Mukushi, Scottish Human Rights Commission

Eleanor Deeming, Scottish Human Rights Commission

ANNEX I

ACRONYMS USED IN THIS REPORT

ANP	Advanced Nurse Practitioner
BIM	Business Improvement Manager
CSRA	Cell Sharing Risk Assessment
CCTV	Closed Circuit Television
C&R	Control and Restraint
CSRA	Cell Sharing Risk Assessment
D&G	Dumfries and Galloway
ECR	Electronic Control Room
E&D	Equality and Diversity
FCO	Family Contact Officer
FCDO	Family Contact Development Officer
FLM	First Line Manager
FOI	Freedom of Information
HM	Her Majesty's
HMCIPS	HM Chief Inspector of Prisons for Scotland
HMIPS	Her Majesty's Inspectorate of Prisons for Scotland
HDC	Home Detention Curfew
ICC	Internal Complaints Committee
ICM	Integrated Case Management
IMU	Intelligence Management Unit
IPM	Independent Prison Monitor
MAPPA	Multi-Agency Public Protection Arrangements
MDT	Mandatory Drug Test
MORS	Management of Offenders at Risk due to any Substance.
NI	National Induction
NPM	National Preventive Mechanism
OH	Occupational Health

OLR	Order for Lifelong Restriction
OPCAT	Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment
PAF	Prisoner Appeal Form
PCF	Prisoner Complaints Form
PER	Personal Escort Record
PIAC	Prisoner Information Advisory Committee
PIDS	Prisoner Intrusion Detection System
PPMS	Personal Performance Management System
PR2	SPS electronic prisoner record system –version 2
PRA	Psychological Risk Assessment
PRL	Prison Resource Library
PSS	Prison Supervision System
PT	Physical Training
RMN	Registered Mental Health Nurse
RMT	Risk Management Team
ROSPA	Royal Society for the Prevention of Accidents
SAR	Subject Access Request
SCQF	Scottish Credit and Qualifications Framework
SMT	Senior Management Team
SOP	Standard Operating Procedure
SPS	Scottish Prison Service
SQA	Scottish Qualification Awards
TTCG	Tactical Tasking and Co-ordination Group
TTM	Talk to Me
WTE	Whole Time Equivalent
WTMD	Walk Through Metal Detector
UHI	University of the Highlands and Islands
UoF	Use of Force
VRG	Violence Reduction Group

Evidence Report

HMIPS Standard 1

Lawful and Transparent Custody

Quality Indicators

1.1 Upon arrival all prisoners are assessed regarding their ability to understand and engage with the admission process.

Rating: Satisfactory performance

HMP Dumfries reception staff interacted effectively with all admissions on arrival to gauge their understanding. During the inspection, all admissions spoke English. Staff were questioned on their knowledge of processes for foreign national or non-English speaking prisoners and demonstrated competence of procedure in this area. There were admission booklets freely available in the four most common languages admitted to the prison. Evidence provided demonstrated that the translation service had been utilised within the last six months, but not regularly.

1.2 On admission, all prisoners are provided with information about the prison regime, routine, rules and entitlements in a form that enables the prisoner to understand.

Rating: Satisfactory performance

All those admitted to HMP Dumfries during the inspection were asked if they had been in prison previously. Those observed who had not, were given a comprehensive overview of the admission and procedures attached to the process. The waiting rooms and general reception was bright, airy and had lots of relevant information in both poster and leaflet format available. Routine rules and regulations were explained before the prisoner was taken to the residential area where they received first night in custody information. The Link Centre and Integrated Case Management (ICM) team managed the core screen documentation paperwork on completion from the residential area, and this was evidenced on both paper and the SharePoint database. What was evident in this process was that on numerous occasions the paperwork was not completed fully on reaching the ICM team/Link Centre. This included missing signatures including residential FLMS.

Recommendation: First Line Managers require to play an active role in the core screen process by ensuring all paperwork is completed before sending it to the ICM team/Link Centre, and a robust assurance process should be implemented and tested through Prison Resource Library (PRL).

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

Rating: Satisfactory performance

All admissions observed had valid warrants and the reception officer checked that every prisoner was aware of their sentence and liberation date, with the prisoner signing a form to say he fully understood the dates. All warrants observed were manually calculated and confirmed via PR2.

There were sufficient staff both competent and qualified to manage the identification and registration of prisoners. Two staff who were qualified and compliant in Warrant and Sentence calculation, while 65 staff were compliant in the previous course, Warrant & Calculation Foundation course, and 24 were compliant in the intermediate course. GMA 032A/19 - The New Warrant and Sentence Calculation Training Course states that staff who have already passed the Warrant and Sentence Calculation Course do not need to re-sit the new course unless at a later date they wish to obtain the SCQF certificate.

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

Rating: Satisfactory performance

All admissions were informed of the classification under the Prisoner Supervision System (PSS) and inspectors observed the PSS paperwork being completed and PR2 being updated correctly. Inspectors completed further checks matching up paper records against PR2 records and all were found to be in order.

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

Rating: Satisfactory performance

HMP Dumfries correctly received admissions directly from Dumfries and Galloway courts as well as providing a national facility for offence-protection prisoners. During the inspection, all prisoners were admitted with the correct and requisite documentation and fully checked against PR2. Allocation within the prison was carefully managed given the prison design of 14 small accommodation areas within five residential halls. There was no Separation and Reintegration Unit within the prison and seven accommodation areas were designated as singleton posts.

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

Rating: Satisfactory performance

The reception process was robust in appropriately identifying vulnerabilities and despite the configuration of HMP Dumfries, where it can be difficult at times to

place the prisoner in the right environment for each situation, it was observed that staff carried out a thorough Cell Sharing Risk Assessment (CSRA) within the guidelines prior to allocation.

The residential FLM ensured that a daily Risk and Conditions and CSRA process was completed and this was evidenced during the inspection. The FLM commented where appropriate and made any amendments if required. There was a clear assurance process for this procedure which included secondary assurance from the Unit Manager and finally a monthly 10% admission check from the Deputy Governor. This was available for inspection and completed up-to-date, confirmed on SharePoint 29/01/20.

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

Rating: Satisfactory performance

All admissions were asked if they knew and understood their liberation and critical dates, and warrants were checked against PR2 to ensure they were properly recorded.

Secondary assurance was completed the following day by the Criminal Administration Team. During the inspection, it was evident that this team worked well with the reception staff and evidence was provided to show that it was over three years since anyone had been liberated or detained in error.

1.8 All prisoners attend an induction session as soon as practicable, but no later than one week after arrival, which provides a thorough explanation of how the prison operates and what the prisoners can expect, including their rights and obligations.

Rating: Satisfactory performance

National Induction (NI) was delivered on a Thursday morning.

The inspector witnessed a NI session where one LTP was present who had been recalled to custody; there were no refusals to attend as he was the only long-term admission that week. The session was led by the link centre officer and it was clear that the officer knew the package and was able to answer any questions the prisoner asked him. Normally support services such as NHS, the Family Contact Officer, Citizens Advice, Education and Social Work attended, however as the prisoner had not been long in the community before being recalled he did not wish the services to be present. The officer did, however, cover comprehensively all these areas and informed him how to contact them should he require them.

The induction unit keep up-to-date SharePoint records on who has attended or refused to attend the induction process, and these were accurate and up-to-date. It was clear to the inspector that the process worked well, staff were well-informed and the atmosphere was calm, relaxing and welcoming. It was unfortunate that some admissions choose not to attend this session.

Recommendation: HMP Dumfries should make greater effort to engage with those that do not wish to attend induction and record this.

1.9 The procedures for the release of prisoners are implemented effectively with provision for assistance and basic practical arrangements in place.

Rating: Satisfactory performance

The liberation process was observed by inspectors and it was found to be satisfactory. The prisoner was treated with courtesy and respect at all times and was informed step-by-step of the procedure. Liberation scrolls, licences and travel warrants were available for inspection daily. All prisoners' cash, private and grant discharged, was counted in front of them and signed for where appropriate.

Once the reception process was completed the prisoner was escorted to the front-of-house where final checks were completed by gate staff, including PR2 identification, and he was given his cellular telephone before exiting the establishment. A kit bag was provided to each individual within reception to store their property and belongings to offer privacy and reduce any potential stigma.

All appointments were made well in advance for any individual required to attend any appointments on liberation. On occasion, Social Work staff when required, collected those being liberated from the gate. This worked well.

HMIPS Standard 2

Decency

Quality Indicators

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

Rating: Satisfactory performance

HMP Dumfries was built in the late 19th century and the original buildings are still in use. Since the last inspection, the reception area has been refurbished and offers a light and modern welcome to the prison. The residential areas however remain cramped, and the act of filling in floors in most of the halls has caused a lack of natural light in most areas of the prison. Windows have been blocked or painted over, sometimes to prevent prisoners overlooking the neighbouring buildings. However, in some cases this seemed unnecessary. In particular, the painting of the skylights in A Hall, and the blocking of windows in the C Hall recreation areas could have had a more elegant solution.

Most of the residential accommodation allowed for single cells with integral sanitation. However, larger cells that accommodated three or four prisoners were found in several halls. In C Hall the sanitation was not in cell, therefore prisoners were required to press a bell if they wished to use the facilities during periods of lock up. Prisoners reported that they did not mind this as it gave them a feeling of freedom and trust.

All cells visited during the inspection were clean and free from graffiti. The individual lockable safes were particularly good, in working order and of a reasonable size to allow the storage of personal and private items. They were better than inspectors had seen during previous inspections. All cells had tables, kettles, chairs and televisions for the prisoners. However, in some cells where prisoners were required to share, these items made the cells crowded, and did not allow prisoners to pass by one another with ease. With a rising population, many older prisoners were required to share cells who would have been better suited to individual accommodation. Whilst consideration was given to the CSRA and the Personal Emergency Evacuation Plans, the prison did not consider the more mundane aspects of sharing accommodation for many of their prisoners, such as asking some elderly men to share bunk beds.

Given the aging population, there was a lack of accessible cells.

The exercise areas were bleak and lacked equipment for the prisoners to use, including benches. The practice of having suntan lotion dispensers in the areas prisoners gather before outside activities was a good initiative.

Recommendation: The skylight on A Hall should be cleared of paint to allow natural light into the halls; this should be expedited.

Recommendation: Where windows need to be blocked to stop the overlooking of neighbouring buildings, this should be done with translucent materials to allow light to enter.

Recommendation: The population of HMP Dumfries should be reduced to ensure no prisoner is made to share a cell.

Recommendation: A sufficient number of accessible cells to meet the needs of the population must be provided.

Good practice: Suntan lotion being available in muster areas for all prisoners.

Good practice: The quality, availability and size of the cell safes.

2.2 Good levels of cleanliness and hygiene are observed throughout the prison and procedures for the prevention and control of infection are followed. Cleaning materials and adequate time are available to all prisoners to maintain their personal living area to a clean and hygienic standard.

Rating: Good performance

Despite the age of the buildings, the prison was cleaned to a very high standard. Prisoners across all halls took pride in keeping their cells clean and tidy, and all those spoken to stated they had adequate access to cleaning materials and time to clean their cells. For those who were not able to clean their cells themselves, provisions had been made for hall cleaners and passmen to assist.

The cleaning party responsible for maintaining cleaning throughout the communal areas of the prison were well organised and had comprehensive training. There was some litter in the exercise areas, which was not helped by the fact that the prison bins were stored in the exercise areas.

2.3 All prisoners have a bed, mattress and pillow which are in good condition, as well as sufficient bedding issued by the prison or supplied by the prisoner. The bedding is also in good condition, clean and laundered frequently.

Rating: Satisfactory performance

The bed frames inspected were all in good condition. Mattresses were in good condition, and a system was in place for them to be replaced when required. No prisoners spoken to complained about the provision.

Bedding was also of a decent standard. However, there was no system to allow prisoners to have access to their own bedding.

Whilst the limitations of the buildings meant the prison laundry was small, the systems in place ensured that standards of hygiene were maintained. The laundry schedule was robust, and the prisoners working in the laundry were clear of the requirements of their roles. Where prisoners had skin conditions arrangements were in place to launder their items separately and with more sensitive detergents.

Recommendation: The SPS should address the lack of consistency across the SPS estate on whether or not prisoners are able to purchase their own bedding.

2.4 A range of toiletries and personal hygiene materials are available to all prisoners to allow them to maintain their sense of personal identity and self-respect. All prisoners also have access to washing and toileting facilities that are either freely available to them or readily available on request.

Rating: Satisfactory performance

All prisoners spoken to had free access to a wide range of toiletries and personal hygiene materials. There was also a wide range of items available from the prison canteen. The prisoner canteen PIAC took place regularly, and minutes were available on all the halls for prisoners to see. Where items had been requested they had all been provided.

Prisoners reported that they were able to shower or bath every day if they wished, and adequate provisions of clean towels were available.

In C Hall, which held around 40 prisoners across the four landings, there was a night sanitation system in operation, where overnight and during periods of patrol prisoners must press a bell to be let out of their cells to gain access to toilet facilities on the landing. Prisoners spoken to stated that they preferred this system, as it meant they did not have a toilet in their cell which they felt was unhygienic, and also they liked being able to leave their cell for short periods as it reduced the sense of claustrophobia. Whilst the time allocated to do this was limited, no prisoners inspectors spoke to had ever been sanctioned for taking too long, and staff in the control room who operated the system said they would normally just check the prisoner was okay and reset the system.

Current provisions of hair and body soap sachets were used, however HMP Dumfries are mindful of the environmental impact and have therefore taken the decision to move to an alternative means of provision. This decision is more environmentally friendly and cost effective.

A barber was in operation by appointment for LTPs. For the short-term and remand prisoners, a barber was based on the hall, but prisoners complained that they could not always get access to the barber, and there appeared to be a breakdown in the system for ensuring a barber was available for both E and D Halls. there was a shortage of haircutting equipment.

Recommendation: The prison should take forward plans for hair and body wash dispensers in communal showers.

Recommendation: The prison should review the barbering availability across all prisoners.

2.5 All prisoners have supplied to them or are able to obtain for themselves a range of clothing suitable for the activities they undertake. The clothes

available to them are in good condition and allow them to maintain a sense of personal identity and self-respect. Clothing can be regularly laundered.

Rating: Generally acceptable performance

The range of prison provided clothing available was reasonable. Some staff and prisoners reported a slight shortage in some sizes of prison issued jeans. Whilst all prisoners were provided with a fleece, access to waterproof coats was poor. Most prisoners spoken to did not know they existed, and some staff on the convicted side of the prison did not know where these were stored, so even if prisoners did ask, they may not be made available. Some waterproof coats appeared to be being stored without any intention of them being made available for use.

The laundry schedule was good, and systems for ensuring prisoners had items washed and returned appeared robust.

As with the last inspection in 2015, there were unnecessary restrictions placed on prisoners being able to wear their own clothing, without a sound rationale in place. **See Annex D.** This was the case at time of this inspection. However, it has since changed and prisoners are now permitted to wear their own clothing within residential areas.

Recommendation: Good quality, easily accessible waterproof jackets in sufficient number should be provided.

2.6 The meals served to prisoners are nutritionally sufficient, well balanced, varied, served at the appropriate temperature and well presented. Meals also conform to their dietary needs, cultural or religious norms.

Rating: Satisfactory performance

The majority of prisoners were able to eat meals in the communal dining area. Some prisoners complained about the lack of time available, and that meal times were overly rushed.

Some prisoners complained about the range of meals available. The food focus group was not felt to be meaningful by some prisoners. On one menu cycle a burger was an option for three out of the four menu options. Notwithstanding this legitimate concern, the meals appeared nutritious and portion sizes were adequate. The ability for prisoners to eat together in a communal dining hall next to the kitchen was positive. Meals are served at the correct temperature, prisoners were given the opportunity to socialise and the atmosphere was pleasant.

Despite the fact that the prison canteen sold a variety of sauces and diluting juice and fruit juice, prisoners were not allowed to take any items to the dining hall. Tomato sauce and brown sauce were provided in the dining hall, as was drinking water.

For the two halls that dine on their halls, systems were in place to ensure that food was kept hot.

The job title of 'ethnic cook' for the prisoner who looks after the halal meal choices was outdated, and had negative connotations.

There was some confusion about the budget available for food to the prison, and whether this was increased when the population went up. This matter should be clarified.

Religious and celebratory events had occurred, and provision was made for fasting prisoners. However, this provision could be expanded. Other than the summer and winter menus, both of which are on a three-week cycle, there was no evidence of any other changes to the menu to celebrate other foods or cultures.

Recommendation: The prison should review with prisoners the condiments and drinking options available in the dining hall.

Recommendation: The job title 'ethnic cook' should be changed to something more in line with current terminology.

HMIPS Standard 3

Personal Safety

Quality Indicators

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

Rating: Satisfactory performance

Inspectors checked a number of recent cases where prisoners had been subject to the SPS Talk to Me Strategy (TTM), and found the paper work to have been generally completed to a high standard, the only gap being recording around contact with families. Despite this, it was clear that quality assurance checks were carried out by the appropriate Unit Manager. Inspectors interviewed prisoners who had been subject to TTM and they confirmed they had been treated with care and compassion. Other prisoners who had not been subject to TTM indicated they were aware of what to do if they had thoughts about self-harm or suicide.

There was good awareness by staff of the required processes and protocols in relation to TTM and evidence of good working relationships between the SPS and the NHS with regard to support for those with mental health or other issues. A number of staff had not yet completed refresher training on TTM, but the prison was working to reach 98% compliance by the end of February 2020.

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

Rating: Satisfactory performance

The risks surrounding vulnerable prisoners were generally identified, and there was clear evidence of individualised support being provided in a considered and compassionate manner to the more vulnerable prisoners. The prison was able to provide evidence of exceptional case conferences and other activity to support those most at risk of self-harm or abuse, with good outcomes achieved, and the appreciation of family members secured.

A health and social care group met monthly and a list was maintained of those with identified care and support needs, with efforts made to locate such individuals, where possible, in single cells on a ground floor.

All prisoners that inspectors spoke with indicated that they felt well supported and cared for by prison staff.

3.3 Potential risk factors are analysed, understood and acted upon to minimise situations that are known to increase the risk of subversive, aggressive or violent behaviour. Additionally, staff are proactive in lowering such risks through their behaviours, attitudes and actions.

Rating: Satisfactory performance

A VRG had been established in August 2019 and was now meeting every six weeks. While the record keeping around the group could be improved, there was evidence of effective sharing of data and information in relation to risk. Similarly processes in relation to the handling of Management of an Offender at Risk due to any Substance (MORS) cases were effective.

Actual levels of violence in the prison over the last year had been very low and all prisoners and staff who met inspectors reported feeling safe. While violent incidents were rare, there was evidence that they were dealt with effectively, with situations de-escalated in a professional manner as quickly as possible. Most prisoners interviewed reported positive respectful relationships between staff and prisoners, which will have contributed to minimising such incidents and effective de-escalation.

It was encouraging to see that HMP Dumfries were keen to develop their capabilities still further. Two staff had been identified for extra training in the area of violence reduction, with the aim of then disseminating their learning within HMP Dumfries.

3.4 Any allegation or incident of bullying, intimidation or harassment is taken seriously and investigated. Any person found to be responsible for an incident of bullying, intimidation or harassment is appropriately reprimanded and supported in changing their behaviour.

Rating: Satisfactory performance

The SPS Think Twice Anti-bullying Strategy was applied effectively in HMP Dumfries, with important information for anyone concerned about bullying translated into a number of different languages including Polish and Albanian.

Prisoners indicated that they were aware what they should do if concerned about bullying, and staff understood how they should respond to such allegations.

A list of those who believed themselves at risk of bullying was maintained. Appropriate action was taken to investigate allegations of bullying and case records completed and adequately maintained. The prison was alert to the risk that allegations of bullying might be raised by those sharing a cell simply to try to secure relocation to a single cell.

The statistics in relation to compliance with compulsory refresher training on Think Twice did indicate room for improvement. This is discussed further in Standard 8.

3.5 The victims of bullying or harassment are offered support and assistance.

Rating: Satisfactory performance

Allegations of bullying were relatively rare at the time of inspection, and an individualised approach was taken to supporting the victim and dealing with the aftermath. Sometimes the victim was moved to a different location within HMP Dumfries for their own protection, but other solutions were considered first. Similarly any restrictions on access to regime or minimising social interaction with other prisoners were only adopted as a temporary measure.

3.6 Systems are in place throughout the prison to ensure that a proportionate and rapid response can be made to any emergency threat to safety or life. This includes emergency means of communication and alarms, which are regularly tested, and a set of plans for managing emergencies and unpredictable events. Staff are adequately trained in the roles they must adopt according to these plans and protocols.

Rating: Satisfactory performance

At the time of the inspection, records indicated very few incidents when an emergency alarm had to be deployed. Nevertheless, protocols were in place in relation to responding to an incident and staff were aware of these and what was expected of them when responding to an emergency alarm. Staff indicated to inspectors that they felt safe and supported when they did require assistance.

There was evidence that alarms were tested and that the control of the issuing and return of alarms was effective. An extensive pilot was under way on the use of radio alarms, with care being taken to ensure radio reception was satisfactory everywhere.

Contingency plans in paper and e-format for a wide range of potential incidents existed and were kept securely. Training was in place for managing different types of event and incidents. A few key roles remained to be filled, but there were plans on how to address that and a reserve pool of suitably trained individuals existed to cover for now.

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

Rating: Generally acceptable performance

HMP Dumfries boosted capacity in this area through making the post of H&S Coordinator a permanent full-time post. Clear evidence was provided of effective record keeping, risk management, and H&S promotion campaigns being run by the H&S Coordinator, and of a willingness to involve the H&S Executive when required.

A system of regular checks on H&S were initiated by the H&S Coordinator, and regular H&S inspections of the establishment were carried out by the H&S Coordinator in conjunction with either the Governor or Deputy Governor.

However, there was evidence that some parts of the establishment were not complying with the requirement to carry out monthly H&S checks in their own areas. Compliance in residential areas was particularly poor, but most areas of the prison had missed at least one monthly check during the previous year. Senior management support efforts by the H&S Coordinator to promote compliance, but a more assertive approach would be helpful. Relocation alongside other members of the management team might raise the profile of H&S and increase the H&S Coordinator's authority and influence with his peers.

Recommendation: Senior Management should provide more direct support for efforts to promote compliance with monthly H&S checks, and consider whether relocation of the office of the H&S Coordinator would also be beneficial.

HMIPS Standard 4

Effective, Courteous and Humane Exercise of Authority

Quality Indicators

4.1 Force or physical restraints are only used when necessary and strictly in accordance with the law.

Rating: Satisfactory performance

The UoF was not observed during the inspection. The Head of Operations was the responsible and accountable person for UoF within HMP Dumfries. There was a management information database for processing information on UoF, which provided information to the Intelligence Management Unit (IMU) manager and the Head of Operations to review incidents as per the Reporting of Incidents policy.

All of the control and restraint (C&R) forms were reviewed by the Head of Operations. The new incident policy was embedded and incidents where UoF had been used were discussed at an operational meeting chaired by the Governor twice per week. However, a number of incident forms required to be followed up as per the incident policy as they had not been reviewed within a 72 hour period. This was reviewed during the inspection and completed.

The Head of Operations reviewed all video recorded UoF. There was a Standard Operating Procedure (SOP) in place and a recent PRL audit for UoF. The Head of Operations and the Intelligence Manager were both able to talk through the incidences of UoF and were familiar with the policy, procedures and practices. Inspectors reviewed a large number of UoF forms and were satisfied that de-escalation was used appropriately by staff when afforded the opportunity to do so. In total, 94% of staff within HMP Dumfries were competent at C&R at the time of the inspection, and 100% of FLMs were competent in the role of the supervising officer.

The Head of Operations led the Tactical Tasking and Co-ordination Group (TTCG) and the IMU Manager chaired the VRG. All incidences of violence were reviewed by the establishment. The processes and systems set up to support both groups appeared to be effective and working satisfactorily. The Governor reviews the UoF analysis at the TTCG to ascertain trends.

Recommendation: The reporting of incidents should be reviewed within 72 hours as per the new SPS policy.

4.2 Powers to confine prisoners to their cell, to segregate them or limit their opportunities to associate with others are exercised appropriately, and their management is effected, with humanity and in accordance with the law. The focus is on reintegration as well as the continuing need for access to regime and social contact.

Rating: Generally acceptable performance

HMP Dumfries did not have a separation and integration unit. Prisoners who required to be separated from other prisoners under Rule 95 or confined to cell were held in the basement accommodation area. Cells 13 and 14 within the basement were referred to as the punishment cells. There was an occasional refusal to return to mainstream conditions however this did not occur during the inspection. There was a regime in place for this area, however, staff reported it was dependent on how busy staff were with admissions and other tasks.

The basement area also contained the prison's safer cells, and new admissions to Dumfries were held in this area until there was a space elsewhere within the prison. Staff therefore had a number of tasks to carry out, as well as operate a daily regime plan for admissions and carry out observations on those who were on TTM. In this area inspectors observed potential ligature points. and at the time of the inspection the toilet area was not clean.

At the time of the inspection, one prisoner was confined to cell and there was no use of Rule 95, 97 or 98 in force. It was noted that a number of Rule 98 applications for one hour periods had been previously used and Rule 95 was mainly utilised for periods of up to 72 hours. In most instances, Rule 95 was being authorised by an FLM. This was rectified as per the SPS policy during the inspection. The duty manager report contained information on any prisoner placed on Rule 95, with trends being analysed by the Business Improvement Manager (BIM) on a monthly basis.

There were not large numbers of prisoners placed on Rule 95 however, the paperwork was completed to a satisfactory standard with the exception of the authorising level of manager. There were no Rule 95 case conferences during the inspection, however, paperwork was inspected and sampled.

There were periods of isolation which inspectors would consider come under Rule 95. This is in the case of the MORS policy which albeit was used infrequently, it was used when there was a requirement to do so. It would be reasonable if someone is out of circulation on MORS to consider that they should be placed on Rule 95 if they are out of circulation. The prison reported that the case conference

would determine the location of a prisoner placed on MORS through their care plan. A dynamic risk assessment would be required if there was multiple occupancy of a cell.

Recommendation: Safer cells required to be reviewed in relation to potential ligature points. SPS HQ should have in place a consistent specification in relation to potential ligature points.

Recommendation: SPS HQ should have in place a consistent approach to MORS Policy and safer cells across the SPS Estate.

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

Rating: Satisfactory performance

Inspectors witnessed one orderly room during the inspection, which was held in C Hall. The hearing was delivered in a professional manner by the adjudicating Governor. It was held in an appropriate area which was out of sight of other prisoners. There was a caring approach to the orderly room and it was observed that the adjudicating Governor knew the prisoner and made him feel at ease while continuing in a manner formal enough to reflect the circumstances of the report. The hearing had one FLM in attendance and two officers to support the process. The hearing ensured that the prisoner was listened to and was able to make representations at each stage of the process and provide any mitigating circumstances. At the end of the process, the prisoner was advised on the appeal procedure if he was not in agreement with the punishment or any other matter relating to the orderly room. The process was not rushed and care was taken to ensure that the details of the orderly room were captured and discussed with the prisoner. The prisoner was informed that he could appeal through the Prisoner Appeal Form (PAF).

There had been 27 orderly rooms since the beginning of January 2020. The paperwork inspected, evidenced that the orderly room process was carried out effectively and that this procedure was not used any more than was required. There was a spread of adjudicating Governors across the SMT that heard orderly rooms. Each duty manager was responsible on their duty week to hear orderly rooms. A list was held by the BIM for those duty managers who were adjudicating Governors and a notice to prisoners had been published. There was a consistent approach observed within the paperwork that was reviewed by inspectors.

From the samples reviewed, the orderly room paperwork had a detailed understanding of the record of the hearings and ensured that there was evidence to support the punishments. It was noted within the paperwork inspected that prisoners had been given the opportunity to call witnesses when required. This was also observed at the orderly room inspectors attended.

There was an audit system in place for the orderly room procedure and 10% were monitored in an audit process by the prison.

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

Rating: Satisfactory performance

At the time of the inspection, there were no special security measures in place for HMIPS to check for any prisoners within HMP Dumfries, and it was reported that no one had been placed on special security measures for some years. The Head of Operations had a good understanding of when special security measures would require to be used.

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

Rating: Good performance

The Head of Operations was the accountable senior manager for searching within the establishment. He had in place a SharePoint site which logged all areas searched each quarter including operations, residential and offender outcomes areas. All cell searches were logged on this site and up-to-date. A residential officer was responsible for keeping the cell search database up-to-date. Inspectors noted that the database for cell searches correlated with PR2. Routine searching was managed as and when staff could carry out this process, as most of the posts within the long-term halls were singleton posts. Targeted searches were discussed and agreed at the TTCG, IMU or as a result of an incident report. A task sheet was created from this and issued to the manager of the area concerned.

Inspectors observed several searches being carried out on prisoners within the prison reception. The searches were carried out professionally and in accordance with the rules and policy as well as the SOP in place for searching.

The officer who worked in reception required to locate another member of staff to assist with the searching as this was a singleton post. A radio call requesting assistance from staff within the prison managed to secure a member of staff to assist with searches that inspectors observed. The searches were carried out sensitively and in a dignified manner. A new admission who had not been in custody before was observed being admitted by inspectors and the process was explained in detail to the prisoner regarding the purpose of the search and what to expect. The member of staff who permanently worked in reception had a professional manner and was able to explain the processes extremely well to prisoners being admitted and those who were being escorted externally.

It was observed that photocopies of property cards were provided to residential areas so that cell searching could be carried out. This was seen as a regular occurrence and staff within reception and residential areas could explain this process.

There was a search box stored within the residential manager's office which accompanied staff to the search area. The box contained appropriate bags to store any productions that were found during the search. The residential manager was

able to explain the search process relating to the chain of custody for productions and the process and procedures in place to manage any items.

The process for handing property out was managed well with an effective process in place. The reception officer ensured that the visitor was aware that there was property waiting to be handed out by personally going to the visit room to speak with the prisoner and his visitor.

4.6 Prisoners' personal property and cash are recorded and, where appropriate, stored. The systems for regulating prisoners' access to their own money and property allow for the exercise of personal choice.

Rating: Good performance

The reception within HMP Dumfries had recently been upgraded by the establishment and was clean, bright and airy. It had a simple design which worked well for the establishment and was a good first impression for those prisoners and visitors entering the prison. The reception had adequate storage facilities.

Upon admission to custody, all valuable property was photographed in front of the prisoner to ensure that the correct property was stored and accounted for. This provided reassurance to the prisoner and also gave a secondary assurance to the prison that processes were in place to ensure that valuable property would be accounted for.

Valuables were placed in a sealed bag with a number. The same process was in place for remand and convicted prisoners. Inspectors observed that all cash was accounted for during the admission process and a receipt was issued to the prisoner and the amount entered onto PR2. The reception officer explained in detail to the prisoner the process for depositing cash into his account while in custody and how the telephone system procedures worked. Sealed bags were opened and checked prior to being sealed in front of the prisoner in a new bag with an identification number logged.

An SOP was in place for reception and the admission process. This process was very well controlled, with good processes in place.

Prisoners reported that they were uncertain about the cost of calls to mobile phones and it may be worthwhile considering providing this information upon admission, especially for those who are in custody for the first time.

There were eight financial claims for loss of property in this financial year that had been processed through the Prisoner Complaints Form (PCF) system. The claims had been investigated and findings were recorded.

Prisoners were able to access their property upon request by completing a reception request form. Access to this was when reception staff were able to accommodate this and inspectors found no complaints about this process.

Money which was handed into the prison gate for prisoners was picked by office staff and entered onto PR2 the day after it was handed in. Inspectors observed money and property being handed in and receipts being issued.

Recommendation: HMP Dumfries should ensure that prisoners are informed about the cost of calls to mobile phones upon admission.

Good practice: All valuable property received during the admissions process was photographed in front of the prisoner.

Good practice: Valuable property bags were opened and accounted for, photographed and sealed in a new bag with an identity number.

4.7 The risk assessment procedure for any prisoner leaving the prison under escort is thorough and implemented appropriately. Any restraint imposed upon the prisoner is the minimum required for the risk presented.

Rating: Satisfactory performance

Inspectors observed a number of contracted escorts arriving and leaving the prison over the inspection period. Inspectors did not observe any SPS escorts arriving or leaving the prison, however, paperwork was sampled by inspectors who reviewed Personal Escort Records (PERS), and risk assessments. The PERS and risk assessments were individualised to the prisoner under escort and the risk that they posed.

Staff within the reception and the operations managers were able to explain the process for both the contracted escorts and the SPS escorts. Inspectors observed that procedures were in place when an SPS escort was required and staff reported they facilitated SPS escorts. The operations manager was responsible for briefing staff and was able to explain what the briefing would entail and ensured that signatures from both members of staff were obtained to say that they had been briefed.

The Head of Operations carries out a cuffing audit once per month on the risk assessment forms to ensure that an individualised approach to risk assessment has been taken for prisoners who are on escort.

HMP Dumfries liberates on average three prisoners per week. There was a process in place for looking forward three months in advance to review what liberations take place.

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

Rating: Good performance

The Head of Operations was the accountable senior manager for the testing of prisoners for alcohol and controlled drugs policy. There was an SOP in place for this process.

An FLM has first line responsibility for the Mandatory Drug Testing (MDT) process. Staff who spoke with inspectors were very knowledgeable and experienced about the policy, procedures and processes. As different staff regularly worked in the area, the processes and procedures that were in place meant that any officer who was trained in testing could work within this area.

Staff were able to describe to inspectors how test results were explained to prisoners and what the procedure would be for independent testing if the prisoner disagreed with the test result. An MDT guidance manual was in place within the testing area for staff to refer to.

Within 2019, 225 MDTs were carried out for risk assessment and suspicion testing, as well as some intelligence-led testing. This data had been audited by the FLM in charge of the MDT area and there were records stored to support this.

Inspectors were informed that there were normally two testers on duty within the operations and residential area on a daily basis.

The statistics gathered from the MDT area were discussed at TTCG which was chaired by the Governor-in-Charge.

4.9 The systems and procedures for monitoring, supervising and tracking the movements and activities of prisoners inside the prison are implemented effectively and thoroughly.

Rating: Good performance

Inspectors observed the route movement on a number of occasions to the activity areas, dining hall and exercise. It was noted that this was orderly, concise and moved on time in a controlled manner. The route movement was well-established and both staff and prisoners had a good understanding of this process. Numbers of prisoners on the route were quite high considering the size of the prison and attendance at activities was reported as important to prisoners that inspectors spoke with.

Any items that were carried on the route by prisoners to the laundry or the learning centre were searched individually by the staff at the Walk Through Metal Detector (WTMD).

During the time of the inspection, the WTMD was out of order in E Hall. The prisoners from this hall were escorted to C Hall to use the WTMD for route

movement. An SOP was under development for the change to the route movement because of the WTMD being out of use in E Hall.

The Residential Manager was in charge of the route and ensured that numbers checks were accurate after each movement. Numbers were confirmed with reception after each route movement and inspectors observed numbers correct checks being carried out throughout the day.

There was a good range of internal Closed Circuit Television (CCTV) coverage within the Electronic Control Room (ECR) with clear picture quality, enabling staff to identify individuals if required. The supervision and tracking of movement was supported by the ECR staff who monitored movement through CCTV. Staff working in the ECR were able to explain the process for monitoring any suspicious activity during the movement of prisoners throughout the prison.

Good practice: Any items carried on the route by prisoners were searched.

4.10 The procedures for monitoring the prison perimeter, activity through the vehicle gate and for searching of buildings and grounds are effective.

Rating: Good performance

The ECR was staffed by one member of staff who monitored the cameras for the prison. The CCTV coverage was clear both internal and external to the prison. Current reported faults were being dealt with by the Head of Operations and the Estates Maintenance Manager. CCTV and light checks were undertaken by night shift staff and records were in place to support this. The staff members in the ECR were able to describe the security alarms in place and what to do if an alarm was triggered.

Perimeter patrols were carried out by operations staff periodically throughout the day. Inspectors observed that both the internal and external patrol route around the prison was clear to walk round. There were records in place to support that patrols were being carried out regularly. Prison Watch signs were in place external to the prison. Perimeter Intrusion Detection System (PIDS) checks were allocated to the vestibule officer on weekdays and the weekend patrol staff to be randomly checked. Records were in place to record this task on SharePoint. This process was well-embedded and understood by the staff whom inspectors spoke with. Vehicles were searched on entry and exit to the prison using the appropriate equipment. Staff were requested from other areas when required to assist with searching of vehicles, drivers and passengers.

Staff who worked in the Gate area were observed processing cash handed in for prisoners by visitors and this was managed professionally.

Staff and visitors entering the prison were searched in accordance with policy and there were lockers available for valuables to be stored within the vestibule area. Staff who worked in this area were polite and courteous to staff and visitors.

The staff who worked in the vestibule were responsible for ensuring that the mail that was delivered was x-rayed. A process was in place with an SOP to support this. The mail process had a robust assurance process in place to account for any mail entering the establishment. Mail could also be handed in rather than be posted.

HMIPS Standard 5

Respect, Autonomy and Protection against Mistreatment

Quality Indicators

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

Rating: Satisfactory performance

The passing of critical information between prisoners and their families can be considered as satisfactory at HMP Dumfries.

On occasion the information sharing process could be considered unclear. An SOP for notification of death of a relative or serious illness described how the vestibule officer should manage information received. However, incoming information was handled initially by the Electronic Control Room (ECR) and confirmed and disseminated to Line Managers from this point. Staff described the process in detail, however no one spoken too, described the role of the vestibule officer in the process. The information handling process was robust and provided a secure and sensitive chain of information, the SOP should be adjusted to reflect this.

A Family Strategy existed which was well supported by a proactive Family Contact Officer (FCO). Families visiting HMP Dumfries were offered induction and awareness sessions. Alternatively prisoners were offered an induction and awareness booklet which could be forwarded by post to their visitors.

Visits to HMP Dumfries could be difficult for families due to geography and limited public transport. Although there had been repeated exploration of potential evening visits it had not as yet been possible to arrange these. Alternative events such as family fun days have been organised. This allowed families visiting to enjoy visits in the excellent gardens of the establishments. Following a Family Strategy PIAC a decision was taken to host a further alternative fun day for those prisoners without children under the age of 16.

Prisoners also worked in conjunction with an external partner agency and developed a musical family session. The sessions took place in the visit room outwith school hours in the late afternoon. The events were well attended with eight prisoners and their families taking part.

Integrated Case Management (ICM) invitations are sent to families to attend ICM meetings but very few attend.

Recommendation: HMP Dumfries should adjust their SOP regarding the death or serious illness of a relative to reflect the practice in place.

5.2 Relationships between staff and prisoners are respectful. Staff challenge prisoners' unacceptable behaviour or attitudes and disrespectful language or behaviour is not tolerated.

Rating: Satisfactory performance

Staff and prisoner relations at HMP Dumfries appeared generally positive and could be described as relaxed. Many prisoners and staff were on first name terms.

Prisoners spoke positively of their relationship with staff and all prisoners interviewed used the same or similar description of their circumstances; they felt safe in HMP Dumfries. There was a correlation between this feeling of safety and the positive relations which existed.

The majority of discipline reports at HMP Dumfries were for disobeying an order, which related to refusing to attend a work party. Further exploration of these reports identified that prisoners in the waste management group were most likely to refuse to attend their work. The waste management group was drawn from the short-term population.

Staff interviewed could describe the Think Twice policy and had good knowledge of the suspected bullying report forms. Training was ongoing and the Think Twice policy was well advertised on electronic and fixed notice boards in the assembly area.

5.3 Prisoners' rights to confidentiality and privacy are respected by staff in their interactions.

Rating: Satisfactory performance

Discussions and interviews with staff indicated an understanding of the importance of prisoner privacy and confidentiality.

HMP Dumfries could provide confidential interview facilities within the Link Centre and agents rooms, but there were fewer areas which provided this environment within the residential areas. Each residential area had recreational areas that when not in use could provide comfortable informal discussion areas.

There was information on data protection within the hall information packs and displayed on some hall notice boards. However, it did not appear in any translated formats.

Mail was handled securely at HMP Dumfries and there were two levels of FLM assurance. This complimented the initial checks carried out by the mail handler and the front of house vestibule staff, with both count all incoming mail. All incoming mail was x-rayed. Confidential mail and recorded deliveries were dealt with in line with national guidance. All staff could describe in detail the SOP for mail handling. Incoming mail was recorded and assured accurately.

HMP Dumfries had recently removed all free to view prisoner detail information, such as prisoner location and sentence notice boards. This was in keeping with GDPR and data protection but also a consequence of a prisoner complaint.

Recommendation: The SPS should consider methods which ensure that up to date information is available for prisoners in translated formats.

5.4 The environment in the prison is orderly and predictable with staff exercising authority in a legitimate manner.

Rating: Satisfactory performance

HMP Dumfries ran an orderly and predictable regime, which was maintained in part by the earlier noted positive staff and prisoner relationships. A good example of this was the route movement that was timeous and well controlled. However, the cancellation of the early morning gymnasium sessions as part of the staff shortage protocol was frustrating to prisoners and staff. Although evidence showed that when this happened sessions were rearranged to allow for fairness. Meetings, such as the VRG and Tactical Tasking ensured that HMP Dumfries were able to challenge issues that threatened the safety of those that lived and worked in the prison. The UoF at HMP Dumfries was relatively limited and well exercised in line with SPS policy. However as stated in Standard 4, staff were unsure on the use of the MORS policy with regards to utilising rule 95 (1,) which would provide a legal position to remove a prisoner from circulation. There was a staff shortage protocol which was clear and robust. Staff clearly understood expectations and were extremely flexible in their approach.

Observation of the prisoner route movement exemplified the flexible approach of staff in ensuring the safe and secure manner in which prisoners moved from residential areas to daily activities. Staff from various posts attended the route movement and searching. This ensured security and safety throughout this major prisoner movement.

Prisoners interviewed confirmed their disappointment that in order to accommodate the staff shortage protocol early morning gymnasium sessions were cancelled to allow the one PT Instructor to assist with residential discipline duties.

5.5 Prisoners are consulted and kept well informed about the range of recreational activities and the range of products in the prison canteen as well as the prison procedures, services they may access and events taking place. The systems for accessing such activities are equitable and allow for an element of personal choice.

Rating: Satisfactory performance

PIACS and/or focus groups took place frequently and were held on an at least quarterly basis. During interview some prisoners suggested they would like the meetings more often.

HMP Dumfries had adapted the groups to accommodate their population and the demands of those in their care. Referred to as PIACS, the groups were now held separately for short-term and LTPs. The focus of the PIACS alternated between general issues and the canteen. Dates for future PIAC groups were scheduled but there was no evidence of publishing the dates for general awareness. There was clear evidence that the requests from the prisoner groups were frequently achieved and met. During interviews, prisoners accepted this to be the case but were disappointed that the alternative items offered could be considered as poorer or of less expensive quality.

Food focus groups took place regularly and an excellent menu was the result. Two prisoners interviewed raised concerns that the choice of vegetarian options were limited. They stated that requests for greater vegetarian alternatives or vegan choices were dismissed. The prisoners felt that HMP Dumfries was failing to adapt to the developing recognition of non-meat or alternative to meat diets.

Prisoners arriving at HMP Dumfries were provided with an informative induction package, this could be made available in various translated formats although there was no evidence of an easy read format. Peer mentors were used at HMP Dumfries to support literacy issues and there were very good examples of ongoing training and support provided. However, peer mentors were not used to support new admissions or as part of the induction process.

Recommendation: HMP Dumfries to publish the PIAC schedule to all prisoners.

Recommendation: HMP Dumfries to develop their excellent peer mentor role to support induction and admissions.

5.6 Prisoners have access to information necessary to safeguard themselves against mistreatment. This includes unimpeded access to statutory bodies, legal advice, the courts, state representatives and members of national or international parliaments.

Rating: Satisfactory performance

Access to agent visits was well managed and available through a booking system, coordinated via the gate and vestibule staff. Agents may request visits to clients in the evening and this could also be accommodated.

Virtual courts were available at all times via video link, although requests for virtual court appearances had been limited. There did not appear to be any frequency or scheduling for these requests, however HMP Dumfries were well set up to facilitate virtual courts from any location and at short notice.

Translations services were widely available and easily accessed at HMP Dumfries but the use of the service was infrequent and minimal. Although there was limited use of the translation service, managers and staff interviewed could provide detail and method on how to access the service. Reception staff described the translation process in detail. A number of translated hard copy induction packs were located within reception. The hard copies available were prepared on the basis of the frequency and nationality of the most recent admissions.

Prisoners had access to an excellent library service which included copies of Prison Rules and a number of legal periodicals. The prison librarian described how he could access further items when requested.

Copies of the Prison Rules were located in staff offices in all residential areas, these were accessible to all prisoners on request from staff.

The main office contacted the appropriate embassy when a Forgiven National prisoner was admitted and uploaded money onto a prisoners phone where they fitted the criteria.

Recommendation: HMP Dumfries should provide more obvious and accessible holders for complaints information. No prisoner was denied access to the complaints paperwork but there should be more obvious signposting and information holders.

5.7 The prison complaints system works well.

Rating: Satisfactory performance

The complaints process and the subsequent appeals processes and services were advertised on noticeboards throughout the establishment.

Prisoner complaint forms were located within drawers within each residential area and prisoners had unhindered access to these drawers and the paperwork and in general prisoners were not hindered in their access to them. However the process was not well sign posted.

Scottish Public Services Ombudsman (SPSO) information was advertised across the establishment.

Evidence provided suggested prisoners had accessed the SPSO very infrequently. At the time of the inspection, there appeared to be two complaints which were being dealt with by the SPSO.

Most complaints related to the regime and the restrictions caused by staff shortages. In particular lack of activities. There were issues around lunch timescales which prisoners suggested could be hurried to accommodate the prison regime. Visit session timings were also close together which impacted upon later sessions, meaning a 60 minute sessions was reduced. Prisoner were disappointed because of the repeated cancellation of PT. Issues with property and food were the next most regular complaints.

It could be considered that HMP Dumfries had attempted to address the issues raised via complaints by using frequent and themed focus groups as described in QI 5.5. There was limited evidence that this had been a successful approach, however matters raised within the focus groups had been resolved satisfactorily, which suggested there may be merit in this method going forward.

Staff interviewed described the complaints process in detail and the system used

when recording complaints. The vast majority of complaints were escalated to FLMS and only a few were answered at source verbally by staff. Further exploration with the prisoner group suggested that they considered the verbal responses in some cases irrelevant, and prisoners had a perception that all complaints must be dealt with by FLM or above.

Prisoners were comfortable using the complaints process, although a number suggested they preferred to raise matters via PIACs or focus groups. They considered complaints as an unnecessary action.

Prisoners interviewed described the complaints procedure as always taking the exact timescale and never being responded to early.

There was evidence that Internal Complaints Committee (ICC) was accessed by prisoners at HMP Dumfries.

Some prisoners were prolific in their use of the complaints process. They described complaints variously as a contest or a situation of “some you win.”

The complaints process has on occasion beneficially changed practices at HMP Dumfries for example prisoners’ identification name boards were no longer on general display thanks in part to a response to a prisoner complaint.

Although this could be considered as a slightly vexatious approach, in every case reviewed, HMP Dumfries had responded to complaints appropriately and within timescales.

During interview, a literacy peer supporter explained how he had assisted in the completion of complaints forms.

An issue of a missing PCF2 had been raised and there appeared to be no auditable trail. As PCF2s were sent discretely to the Governor-in-Charge there was no method in place to track this type of submission.

Recommendation: In relation to prisoners submitting a confidential PCF, the SPS should consider creating a system which provides a receipt for such submissions, which would provide a track of each complaint.

5.8 The system for allowing prisoners to see an Independent Prison Monitor works well.

Rating: Satisfactory performance

There was no evidence of restriction of access to IPMs. The service was advertised throughout the establishment, although the posters on display were out-of-date. Prisoners completing IPM paperwork post it into the one post-box located in the assembly area.

The quarterly report provided by the IPM was positive and described a well-run prison with positive staff and prisoner relationships.

Prisoners interviewed were at times ambivalent to the role of IPM. They did not recognise it as an essential services and one was dismissive describing how his issue was taken straight to the residential staff and the answer they provided was simply repeated verbatim.

Staff interviewed had no issue with role IPMs.

Recommendation: HMIPS should work with HMP Dumfries to ensure all IPM notices are up to date and noticeboards are well signposted.

Recommendation: HMP Dumfries should ensure that the one IPM post-box is more adequately signposted within the assembly area.

HMIPS Standard 6

Purposeful Activity

Quality Indicators

6.1 There is an appropriate and sufficient range of good quality employment and training opportunities available to prisoners. Prisoners are consulted in the planning of activities offered and their engagement is encouraged.

Rating: Good performance

The prison offered an appropriate range of employment and training opportunities to prisoners. The opportunities for LTPs included: kitchen; laundry; cleaning; joinery; pass men roles and gardening. STPs were limited primarily to waste management. Although this range was limited, it was adequate for the size of the prison population. Unusually, work opportunities were at times available to untried prisoners where practical. This was typically where an untried prisoner was known to the prison.

The employment and training opportunities were of good quality. The work sheds were adequate with reasonable resources. The quality of instruction and work ethic in each area was strong, and there was a clear sense of order, trust and focus in their work. Prisoners felt safe and were treated with respect in the work sheds. In almost all areas SQA qualifications were offered and taken up, and a high proportion of prisoners had completed vocational qualifications.

Work parties comprised of a pool of around 18 prisoners, with around 12 who could be taken and supervised at each session. This allowed the prison to optimise uptake and fill available spaces for each session, as many prisoners would have PT, education or other sessions which made them unavailable for the work party from time-to-time. Attendance rates were high. This management of numbers worked well to make the best use of spaces available. From time-to-time, some of the work parties were cancelled and work opportunities lost as a result of the need for staff cover elsewhere.

Prisoners were consulted on the activities offered, and a further review was underway to ensure that the work experience and qualifications continued to be relevant to the prisoners who may use the skills and qualifications on release.

The work parties also engaged with community activities or events where they could to enhance the sense of purpose and achievement. The joinery work party had completed many tasks for community groups and hospitals, which had been recognised and publicised, giving the prisoners a sense of pride. The waste management work party recycled old wood into fire kindling, which was distributed to almost 300 older residents in the community, again giving the prisoners a sense of contributing positively to their community. The gardening work party helped establish a project for people in the community suffering from Dementia, and prepared activities and tasks for them to do. These activities gave a strong sense of purpose and community connection.

Good practice: Helpful vocational training was offered within the life skills area with a focus on the hospitality industry. “Let’s Cook” was a programme that had been offered for three years and, with the support of an external partner, it offered a useful introduction to personal and professional cookery, as well as developing employability and life skills. Over the three year period, 75% of those undertaking the programme have remained outside the prison system.

6.2 Prisoners participate in the system by which paid work is applied for and allocated. The system reflects the individual needs of the prisoner and matches the systems used in the employment market, where possible.

Rating: Good performance

The prisoners were given useful and clear information on their arrival in the prison regarding the work options open to them. They were encouraged to think positively about the benefits and many prisoners who, by virtue of age, were not required to work, still took up the option. Having applied for a work party, prisoners were given a general interview aimed at assessing their skills, knowledge, attitude and training. This allowed the staff to give useful advice on the best options.

Prisoners applied for a specific work party and following the normal security checks, were then interviewed by the officer leading the work party. There was a weekly meeting to manage work allocations. Should a prisoner want to change work party, this was done through the normal application process. This was normally triggered by the prisoner completing qualifications or having served for some time on a work party rather than any discontent.

Occasional focus group discussions had allowed prisoners the opportunity to feedback on work allocations. Periodic review of what was on offer gave some confidence that the range of work parties were fairly relevant to the local employment market. Prisoners confirmed that there were very few delays in getting into an appropriate work party.

The only work party available to all STPs was the waste management work party and prisoners could start on this straight away as there is no waiting list. However, where a short-term or untried prisoner is known to the prison, they may be allocated to another work party where security checks allow. This showed a useful reflection on the needs and circumstances of individual prisoners.

6.3 There is an appropriate and sufficient range of good quality educational activities available to the prisoners. Prisoners are consulted in the planning of activities offered and their engagement is encouraged.

Rating: Good performance

There was a limited range of good quality educational programmes available to prisoners. These included programmes across a number of subject areas including art, ICT, history, creative writing, maths and communications. Most courses were provided at SCQF levels 4 & 5. Prisoners attained a mixture of Scottish Qualification Awards (SQA) and Royal Society for the Prevention of Accidents (ROSPA) units of

accreditation, attained through the Fife College ILearn platform. A few prisoners were studying distance learning qualifications at an advanced level through Dumfries and Galloway College and the University of the Highlands and Islands (UHI). Adult basic education provision was delivered through one-to-one support sessions held in the Link Centre, supported by local authority staff. In addition, prisoners with no experience of using a computer were supported to engage in making use of technology. Two peer mentors supported individual prisoners with their learning in their residential halls.

All prisoner groupings, including those awaiting trial, had sufficient opportunities to access educational provision. Education programmes were timetabled well and this ensured all prisoner groupings could access and attend education programmes.

A number of prisoners participated in a helpful induction session, which included completion of the Skills Profiler Scotland. This approach helped identify prisoner learning need and was used to inform teaching approaches.

Education staff encouraged prisoner participation in educational activities and these were supported well by the prison regime staff. Around one-third of the prison population attended education classes. Staff were responsive to the educational requests received from prisoners. Where practicable, they incorporated these into their provision and made adjustments to their learning approaches and activities. Staff and prisoner relationships were very positive. Prisoners valued their learning programmes and recognised the improvements they were making.

Education staff had established a number of purposeful activities in conjunction with external partners. Visiting authors conducted book discussions held with prisoner groups. Prisoners' art work was displayed within the games hall where outside visitors could view and make purchases. A visiting Cumbria University lecturer supported prisoners to produce a photography brochure focused on the history of the Dumfries area.

6.4 There is an appropriate and sufficient range of physical and health educational activities available to the prisoners and they are afforded access to participate in sporting or fitness activities relevant to a wide range of interests, needs and abilities. Prisoners are consulted in the planning of activities offered and their engagement is encouraged.

Rating: Generally Acceptable performance

There was a good range of physical activities provided in the main gym to support physical fitness and training. The gym was small but appropriate and well-equipped. There was an indoor games hall which was used well. This was supplemented by the availability of two smaller satellite gyms in two of the wings with a few pieces of useful equipment in each. However, there was limited use of the extensive outside space for football or other activities.

There was an appropriate and formal programme of gym activities made available to all groups of prisoners. In addition to taking groups by hall, there were some themed activities such as spin for prisoners from any area. Prisoners valued the useful and

skilled input given by PT staff and confirmed that it was a supportive and safe atmosphere for exercise.

The programme of activities was often interrupted where staff had to be taken to cover staff absences or shortages in other areas of the prison. Although staff rescheduled sessions where practical to ensure no particular group would regularly lose their gym slot, there was still a significant loss of sessions. This averaged over one gym slot lost each day and it had an impact on activity and morale.

The staff recently established two PT sessions each week available on site in one of the halls aimed at older or infirm prisoners. This was primarily seated exercise and was valued by the older prisoners. A “Fit for life” programme was offered once a year, aimed at prisoners who were irregular gym attenders or who may have minor weight or health challenges. This included advice and support on diet and health as well as general work on fitness.

There was a lack of health promotion information or activities provided within the prison. There were relatively few structured programmes around healthy living or healthy eating, heart health or mental health. Wellbeing and relaxation were rarely addressed and there were few promotional activities around a healthy lifestyle. This is increasingly important with an aging prison population, yet was hardly visible to most prisoners. Although prisoners indicated that the mental health clinical service was readily available on an individual basis, they recognise an absence of information or support on the wider issue of keeping good mental health.

Recommendation: Further opportunities should be offered to promote and support wellbeing and, in particular, mental health.

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

Rating: Satisfactory performance

The prison had two separate libraries, sited in different locations, to meet the needs of short-term and LTPs. They both contained very large numbers of DVDs and these were popular and were well used. The LTP library contained large numbers of fiction texts and some non-fiction books including history and autobiographical texts. This library also had large-print texts and publications designed to appeal to prisoners with low levels of literacy or reluctant learners. The STP library was less well stocked. It only contained fiction texts and did not contain a range of other books to meet the reading needs and interests of the STP population.

All prisoner groups had access to safeguarding and individual rights texts. Neither library contained newspapers or general interest magazines. A limited number of books were located for prisoners use within the residential halls. The prison staff had established effective formal links with Dumfries and Galloway Council library services. These arrangements enabled a significant number of prisoners to benefit from council loan services.

Prison staff hosted small group activity sessions within both libraries. These included matchstick modelling, chess and group discussions. These worked well and were valued by the prisoners as they supported informal discussions and positive engagement.

Within the libraries, there were no thematic displays or promotions addressing prisoner-related issues such as mental health concerns. Prisoners were consulted informally on their library experiences by the Library/Activities Officer. They provided ongoing feedback on their DVD selection options but little input into book selection or purchase stock choice options.

6.6 Prisoners have access to a variety of cultural, recreational, self-help or peer support activities that are relevant to a wide range of interests and abilities. Prisoners are consulted on the range of activities and their participation is encouraged.

Rating: Generally acceptable performance

The chaplaincy provided a range of weekly services for prisoners of different faiths including Church of Scotland, Roman Catholics and Muslims. In addition, through the services of chaplaincy volunteers, bible study classes were held on a regular basis. Worship services were conducted in the prison visiting room.

The prison offered a range of cultural, recreational and self-help activities. The prison celebrated a few religious and cultural events including Burns Day, Christmas, Remembrance Day and Eid. However, there was no active promotion or wider awareness raising to promote understanding of other cultures or religions. There were no prison wide awareness raising campaigns or celebrations to encourage a greater understanding of people with different backgrounds, interests or abilities.

The Learning Centre provided a few themed events to promote prisoner learning and understanding. A number of prisoners attained recognition of their art and literature through successful entries made for the Koestler Awards. Twelve awards were attained last year, including one prisoner attaining a platinum award.

Prison staff consulted informally with prisoner groups on the range of cultural and self-help groups provided. Where prisoner groups did not attend events, staff made efforts to engage with them and seek their views for adjustments or alternative provision. Wheelchair-bound and elderly prisoners were supported to engage in activities through attendance and support from staff in their halls. The prison had two prisoners who supported individuals through their Listener roles. In addition, at the time of the inspection, a further five were being trained. Prisoners also had access to two peer tutors and mentors.

Recommendation: Prison managers should actively promote a wider knowledge of equality-related issues and an understanding of other cultures in line with the requirements on public bodies.

Good practice: Organised events including Holocaust and Genocide Awareness activities and event, Wigtown Book Festival, Recovery Café,

prisoners week, prisoner training in dementia awareness; yoga available in PT schedule, Recover week series of events.

6.7 All prisoners have the opportunity to take exercise for at least one hour in the open air every day. All reasonable steps are taken to ensure provision is made during inclement weather.

Rating: Satisfactory performance

Exercise was well managed with appropriate staff supervision. Exercise areas were generally reasonably tidy and checked by staff in advance of use. Some block seating was available in the exercise yards, but these areas were otherwise quite institutional and could be further enhanced. Prisoners described a desire to access the prison gardens area more frequently than was currently possible for the purposes of relaxation and time in the open air, and this merits further consideration.

Participation levels at exercise were generally good and access arrangements were straightforward; however, the exercise period for the LTPs was split into two sessions, and whilst two sessions of shorter length appeared more appropriate for the age range and mobility issues evident, one of the half hour sessions took place at 07.45 every day which may inhibit attendance. Prisoners reported feeling safe at exercise, and attendance of different population groups was managed in such a way as to ensure offence-protection prisoners were not subject to abuse.

Prisoners were all issued with good quality individual fleece jackets hats and gloves, however there was inadequate provision of good quality, easily accessible waterproof jackets and this needs to be addressed.

Recommendation: Consideration should be given to further enhancing existing exercise areas and improving access to the gardens facility.

Recommendation: As per the recommendation in QI 2.5, Good quality, easily accessible waterproof jackets in sufficient number should be provided.

6.8 Prisoners are assisted in their religious observances.

Rating: Generally Acceptable performance

The Chaplaincy team at HMP Dumfries was well established with good community links, previous attempts to base a Chaplain in the community to support through care were innovative but had ceased. Team relationships were positive with the experience of being part of the Chaplaincy team described as 'enjoyable'. Levels of provision were generally adequate with multi-faith needs catered for and volunteer support available, though additional services to support bereavement and loss to supplement those offered by the Chaplains should be considered. The Chaplains were integrated into the SMT, attending appropriate meetings and events including E&D planning. Chaplains described being supported and confident in their interactions with a complex and potentially high risk offence related population, with opportunities to consult other specialist disciplines for advice as required.

Attendance at services was good and Chaplaincy events inclusive of both LTPs and STPs. This in principle was a positive example of integration, however attendance should be monitored to ensure that individuals from either population group do not feel inhibited from participating. A range of Chaplaincy events and services were evident with encouraging levels of community engagement.

Despite a positive outlook, facilities for the Chaplaincy were inadequate and required further consideration. Whilst recognising the need for shared space in a small establishment, current arrangements for services to be held in the visit room were inappropriate; the area was often not set up in advance, required to be cleaned and there were no facilities for tea and coffee to support fellowship activities. Requests to establish basic technical equipment to support essential service delivery had not been met timeously. There were no designated facilities to undertake confession, and lack of interview facilities meant that Chaplains undertook many discussions in prisoner's cells, placing themselves at heightened risk. In addition, the Chaplains office was inadequate, lacked the facility for use as an interview space, and was isolated from other multi-disciplinary professionals. Whilst recognising the limitations of space in HMP Dumfries these issues reflect on the value placed on Chaplaincy support and should be addressed, potentially being accommodated within, or as a consequence of, a refurbished Links Centre.

Recommendation: The SPS should look at the levels of service needed to support bereavement and loss to supplement those offered by the Chaplains.

Recommendation: Attendance at Chaplaincy events should be monitored to ensure that individuals from either population group do not feel inhibited from participating.

Recommendation: HMP Dumfries should continue to seek opportunities to expand and enhance the Chaplaincy facilities.

6.9 The prison maximises the opportunities for prisoners to meet and interact with their families and friends. Additionally, opportunities for prisoners to interact with family members in a variety of parental and other roles are provided. The prison facilitates a free flow of communication between prisoners and their families to sustain ties.

Rating: Generally acceptable performance

HMP Dumfries had a specific context for families to manage, partly because of its location and partly because of the national status of their offence related prisoners who come from across Scotland. This meant that visits could be difficult to accommodate, particularly in the evenings, a position that was exacerbated by a lack of good public transport facilities. HMP Grampian were arguably in a similar position and had undertaken work with local authority providers to improve transport links; there may be some value in sharing experience between the two sites.

HMP Dumfries had evidence of a robust family strategy/plan and partnership group in support of implementation including links with Families Outside. Aberlour were engaged with the establishment and also worked with families in the community. The establishment were working with partners to explore funding routes to expand

service provision to families in HMP Dumfries, including initiatives such as book bug sessions.

Early Years funding had previously been available and had supported work with fathers, including cooking sessions with dads and children. Specific visits to allow prisoners less formal visits with their children were held every other weekend and hosted by the Family Contact Officer (FCO). No specialist play support service was available during these times and the establishment would also benefit from refreshed parenting supports.

Evidence was provided of regular family events including annual garden parties and themed events for children (special provision had also been made so that those prisoners with adult visitors only could also attend a separate event). The establishment had also offered adult only visits where necessary, to accommodate the requirements of their offence specific population. The Vox Luminis 'In Tune' Families events had gone well involving four families with community social work services, and Aberlour providing transport to allow families and children to participate in the evenings. The local faith community provided Christmas presents and prisoners were allowed to choose from these, wrap them personally and hand them to their children. Telephone access was readily available along with officer initiated calls.

Recommendation: HMP Grampian have undertaken work with local authority providers to improve transport links; there may be some value in sharing experience between the two sites.

Recommendation: Funding routes should be explored to enhance parenting and play supports.

6.10 Arrangements for admitting family members and friends into the prison are welcoming and offer appropriate support. The atmosphere in the Visit Room is friendly, and while effective measures are adopted to maintain security, supervision is unobtrusive.

Rating: Satisfactory performance

Despite the limitations of an older prison design, the vestibule area had been refurbished to provide an effective and welcoming space for visitors to be received and wait in advance of visits. Staff commented that they had been actively included in the redesign of the vestibule (and also the refurbished reception area) which was appreciated and they felt led to more effective working practice. Admission procedures were observed to be courteous, and relationships positive. Staff were able to explain how they accommodated the needs of children and visitors, especially during less routine events such as the use of drug dogs. Family induction arrangements were in place including a booklet with travel information sent out to families. The FCO described regular contact with visitors in the visit area, targeting especially those who were new to the prison where an additional 'walk through' of the welcome arrangements for visitors could be provided in advance of their first visit. The FCO also acted as child protection co-ordinator.

Specific visit areas for agents and closed visits were viewed, and were clean and tidy though rather institutional. Video court facilities were in place and used, with staff recently having been provided with updated training.

The visit room itself was bright, well decorated and child friendly. Cleaning routines were in place, but suitable arrangements to ensure that toys were cleaned effectively (especially the large number of soft toys available) should be explored. A small café facility within the visit area provided snacks during all visit sessions staffed by community volunteers.

The lack of a separate family visitor centre represented a gap in service support that could be provided for families. HMP Dumfries was exploring innovative ways of providing community drop in opportunities for families, but investment in a visitor centre, and additional information, advice and guidance services for families should nevertheless be considered.

Recommendation: Enhanced décor to deinstitutionalise the agents and closed visit areas should be considered where possible.

Recommendation: Arrangements to ensure adequate cleaning of all toys in the visit area should be explored.

Recommendation: Investment in a visitor centre, and additional information, advice and guidance services for families should be considered by the SPS.

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

Rating: Satisfactory performance

HMP Dumfries offer -inter-prison visits and accumulated visits to those who met the national criteria, and gave specific examples of these in recent operation. Information for families in respect of Assisted Prison Visits was proactively made available. E-mail a prisoner arrangements were in place and well-advertised.

HMP Dumfries had technology in place to facilitate video calls and these were used regularly to support case conferencing and professional contact arrangements. The establishment had participated in a national video visits pilot and had successfully hosted visits with parties in Inverness though the pilot had concluded. The potential to establish video visits as a routine part of visit provision at HMP Dumfries should be actively explored. Provision might include evening visits (to assist with access by children after school) but also potentially assist with reported public transport difficulties, and the needs of families travelling long distances from all over Scotland including from the Stranraer area.

Personal Officers were encouraged to meet families in the visit area and flexible arrangements were in place to provide staff cover to facilitate this. Staff were able to describe specific examples of contact with families within the establishment (where special requirements were evident) and as part of through care arrangements.

Staff provided a helpful example of an occasion where national criteria for family visits were reviewed and made more restrictive, but individual consideration was given locally to continuing access (for a prisoner who was a Grandad and who had previously been eligible) taking account of the best interests of the child in decision making.

Helpfully the establishment had maintained a Prison Visitor scheme (where these had often disappeared at other sites) to further an aim of reducing social isolation for those prisoners who received no other visits. Inspectors were advised that the scheme had been temporarily suspended whilst guidance was reviewed but that it was due to be reinstated soon.

Recommendation: The potential to establish video visits as a routine part of visit provision at HMP Dumfries should be actively explored at local and national level.

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

Rating: Satisfactory performance

HMP Dumfries paid close attention to the issue of restricted visits. Records were well maintained and small suggestions by inspectors to provide clarity in letters to families were actioned immediately. Very few closed visits took place with only six individuals being managed under the closed visits protocol in 2019 with no current cases. Few visitors were banned, with only two individuals under current restrictions; alternative ways to support open visits especially with children in these circumstances were discussed and examples of practice (such as supervised social work visits) described. Prisoners held under rule conditions were not automatically placed on closed visits and specific examples were given of how staffing arrangements were facilitated to support visits in these circumstances in the main visit area.

6.13 There is an appropriate and sufficient range of therapeutic treatment and cognitive development opportunities as well as an appropriate and sufficient range of social and relational skills training activities available to prisoners.

Rating: Generally acceptable performance

HMP Dumfries has had to adjust to national changes in psychology and offence related programmes provision in recent years. A programmes team no longer exists on site and those awaiting programmes must transfer to other establishments when a course becomes available. In the main, this impacts the long-term sex offender population, with the current national waiting list described as approximately 251 for the programme 'Moving Forward Making Changes'. A central psychology database operated to ensure consistent national prioritisation of cases for psychological risk assessment, programmes or bespoke intervention allocation. Whilst these

processes ensured best use of national SPS resources across the prison estate, workload pressures mean that prisoners describe long waits for access which they believe delay their progression. In addition, many prisoners find the upheaval of transfer whilst undertaking a programme stressful and described this as an inhibitor to engaging in progression processes.

Following a long period without designated psychology resource, remote access to psychology support had recently improved, with a consistent nominated individual in support and the prospect of some additional resource. The establishment recognised waiting lists for assessments (such as the 'denier's readiness assessment' which was often necessary for this population and which had to be completed by those trained in the 'Moving Forward Making Changes' programme) but indicated that this was an improving position. Referrals to the Risk Management Team (RMT) had increased following improved psychology provision and additional training was planned for staff during February to complete programme assessments and further reduce the current waiting list for assessment of 28.

A programme case management board was attended. This was an open multi-disciplinary discussion demonstrating a detailed knowledge of the individual cases presented. High quality input from prison staff was evident, with inclusive consideration of possible programme adaptations to support those with specific learning needs.

Whilst staff recognised the need for national oversight of programme delivery and psychology resource, they also regretted the loss of permanent on-site support and the dynamic benefits which it offered for relationships, ongoing specialist advice, training and culture change. It was felt that there should be more options for on-site delivery including modules which could be delivered on a one to one basis. The lack of any SPS suite of programmes for domestic abuse was also regretted. It was noted that a national options paper was currently being prepared in respect of the specific challenges of service delivery to prisoners in Dumfries.

In regard to wider social and relational skills training and activities, the establishment had been undertaking some innovative work to prepare staff for working with prisoners with dementia in partnership with a local organisation. Occupational therapy support was not easily accessible from the NHS and the need for this to inform the delivery of a broader activities programme (such as that operating in HMP Grampian) should be formally assessed. Peer supports were available but were limited and could be expanded significantly with more of a sustained focus on training and co-ordination. Life skills programmes had been a strong feature in the establishment for some time, but both the life skills area and the links centre were tired and would benefit from substantial refurbishment.

Recommendation: The long wait for access to assessments and programmes which are essential for progression should be monitored by SPS HQ with increased resources allocated where required to reduce waiting times.

Recommendation: Research should be commissioned by the SPS to better understand the impact of transfer to undertake programmes, and the extent of withdrawal from progression by individual prisoners as a consequence.

Recommendation: Additional options for on-site delivery should be considered in light of any conclusions from the commissioned options paper.

Recommendation: The need for Occupational Therapy support to inform activity provision, similar to that operating in HMP Grampian should be formally assessed by NHS partners.

Recommendation: Peer support services should be expanded and embedded.

Recommendation: The life skills area and the links centre both require significant refurbishment to maximise use of space and provide up to date facilities.

Good practice: The establishment had been undertaking some innovative work to prepare staff for working with prisoners with dementia in partnership with a local organisation.

6.14 The prison operates an individualised approach to effective prisoner case management, which takes account of critical dates for progression and release on parole or licence. Prisoners participate in decision making and procedures provide for family involvement where appropriate.

Rating: Good performance

HMP Dumfries held 142 prisoners who were subject to enhanced ICM procedures, around 120 of whom were registered sex offenders. A large number of these individuals fall under Multi Agency Public Protection Arrangements (MAPPA), but no prisoners were currently held under Orders for Lifelong Restriction (OLR).

Induction arrangements were in place, facilitated by two experienced officers with previous detailed involvement in programme delivery.

The development of local ICM services had been informed by a case management review in 2018, the conclusions from which had been implemented successfully. A follow up review was planned demonstrating evidence of attention to continuous improvement. A case management 'hub' had been established and plans to revise the team composition to create three case management officer posts (to better facilitate case holding) was underway. Some practical alterations to facilities to more directly connect the 'hub' with the case management officer's office and create a shared space would be advantageous. The existing Case Management Co-ordinator was well regarded, and whilst there were some concerns about the potential loss of his expertise, it was clear that consideration to preserve continuity of service was in progress.

An ICM case conference was attended which was well managed. Local Authority Social Work were present by telephone link to engage with Prison Based Social Work and the Personal Officer also attended to support the prisoner (use of both phone and video link services were demonstrated and were regularly accessed by specialist services). Detailed discussions took place in respect of transition arrangements to a local prison and the nature of intervention support that would be appropriate in the community on release, including housing and employment needs informed by relevant risk assessment information. The prisoners input was encouraged and his understanding checked. Levels of family involvement in case

conferences were evidenced (around 2-5 cases a month) and examples of family involvement through access to the video link services in community social work departments provided. No formal advocacy supports were available but interpreters were used as required.

The ICM case conference area was adequate, and recently decorated, but sparse. The addition of tea and coffee for all attendees may have added to a more relaxed atmosphere. The same space was utilised for Parole Tribunals and was described as problematic having no ready access to toilet facilities or breakout space. Consideration should be given to how this area could be further enhanced, or incorporated potentially into a refurbished links centre.

A method to better plan personal officer attendance was in place with the ICM Co-ordinator attending the weekly FLM staffing meeting. Complement variables had been moved to better facilitate case management requirements. These simple but effective practices should be regarded as good practice and commended to other establishments.

Personal Officers knew their prisoners well and relationships were good. It was agreed however that Personal Officer delivery could be enhanced, and a local training programme had been initiated starting with improving staff familiarity with relevant IT applications. Newly promoted members of staff were actively identified for personal officer training and were allocated experienced mentors. Staff indicated that further development in respect of the challenges faced in the management of sex offenders and their needs would be of benefit. Weekly development sessions were in place for FLMs led by the Deputy Governor. Staff recounted having previously trialled various case management systems such as AIR MAPS and a recent HQ pilot of case management pathways. Further national guidance and training to support the development of consistent and effective case management practice by personal officers is required.

Local audit in September 2019 to national standards of RMT processes had been deemed substantial. An RMT was attended which was expertly chaired by the Deputy Governor. Detailed discussion took place direct with a Castle Huntly staff representative by video link (a good practice to be commended to other establishments). A thorough exchange took place in respect of the potential changes in risk and need for an individual during the transition process to open conditions. Wider protective factors such as the need to reduce social isolation and enhance family contact were explored. When the prisoner attended efforts were made to ensure the discussion was inclusive, including a clear statement that his opinion was valued.

Parole caseloads averaged around five cases a month, though the additional workload associated with Freedom of Information (FOI) and Subject Access Requests (SARs) for this population was described as intense for a small case work team. Robust primary and secondary assurance arrangements for parole dossiers were in place. Unfortunately, as previously indicated, some prisoners felt inhibited from engaging in progression or parole processes because of perceived system delays or the need to transfer to another establishment.

Despite the lack of Throughcare Support Officers (TSOs), good partnership working to support liberation arrangements was evident. Quarterly meetings with partners were planned to start soon. A Multi Agency Community Reintegration Board operated for the short-term population and this should be regarded as good practice to be commended to other establishments. A number of establishments now operate similar support processes and these should be considered as part of embedded national case management practice for consistency.

Recommendation: Some practical alterations to facilities to more directly connect the ‘hub’ with the Case Management Officer’s office and create a shared space would be advantageous.

Recommendation: Consideration should be given to how the Tribunal/ICM case conference area could be further enhanced, or incorporated potentially into a refurbished links centre.

Recommendation: Further training and development in respect of the challenges faced in the management of sex offenders and their needs would be of benefit to staff.

Recommendation: Further national guidance and training to support the development of consistent and effective case management practice by personal officers is required.

Good practice: A method to better plan personal officer attendance was in place with the ICM Co-ordinator attending the weekly FLM staffing meeting. Complement variables had been moved to better facilitate case management requirements. These simple but effective practices should be regarded as good practice and commended to other establishments.

Good practice: Detailed discussion at RMT took place direct with a Castle Huntly staff representative by video link (a good practice to be commended to other establishments).

Good practice: A Multi Agency Community Reintegration Board operated for the short term population and this should be regarded as good practice to be commended to other establishments. A number of establishments now operate similar support processes and these should be considered as part of embedded national STP case management practice for consistency

6.15 Systems and procedures used to identify prisoners for release or periods of leave are implemented fairly and effectively, observing the implementation of risk management measures such as Orders for Lifelong Restriction and Multi-Agency Public Protection Arrangements.

Rating: Satisfactory performance

Despite the impact of national changes such as the loss of Through Care Support Officers (TSOs), the establishment had continued to maintain a focus on transition to the local community through a partnership engagement with Aberlour. An innovative community ‘drop in centre’ had been trialled in Dumfries to encourage families to engage with prison staff and this concept was hoped to be tested further in Stranraer within premises available to Aberlour.

Compassionate examples were provided of attention being paid to both the physical and emotional needs of prisoners on liberation, including prisoners with specific needs being accompanied by SPS staff to appointments on release despite the absence of a formal TSO resource. Arrangements were in place to transfer other prisoners to an establishment close to their home for liberation.

National changes to HDC criteria had severely reduced numbers, and the last time HDC had been authorised in Dumfries was 2018. Staff reported that four applications were however now in progress and the recently revised process placed more emphasis on helping prisoners to set out short term goals. HDC training was planned for staff and support was also available from an adult literacy provider for those prisoners who might find difficulty completing the forms.

Dumfries holds no prisoners with an OLR and MAPPA arrangements were well embedded with good partnership connections.

Recommendation: National decisions in respect of Through Care Support Officers should be progressed, and communication made to staff to inform their understanding of estimated timescales for reinstatement.

HMIPS Standard 7

Transitions from Custody to Life in the Community

Quality Indicators

7.1 Government agencies, private and third sector services are facilitated to work together to prepare a jointly agreed release plan, and ensure continuity of support to meet the community integration needs of each prisoner.

Rating: Satisfactory performance

The prison hosted monthly meetings with partner agencies to consider those prisoners due for released soon. These meetings were well attended and there was an open discussion among those who may be able to offer the individual support to meet their identified needs. Information sharing agreements were in place and this ensured that services were informed about personal circumstances, any potential risks and concerns.

The number of services and their various criteria for delivering a service was confusing for some prisoners and staff. Inspectors heard concerns that this may be affecting engagement by prisoners and the ability of front-line staff to provide informed advice. The quality and availability of written information about services was mixed and not always in an easy read format. There were no plans to deliver awareness sessions to staff to help them play a part in encouraging prisoner engagement.

Prison management had developed strong relationships with individual agencies, and this had been bolstered by engagement in community partnership activities, for example attending the local community justice partnership meeting or housing forums. A 'family link day' in the summer was an example of the proactive efforts made by the prison to increase the profile of services with prisoners and their families. Established relationships between prison-based statutory services and their community-based colleagues were also a key strength in supporting community integration needs of individuals. Prison-based social work and health staff sustain a close relationship with colleagues in the community, ensuring that referrals for community-based interventions, for example addiction services, were timeous.

The busy link centre was effectively providing a base for prisoners to access services that would help with their return to the community. Prisoners due for imminent release told inspectors that they had been able to get good advice on benefits and housing, and for one prisoner returning to another local authority area the advice worker based in the link centre had advocated on his behalf with housing to ensure he had accommodation to go to. Inspectors saw good evidence of educational opportunities for prisoners and encouraging signs of a positive impact. Some prisoners also stated that they had attended the link centre to speak to case management staff about their plans, where they had been concerned about specific issues. This informal access was reassuring and reducing anxieties.

The prison could do more, in partnership with other relevant agencies and services, to gather data on the effectiveness of processes and outcomes for individuals.

Recommendation: To ensure that prisoners are empowered to engage with services, the Governor should ensure that good information on services is freely available and in an accessible format.

7.2 Where there is a statutory duty on any agency to supervise a prisoner after release, all reasonable steps are taken to ensure this happens in accordance with relevant legislation and guidance.

Rating: Satisfactory performance

The prison-based social work team were fulfilling their responsibility to undertake and update assessments relating to prisoners subject to statutory supervision on release. The social workers met with prisoners individually to inform these assessments, and relationships with prisoners were largely positive. The quality of assessments and reports was good and enabled coherent decision making.

The enhanced case management process for prisoners subject to statutory supervision on release was robustly delivered by knowledgeable and experienced staff. Long-term absences in the preceding years had focussed prison management on the need for succession planning in case management roles.

Tracking of cases was monitored through the case management board, which ensured that case planning activity was accountable to prison management and outstanding tasks were clearly delegated to individuals and time limited. Some prisoners felt they were well-informed about the progress of case management processes, but others reported extensive delays (related to completion of assessments and access to programmes) which they considered had not been properly explained. This caused some frustration for individuals.

Inspectors saw that community-based social work services were fully engaged in case conference processes. There were also good examples of community-based social workers increasing contact with individuals prior to progression to open prison facilities, developing relationships which would help with their ongoing statutory role in the community.

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

Rating: Generally acceptable performance

The prison does not deliver any offence focussed programmes and other offence focussed work is very limited. This affected all prisoners regardless of length of sentence. Lack of provision in this area will limit progression and affect successful community reintegration.

Access to programmes at other locations was limited and reliant on completion of a generic programmes assessment and subsequent agreement at the programmes case management board meeting. Delays in these processes were frustrating for those who were fully motivated to undertake identified programmes. Considering the profile of this prison's population, the most pressing need was access to programmes which addressed sexual offending. Unfortunately access to the relevant programme was affected by an increased demand nationally.

For prisoners, their narrative was that there was nothing offence focussed for STPs to do, and LTPs either do not want to move to do programmes or if they are willing to move there are excessive waiting periods. Individual bespoke work with prisoners was not common. Prison and case managers recognised this narrative. There was a backlog in respect of generic programme assessments and progression plans for some individuals were delayed. Following the decision to discontinue the programmes team, the strategy for meeting the needs of prisoners with regards to any offence focussed programmes was limited. Plans to increase the numbers of staff to undertake the programmes assessment and the provision of psychological services were at an early stage, so it was not possible to report on the impact this would have.

The prison-based health services were providing mental health and addiction services, and well-established links with community-based teams were enabling them to ensure that individuals had access to ongoing support to meet those needs. Close working relationships with key agencies around addictions was also encouraging prisoners to engage with these services post release. A recent group work intervention with prisoners around addictions was informing ongoing delivery of support within the prison and establishing relationships with services which could offer support in the community.

Recommendation: To help prisoners receive the support they need in preparation for transition from custody, the Governor should take steps to improve the timely completion of generic programme assessments and develop a strategy to improve access to offence focussed interventions.

7.4 All prisoners have the opportunity to contribute to a co-ordinated plan which prepares them for release and addresses their specific community integration needs and requirements.

Rating: Satisfactory performance

The review of case management in the prison in 2018 prompted an improvement in the development of plans for prisoners on release. The improved use of prisoner recording systems from the point of induction was helping to ensure that all individuals had a written integrated case management plan. The oversight provided by the multi-agency case management steering group was monitoring the progress of plans, identifying delays and tracking individual cases.

The quality and content of plans was still dependant on staff input and as such quality was varied. Awareness raising sessions with residential staff were under way and included a focus on recording systems, case management and risk

management processes. Some prisoners felt that personal officers were not accessible and did not see that they had any part in their plans.

Processes for discussing and agreeing the content were evidently more robust for LTPs. Case conferences were well attended by prisoners, residential staff and, where relevant, social workers both prison and community-based. Attendance of families was good, and this was encouraged by case managers in discussion with individuals. This involvement was important for informing co-ordinated plans for release.

The case conferences inspectors observed during the inspection evidenced good participation of prisoners and their families. It also evidenced the role and contribution of other agencies including health services. For those subject to statutory supervision upon release, there was clarity about the expectations of community-based services meeting the needs of the individual and the multi-agency management of risk.

The individual case plans inspectors considered during the inspection were detailed in terms of the range of needs to be met and the services that would be involved. They were specific about the arrangements required on the day of release and the need to arrange appointments with other agencies prior to release.

The prison reported that 90% of prisoners were actively involved in the case management process. However, some reports about prisoners did not clearly record the views of individuals and few were signed. Some prisoners were also less confident about what their plans were for progression or release, some also reported poor communication about what was happening next or the outcome of meetings. This suggests that the meaningful involvement of individuals was not assured by the existence of clear systems and processes.

Recommendation: To maximise prisoner participation, the Governor should ensure that awareness sessions with prison staff continue and include how all staff empower prisoners to be meaningfully involved in the development and review of co-ordinated plans for their release.

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

Rating: Generally acceptable performance

There were a range of services available to prisoners being released from the prison. This included ongoing support from the prison-based social work team and the provision of services by third sector organisations. Management at the prison ensured that those providing these services were fully involved in identifying those individuals who required their support. This was done through the multi-agency monthly meeting which tracked individuals due for release. At these meetings the prison was assured that each service had a clear plan for engaging prisoners prior to their release, and a clear understanding of the needs of individuals and other potential supports. Despite these arrangements, for some prisoners the transition to the community was reliant on the flexibility of prison staff and responsive adhoc

arrangements. For some individuals they did not get the agreed support due to ineffective referral and allocation processes.

There were no established processes for evaluating the post-release offer to prisoners, and the only data gathered related to numbers of prisoners being released and the services they had been referred to. This showed that services had been able to meet the demand, in terms of numbers, created by the discontinuation of the Throughcare Support Officer service. However, it did not allow them to confidently assess the impact of this change or the adequacy of the alternative arrangements. The number of agencies delivering a service to prisoners after release did present a challenge in terms of collating information on the effectiveness of plans.

The prison had established information sharing agreements and relationships with agencies, and services providing support to prisoners post release were positive. Knowledge of provision in the local area was helped by these relationships and by prison management involvement in local area strategic groups, for example community justice partnership and housing forum.

Other agencies and services were not providing consistent feedback on the impact they had. Evaluating this area of work was underdeveloped and was therefore not informing future development and improvement.

Recommendation: To enable coherent continuing improvement, the Governor should, in partnership with other agencies and third sector providers, undertake a systematic review of services offered to prisoners after their release.

HMIPS Standard 8

Organisational Effectiveness

Quality Indicators

8.1 The prison's E&D Strategy meets the legal requirements of all groups of prisoners, including those with protected characteristics. Staff understand and play an active role in implementing the Strategy.

Rating: Poor performance

The last inspection report of HMP Dumfries in 2015 identified a gap in E&D and unfortunately gaps were still apparent during this inspection.

The E&D structure was not embedded into HMP Dumfries daily life. However, they have recently replaced their E&D manager and rewritten their E&D Strategy to address this, but had yet to develop an action plan. This was highlighted during the last E&D Prisons Resource Library (PRL) assurance undertaken on 6 December 2019, with an action to be addressed at the next E&D meeting and a completion date of 29 February 2020. A number of actions were highlighted including setting up prison ambassadors to reflect all protected characteristics, audits on reasonable adjustments and to gain access to the SPS HQ E&D reports.

83.4 % (136) of staff had completed the E&D e-learning course to date. Although this gave staff a general understanding of E&D, it was reported that classroom based training might be more effective. Staff made efforts to address E&D issues, but more from experience and common sense than from training. Examples included staff that had supported prisoners who were gay and did not wish their sexuality to be known to other prisoners, and a transgender prisoner who was recognised by the establishment as going through transition but had wished to be known by his birth gender as he had not fully transitioned in the community. Both were dealt with sensitively and confidentially.

When looking at the prisoner profile, the majority of prisoners were listed on PR2 as White, British, Christian prisoners, therefore there might be mitigation for E&D not being a high priority. However, all prisoners should be treated equally regardless of their numbers and it is important to note that HMP Dumfries had one of, if not the highest, population of older prisoners (per capita); 28 were between 50-59 years and 40 were over 60 years, living in a prison that was not designed to accommodate an aging populations needs.

There was also some notable positive practices, such as the Governor's open letter to all staff in December 2019, reminding them of the No Bystanders campaign. The campaign was first introduced in November 2016 outlining the Governors public pledge to treat and ensure others treat people with dignity and respect, outlining that debate and heartfelt discussion should be encouraged but in a manner that negates hateful language and unacceptable behaviour, whilst promoting tolerance and inclusion for all ideas and viewpoints. The E&D manager may wish to consider contacting HMP Edinburgh to get a copy of their E&D sign posting manual, that gives

comprehensive information on how to manage those under the protected characteristics. During the inspection, it was clear that interpreter services were not being used on a regular basis, with only five instances since May 2018. Even with the small amount of foreign national prisoners entering the establishment this seemed low, particularly as inspectors met four Albanian prisoners who had no or very little English.

HMIPS agreed to offer HMP Dumfries six months to develop and deliver an E&D action plan.

Recommendation: HMP Dumfries should develop an action plan that allows E&D to be embedded into the daily life of the prison.

Recommendations: HMP Dumfries should ensure all actions from PRLs are addressed to support E&D.

Recommendation: HMP Dumfries to consider introducing supplementary classroom based awareness sessions for E&D.

Recommendation: HMP Dumfries should encourage the use of translation and interpreter services more regularly to meet the needs of the population. In addition more information about the service should be available to encourage individual to use it.

Recommendation: The E&D manager may wish to consider contacting HMP Edinburgh to get a copy of their E&D sign posting manual, that gives comprehensive information on how to manage those under the protected characteristics.

8.2 Appropriate action has been taken in response to recommendations of oversight and scrutiny authorities that have reported on the performance of the prison.

Rating: Good performance

An establishment action tracker was in place, which was the responsibility of the Business Improvement Manager (BIM), and it identified recommendations from a number of scrutiny bodies, both internal and external audits. The tracker was reviewed by the BIM who updated on progress and areas to improve during the monthly Business Improvement (BI) meeting. Any actions were communicated to Unit Managers for further dissemination. All paperwork can be found on the HMP Dumfries SharePoint site.

HMIPS highlighted good practice in previous inspection reports where PRLs were carried out by FLMs or staff from other areas. In HMP Dumfries some PRLs were found to be carried out by managers from the same area. An example being the E&D PRL being carried out by the E&D manager and the H&S PRL being carried out by the H&S co-ordinator. Although actions were noted, HMIPS would encourage HMP Dumfries to utilise a cross functional system that allows for a lesser degree of scrutiny on any compliant audits. However, some examples of cross-functional auditing was the family strategy PRL being carried out by a residential FLM. Any actions from PRLs were disseminated to the appropriate areas to be dealt with. Reminders were sent when completion times were nearing and the PRL assurance schedule was easily accessible on SharePoint. The action tracker also highlighted

where HMP Dumfries had applied for derogation. An example of this was where the staff locker room remained beyond the secure line, which does not meet with security standards. However, there was a robust procedure in place to mitigate any threats of unauthorised items being introduced to the establishment and therefore will not affect any future PRLs from gaining substantial assurance.

The IPM team reported a good relationship with staff at all levels at HMP Dumfries. Where concerns were highlighted, the SMT look to respond positively. An example of this was issues raised regarding graffiti in a cell in the basement area and within a week the graffiti had been removed, cells repainted, privacy screens erected. There was also a commitment by management to deliver refresher training on dealing with the complaints processes after IPMs highlighted a few anomalies at ICC. IPMs reported that staff were very helpful in enabling them to access prisoners, and the Governor and/or Deputy Governor always attended their meetings, giving full written and verbal responses to their findings and queries.

The standard ratings in the report that followed the last HMP Dumfries inspection, 11-22 May 2015, were one good performance, seven satisfactory performances and two generally acceptable performance. Within the quality indicators (QIs) there were six areas rated as poor and one rated as unacceptable. It should be noted that since the last inspection, the number of HMIPS standards have been reduce from ten to nine, as. E&D is now incorporated throughout the QIs and a separate human rights overview, written up under the PANEL principles is submitted by the Scottish Human Rights Commission. The number of QIs has reduced from 156 to 85, with some having been removed and some having been encompassed in other QIs, and therefore there cannot be a direct comparison with previous QI ratings. That said a lot of work has been carried out to ensure these poor ratings were addressed. The findings can be found in **Annex D**.

Recommendation: HMP Dumfries should ensure that, where possible, PRL audits are carried out by staff from other areas.

Good practice: Staff workshops taking place to seek views and review the needs of the staff and the prison.

8.3 The prison successfully implements plans to improve performance against these Standards, and the management team make regular and effective use of information to do so. Management give clear leadership and communicate the prison's priorities effectively.

Rating: Satisfactory performance

HMP Dumfries had developed an annual delivery plan, and subsequently a business improvement plan that is accessible to all staff on SharePoint. Within the plan, actions on recommendations could be evidenced or where there were plans to do so. The plan clearly set out action leads, timescales, status, progress, comments and proposed evidence. The action plan tracker identified actions based on local and national audits, i.e. PRLs. The prison held monthly business meetings where these plans and progress were discussed. Thematic reviews on operational stability, population and staff communications were also included, and local issues such as

H&S, estates work and healthcare were also discussed. Staff were invited to these meetings, however uptake was minimal. The meeting minutes could be found on SharePoint.

Following the publication of the last HMIPS full inspection report, a report was produced by Audit & Assurance Services at SPS HQ in April 2016, to identify progress against the findings of the HMIPS report. The conclusion of this report was to award an assurance level of 'substantial assurance', the highest level awarded. However, inspectors noted that 11 actions were not completed until after substantial assurance was awarded, and two, covering 6.16, 6.17, 9.8 from the old standards, had still to be resolved. These related to limited use of translation materials and the interpretation service.

There were some comments made during pre-inspection focus groups and during the inspection about a lack of communication from the SMT to staff with regards to outcomes of meetings. However, the inspection team's view, through evidence gathered, was that the SMT took an active role in the establishment, with an abundance of e-mails covering vast and varied subjects being circulated and meetings being held.

Recommendation: The SPS should review their audit process to ensure all action or mitigations have been completed prior to Substantial assurance being awarded.

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

Rating: Generally acceptable performance

There were mixed view amongst staff as to their contribution to the priorities of the prison. However, when speaking to and observing staff it was clear that they understood what was required of them on a daily basis. There was no doubt that the flexibility of the staff was an important cog in the HMP Dumfries wheel from the top down, and a general understanding of the different roles within the prison was important. There were a number of examples where staff, unsure or not trained in specialist role, i.e. warrants, were able to call on support from colleagues. Whilst this was commendable there was a risk that assistance may take some time to arrive, due to other commitments.

A number of training events took place to develop staff as per the HMP Dumfries Annual Delivery Plan (ADP) 2019-2020 . An example of good practice was a workshop delivered by the BIM and Senior HR officer to uniformed staff, designed to formulate views on staff roles and responsibilities and to look at any changes the SMT might make. To meet the needs of staff, refresher professional boundaries training was delivered. This training was included in the establishment risk log to mitigate concerns around the seven single officer posts, and the FLM roster was changed to reflect comments made at the workshop. A follow-up event took place during the writing of this report, with 79 staff attending throughout the day. Feedback from the last event was delivered to staff and actions have been placed on the ADP.

A C to D band transition meeting was held with newly promoted staff to discuss the support they might require, and a follow-up meeting was planned within six months. Unfortunately, inspectors were unable to talk to staff who had attended this meeting, but minutes showed a number of concerns were raised giving Dumfries SMT food for thought, and an opportunity to deal with concerns highlighted. A number of training events, including FLM training in MORS and ICM, RMT training, the Rule 95 process and application, as well as subjects such as an awareness of the ADP for FLMs. Staff mentioned they would like training in dealing with prisoners with mental health issues, similar to the training received by FLMs. Disappointingly, planned training had been put on hold due to lack of psychological input from HQ.

Recent figures on staff training indicated that the majority were below the accepted levels. C&R and TTM were 84% and 54% respectively, which falls below the accepted levels of compliance.

Recommendation: HMP Dumfries should introduce Mental Health Awareness training to all staff.

Recommendation: HMP Dumfries should ensure acceptable levels of compliance in staff training in critical areas such as C&R / Personal Protection Training (PPT), H&S for managers and TTM.

Good practice: An example of good practice was a workshop delivered by the BIM and Senior HR officer to staff, designed to formulate views on staff roles and responsibilities and to look at any changes the SMT might make.

8.5 Staff at all levels and in each functional staff group understand and respect the value of work undertaken by others.

Rating: Satisfactory performance

HMP Dumfries is one of the smaller prisons in Scotland and has one of the smallest staff groups. The prison was comprised of 14 accommodation areas making up five small residential halls. Seven of the accommodation areas were designated as singleton posts. There were 14 residential officers and one PTI (D+) on shift, and seven operational officers (six at weekends). The staff shortage protocol stated that HMP Dumfries would start to look at restricting their regime to cover staff shortages when one post from either group was vacant. When HMP Dumfries experienced staff shortages it appeared that the prison functioned through staff goodwill. The pre-inspection focus groups with staff and discussions held with staff during the inspection, indicated that there was respect amongst their peers and they had a good understanding of respective roles and this was evidence during the inspection.

Staff flexibility and motivation to cover posts saw staff invariably working at higher or lower grade than their substantive grade and at times covering a number of different posts on the same day. Although this was not ideal for continuity, it allowed staff to understand and respect the value of work undertaken by others. Staff reported that they had covered most posts within the prison. Staff reported their appreciation for the support given to them by other staff members in filling posts, but appreciate that regimes staff would be better served training prisoners and getting prisoners to work

and education. A number of staff commented to inspectors that the prison felt more like one grade of officer rather than operational and residential staff, which is also the view of the inspection team. There appeared to be a good working relationship across all functions, including the management team and the Partnership Liaison Representatives (PLRs).

Good practice: The handover briefings that took place at the start and end of shifts, where information was passed to all staff, regardless of their role for that day, to give all those working an understanding of the issues and priorities of the day.

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

Rating: Satisfactory performance

Completion rates for annual appraisals were carefully monitored by the HR department, and Personal Performance Management Systems (PPMS) completion figures were the subject of discussions between HR and SMT.

At the interim reporting period in October 2019 some groups had 100% completion. However, the FLM and residential staff completions were the lowest with 60% and 42% respectively. Following reminders from HR, the Deputy Governor contacted those that had failed to meet the deadline, to remind them of their responsibilities in completing these reports. The GIC and Deputy Governor assured a number of completed PPMS throughout the reporting year and offered feedback on both good or poor practice. HR also offered feedback to those carrying out PPMS reports and reported improvements in the quality of submission.

Effective steps were evidenced with regards to addressing inappropriate behaviour through the use of the code of conduct policy, with outcomes ranging from no case to answer to dismissal.

In line with good practice in other prisons, the Governor meets staff who have been absent for 30 days or more, as part of a welfare meeting, to investigate how the prison can support them in returning to work. Inspectors spoke to staff who had attended these meetings and they reported finding it beneficial in returning to work, appreciating the support they had received. Staff on long-term absence could return to work, with permission from their doctor, prior to an Occupational Health (OH) report being requested, to enable them to return to work quicker. This was carried out in a supportive manner where the tasks were mutually agreed and were always less than the advice from OH.

The Governor and Deputy Governor were very strong in contacting staff to offer thanks, congratulations or updates on new initiatives. There were many examples provided of them thanking staff for their contributions both at work and in the community. For example GMAs were circulated to inform staff on subjects such as how to handle hazardous waste, congratulating staff for passing a sift, clearly communicating plans on how staff would be developed, motivational emails to staff

appreciating their professionalism and commitment and reinforcing the need to behave in a professional manner, an email from estates thanking the staff for their assistance in helping to complete the estates projects, and letters offering encouragement and support for example being an acting FLM first weekend on duty.

Staff had been recognised for their work through The Butler Trust, and offered the opportunity to represent HMP Dumfries at the Royal Garden Party. Thank you letters to staff and the prison were displayed at the front entrance and emails from the Governor and Deputy Governor emphasised the role everyone in the prison had in dealing with complex issues experienced by both prisoners and visitors.

HMP Dumfries had recently reinvigorated the staff recognition committee and had a good representation of the prison. They ran retirement events, such as a recent event to celebrate 30 years long service for operational staff and 20 year service for non-operational staff. HMP Dumfries also had in development a recognitions board, similar to those found in other prisons, for long service.

8.7 The prison is effective in fostering supportive working relationships with other parts of the prison service and the wider justice system, including organisations working in partnership to support prisoners and provide services during custody or on release.

Rating: Good performance

The focus groups and discussions with the external agencies during the inspection indicated that they had a good relationship with the prison. This was also confirmed by numerous discussions between inspectors and HMP Dumfries staff.

HMP Dumfries listed 18 agencies who worked within the prison and they also attended numerous meetings externally including MAPPA, Dumfries & Galloway (D&G) Drug Strategy Review, D&G Suicide Prevention Strategy Group and D&G community justice partnership. There were numerous examples of a good working relationship with other organisations responsible for providing services for prisoners as intimated in standard 7 both during their sentence and on liberation. The Governor also represented the SPS at the Ayrshire Community Justice Partnership meetings.

There were many examples of collaboration between the prison and outside agencies including old people's homes and working with people with dementia through the garden party. This will assist prison staff working with prisoners with dementia. Unfortunately, suspension of the TSOs in September 2019, has led to a reduction in support from outside agencies for those leaving the prison. However, HMP Dumfries had worked hard to fill the gap left by the Throughcare Officers, and some development work was being undertaken by the Head of Offending Outcomes to reintroduce the prisoner visitor scheme in collaboration with the local Baptist church.

HMP Dumfries recognised the benefit of utilising modern technology, such as virtual visits and courts. Due to geographical demography, where almost all but one local authority was represented within the prison, HMIPS welcomes any increase in family contact and minimising long journeys to courts by using this type of technology.

Inspectors spoke to an ex-prisoner who had taken part in the Springboard Project 'Let's Cook' programme designed to give participants experience in the hospitality industry, and two representatives from MAPPAs who were looking to take a different approach to risk management. More information about this can be found in **Annex E and Annex F**.

There was a good working relationships with the local police who supported the prison with both inquiries and incidents.

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

Rating: Satisfactory performance

Although SPS HQ dealt with all requests from the media, the prison co-operated where practical with any media requests. HMP Dumfries had engaged in a number of local events and projects, including wooden furniture made at the prison for the garden area of a local mental health ward and making bird boxes for the local RSPB to help contribute to the local community.

HMP Dumfries also invited local residents with dementia from two old people's homes into the prison garden to get involved in garden projects.

The Governor attended a number of external groups to raise the profile of the work carried out with HMP Dumfries.

HMIPS Standard 9

Health and Wellbeing

Quality Indicators

9.1 An assessment of the individual's immediate health and wellbeing is undertaken as part of the admission process to inform care planning.

Rating: Good performance

The immediate health and wellbeing needs of all patients were assessed on arrival at HMP Dumfries by a member of the primary care team using a standardised assessment screening tool. Anyone identified as being at risk of self-harm or suicide was placed onto TTM. If someone was found to be unfit to be in custody, arrangements were made to transfer them out to secondary care. As part of the assessment, patients who reported as actively using drugs had a screening of opiate withdrawal carried out.

Staff were observed to treat patients with respect and maintain their dignity throughout their health screening. They explained the screening process, listened to any concerns raised by the patient and offered reassurance and support.

The health screening process informed the patient's care planning. Referrals were made to relevant services with the patient's consent. All health screening information was clearly recorded onto the Vision patient electronic record. There was a process in place to use paper records to record information and transfer it to the system at a later date if there were issues with Vision.

9.2 The individual's healthcare needs are assessed and addressed throughout the individual's stay in prison.

Rating: Satisfactory performance

Patients with long-term health conditions or those requiring immediate review were identified through the health screening process at reception.

Patients were given an information leaflet explaining that access to primary care services was managed through a daily nursing triage clinic. This information was also available in an easy read version, however it was not available in different languages for those patients whose first language was not English. Patients had access to language line interpretation service. The health centre manager told inspectors that discussions were underway with patient services at NHS Dumfries & Galloway to access information in alternative languages. Patients also had access to an induction where primary care staff attend.

Patients could access the daily nursing triage clinic to discuss any concerns and issues they had regarding their healthcare. The primary care nurse triaged and signposted the patient to the most appropriate service. This could result in the

patient seeing a GP, referral to the mental health nurse or the substance misuse team. This process worked well within the establishment.

Patients who required referral to secondary care were well-managed and were receiving a service equitable to that of primary care in the community setting. Patients were supported to attend appointments outwith the establishment and were informed 24 hours before that they would be attending appointments to allow them to prepare. Details of what the appointment was or where was not disclosed. Statistics presented for this inspection demonstrated attendances at secondary care were very rarely missed.

Staff were trained in the delivery of emergency care and they would respond to Code Red and Code Blue emergencies. Emergency bags were situated both within the health centre and satellite centre and inspectors saw evidence that these were regularly re-stocked and checked. Automated external defibrillators were available in residential areas. Inspectors were told that these were checked and maintained by SPS.

Arrangements were in place for out-of-hours GP services. This was available on an on-call basis.

There were no patients requiring social care at the time of the inspection. As part of an ongoing health needs analysis, social care provision was being discussed. In the meantime, any patients who required assistance would be assessed by nurses. Access to community provision was available if necessary. Nursing staff reported that SPS officers would also identify patients who required extra support with day-to-day activities.

Inspectors were told there could be delays in occupational therapy functional assessments for patients. On discussion with senior managers, inspectors were told that this had been raised at the Partnership and plans were in place to improve access for patients.

Recommendation: The Partnership must ensure that information is available in different formats and different languages.

Good practice: Patients were supported to attend appointments outwith the establishment and were informed 24 hours before that they would be attending appointments to allow them to prepare. Details of what the appointment was or where was not disclosed. Statistics presented for this inspection demonstrated attendances at secondary care were very rarely missed.

9.3 Health improvement, health prevention and health promotion information and activities are available for everyone.

Rating: Satisfactory performance

All admissions to the prison were invited to the Link Centre by the addictions team, and were offered screening for sexual health, national and local age appropriate immunisations, alcohol use, drug use, and harm reduction. An opt-out blood-borne virus screening programme was in place as part of the health screening process at

the prison. Where patients had not received this screening at reception, they were able to opt-in to be screened at a later date.

Prisoners were offered safe drug using kits, take home Naloxone training and condoms.

Verbal advice and written health promotion information were offered during all one-to-one consultations with all healthcare staff. Translation services were available for patients when English was not their first language. Inspectors saw the health promotion calendar which held information about forthcoming campaigns. Inspectors were told that each month, posters on a different theme were displayed around the prison. Health promotion events were held which were facilitated by both the SPS and NHS, and all prisoners within the establishment were invited. Inspectors were told that there were peer mentors trained as smoking cessation champions.

SPS physical education staff had recently set up armchair aerobics for the more aged and/or infirm prisoners.

Good practice: The recently set up armchair aerobics for the more aged and/or infirm prisoners.

9.4 All stakeholders demonstrate commitment to addressing the health inequalities of prisoners.

Rating: Good performance

Staff spoken with possessed a good understanding of the health inequalities experienced by many of their patients. They understood the barriers that many prisoners faced when accessing healthcare in prison and were seen to adapt their approach accordingly. The majority of patients spoken with described having a positive relationship with healthcare staff. Inspectors observed a range of healthcare interactions between staff and patients. Patients were treated with dignity and respect by staff who were polite, respectful and positive.

9.5 Everyone with a mental health condition has access to treatment equitable to that available in the community, and is supported with their wellbeing throughout their stay in prison, on transfer and on release.

Rating: Generally Acceptable performance

The mental health team consisted of one registered mental health nurse and a consultant psychiatrist. Access to clinical psychology was via the wider NHS forensic clinical psychology service, and they provided limited input into the prison. Inspectors were told that this consisted of one session a week to provide support for patients with complex needs. Four patients were awaiting an assessment with the clinical psychologist, with the longest wait being six months. There was limited opportunity for the clinical psychologist to provide complex case discussion to the team, and a clinical multi-professional meeting that met on a regular basis for triaging and case discussions of patients referred to the service was not in place.

The psychiatrist attended the prison one afternoon a fortnight. They were available for telephone advice and would see anyone in crisis. Inspectors were told that the GP would also provide support if medications required to be prescribed in the absence of the psychiatrist.

The mental health nurse within the prison provided a responsive and proactive mental health service within the prison. They assessed and triaged all referrals to their service. Emergency referrals would be assessed by the mental health nurse within 24 hours and, if required, patients would be seen by the psychiatrist within 48 hours. At reception, all new prisoners were screened for mental health issues and this was reviewed by the mental health nurse who arranged follow-up for those patients identified. A standardised mental health and risk assessment tool was in place. Routine appointments for assessment by the mental health nurse would be within a week and within two weeks for the psychiatrist.

A poster was in place in the visits room with contact details for the mental health team, and the prisoners families could contact if they had concerns about their family members.

On reviewing patient's healthcare records, inspectors found that they all had an individual care plan and there was evidence that they were fully involved in its development.

Inspectors were concerned that as it was a small team it meant that it was a person-dependent service, and as the prisoner healthcare team as a whole was a small team there was a reliance on verbal communication and discussion rather than having clearly written down pathways and processes of care. This could potentially be a risk for any new staff coming into the prison as they would find it challenging to know and understand processes if there was no written pathway.

Through Action 15 money, which is part of the Scottish Government Mental Health Strategy 2017-2027, an additional band 6 mental health nurse post had been secured, to support the development of psychological therapies within the prison. There was an acknowledgement by managers that there were gaps in the range of psychological interventions being provided. This was also identified in the self-evaluation. A health needs analysis was planned to inform the needs of the prison population and help to design and develop the service.

Where admission to a psychiatric unit was indicated, arrangements were made to transfer prisoners. This could be to a low secure environment (intensive psychiatric care unit), medium or high secure environment, determined by the level of illness and offence. Inspectors were told that there were no current delays in accessing medium secure beds.

Where community follow-up on release from prison was required, inspectors saw that a referral was made to the relevant community mental health service and patients were kept informed of their planned care follow liberation.

There were clear links for referral on to specialist services such as older peoples care and learning disabilities.

The relationship between the primary care and substance misuse team was informal but effective, with staff working together when required to provide a joined up service to patients.

Recommendation: The Partnership must review workforce planning to ensure the full range and skill mix of appropriate professionals are available within the mental health multi-disciplinary team to offer and deliver the assessment interventions and reviews.

Recommendation: The Partnership must implement written procedures and pathways of care to ensure that there is a clear and consistent approach for staff working in the prison.

Good practice: A poster was in place in the visits room with contact details for the mental health team, and the prisoners families could contact if they had concerns about their family members.

9.6 Everyone with a long-term health condition has access to treatment equitable to that available in the community, and is supported with their wellbeing throughout their stay in prison, on transfer and on release.

Rating: Generally Acceptable performance

There were systems and processes in place to ensure the delivery of a comprehensive approach to managing long-term conditions within HMP Dumfries. Health needs were identified at reception and followed up where necessary.

There was a GP service available Monday to Friday and out-of-hours. The GP was supported by nursing staff at a daily nursing triage clinic. Nursing staff were responsible for the planning and safe delivery of patient care and they triaged appropriately to assess patient's needs. Long-term condition clinics were managed by nursing staff and patient's conditions were managed within national guidelines, including timely referral to secondary services.

All patients spoken with described a supportive approach to their healthcare needs. Healthcare services available to patients were facilitated by SPS staff who ensured timely arrival at appointments. Nursing staff delivered care primarily in the health centre, however there was a satellite centre available to enable easier access for those patients requiring it. Care plans were available for more complex patients and there was evidence of the rollout of anticipatory care plans. These were discussed with patients who had ownership of them. A list of patients who had them in place was kept by the admin team.

There was only one accessible cell available within the prison. On discussion with SPS senior management and healthcare staff, inspectors were told that this cell had been identified as not fit-for-purpose as it did not have appropriate adaptations. This had been highlighted on the SPS corporate risk register.

As discussed in QI 9.2, there could be delays in accessing occupational therapy functional assessments.

As discussed in QI 9.5, inspectors were concerned that as it was a small team there was a reliance on verbal communication and discussion rather than having clearly written down pathways and processes of care. This could potentially be a risk for any new staff coming into the prison as they would find it challenging to know and understand processes if there was no written pathway.

The requirement for care plans within HMP Dumfries was minimal due to the generally good health of the prison population. Existing care plans reviewed were not person-centred or outcome-focused. There was no evidence of a collaborative approach between nursing staff and patients or evidence of review of ongoing care.

Recommendation: The Partnership must ensure that care plans are person-centred and outcome-focussed. Staff must work jointly with patients in the writing of their care plans and setting of goals. Patients should be given a copy of their agreed care plan.

9.7 Everyone who is dependent on drugs and/or alcohol receives treatment equitable to that available in the community, and is supported with their wellbeing throughout their stay in prison, on transfer and on release.

Rating: Generally Acceptable performance

Prisoners with drug and/or alcohol dependence were identified during their initial health screening. If the patient had an existing prescription for Opiate Replacement Therapy (ORT) there was a process for the patient to continue ORT medication during their stay in prison.

The substance misuse team comprised of one whole time equivalent (WTE) learning disabilities/registered general nurse and one case worker. Inspectors observed the team taking a person-centred and compassionate approach to care for patients with addictions. Despite the small size of the team they were well-motivated and delivered a full range of interventions and treatments such as the self-management, harm reduction and Naloxone training. There were no waiting times for access to assessments. The team had access to a locum psychiatrist with a specialist interest in substance misuse and cases could be discussed on a one-to-one basis.

For new patients wanting to commence ORT therapy, there were no delays. Inspectors were told that methadone was the first line of treatment offered to patients and that the prescribing of Buprenorphine was based on clinical need and not patient preference.

There were no regular clinical meetings attended by a GP, mental health nurses, addiction worker or pharmacists to discuss assessments and concerns regarding complex patients.

As discussed in QIs 9.5 and 9.6, inspectors were concerned that as it was a small team there was a reliance on verbal communication and discussion rather than having clearly written down pathways and processes of care. This could potentially be a risk for any new staff coming into the prison as they would find it challenging to know and understand processes if there is no written pathway.

As with the mental health team, the addictions team had no multi-disciplinary approach for the discussion of complex cases.

There was a strong emphasis on relapse prevention where patients were provided with strategies and coping mechanisms for dealing with triggers and difficult situations, as well as guidelines for establishing healthy habits and routines.

On liberation, the patients' GP and community addiction team were informed of treatment prior to discharge and therefore follow-up appointments and support could be put in place quickly.

Pre-liberations groups were open to all prisoners. The focus of the groups was on harm reduction and Naloxone training.

On reviewing patient's healthcare records, inspectors found that they all had an individual care plan detailing treatment for drug/alcohol dependence and taking account of any mental health treatment, and there was evidence that they were fully involved in its development.

Recommendation: The Partnership must put in place a process for the multi-disciplinary team/professionals to review and discuss people referred to the substance misuse team.

Good practice: There was a strong emphasis on alcohol/drug relapse prevention where patients were provided with strategies and coping mechanisms for dealing with triggers and difficult situations, as well as guidelines for establishing healthy habits and routines.

Good practice: Pre-liberations groups were open to all prisoners. The focus of the groups was on harm reduction and Naloxone training.

9.8 There is a comprehensive medical and pharmacy service delivered by the service.

Rating: Generally Acceptable performance

A pharmacist visited the prison once a month. An NHS D&G pharmacist provided advice on an adhoc basis to staff within the health centre.

Although nurses could request clinical pharmacy advice about their patients, there was no formal process in place to enable patients to seek and receive direct support and advice from a pharmacist.

Issues were noted with the administration times of some medications. The kardexes in place were used throughout the prison estate in Scotland, and did not specify times in the same way as kardexes which were used in the rest of the NHS in Scotland. Staff were observed to administer medication safely, and prescription kardexes and controlled drug registers were completed and signed at the time of administration. However, as the prescription chart only stated morning, afternoon, evening and night time, it was not possible to determine the exact times medicines

had been administered to patients. There is a risk that this could lead to patients receiving doses too close together or going longer than necessary between dosages.

Further to this there were no direct meetings with the pharmacist and the visiting GPs. This was identified as an area of concern by the health centre manager prior to the inspection. Any communication regarding pharmacy issues would be via other healthcare staff or the health centre manager. Consideration was being given to putting this meeting in place to improve communication.

The healthcare team did not have a Home Office Controlled Drugs License in place, however inspectors were given an assurance that the Partnership had started the process to secure this.

Patients who had medicines in-possession had access to secure storage for these medicines in their cells.

GP10 forms were used for controlled drugs on liberation and supply meds (five days) given on liberation. There was a reliance for patients to re-register with a GP in the community within five days following liberation.

Prisoners who were due to attend court received their prescribed medication before going to court.

Recommendation: The Partnership must ensure that the timings of administration on the prescription kardexes are clearly recorded and ensure that the appropriate gap between medication administrations is provided.

Recommendation: The Partnership must ensure that there is a mechanism in place to allow the visiting pharmacist to liaise with the GPs in relation to the safe and effective use of medicines.

Recommendation: The Partnership must ensure that a Home Office Controlled Drug License is put in place as a priority, for the holding and management of controlled drugs within the prison.

9.9 Support and advice is provided to maintain and maximise individuals' oral health.

Rating: Satisfactory performance

Dental services were provided one full day a week. Patients were seen within one week of request. The dentist and dental nurse explained the plan of treatment to patients and gave advice on oral health. Out-of-hours emergency treatment is available. Patients could also be seen by GPs in the interim for pain relief if necessary.

No written information regarding treatment was provided by the dental service at the time of the inspection. All explanations were verbal.

The dental treatment room was fit for purpose. All instruments were managed safely by the dental nurse and removed at the end of each day for decontamination as per national guidance.

Oral health was promoted by all staff and toothbrushes and toothpaste were available.

9.10 All pregnant women, and those caring for babies and young children, receive care and support equitable to that available in the community, and are supported with their wellbeing throughout their stay in prison, on transfer and on release.

Rating: Not applicable

There were no female prisoners in HMP Dumfries at the time of the inspection.

9.11 Everyone with palliative care or end of life care needs can access treatment and support equitable to that in the community, and is supported throughout their stay in prison, on transfer and on release.

Rating: Satisfactory performance

At the time of the inspection, no patients in the prison had been identified as having palliative or end of life care needs. Patients would be seen by the GP or Advance Nurse Practitioners (ANPs) initially and then referred to the palliative care team in NHS Dumfries and Galloway.

Although staff had little exposure to patients with palliative or end of life care needs, all staff demonstrated an awareness of the principles that underpin care for any patient who may require this in the future. There were no recognised assessment tools in place. Staff had worked closely with Marie Curie and education was available. An on-call palliative care consultant was available if required for any emergency cases and there was access to MacMillan support nurses. Anticipatory care plans were in place within the establishment.

9.12 Everyone at risk of self-harm or suicide receives safe, effective and person-centred treatment, and support with their wellbeing throughout their stay in prison, on transfer and on release.

Rating: Satisfactory performance

Although there was no one on TTM at the time of the inspection, systems and processes were in place in line with the SPS TTM strategy. Anyone identified as being at risk of self-harm or suicide, either on admission or while in prison, was immediately commenced onto TTM. The majority of TTM case conferences were attended by a mental health nurse. If the services of a translator were required at the conference this would be arranged.

If a patient appeared to be at immediate risk of self-harm or suicide, the mental health team could arrange for an urgent next day appointment with the psychiatrist.

9.13 All feedback, comments and complaints are managed in line with the respective local NHS Board policy. All complaints are recorded and responded to in a timely manner.

Rating: Good performance

Complaints, comments and feedback about healthcare services were managed in line with the local NHS complaints handling policy. Notifications were observed to be recorded, shared and actioned within recommended time frames and in accordance with data protection legislation. Confidentiality protocols were followed, with complaints only being recorded into the Datix system and not in the patients Vision records.

Feedback, comments, concerns and complaint forms were available in all residential halls from officers and from healthcare staff. For those who required the form in a different format for example in a different language, healthcare staff could print this off. Information advising patients about how to provide feedback or make a complaint in relation to health care was available throughout the prison. Patients could view the process for handling complaints as described on the forms and this included timelines. When acknowledging a complaint, patients were given information on the “patient’s advice and support service” which could support prisoners with their complaint.

Responses to complaints met the nationally agreed standard and there were processes in place to ensure that complaints were reviewed and discussed for shared learning within the team.

Good practice: When acknowledging a complaint, patients were given information on the “patient’s advice and support service” which could support prisoners with their complaint.

9.14 All NHS staff demonstrate an understanding of the ethical, safety and procedural responsibilities involved in delivering healthcare in a prison setting.

Rating: Good performance

Staff were able to explain the boundaries between professional and ethical issues. They were aware of the demands associated with delivering healthcare within the prison setting and the requirement for security.

Staff understood their duty to pass on any intelligence that could compromise the health and wellbeing of a prisoner or to the safe running of the prison. Formal processes were in place to ensure that cases of possible physical or psychological harm to prisoners, were reported appropriately by staff.

The healthcare administration team was found to be well organised with robust administration processes in place for the management of patient information including organisation of clinics, appointments and the sharing of patients’ records.

9.15 The prison implements national standards and guidance, and local NHS Board policies for infection prevention and control.

Rating: Good performance

The standard of environmental cleanliness throughout HMP Dumfries was of a high standard. Pass men had been trained in cleaning and were responsible for corridors, toilets and residential areas. Healthcare facilities, both within the health centre and the satellite centre, were of a good standard. Personal protection equipment and alcohol-based hand rub was available at the point of care, and the environment and equipment was in a good state of repair, clean and ready for use. Inspectors observed staff cleaning equipment in between patients. All staff adhered to national uniform policy.

Infection prevention and control audits were carried out by the infection control team at NHS Dumfries & Galloway Royal Infirmary. The audit demonstrated a high standard of compliance and had been reduced from annually to two yearly.

9.16 The prison healthcare leadership team is proactive in workforce planning and management. Staff feel supported to deliver safe, effective, and person-centred care.

Rating: Good performance

There was one WTE band 5 vacancy within the primary healthcare team. However this was not impacting of the safe delivery of patient care. Contingency to support the team came from other specialities and from the health centre manager, who was visible and worked clinically to support teams.

Staff who commenced employment were supported through induction and mentored. Staff competence was reviewed through discussion and sharing of complex cases at weekly meetings. Inspectors were told that external education facilitators visited monthly and an education plan was available for all staff in the health centre. Staff personal files contained statutory and mandatory training.

Monthly line management and clinical supervision was diarised for staff and worked through a rolling agenda. Regular team meetings ensured continued communication. The team was small but staff described a supportive culture amongst colleagues and leadership teams both within health and the SPS.

Turas was not currently available for staff appraisals, however teams were being supported to roll it out by April 2020. An alternative appraisal process was in place.

As discussed in QI 9.5 an additional band 6 mental health nurse (RMN) had been secured.

9.17 There is a commitment from the NHS Board to the delivery of safe, effective and person-centred care which ensures a culture of continuous improvement.

Rating: Good performance

Staff demonstrated an understanding of reporting structures within the prison. There were clear and visible line management and governance structures in place through the Health and Social Care Partnership and Integrated Joint Board. There were robust systems in place and representation of prisoner healthcare in many forums within this structure and the wider NHS board. This was raising the profile of prisoner healthcare.

Quarterly governance meetings took place and were represented by both SPS senior management, health senior management, healthcare teams and admin staff. This process demonstrated excellent communication between all staff, an open and honest culture and support of one another for safe service delivery. These meetings had structured agendas. The recognised system for reporting of adverse events in Datix was used by staff and there was a process in place for the health centre manager to review all issues and escalate accordingly.

There was a workforce plan available outlining the strategy in place to develop a high quality service for patients. This was reviewed annually. Although there was currently no mechanism to record patient's suggestions or feedback, feedback had been sought in focus groups as part of the health needs analysis which they planned to use to further develop the service.



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