REPORT ON
HMP & YOI CORNTON VALE
FULL INSPECTION
28 SEPTEMBER-7 OCTOBER 2015
HM Inspectorate of Prisons for Scotland is a member of the UK’s National Preventive Mechanism, a group of organisations which independently monitor all places of detention to meet the requirements of international human rights law.

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INTRODUCTION AND BACKGROUND

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

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

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

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

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

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

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

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

• attending and observing relevant meetings impacting on both the management of the prison and the future of the prisoners such as Case Conferences; and

• reviewing policies, procedures and performance reports produced both locally and by Scottish Prison Service headquarters specialists.

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

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

1. A colour coded assessment marker.

<table>
<thead>
<tr>
<th>Rating</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good performance</td>
<td>Indicates <strong>good performance</strong> which may constitute a practice worthy of sharing.</td>
</tr>
<tr>
<td>Satisfactory performance</td>
<td>Indicates overall <strong>satisfactory performance</strong>.</td>
</tr>
<tr>
<td>Generally acceptable performance</td>
<td>Indicates <strong>generally acceptable performance</strong> though some improvements are required.</td>
</tr>
<tr>
<td>Poor performance</td>
<td>Indicates <strong>poor performance</strong> and will be accompanied by a statement of what requires to be addressed.</td>
</tr>
<tr>
<td>Unacceptable performance</td>
<td>Indicates <strong>unacceptable performance</strong> that requires immediate attention.</td>
</tr>
<tr>
<td>Not applicable</td>
<td>Quality indicator is <strong>not applicable</strong>.</td>
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2. A written record of the evidence gathered is produced by the Inspector allocated each individual standard. This consists of a statement against each of the indicators contained within the standard inspected. It is important to recognise that although standards are assigned to inspectors within the team all inspectors have the opportunity to comment on findings at a deliberation session prior to final assessments being reached. This emphasises the fairness aspect of the process ensuring an unbiased decision is reached prior to completion of the final report.
KEY FACTS

Location

Her Majesty’s Prison and Young Offenders Institution Cornton Vale is situated on the B823 approximately two miles from the town centre of Stirling.

Role

Cornton Vale is the principal prison in Scotland for holding female offenders remanded or sentenced to prison by the courts. Whilst Cornton Vale is Scotland’s only all-female prison, women are also held in Edinburgh, Grampian, Greenock and Inverness.

Brief history

The Church of Scotland established a garden colony between 1907 and 1946 aimed primarily at men with alcohol problems. The focus changed to an open borstal from 1946 to 1975, when the site was acquired by the Scottish Prison Service and a women’s prison was set up. It took only convicted prisoners from 1975 until 1978. In 1978 Parliament passed the necessary legislation to allow women to be held there on remand.

Accommodation

There are six accommodation Houses, a Separation and Reintegration Unit (SRU) and independent living units (ILUs).

Design capacity

The establishment can hold up to 309 prisoners which includes 24 spaces within the ILUs, currently the typical day-to-day operating capacity is 200 - 230.

Population held at time of inspection

On 28 September, 228 prisoners were held – details of the prisoner population are outlined in Annex A.

Date of last inspection: Follow-up inspection, 30 January – 2 February 2012.

Healthcare provider: NHS Forth Valley.

Learning provider: New College Lanarkshire.
OVERVIEW BY HM CHIEF INSPECTOR OF PRISONS FOR SCOTLAND

Introduction

This full inspection of HMP and YOI Cornton Vale came at a time of significant change for women in prison in Scotland. In 2012 the Angiolini Commission on Women Offenders concluded that “Cornton Vale is not fit for purpose” and recommended that “Cornton Vale is replaced with a smaller specialist prison for those women offenders serving a statutory defined long term sentence and those who present a significant risk to the public”. The Scottish Government has accepted this recommendation. The context, therefore, of this inspection in 2015 was one of uncertainty as to the length of time which Cornton Vale would continue as the national prison for women and young offenders in Scotland.

The establishment of the Commission on Women Offenders followed the report of an inspection by my predecessor in 2009, which found a prison “in a state of crisis”.

It is clear to me that significant progress has been made since these reports and I assess that Cornton Vale is no longer in a state of crisis. However, there are aspects of the conditions in Cornton Vale and the treatment of women which are unacceptable. The continued use of night sanitation arrangements was the most concerning. These arrangements were in place for nearly half of the women in Cornton Vale. During the night, the women did not have direct access to toilet facilities and often had to wait, in some cases for an extended period of time, before they could use a toilet. On occasions, prisoners were advised to use their sink as a toilet. This is wholly unacceptable in the 21st Century. As a matter of urgency, alternative measures need to be put in place to ensure that prisoners have unrestricted access to toilet facilities.

The implementation of the replacement for Cornton Vale and the planned strategy for women in the criminal justice system has the potential to deliver significant improvements to the conditions for women and their treatment whilst in custody.

Inspection Findings

Of the ten Standards for Inspecting and Monitoring Prisons in Scotland used to inspect Cornton Vale, four were assessed as satisfactory, five as generally acceptable and one as poor.

There had been substantial improvements in some of the living accommodation, where investment in upgrading the fabric and facilities, and a marked reduction in the overall population had led to improved living conditions. The old ‘back cells’ used for segregating women had been replaced by a modern, fit for purpose Separation and Reintegration Unit. The introduction of new activities and services, combined with the extension of training available, had brought welcome improvements.

The new Family Centre and Help Hub, opened in September 2013, had been a particularly welcome initiative. Both families and prisoners found it to provide very positive support from professional staff and volunteers. This was an area of practice worthy of sharing.
The spacious grounds in which Cornton Vale is set were well maintained. Prison issued clothing was of a suitable standard; efficient and effective arrangements were in place for the laundry.

In general, prisoners told us that they felt safe in Cornton Vale. We witnessed respectful and courteous interactions between staff and prisoners, where care and compassion were clearly evident. Relationships were, in the main, positive and professional. This notwithstanding, many prisoners told us that they did not have confidence in the complaints system and that they were afraid to make a complaint for fear of the consequences.

The provision of healthcare was assessed as being generally acceptable. Healthcare was well planned and focussed towards the needs of the population. In particular, care was evident during the period immediately following admission and for prisoners who were especially vulnerable. The care and treatment of prisoners with addictions was identified as good practice. The work undertaken in Ross House with the most vulnerable prisoners was impressive, but would have been further enhanced with more consistent mental health nursing provision. The cells in Ross House had not benefitted from refurbishment and provided a particularly harsh environment. Too often we found that the delivery of healthcare services was adversely impacted by the operational needs of the prison.

Overall, the security measures were implemented to a generally acceptable standard. Authority was exercised respectfully. Some areas for improvement were identified in searching procedures. As part of the inspection we visited Glasgow Sheriff Court to assess the conditions in which women were held there. These gave rise to major concerns; the facilities were not fit for purpose. The findings are detailed in Annex B of this report. The Scottish Courts and Tribunals Service has been informed of our findings. In relation to the arrangements for women travelling under escort to and from Cornton Vale, many women had unacceptably long journeys, often having to share vehicles with male prisoners.

The provision and engagement in purposeful activity was assessed as satisfactory. Some of the employment opportunities were not available due to staff shortages. The visiting arrangements had improved significantly with the introduction of the Family Centre and Help Hub. The staff and volunteers created a safe and welcoming environment. It was encouraging to see the facility used to support women on liberation. Througcare support for women serving short sentences had been introduced and was making encouraging progress. The throughcare team had recently begun to work with women for at least six weeks after their release. Additional support was still required to meet the housing needs of women leaving Cornton Vale.

The Governor and management team had developed a clear plan for the priorities at Cornton Vale. These had been well communicated to staff throughout the establishment. The prison had fostered and encouraged supportive working relationships with other prisons in Scotland and with organisations providing services to the women in Cornton Vale. Considerable efforts had been made to attract positive press and media coverage for Cornton Vale.
Next Steps

This report identifies a number of areas of practice worthy of sharing which are working well in Cornton Vale and highlights areas where improvements are required. I look forward to seeing the action plan produced by HMP and YOI Cornton Vale in response to the findings in this report. HM Inspectorate of Prisons for Scotland will continue to monitor the implementation of the action plan.

David Strang
HM Chief Inspector of Prisons for Scotland
SUMMARY OF INSPECTION FINDINGS

Standard 1  Lawful and transparent custody
Satisfactory performance

Standard 2  Decency
Poor performance

Standard 3  Personal safety
Generally acceptable performance

Standard 4  Health and wellbeing
Generally acceptable performance

Standard 5  Effective, courteous and humane exercise of authority
Generally acceptable performance

Standard 6  Respect, autonomy and protection against mistreatment
Generally acceptable performance

Standard 7  Purposeful activity
Satisfactory performance

Standard 8  Transitions from custody to life in the community
Satisfactory performance

Standard 9  Equality, dignity and respect
Generally acceptable performance

Standard 10 Organisational effectiveness
Satisfactory performance

Good Performance

There were nine good performance Quality Indicators 4.7, 4.13, 4.16, 5.3, 7.2, 7.5, 10.7, 10.9 and 10.10.
STANDARDS, COMMENTARY AND QUALITY INDICATORS

STANDARD 1 - LAWFUL AND TRANSPARENT USE OF CUSTODY

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

Commentary

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

Inspection findings

| Overall rating: Satisfactory performance | |

There were sound practices and governance structures in place to ensure that Cornton Vale’s compliance requirements in terms of the law were met. From the admission processes through to release on temporary licence levels of performance in terms of treatment and care were found to be satisfactory.

The introduction of the new Family Centre & Help Hub coupled with the old back cells (previous Segregation Unit) being replaced by Dumyat (Separation and Reintegration Unit - SRU) were a welcome response to previous inspection findings.

Staff should use their discretion more in regards to reviewing an individual’s Prisoners Supervision System (PSS) level to ensure that no prisoner misses out on opportunities such as Home Detention Curfew (HDC), that may assist them in their desistance journey.

Quality indicators

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

Rating: Satisfactory performance

All statutory procedures were fully complied with. An in-depth process existed for the checking and verification of warrants. This consisted of the appropriate and expected checks and controls carried out at the point of Reception followed up by secondary assurance processes. These were seen to work efficiently. This was further supported by a SharePoint site which contained desk top instructions for all warrant processes.
1.2 All prisoners are classified and this is recorded on the prisoner's electronic record.

Rating: Satisfactory performance

The PSS process was initiated at the point of Reception and where appropriate completed in the First Night in Custody area. This was used proportionately and reviewed appropriately by a manager in accordance with policy. Speaking with staff it would appear that opportunities to review PSS status, outwith the guidelines were not taken, which may result in the individual not gaining access to certain job or training opportunities or indeed access to the community as part of the HDC scheme.

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

Rating: Generally acceptable performance

There was a wide range of accommodation available dependent on how women presented and which risks, if any, were identified during the admission process.

A number of admission interviews were observed which were found to be of a high standard. Both operational staff and nursing colleagues paid due cognisance to how women presented, the risks both identified and self-disclosed. In Reception in particular staff should be commended for the compassion displayed and the manner in which they went about putting the women at ease. Prisoners acknowledged that staff had their best interests at heart. However, during the prisoner focus groups prisoners stated that the advice given by staff, to new arrivals, about how to manage relationships with other prisoners, whilst well intentioned, did on occasion raise their anxiety levels rather than to reduce them. Perhaps the deployment of trained peer supporters within Reception would assist in this regard.

One area of concern was identified, that being the admission process for individuals’ moving from Reception after 21:15. All such arrivals were placed in Ross House. This was inappropriate as Ross House held the most vulnerable and challenging prisoners and placing, for instance, a first time in custody young offender in this location is not appropriate. Prisoners upon arrival should always be located in the most appropriate location for them as individuals, irrespective of when they arrive at the establishment.

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

Rating: Satisfactory performance

On the date the process was inspected, 27 cells were being shared. A number of Cell Sharing Risk Assessments (CSRA) on PR2 (the SPS electronic prisoner records system – version 2) for these shared cells were examined. Overall no risks were identified. Although, it was noted that in four assessments where a potential risk of
“bully” had been flagged, there was no rationale within the additional narrative box to explain why the applied marker did not pose a risk when allowing these individuals to share. However, further investigation concluded that the “bully” marker was not a result of behaviours between these particular cell mates.

It was concerning to note that so many prisoners were sharing cells given that the population held was sufficiently low enough to easily facilitate single cell occupation for everyone who would benefit from it.

The cell allocation process appeared to be fair and robust.

During the Reception process the women were assessed by both prison and nursing staff to determine whether they had any issues that may present a risk to themselves or to others. This included any medical, psychological, drug or alcohol problems they may have had. Reception staff recorded any identified issues on PR2. The outcome of this assessment then determined which house block they were allocated to. On arrival at their allocated house block, prisoners were interviewed again to determine whether they had any particular issues within that house block for example any previous relationship problems with others located there. Staff also reviewed information on PR2 to assess suitability in relation to both the prisoner’s allocation to the house block and cell allocation. This included the individual’s ability to cell share, which given the population levels should not routinely happen. If a cell share was decided then a CSRA was completed prior to allocating the prisoners to the cell.

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

Rating: Generally acceptable performance

In the main critical dates were calculated in Reception and given to the prisoner at this point. This was with the proviso that upon verification of the warrant these dates were officially communicated within 24 hours. On at least one occasion however a new arrival was observed to request her liberation date only to be told that this would have to be checked before they would commit to a date. Management should ensure that all staff allocated to work within Reception were appropriately trained and confident in calculating liberation dates. Apart from this concern the system in place for validating critical information appeared to be sound with both the senior manager responsible and criminal administration staff displaying commensurate knowledge of its application.

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

Rating: Satisfactory performance

The statutory powers granted to the Governor were carried out as required by law. During the course of inspection the orderly room was observed and all practices were found to be appropriate.
Other examples checked during inspection included, Food Standards Act 1999 and Health and Safety at Work Act 1974. The practices and procedures for the temporary release of prisoners on licence were also found to be in accordance with policy with its application assessed as appropriate.

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

**Rating: Satisfactory performance  ●**

There had been substantial investment on site in respect of the accommodation available. Most notably was the closure of the old Segregation Unit (the “back cells”) which were previously deemed unfit for purpose. These had been replaced with Dumyat which represented far more appropriate accommodation for women requiring a heightened level of supervision and support.

The ‘Front of House’ area had also been upgraded and the substantial investment in the new Family Centre & Help Hub was a welcome and valued addition to the facilities provided for visitors to the prison.
The prison supplies the basic requirements of decent life to the prisoners.

Commentary

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

Inspection findings

Overall rating: Poor performance

Almost half of the prison population did not have direct access to toilet facilities. This created serious problems and as a consequence many prisoners felt degraded. The arrangements for sanitation were no longer appropriate and the situation needs to be remedied immediately. It was not acceptable, in the 21st Century, that prisoners were advised to use their sink as a toilet, because there was a backlog of requests within the electronic system.

Decency issues for women held in the Glasgow Sheriff Court are highlighted in detail in Annex B to this report.

Most prisoners lived in reasonable circumstances, but there were some areas where conditions were poor. Prisoners sharing accommodation lived in cramped conditions, an unnecessary situation given the space available with the prison. Cornton Vale was a clean prison, the buildings were in good order and the grounds were well maintained. There was an efficient laundry and prison issue clothing was of a suitable standard but some of the bedding was not good enough.

The catering arrangements were sound and prisoners were offered a balanced and reasonably healthy diet.

Quality Indicators

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

Rating: Generally acceptable performance

Overall the standard of accommodation was mixed. It ranged from excellent in the well-equipped and nicely decorated and furnished ILUs, to poor, for those living in the ground floor of Ross House where some of the cells were dirty, untidy and poorly equipped.

Generally the living conditions for most women were adequate, apart from those sharing small cells in Younger and Bruce Houses where there was not enough space.
The fabric of the buildings were in a reasonable state of repair and the grounds were well kept and maintained to a high standard.

All prisoners should be able to live in clean decent accommodation which is adequately equipped and provides sufficient space.

Given the space available in Cornton vale, cell sharing should only be used when it is beneficial to the individuals involved and not for operational reasons.

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

Rating: Generally acceptable performance  

There was an active and effective industrial cleaning party and levels of cleanliness and hygiene throughout the prison were adequate. The exception to this was on the ground floor in Ross House, where we found a number of cells with ingrained dirt and were extremely untidy and unkempt. This accommodation was in urgent need of a “deep clean” and redecoration. Advice should be sought to ensure the colour schemes used in the area were appropriate and calming given that many of the women held in Ross House had significant mental health issues.

All living accommodation within the prison should be kept in a clean and hygienic state at all times.

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

Rating: Generally acceptable performance  

Cleaning materials were generally accessible within the Houses and most prisoners used them properly. In Skye House we saw staff encouraging and supporting young offenders to keep their living areas clean and tidy. This approach did not work so well for some of the prisoners in Ross House who were either unable or unwilling to maintain a reasonable standard. The utilisation of peer support in the area should be considered, giving the opportunity to the peer supporter to do something positive and feel valued and the person being supported to acquire useful independent living skills.

All prisoners should be encouraged and supported to maintain decent personal living standards. Extra help should be provided for individuals who cannot manage this for themselves.

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

Rating: Poor performance  

Apart from the newer units, most of the beds were metallic bunk beds. Although well-constructed and durable, these were now old pieces of furniture and in many cases the paint was beginning to flake off the frames.

We received numerous complaints from women about the standard of the mattresses, which they said were old, and thin. There were arrangements in place to replace worn
mattresses and sometimes they were changed, but many of those which we saw in use were still in poor condition. Many of the mattresses in Ross House were also covered in graffiti. When talking to staff about the condition of pillows and mattresses, not all of them were aware how they would go about getting a replacement for a damaged or soiled one.

All prisoners should be provided with a decent bed and a serviceable mattress.

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

Rating: Generally acceptable performance 🟢

The laundry arrangements were well organised and efficient, bedding was washed weekly. Newly admitted prisoners were supplied with fresh linen which was contained in a sealed pack. The bedding in some of the Houses, particularly Ross and Skye was poor. Not all duvets had covers and some pillows were badly soiled and worn.

Bedding being used by prisoners, should always be maintained to a reasonable standard.

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

Rating: Satisfactory performance 🟢

On admission, all prisoners were issued with a full range of basic products, to keep themselves clean and tidy. Some women complained to us about the quality of some of the items provided, however they could purchase better quality products from stock held within the prison.

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

Rating: Unacceptable performance 🟥

All prisoners had access to decent washing facilities. However, almost half of the population had to rely on the antiquated night sanitation system. This meant that during the night they did not have direct access to toilet facilities and often had to wait, sometimes quite extended periods of time, before they could use a toilet. Our analysis of prison records for September 2015 showed that in 11.5% of cases or 357 instances, prisoners had to wait between 6 and 10 minutes to get access to the toilet. In 8.5% of cases or 266 instances, prisoners had to wait longer than 10 minutes, to get access to the toilet. In a small number of situations, records showed that prisoners had to wait for over an hour to get access to the toilet.

Staff and managers acknowledged that during the lock up and unlocking times the system was not activated until a given time, resulting in some cases where a prisoner could not even request to get out to the toilet for periods close to an hour. That was unacceptable.
We received numerous accounts about the distress and discomfort this caused, in some cases involving women who were pregnant or who had health problems. Indeed, prisoners were extremely vocal about this subject and it was by some way, the single strongest criticism that women made about the prison. Without prompting, prisoners in three of the four discussion groups informed us that they had been told by the staff in the control room to “pee in the sink”, when they had not been able to get access to a toilet quickly enough.

There arrangements were completely unacceptable and had continued for far too long. Alternative measures should be taken immediately to ensure that prisoners have unrestricted access to toilet facilities.

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

Rating: Satisfactory performance

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

The general standard of prison issue kit was reasonable and most women seemed content with it. Although some women in Ross House appeared to be poorly dressed, when we enquired further about this, we were satisfied that staff had actually taken reasonable steps to offer these women suitable clothing.

Women were able to wear their own clothing in the evening, at weekends and at visits. As we have referred to in QI 2.5 the laundry arrangements were efficient and prisoners were able to keep their clothes clean.

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

Rating: Satisfactory performance

Prisoners dined communally in their own living areas. Inspectors dined with the women on several occasions and found the food to be wholesome and of a reasonable standard. The food was prepared centrally and there were suitable checks in place to ensure that when the food arrived at the Houses, it was served at the correct temperature. The pantry areas where the food was served were kept clean.

We received few complaints from prisoners about the quality or quantity of the food served. The menu was balanced and inspectors thought that catering staff took reasonable care to try and meet the diverse needs of the prisoner group. The menu was checked by the Imam and a nutritionist and there were regular consultations with prisoners.
2.10 The meals served to each prisoner conform to their dietary needs, cultural or religious norms.

**Rating:** Satisfactory performance

Suitable arrangements were made to cater for prisoners who required special diets. The catering manager was particularly well informed about this subject and had carried out his own research on the subject. A new software programme was about to be introduced into the prison kitchen which it was hoped would improve overall efficiency. There was a strong emphasis on healthy living and prisoners were encouraged to eat fresh fruit on a daily basis.
STANDARD 3 - PERSONAL SAFETY

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

Commentary

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

Inspection findings

Overall rating: Generally acceptable performance

The lack of confidence that prisoners had in the application of the complaints process was universal amongst the prisoners and was raised by them on numerous occasions during the inspection process. It was acknowledged that management had tried to improve that situation, however, to date their efforts had failed and they need to revisit this issue as a matter of urgency.

Despite the concerns raised about the management of complaints there can be no doubting that both staff and prisoners felt safe in Cornton Vale. This was self-reported throughout a series of focus groups and the inspection itself. The general interactions themselves between staff and prisoners was further evidence of this. Relationships witnessed were, in the main, positive and professional. Those relationships helped form the basis of the caring atmosphere which existed for the majority of women in Cornton Vale. There was a genuine feeling that the staff wanted to give of their best when it came to doing what they could for the women. This was particularly evident in Reception and Ross House where interactions were viewed on numerous occasions throughout the inspection. From initial interviews through to personal care plans and case conferences staff were operating in a caring and professional manner.

The impact of operational issues was however, at times, an impediment to continuity in terms of the regime and the delivery of services. The balance between the immediate operational needs of the establishment and the delivery of services to the prisoners did not seem to be balanced or considered. For example two short duration but nonetheless significant incidents, which occurred during inspection, had a disproportionate effect on the care aspect of the regime provided. This resulted in missed appointments with health specialists and the rushed and delayed issue of medications, which the inspection team felt could have been more suitably and proportionately managed.

Quality Indicators

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

Rating: Satisfactory performance

Although there had been a substantial level of reported instances of violence in the year preceding the inspection, only one had been of a significant nature. The
overwhelming response from both prisoners and staff indicated that this was a safe prison.

The Tactical Tasking and Co-ordination Group and the Anti-Bullying Strategy were used appropriately in order to address this issue. There was a regular meeting dedicated to reducing violence which was augmented by a SharePoint site containing appropriate information and detail for staff. Comprehensive minutes were recorded including information and statistics such as violence “hot-spots” were also available. The Deputy Governor took personal responsibility for this. Inspectors were also advised that a “zero tolerance to violence” poster campaign was being planned.

It appeared that reasonable steps were being taken in respect of this indicator however of slight concern was the management of the “must be kept separate list” which if updated more regularly would provide additional assurance.

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

Rating: Satisfactory performance

At the time of inspection the manager responsible for Health and Safety was absent. A nominated manager provided the information required for examination. It appeared that robust systems were in place for the management of this critical area of the business. Both the Governor and Deputy Governor carried out inspections and walkabouts which were logged in addition to the requirement to do so. This indicated the level of attention paid to this indicator. In terms of audit and inspection, processes utilised were found to be satisfactory. Whilst daily fire checks were carried out, a minor issue was the absence of fire notices on the back of cell doors. This should be addressed as a matter of urgency.

Training statistics in respect of Health and Safety showed a high level of uptake, a further indication that this area was well managed with the appropriate level of attention to detail.

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

Rating: Satisfactory performance

A dedicated SharePoint site existed with a comprehensive set of both Risk Assessments and Safe Systems of Work. A selection were reviewed and a number of these were observed in the operational context and this confirmed the application of the process in real time.

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

Rating: Satisfactory performance

Throughout the course of inspection many examples were highlighted of positive staff behaviours. This ranged across a number of disciplines on site. Of particular note was the attitude and manner of staff in the Family Centre & Help Hub setting the scene for positive interaction with staff operating within the confines of the prison.
Staff in Ross House and Dumyat were also seen to go “above and beyond” in terms of their handling and interaction with a number of challenging individuals. In Ross in particular it was difficult to imagine the staff doing any more in order to contribute to addressing this indicator. This was an area of **practice worthy of sharing**.

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

**Rating:** Generally acceptable performance

In depth interviews were carried out with all prisoners on admission to the establishment. Several of these were observed during inspection and found to be of a high standard. The staff involved displayed a professional and caring attitude which came across as a genuine attempt to settle the women into custody from the outset. The staff interaction whilst putting the women at ease was also utilised to ensure any significant information was both uncovered and discussed in detail prior to allocation to a house block. An induction process existed for all women regardless of where they were allocated. There was also a dedicated First Night in Custody suite located in Bruce House where the national induction process was conducted for convicted women. A further induction unit existed in Younger House for untried women. In Skye House where young women were located the induction process was carried out by staff from Bruce. In all, this represented a significant level of attention paid to this crucial phase of a women’s transition into custody.

The situation regarding the location of late arrivals, raised in QI 1.3 does however require urgent attention.

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

**Rating:** Generally acceptable performance

One area of concern relating to this indicator arose during the management briefing session held prior to the commencement of the inspection. HMIPS was informed that on occasions non-compliant prisoners, deemed at risk of self-harm, were subjected to Control and Restraint procedures in order to facilitate them being changed into “safer” clothing. This situation should be reviewed with immediate effect to ensure that it is appropriate and proportionate to the risks being presented. If the application of such techniques in such circumstances was deemed appropriate they should be subject to a post incident review.

Initial assessment interviews were conducted by staff in Reception with a follow up carried out by nursing staff. As described throughout the evidence for QI 3.5 these were carried out in both a professional and caring manner with due regard taken of all risks presented.

Several aspects of the ACT2Care process were inspected including, care plans, documentation, accommodation and case conferences attended. With the exception

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1 ACT2Care is the SPS’ system for identifying prisoners at risk of self-harm or suicide. It aims to address the risk of suicide and suicidal behaviour and promote a caring environment where those in distress can ask for help.
of the cellular accommodation in Ross House all of this was found to be of a good standard.

Inspectors were particularly impressed with the manner in which the staff in Ross dealt with the women who presented with the need for additional care. The staff were found to be both caring and respectful setting the scene for a climate which encouraged the women to be open and honest with them.

There was a dedicated SharePoint site for ACT2Care and the staff in both Ross and the health centre work closely in this regard. Other initiatives in Ross included a quiet room and the provision of a 24 hour crisis phone where the women could contact the Samaritans, Rape Crisis or Breathing Space. This was an area of practice worthy of sharing.

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

Rating: Satisfactory performance  

There were a number of positive examples in relation to this indicator in Ross House. Individual care plans were scrutinised during inspection and found to be of a satisfactory standard. The work done by staff building relationships with prisoners who fell into this category on a day-to-day basis ensured that they had a communication outlet was noticeable.

One particular prisoner who fell into this category had a significant level of resources dedicated to her well-being. A multi-disciplinary case conference with a range of colleagues representing all aspects pertaining to care and security was attended. This was chaired by the Deputy Governor and it was clear that the prison was taking both pragmatic and care based decisions in respect of this woman.

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

Rating: Satisfactory performance  

From the point of admittance in Reception it was clear that considerable thought was given to the allocation of individual prisoners. This was also the case in respect of prisoners who were removed from general association and located in Dumyat which was used proportionately.

There was also appropriate use of Rule 98 where prisoners were locked in their cell for a period of one hour in Ross House. This was dictated and utilised as a result of behaviours which the prisoners exhibited and was again proportionate. The application of this rule and its utilisation was a positive response where it was viewed that common sense and good prisoner management skills were exhibited for the benefit of all concerned.
3.9 Where bullying or harassment of prisoners is suspected or known to have taken place, steps are taken to isolate those responsible from their current or potential victims and to work with them to modify their behaviour.

Rating: Satisfactory performance 🟢

The formal process which was utilised to manage prisoners who displayed bullying type behaviours was the Anti-Bullying Strategy as noted in QI 3.1. At the time of the inspection there were a small number of prisoners where this was applied. It was apparent that there was work being done to address behaviour of this nature. During the induction process for every prisoner an anti-bullying compact agreement was signed off and uploaded onto individual files. Several prisoner files were checked and this was verified. Two First Line Managers were anti-bullying co-ordinators and there was a dedicated hotline available and cards displayed on the back of cell doors regarding bullying.

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

Rating: Poor performance ⚫

The prisoners consulted were quick to point out that they would be reluctant to make a formal request for assistance but were more likely to wait for a specific member of staff or manager to be on shift to discuss any concerns they had. This was concerning as it could result in a considerable delay in the notification of an incident of bullying. Management need to address this issue, as it would appear that there was a lack of confidence, within the prisoner group, that certain members of staff would deal with reported incidences of bullying appropriately.

Those who had been identified as being the subject to bullying or harassment were offered support and assistance although this was not as a result of a formalised process. Several First Line Managers, staff and prisoners were consulted regarding this.

Both the First Line Managers and staff commented that the prisoners were all aware that they could approach a member of staff or a manager who they considered appropriate and have these discussions regarding any concerns.

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

Rating: Poor performance ⚫

During consultation with the prisoners they pointed out that they were not keen on using the formal complaints process. When pressed on this issue it was because they felt they did not have much faith in the system. Worryingly a small, but not insignificant, minority of prisoners stated that they had suffered repercussions as a result of raising their complaint.

During the inspection numerous complaint forms were examined. Two complaints in particular were concerning where a prisoner had made an allegation of threats of
violence from a member of staff. On both occasions the responses to those complaints were unsatisfactory.

There was, however, no evidence to suggest that this type of response to allegations of mistreatment was systemic.

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

Rating: Generally acceptable performance

A Safe System of Work existed for responding to an emergency within the prison. This reflected the numbers of staff who should attend and from which areas. A senior manager however conceded that this was rarely followed and inevitably resulted in too many staff attending.

During the inspection there were two emergency situations where the proportionality of response was viewed to be excessive resulting in unnecessary impact throughout the remainder of the prison.

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

Rating: Satisfactory performance

Staff carried pagers within the prison. There was a personal alarm function in the radios carried by staff and this was supported by a hard wired alarm system. Alarm tests were carried out on a weekly basis with the area being designated by the Electronic Control Room (ECR) staff who logged this activity in a book. Any faults were noted and reported to an alarm contractor where an agreement existed that they would respond within four hours to address the fault.

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

Rating: Generally acceptable performance

National Contingency Plans were in place with the appropriate number of hard copies retained. There was also a dedicated SharePoint site. The review process was split between two managers. The last local incident management training week took place in October 2014, however no feedback analysis was available. It was noted by the inspector that the ability to identify role holders in the event of an incident had not been facilitated within the report provision of the key vend system.
STANDARD 4 - HEALTH AND WELLBEING

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

Commentary

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

Inspection findings

Overall rating: Generally acceptable performance

Whilst the overall rating for this standard was generally acceptable there were a number of key factors that needed to be resolved to ensure that there was a consistent delivery of the services provided. The maximum benefit of the services being delivered was not being realised due to the poor co-ordination of planning, systems and processes rather than a deficit in the actual quality of what was being delivered.

The local provision of healthcare was well planned and was focussed towards the needs of the population, however, it could be further enhanced by a number of small but important operational and IT changes.

Too often we found that the delivery of healthcare was adversely impacted upon by the operational needs of the establishment, which appeared to occur without due consideration of the needs of health care staff or indeed the prisoners. We did not see this as direct or deliberate, rather a lack of thought or consideration of what happened more widely within the establishment.

It was also a concern that on occasions healthcare staff appeared to be working out with their scope of practice.

The effectiveness of healthcare delivery could be significantly improved if the working day was extended from the 4 hours 45 minutes currently. This could be achieved by ensuring that SPS staff were available within the health centre for longer during the core working day.

It was encouraging to see the close working relationships that had developed within the prison; these were most evident during the vitally important admission to the establishment and the period immediately after. There were clear signs that all parties worked in a co-ordinated manner to ensure that prisoners upon arrival were appropriately assessed and that any on-going health concerns or issues were picked up and addressed as soon as possible.

The work undertaken within Ross House with the most vulnerable prisoners was encouraging, but could be further enhanced if the dedicated Mental Health Nurse post was filled everyday as intended and was ‘ring fenced’. We witnessed this post being unfilled due to sickness or temporarily being moved to work in other areas of the establishment.
The lack of an integrated IT system was preventing the delivery of a service equitable to that available in the community.

Quality indicators

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

Rating: Generally acceptable performance

The GP worked full time (08:00 to 18:00 Monday-Friday) and had experience of addictions. The GP was supported by three portfolio GPs to provide out of hours cover (08:00-18:00 and weekends) for all three prisons in NHS Forth Valley (HMP & YOI Cornton Vale, HMP Glenochil and HMYOI Polmont). The GP was also the medical lead for the service.

Health centre staff covered multiple clinics/roles. Worryingly we observed a nurse examining a patient (sounded chest, checked ears) in clinic who stated that they had learnt from experience and colleagues, but had not undertaken any additional training such as clinical decision making or advanced clinical examination. This did not provide assurance that all of the prisoner health needs were being identified to enable appropriate referral. It was also noted that some clinics were staffed by mental health/learning disability nurses who had not had adult general nurse training. This was a weakness.

There was adequate cover provided by the dental service which included a dentist (one day per week with resource for an extra day if required), dental hygienist and an oral health training officer.

In general, we found that there was good access to specialist mental health services in Cornton Vale. However, there was evidence that arrangements to make time with health colleagues productive could be impacted upon by unplanned events that occurred within the prison outwith the health centre’s control, such as lock downs and availability of escorts. This prevented some prisoners being able to attend for appointments as outlined in QI 3.12.

Two psychiatrists worked part-time within the prison, covering convicted and remand prisoners. The referral route to be seen by a psychiatrist was via the mental health nurses who would assess and arrange an appointment with the psychiatrist. There was no waiting list for an appointment with a psychiatrist.

Access to psychological therapies was variable and there was no clear pathway or overarching clinical governance in relation to psychology services. Cornton Vale had access to a nurse cognitive behavioural therapist, however this service appeared to be underutilised with the therapist having a small caseload with few referrals. On meeting with the prison’s clinical psychologist we were informed that there was work underway to carry out a health needs assessment and analysis of the addiction and mental health needs of prisoners and identify gaps in service provision.

Two addiction nurses were based in the health centre, which was sufficient given the average number of prisoners with addiction issues. However, their time was not protected for addiction work and they were frequently required to provide cover for staff absence. This reduced the time spent on addiction work within the prison. This was a
**weakness** and staff should have protected time in which to deliver addiction services and clinics.

The enhanced addiction casework service (EACS) provided non-clinical addiction interventions and liaison with community service providers. The team comprised six caseworkers, one administrator and one team leader. Since transfer to NHS provision from the SPS in November 2011, replacement staff had been provided by NHS Forth Valley via a sub-contracted service provider. However, this provider did not recruit staff with adequate experience or knowledge of addiction work. In addition, the team leader had not been involved with shortlisting of candidates and on occasion had not been able to appoint a new staff member due to the selection of candidates not having the necessary knowledge, skills or experience. This put additional pressure on existing staff due to new staff requiring longer periods of on the job training. **This was a weakness.**

It is essential that NHS addiction caseworker provision, directly employed or sub-contracted, must include the team leader in the entire recruitment process. New recruits must be able to demonstrate adequate experience, knowledge and skills appropriate to addiction work.

Staff should be commended for being able to provide such a high quality addictions service despite the issues stated above.

### 4.2 Prisoners have direct confidential access to a healthcare professional.

**Rating:** Generally acceptable performance

Information was provided to all prisoners on how to access health services in the form of an information leaflet, which was in English only. **This was a weakness** and leaflets should be available in other languages. At the time of the inspection there were non-English speaking prisoners within Cornton Vale.

Self-referral forms were available in all house blocks although these were also noted to be in English only. It was not clear how non-English speaking prisoners would access these. Locked post boxes were seen to be in use. However, although the keys were held by health centre staff they were also able to use a ruler to open the box if they forgot the key. Prison officers were aware of this, as we observed one morning when they offered the nurse a ruler. The boxes did not provide appropriate information security provision and must be replaced. The forms were collected by health staff and then handed to the health centre administration staff for processing. A triage clinic ran daily.

Prisoners were observed discussing concerns/appointments during medication administration with advice being given by health staff.

Daily sick reporting clinics were held within the health centre for prisoners who should be attending work or education but claimed to be unwell. Prisoners requested attendance through the prison officers.

The routine of these clinics being held in the health centre was dependent on the availability of SPS staff to escort prisoners to and from the health centre and to provide Reception cover. The health centre was only able to schedule clinics for prisoners between 09:30 to 11.45 and 13:00 to 15:30. Clinics and the functioning of the health
centre were also affected by operational activity such as lock downs by SPS for drug searches. Where the morning clinics were delayed, this then adversely impacted on the staff’s ability to perform other services later in the day.

The effective working day for health care professionals in the health centre was 4 hours and 45 minutes, which was poor utilisation of a valued and expensive asset. This situation needed to be improved significantly.

The GP made use of the consulting rooms within Younger and Ross Houses which had computer access to see new prisoners before 09:30.

The continuity of healthcare provision, in the way which clinics were delivered must be reviewed jointly between the NHS and Cornton Vale management to ensure that a full productive day was achieved and any operational situations that develop were managed in such a way to minimise any impact on service delivery.

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

**Rating:** Satisfactory performance

Face to face consultations were held in private, with rooms having frosted glass or blinds in place. There were however some interruptions observed with staff coming in for equipment or to collect specimens. Not all staff knocked before entering the room during private consultations; this must cease with immediate effect.

Records were stored securely in a locked room with restricted access. The health centre had dedicated administrative staff to manage records and ensure the safe and secure transfer of records. There was a good system for tracking the movement of records on admission, transfer and release. There was an appropriate archive system in place.

Electronic records were password protected. Relevant staff could access the prisoner health records on Vision and PR2.

There was an issue that the GP could not send electronic referrals to NHS hospital services as health staff could not access the NHS IT system required for this. **This was a weakness.** This was in part due to technical issues as different systems were in use. However, if there was equivalent access to the system as GPs outwith the prison have, this would improve the flow of information between hospital and primary care within the prison.

The dental service used its own records system which could only be accessed by them. Information did not transfer into the prison health record system.

There was a data protection and confidentiality policy in place and staff were aware of their responsibilities in this. Prisoners were asked to sign consent to share information and inspectors witnessed this being explained to them prior to the request being made.
4.4 Healthcare provided in the prison meets accepted professional standards.

Rating: Generally acceptable performance

At the time of inspection we found that there was no formal one-to-one line management supervision or case load weighting/management being offered to mental health nursing staff to evaluate or reflect on their delivery of care and interventions. **This was a weakness** and the mental health team manager should make sure that there was regular one-to-one case load management supervision with staff to ensure that all prisoners allocated to that worker were regularly reviewed and discussed, ensuring that there was appropriate support and management for junior grades of nursing staff.

There were systems in place for checking Nursing and Midwifery Council registrations.

Staff stated that they had access to learnPro and face-to-face training. Cardiopulmonary resuscitation (CPR) training was delivered by an external provider and was tailored to the prison environment.

The practice in relation to the administration of medicines was seen to be carried out in a safe way. However, this was reliant on the prisoner stating their prison number rather than the use of a photo ID card which has been seen to be in use in other prisons. **This was a weakness**. The prison should review the standard safety measures, including identification of prisoners, prior to the administration of medicines. There were standard operating procedures in place for the administration of controlled drugs and methadone. Patient group directives were in place for drugs such as diazepam and dihydrocodeine.

Staff stated that they learn from incidents and that this provided opportunities for them to review their practice.

New staff were given a period of induction during which time they were supernumerary. This allowed them to observe drug rounds and clinics, giving them the opportunity to ask questions.

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

Rating: Generally acceptable performance

Generally there was good access to specialist mental health services within Cornton Vale. However, this could be hindered by events that occurred within the prison that were outwith the health centre’s control, such as lock downs and availability of escorts, referred to on a number of occasions throughout this report. This prevented some prisoners being able to attend for appointments. **This was a weakness**.

We found that the mental health nurses had a difficult task providing structured, regular treatment and interventions to their existing caseload due to other clinical demands, such as medication and covering duty rotas for sick leave. In some cases, this resulted in prisoners allocated a mental health nurse for treatment being seen on an irregular basis, with mental health nursing staff fitting in visits when time permitted.
See QI 4.1 for a description of psychological provision.

Prison officers, healthcare staff and the psychiatrist, told us that due to a lack of medium secure psychiatric beds in the community, prisoners who were acutely mentally unwell and required treatment in a psychiatric hospital could be delayed in being transferred due to lack of a suitable bed. This resulted in the prisoner being managed, whilst acutely unwell, within the confines of Ross House. This was deemed as being inappropriate and created undue distress for the prisoner themselves, those located within Ross House, healthcare staff and prison officers.

Prisoners received support to access specialist obstetrics and gynaecology services, for example abortion and colposcopy services. For pregnant women who were substance misusers, there were close links with the local specialist teams.

However, referrals were made by telephone or on paper which was different to referrals from outwith the prison environment. The GP was unable to use the NHS electronic referral system to arrange specialist input. **This was a weakness.** This was due to access restrictions and IT technical issues. A handwritten referral was generated which then needed to be scanned into the prison IT system and sent via secure e-mail to the hospital department. The response was then sent through the postal system to the health centre administration staff. Health centre staff should have equivalent access as practitioners have outside the prison.

SPS were notified of appointments in advance and arrange transport. These appointments were mainly for investigations and outpatient appointments. There were processes in place for healthcare and prison staff when a prisoner required emergency treatment, including emergency hospital treatment.

The outcome of any appointment was not readily available to prisoner health staff due to the IT issues. This could present a problem as it meant that any actions for follow-up or future treatment could be missed if the prisoner was released prior to the information being made available. It also relied on prisoners remembering that they may have had appointments arranged prior to being admitted to prison.

Within the prison there was a wide range of healthcare provision. However, it was concerning to note that prisoners on remand in line with national guidance, can only access emergency dental treatment. Equitable access to health care should be available to all prisoners.

Waiting lists within the prison were difficult to follow as each team had a separate way of recording the information. However, from the information provided, waiting lists were acceptable:

- Mental health nurse – same day for urgent referrals or average of 7 days for routine referrals
- Nurse – some same day, many 7-8 days
- Dental triage: 1-2 weeks.

The waiting times were directly affected by the availability of SPS staff to escort prisoners to the health centre and by the operational activities of the prison.
4.6 Prisoners identified as having been victims of physical, mental or sexual abuse are supported and offered appropriate treatment. The relevant agencies are notified.

Rating: Generally acceptable performance

We found that prisoners who suffered any injury within the prison were seen immediately by the healthcare team during clinic hours. Outwith this time, the GPs operated an on-call procedure. If the injury was assessed as serious, then arrangements were made to transfer the prisoner to the local accident and emergency department.

Prisoners were also able to access the sexual health clinic. They were given the opportunity to discuss problems or express concerns on all aspects of their sexual health and safety. Referral boxes were located in each of the Houses and prisoners could self-refer as required. Referrals were collected daily by nursing staff from the health clinic, however as noted in QI 4.2 these boxes were not secure.

The intelligence unit was notified of any concerns about prisoner safety. Healthcare staff told us that they would escalate concerns to management. However, we saw that there were no clear procedures, policy or pathways in place for health staff in regards to the notification of physical, mental or sexual abuse occurring within the prison.

Prisoners could refer themselves to Open Secret\(^2\) if they felt it was appropriate. Healthcare and prison staff could also complete referrals for prisoners on their behalf.

Prisoners could be referred to Survive and Thrive\(^3\). This pilot project was jointly run by the SPS forensic psychologist and an addictions mental health nurse.

Prisoners had access to chaplaincy services and during our onsite inspection we witnessed frequent attendance at the house blocks by the chaplain.

Mental health nurses were available to speak with prisoners, with a triage mental health clinic available most week days. A dedicated mental health nurse was also attached to Ross House which housed the most vulnerable prisoners. At the time of inspection, the mental health nurse was on sick leave and the contingency plan for supporting prisoners in this unit was provided by the on duty mental health nurse. This resulted in unscheduled and infrequent support which was dependent on ongoing daily duties and tasks. We were also told that when the dedicated nurse for Ross was on duty she too could be withdrawn to cover medication rounds, Reception and to cover staff shortages. This therefore resulted in a lack of protected time for the mental health nurse to deliver continuity of care. **This was a weakness.**

We saw that prisoners with mental health issues, learning disabilities and acquired brain injuries in Cornton Vale had difficulty accessing advocacy services to support them in talking to professionals and in decision making regarding their healthcare and treatment. NHS Forth Valley had commissioned Forth Valley Advocacy Service to provide advocacy for prisoners. Despite several referrals being placed by health staff for prisoners who were perceived to meet the criteria, no existing prisoners had been accepted by this service. Links should be improved and the referral criteria clarified.

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\(^2\) Open Secret is a voluntary organisation who provided support and counselling to victims of abuse.

\(^3\) Survive and Thrive is a psycho-educational programme for women who had experienced trauma.
with Forth Valley Advocacy Service to ensure that their most vulnerable prisoners who need advocacy support receive a service.

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

Rating: Good performance

All prisoners, new and transferred, to Cornton Vale received a health screen. The initial health screen was carried out by a mental health nurse. This included a general health screening, checking of prescribed medication (using the electronic emergency care summary) and ACT2Care screening. Language line was used for a non-English speaking prisoner. If medical issues were identified the nurse stated they would be referred to an appropriate clinic.

The GP saw prisoners the following day (seven days a week cover) to carry out health assessment, prescribe medications and complete ACT2Care documentation.

Prisoners identified as having an ongoing medical condition, such as asthma, epilepsy or cardiac conditions were booked into the nurse-led clinics. This ensured a regular review of their condition.

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

Rating: Satisfactory performance

In Ross House, which houses the most vulnerable prisoners, care plan documentation was kept within the unit and regularly updated by clinicians. The NHS IT system Vision was updated with relevant information and any changes to the prisoners care plan. If a prisoner was deemed to be at risk of physical or psychological health conditions or capacity issues which would leave them at risk of harm from others, they were placed on a ‘stepped up’ care plan which was regularly reviewed. We observed that for prisoners on a ‘stepped up’ care plan were actively discussed by prison staff and health staff, with advice on management of the prisoner being offered.

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

Rating: Generally acceptable performance

The GPs provided daily clinics Monday to Friday. A nurse triage clinic was held daily after the administration of medicines Monday to Friday. Any follow on appointments were made with the most appropriate healthcare professional. However, it was noted that some clinics were staffed by mental health/learning disability nurses who had not had adult general nurse training. This was a weakness. None of the nursing staff, including primary care staff, had undertaken any additional training, such as clinical decision making or advanced clinical examination. This did not provide assurance that all of the prisoner health needs were being identified to enable appropriate referral. This was a weakness.

All nursing staff should receive training for clinical decision making and work within their scope of practice.
Various other clinics were held, some on demand basis such as diabetic, wound management or optician. A podiatry triage system was also in place.

Again, the availability and frequency of the clinics being held was dependent on the availability of staff to run them. This was affected by the availability of prison officers to escort prisoners and staff to the Reception area of the health centre and on prison operational issues.

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

Rating: Satisfactory performance

Vaccination programmes were in place for some transmissible diseases, such as influenza and Hepatitis A and B.

Prison staff used appropriate personal protective equipment (PPE) when carrying out procedures. However, one nurse was observed taking blood without wearing gloves. The used sharps were then carried across the room to the sharps box.

There was a specialist biohazard team in place to clean up any blood spills. If a blood spill occurred out of hours, the area would be closed off.

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

Rating: Generally acceptable performance

PPE was available in the health centre and we observed prison staff generally using appropriate PPE when carrying out procedures. We noted that emergency boxes contained only latex gloves, however prison officers stated that they could access non latex gloves if required. SPS should ensure that latex gloves are removed from emergency boxes as it may be the case that it is the prisoner who may have a latex allergy.

There were also some issues regarding hand hygiene in the prison. No hand gel was seen anywhere throughout the inspection. The dispensaries in the house blocks did not appear clean or have appropriate hand washing facilities. **This was a weakness.**

Sharps management was poor. Sharps boxes for razors within house blocks were managed by SPS. These were unlabelled and not closed using the temporary closure mechanism. They were also seen in an office area and were over filled. SPS staff were unsure who was responsible for their removal/ replacement. Sharps within the health centre were not disposed of at the point of use. Staff were seen carrying used sharps across the room from the patient to the sharps box (as noted in QI 4.10). **This was a weakness.**

Staff could not describe the process or frequency of the bed curtains within the examination room being changed. These were the disposable type.

Cleaning schedules were in place and seen to be completed within the dental room. There was a clear process for dental equipment decontamination.
4.12 Preventive healthcare practices are implemented effectively in relation to the assessment, care and treatment of those at risk of self-harm or suicide.

Rating: Generally acceptable performance

All prisoners transferred and newly admitted to Cornton Vale had an initial health screen carried out by a mental health nurse. This included questions about the prisoner’s mental health, including self-harming behaviour and suicidal thoughts. The nursing staff were skilled in their delivery of this assessment and had a clear understanding of risk assessment. Prisoners were referred to the mental health team for further assessment and psychiatrist input, if appropriate.

On admission, ACT2Care documentation was completed for all prisoners. In line with policy, procedures were put in place for prisoners identified as at risk. Documentation for a person being placed on ACT2Care was completed in conjunction with healthcare staff with the staff from Ross House, where vulnerable prisoners were housed. Multidisciplinary case conferences were then convened with an agreed action plan implemented. Management strategies included enhanced observations or accommodation in a “safer” cell. A pre case conference healthcare assessment, was observed which was carried out by a mental health nurse, and the case conference that followed on from this. This was attended by mental health staff, prison officers and the prisoner. There was full discussion of the prisoner’s mental health, behaviours, challenges and agreed interventions.

We attended and observed the weekly multi-disciplinary mental health team meeting. This had good representation from SPS and health staff including a clinical consultant psychologist who provided clinical input regarding the management and support for prisoners with complex mental health and addiction issues. Prisoners had access to chaplaincy for pastoral care, Listeners and The Samaritans by virtue of the emergency access phone available in Ross House.

There were no regular structured mental health nurse team meetings to convey or discuss new admissions, prisoners on ACT2Care, the existing caseloads health needs and vulnerable prisoners. We observed that mental health nursing staff would therefore rely on information submitted via Vision, PR2 and written care plan documentation to obtain an update on a prisoner’s status and progress. It was acknowledged by the mental health nursing team that they could improve communication and how they evaluated, reviewed and shared prisoners’ mental health information. Mental health care staff told us that they required protected time to allow effective handover and peer discussion of their caseload. Currently this was recognised but was unachievable due to other work commitments. Further to this there were no structured positive interventions for prisoners being carried out by health staff in Ross House. Again reasons given for this were that the dedicated Ross House nurse was on sick leave, there was a lack of protected mental health nurse time and the continual pressure to meet service demand.

As a priority the NHS Forth Valley mental health team should consider implementing protected time for mental health staff to enable the delivery of positive structured interventions and timely one-to-one treatment intervention.
4.13 Preventive healthcare practices are implemented effectively in relation to the care and treatment of those exhibiting self-harming and addictive behaviours.

Rating: Good performance

Addiction nursing staff were responsible for the following:

- supporting prisoners wishing to access opiate substitute treatment (OST) and naloxone
- the management of complex health care needs
- the management of prisoners with co- and multi-morbidities, and
- liaising with all agencies providing support and services to prisoners outside of prison.

Addiction nurses carried a caseload of around 10 or fewer prisoners. Their caseload comprised prisoners experiencing multiple and complex needs, such as pregnancy, transgender, mental health or behavioural issues, in addition to their addiction issues.

Referrals to the addiction nurse service could originate from the admission process. Prisoners could also self-refer or be referred by EACS at any point during their custody.

Many prisoners complained of not receiving methadone or other OST medication prior to going to court or on their day of liberation. Previous inspection reports had also taken issue with this practice, stating that this was not universal across the rest of the prison estate. However, there was justification for continuing this practice. For all prisoners receiving OST, arrangements were made with community prescribers prior to court or liberation to ensure continuity of supply after release from prison. Community prescribers were given the option to either have the prisoners’ medication dispensed by the prison prior to leaving for court or liberation or having it dispensed after court or liberation. In the majority of cases community prescribers opt to dispense medication themselves after court or liberation, (prisoners who were not liberated from court had OST dispensed on their return to the prison). This was an area of practice worthy of sharing as it:

- encouraged service contact post release
- eliminated double dosing of OST
- there was no clinical reason, due to the long half-life of OST, why it should be dispensed at the same time each day, and
- there was an in-built option for prison dispensing if the community prescriber preferred this, for example for reasons of travel distance from prison or court.

Prior to the introduction of this policy it was alleged that there was a high incidence of non-attendance at community services on the day of release leading to higher levels of relapse and breaks in treatment with a resultant increased risk of opiate related overdose. There had also been instances of double dispensing, where prisoners would obtain a second dose of OST from community prescribers after receiving it from nursing staff prior to release. This policy applied to all prisons within NHS Forth Valley and its adoption should be considered by other health boards.
EACS provided cover Monday to Friday 08:00-17:00. They provided psychosocial, awareness raising and education interventions for all prisoners experiencing addiction issues (drugs, alcohol and tobacco addiction) on a one-to-one and group basis. They received between 50-80 referrals per month and around 120 prisoners were receiving one-to-one support at any given time. There was no waiting list, however group work was delivered when there were sufficient numbers for optimum group sizes of 6-12 prisoners. Interventions could also be delivered on a one-to-one basis if prisoners did not wish to attend a group or there were insufficient numbers to deliver group sessions.

EACS took referrals for prisoners who were serving any length of sentence as well those on remand. Previously, EACS would not see remand prisoners or anyone serving less than 31 days in prison. Taking referrals for remand prisoners and prisoners serving under 31 days should be considered as an area of practice worthy of sharing as these prisoners tend to be more chaotic, more vulnerable and were prone to being missed by through care services and should be encouraged in other health boards.

There was an issue regarding access to smoking cessation training for staff. Due to a lack of access to training, there was a risk that no staff would be able to deliver smoking cessation group work and one-to-one interventions if any of the limited number of staff who did this work were absent or were to leave. Prison addiction staff should have access to smoking cessation training.

The EACS team, addiction nurses and the GP had a fortnightly meeting to discuss changes to the current case load and next steps in treatment in the coming fortnight. The focus was on OST. There was evidence of:

- prisoners having access to a full range of OST and initiation of treatment whilst in custody as well as continuation of community prescription
- effective communication with community prescribers after Reception, during custody and prior to liberation, and
- examples of prisoners being at different stages in treatment.

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

Rating: Satisfactory performance

All prisoners were assessed on arrival and could be referred to the women’s health service dependent on the initial assessment by the nurse and GP. The women’s health service was an opt-in service and appeared to work well on a triaging basis for new prisoners. Staff stated they were happy that they were seeing the appropriate women. For women who were already resident they could self-refer, again this appeared to work well.

The nurse ran excellent education sessions around contraception options. There was information on cervical screening, menopause management services and well woman services which were wide ranging, including continence issues. The women’s and sexual health service was proactive and individualised, there was a focus on taking responsibility for health and ensuring women were given, for example, contraception prior to leaving.
There were leaflets readily available and translation services were available and utilised as appropriate. The midwifery service offered the same health information as for non-custodial women, including choices for birth, promotion of breastfeeding and quitting smoking.

While the service was of a high standard for health education for prisoners, it was noted that there were no health education activities for either health or prison staff. Health education for prisoners was provided at various opportunities such as admission, appointments and one-to-one contact.

Oral health promotion provided toothbrush and toothpaste which were given out by the dental service and replaced every three months. Advice and education on dental hygiene could be delivered on a one-to-one basis if required.

There was a list of world health days in the health centre staff area. At the time of inspection the health centre was undergoing some redecoration work which may have impacted on the information being displayed.

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

Rating: Generally acceptable performance

Staff appeared to form positive relationships with prisoners seeking healthcare. Care was holistic and person centred. Confidentiality was also good; with SPS staff not being aware what prisoners were attending appointments for.

There was clear frustration with the consequences of lockdowns, which meant that prisoners were late accessing the routine medication administration and then were not able to attend their appointment at the health centre. Health centre staff might not complete their booked clinic lists and had to reprioritise care. The clinic sessions were very short, the women’s and sexual health doctor had three and a half hours once a week. As there was a lockdown on the day it was held during the inspection, the women’s and sexual health doctor was unable to see any of the approximately seven prisoners on the list. This was a consistent and recurring theme throughout the report and required to be resolved.

Staff were content that there would be no delay in prisoners accessing emergency treatment.

The midwife expressed some frustration about a time when several prisoners had to access the high risk antenatal clinic at Forth Valley Royal Hospital on the same day as the consultant for prisoners had a clinic. As a result there was difficulty in accessing secure transport to the clinic.

There were issues relating to the interface of the prison IT and health communication systems with external IT systems which the GP raised with inspectors. All prisoners who were seen had the episode of care entered on Vision, however this did not link with any external healthcare systems. An example was given where a prisoner was receiving a course of treatment and when released and back in the care of her local GP there was no transfer of treatment and the GP did not know any of the details. The
woman herself had to phone the health staff to obtain details to give to the GP. This could be a significant concern if a woman did not take such responsibility for her own health. Staff also could not access previous health records and some time was spent on phoning and chasing up previous histories.

In pregnancy, the women, for valid reasons, did not carry their own maternity records and these were held at Forth Valley Royal Hospital. There was poor communication between emergency appointments at the hospital and the midwife and liaison nurse. An example was given by both these staff where a significant incident occurred and they understood there was no notification from the acute hospital to them of several urgent admissions which should have flagged up an issue much earlier. Staff were clear, however, that if a pregnant prisoner needed to attend maternity as urgent/emergency, there would be no delay or problem.

Two issues of concern were raised by a pregnant prisoner. The first issue related to access to the toilet at night was difficult and buzzers, she stated, were ignored by SPS staff (as outlined in QI 2.7). She was worried what would happen if she buzzed and was bleeding or her waters broke. The second issue was that she believed her care for delivery of her baby may be affected by the fact her release date was the same as her due date. This was discussed with the midwife who was not clear about this as there was no documentation in the maternal notes about plans for delivery of the baby. It would be of concern if the mother to be did not fully understand the birth plan for her and her baby.

The midwife cited an example of a complaint she had received from a postnatal prisoner about her treatment and the attitude of staff in Forth Valley Royal Hospital. Although the midwife did follow this up, it was felt that the midwife could act as more of an advocate for these vulnerable women. They could attend high risk appointments with prisoners, have direct contact with the obstetricians to plan care and escalate inappropriate care or complaints in a robust way.

Healthcare staff were aware of the demands of delivering healthcare within the prison setting and the need for security. Regular meetings were held with prison management to discuss any issues, review incidents and to improve practice. There were some issues around availability of SPS staff for the health centre that impacted on times clinics can run. There was limited ability of health staff to work out with the health centre.

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

Rating: Good performance

A basic health screen was carried out for all new prisoners and transfers. This included general observations such as blood pressure, pulse and respirations, height and weight. Information was then entered on to the electronic health record.

There was a clear system in place for obtaining community health records for prisoners who it was known would be in for more than three months. However, as NHS electronic health records could not be accessed through the SCI\textsuperscript{4}gateway not all

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\textsuperscript{4} The SCI Gateway is a national system that integrates primary and secondary health care systems.
information was available at the time. The system relied on the prisoner providing accurate up to date information.

All prisoners newly admitted and transferred to Cornton Vale received an initial health screen by a Mental Health nurse. All prisoners were then seen the following day by a GP who carried out a general health assessment. This identified medical issues that may require further investigations or treatment, and prescribed medication. The onsite GP provided a flexible service and visited prisoners in the house blocks if required. Prisoners were referred to the mental health team for further assessment and psychiatrist input, if appropriate.

On admission, ACT2Care documentation was completed for all prisoners. In line with policy, procedures were put in place for prisoners identified as at risk. Documentation for a person being placed on ACT2Care was completed in conjunction with health staff with the staff from Ross House, where vulnerable prisoners were located. In Ross, care plan documentation was kept within the unit and regularly updated by clinicians. The IT system was also updated. If a prisoner was deemed to be at risk of physical or psychological health or capacity issues which would leave them at risk of harm from others they were placed on a ‘stepped up’ care plan which was regularly reviewed. Prisoners on a ‘stepped up’ care plan were actively discussed by prison staff and health clinicians and with advice and management of the prisoner being offered.

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

Rating: Satisfactory performance

There was a good system of managing paper records with administrative staff using a tracking system to identify what records had been received, transferred or were requested. Sealed bags were used for transfer of records between establishments, which staff stated worked well. Records for prisoners who were liberated were returned to their area prison. Community health records which were held by the prison health centre were returned to the NHS area. As noted earlier in the report in QI 4.16 there were also issues relating to the interface of the prison IT and health communication systems with external IT systems.

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

Rating: Satisfactory performance

Cornton Vale had systems and processes in place to ensure healthcare staff made appropriate notifications in cases where there could possibly be physical or psychological harm to prisoners. These included notification of when a prisoner was not fit to work or when a prisoner required to access treatment in the community.

4.19 Healthcare professionals fully undertake their responsibilities as described in the law and in professional guidance to assess, record and report any medical evidence of mistreatment of prisoners and to offer prisoners treatment needed as a consequence.
Healthcare staff had a clear understanding of their duty of care. They would escalate any concerns to the health centre manager in the first instance, however, there was no protocol or policy to support this.

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

Rating: Satisfactory performance

Designated primary care staff carried radios and were alerted by prison staff if an emergency happened. Emergency packs were located in the health centre and in the house blocks and included emergency drugs, oxygen, suction and defibrillators. These were checked on a weekly basis and following use. However, it was noted that gloves in use were not latex free (see QI 4.11). Crash packs were also available for use for use by prison staff. These contained safety scissors, fish knife and face shield. The responsibility for checking and stocking these lay with the SPS.

It was noted by a number of inspectors that a number of the female staff had long fingernails which could perforate the gloves provided, thereby exposing them and the prisoners to a risk of cross infection. This should be addressed by management.

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

Rating: Satisfactory performance

Links with mental health services and notifications were made when a prisoner was due for release. This was done by the prisoner’s named mental health nurse and, if deemed appropriate, a referral was sent to the receiving community mental health team prior to release of the prisoner back into the community. A letter was sent to the community addictions team prior to the prisoner’s release to arrange community dispensing and follow up.

The GP communicated any changes with medications to the community GP if the prisoner had been in custody for less than three months. A five day supply of medications (except addictions drugs) were given to the prisoner on release. Information was provided to prisoners who required to register with a GP on release from prison.
STANDARD 5 - EFFECTIVE, COURTEOUS AND HUMANE EXERCISE OF AUTHORITY

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

Commentary

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

Inspection findings

Overall rating: Generally acceptable performance

The overall rating for this standard was impacted upon by the failure of or ignorance of basic security processes that ought to be in place to ensure that individuals and vehicles entering and leaving the establishment were appropriately accounted for and searched. It was found that staff searching on entry to the establishment was not robust, if the metal detection alarm sounded staff were subjected to a sweep by a metal detecting wand with an explanation for the alarm being accepted rather than resulting in a physical check, for instance shoes were not removed when the wand indicated. The staff member operating the x-ray machine, during the inspection of the area, acknowledged they did not know how to identify suspect articles that were detected, there were no staff searching arrangements in place and the main entrance doors did not appear to be appropriately interlocked.

Internal security measures and searches were undertaken appropriately, with care and consideration of any particular individual circumstances. During the inspection a targeted search was undertaken and witnessed. This was undertaken effectively and with due regard to the prisoner’s personal property and dignity. It was of concern though the impact that a small localised search had upon the regime of the whole establishment, adversely impacting upon the delivery of health care and the numbers of prisoners participating in purposeful activity. Management must ensure that such activities were well communicated with key partners and that the planning of such activities ensured that any resultant impact, to the delivery of the regime, was understood and minimised.

The arrival and departure processes for prisoners were undertaken with care, consideration and humanity. The offering of a small purse, to those prisoners being liberated, clearly meant a lot to the individual receiving it and additionally was an opportunity, well utilised by the Reception staff, to enter into a normal, human discussion with the soon to be liberated prisoner. It was encouraging to see that the liberation process and the Family Centre & Help Hub were closely linked, where all prisoners being liberated passed through the hub where they could wait for their lift or were provided with details of their options for getting home.
Quality indicators

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

Rating: Satisfactory performance

Interactions between staff and prisoners and staff and visitors were witnessed throughout the duration of the inspection. This included processing of visitors at the Front of House, visit sessions, admission/ liberations at Reception, route movement, cell searching and full body searches. Staff were seen to be courteous, respectful and professional at all times.

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

Rating: Poor performance

Inspectors shadowed an operational staff member during one of the establishment’s daily Perimeter Intruder Detection System checks. The patrol was carried out to an acceptable standard and the staff member was witnessed checking any suspicious items she came across during the patrol. It was noted that the perimeter of Cornton Vale was relatively litter free which assisted security by making illicit articles easier to identify.

A review of perimeter check records in the ECR evidenced that internal fence patrols were conducted at least twice daily. There were also monitored cameras within the ECR that pan around the full perimeter of the prison. However, it was noted that no external perimeter checks were conducted.

Discussions with respect to the Prison Watch Scheme provided that no arrangements were in place for its imminent implementation. This should be reviewed with immediate effect.

It was noted that the “three door rule” which should apply to the main pedestrian access to an establishment was not being observed. This was a weakness.

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

Rating: Good performance

Inspectors monitored admission of a first time remand prisoner. This included a full body search, admission interview, warrant/ details check and recording/ searching of the prisoner’s property. All parts of the process were carried out courteously and effectively.

Inspectors followed the liberation process of a prisoner from their house block to the Family Centre & Help Hub, where all prisoners were encouraged to attend on liberation before making their onward journey. Again, the process was implemented both efficiently and effectively, with the secure bags which held her belongings ready to be opened and checked on her arrival at Reception reducing the time required to exit the
prison. Staff were courteous and helpful throughout. At the Reception the prisoner was offered a black hold-all and a purse to transport her belongings and at the Family Centre & Help Hub, as she was not being picked up, was provided with details of taxis, buses and trains. The use of the Front of House and the Family Centre & Help Hub for liberations was positive.

Issues with the secure storage of property are dealt with in QI 5.22 and were not reflected in the grading of this standard.

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

Rating: Poor performance

During the inspection access and egress of official visitors, staff and prisoners’ visitors were observed. Although staff were courteous and professional throughout, it was noted that the security processes for entering the prison were more robust for prisoners’ visitors than they were for official visitors and staff. Also, when asked to explain what the different colours on the x-ray machine screen represented, the Front of House officer could not answer. This was a weakness.

All individuals on arrival to the prison were asked to produce identification, had any property that would be entering the prison x-rayed and were screened using the walk-through metal detection portal. However, staff and official visitors were not always questioned or subjected to further searching for example with a hand-held metal detector or rub-down search, in an attempt to identify the metallic source if the portal alarmed. All prisoners’ visitors received a rub-down search.

Staff were allowed to take bags into the establishment as the staff lockers were located inside. There was no list of what was and what was not allowed in. The Front of House staff were unable to provide any additional information. This was a weakness.

It was noted that Cornton Vale does not operate random staff searching. When asked, a senior manager cited that there was no suitable area at the Front of House to facilitate this and that union colleagues had objected to staff being searched. This was a weakness.

The Tactical Dog Operations Unit (TDOU) were scheduled to attend the establishment twice per week to carry out additional searches, including entry searches for staff and visitors. However, this appeared to be sporadic.

There were no current Standard Operating Procedure (SOP) for Front of House admissions process. This was a weakness.

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

Rating: Poor performance

Inspectors observed a number of vehicles entering and leaving the prison and reviewed the content of records held within the Gate and at Front of House. Staff at Front of House and Reception were also interviewed in relation to the processes for the delivery of mail and parcels.
Records held within the Gate detailing registrations and access/egress times for all vehicles were deemed satisfactory, however there was some confusion at Front of House with respect to which system should be used to record the details of delivery drivers/contractors and visitors. This was a weakness.

On entering the prison vehicle lock, drivers were asked to verbally declare possession of any illicit articles. However, they did not sign the standard SPS declaration form as per policy. This was a weakness.

Although cursory searches were witnessed for a number of delivery vehicles on access and egress to the establishment, no search was conducted on a G4S van observed entering the prison. Gate staff only checked the number of prisoners on board. The current SOP for vehicle checks/entry processes did not reflect the entry arrangements and the current practice did not reflect the SOP.

It was noted that the extent of current SOP provision for operational processes was very limited.

Cornton Vale appeared to have robust processes in place for handling incoming prisoner property. On arrival at the prison, all parcels were x-rayed before being passed to Reception for a search by the TDOU prior to issue. Reception staff also checked the contents of the parcel to ensure they matched the authorised proforma. There was a potential delay between the parcel arriving at the prison and being issued to the prisoner. Inspectors were advised that the TDOU were not readily available to conduct searches with often a week between visits. Therefore prisoners’ parcels could potentially sit in the prison for up to a week before being issued. This was far in excess of the 24 hour target timescale for delivery. This was a weakness and needs to be addressed as a matter of urgency.

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

Rating: Satisfactory performance

A sample of Prisoner Escort Records (PER) and other associated paperwork including G4S Risk Assessments, Escort Approval Certificates and Handcuff Risk Assessments, which were completed by the prison prior to external escorts, were reviewed. The content reflected that appropriate risk assessments were being conducted prior to any prisoner access to the community. Where risks were identified, escorting staff were appropriately briefed and if deemed necessary handcuffs applied. In addition to this, the police were notified of any escorts being conducted by SPS Staff.

Discussions with prison management provided that prisoners were only allowed access to the community unescorted for example on work placement or to stay within the ILUs once they met set criteria and were assessed as suitable by the Risk Management Team (RMT).
5.7 The risks presented to others in the prison by any prisoner are assessed and appropriate supervision is enforced.

**Rating:** Generally acceptable performance

The level of risk each prisoner presented was assessed using the PSS. On first admission to prison custody, prisoners were automatically assigned a “high” supervision level and were allocated to first night accommodation based on their individual needs. For example, if they were assessed high risk to themselves or others as a result of mental health or drug/alcohol withdrawal they were placed in a different location than if they presented no issues. Their PSS Level was then re-assessed within a 24 hour period to determine which residential area they would be allocated to. PSS Levels not only impacted on where a prisoner was housed, it also impacted on their work opportunities and access to HDC.

Cornton Vale did not operate a “protection” population to manage prisoners who were assessed to be at risk from others for example as a result of their index offence or previous issues with others. Prison management informed inspectors that any risks of this nature were managed by keeping individuals separate and recording the information on PR2 under linked prisoners and intelligence. A “Must be Separate” list was also produced for use by staff who were escorting prisoners around the prison. However, on viewing this list on the establishment’s SharePoint site, it was noted that it had been last updated in June (three months earlier) and given that both the population and relationships within the prison could change daily this was perceived as a potential risk. **This was a weakness.**

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

**Rating:** Satisfactory performance

As witnessed during the inspection, ACT2Care assessments were conducted for all prisoners during the Reception process and at any other time where behavioural triggers were recognised. Where necessary, case conferences were held to determine individual care plans which addressed the specific needs of prisoners. Further care requirements were then reviewed through the Integrated Case Management (ICM) process. All prisoners on ACT2Care were located within Ross House.

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

**Rating:** Satisfactory performance

Inspectors assessed the systems and procedures for monitoring and supervising movements and activities of prisoners inside the prison to be satisfactory. All prisoner movement and activities witnessed during the course of the inspection were observed to be effectively monitored and conducted by operational staff.

However we were concerned that management of the route appeared to be unduly regimented and “over controlled”, see QI 6.13.
5.10 The systems and procedures to maintain the security of prisoners when they are outside the prison are implemented effectively.

**Rating:** Satisfactory performance

As outlined in QI 5.6, inspectors assessed the prison to have satisfactory procedures in place to identify any risks prisoners may pose while out with the prison and, where necessary, share this information with G4S and/or Police Scotland. Where risks were identified appropriate measures were put in place to reduce the risk, examples being application of handcuffs or police escort.

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

**Rating:** Satisfactory performance

Inspectors reviewed paperwork in relation to the prison disciplinary system and observed a disciplinary hearing in progress. Timescales in terms of serving the charge and the disciplinary hearing were met. It was clear that the Adjudicator had no prior knowledge of the case, and although the prisoner pled guilty she was given ample opportunity to present her case. Overall use of the prison disciplinary system appeared appropriate and conducted in accordance with legislation.

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

**Rating:** Satisfactory performance

A number of searches were witnessed during the course of the inspection including a full body and property searches at Reception, a search using the TDOU and a cell search during an establishment intelligence led search operation. All searches were conducted in accordance with both legislation and SPS policy. Officers were observed to be professional and courteous throughout.

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

**Rating:** Poor performance

The testing of prisoners for alcohol was appropriately undertaken where any suspicion existed.

There were two full time drug testing officers supported by additional staff from residential who were trained in order to provide seven days a week cover when necessary. This process appeared well bedded in with no apparent issues.

A concern was raised by the addictions manager regarding the application of the “Management of offender at risk due to any substance misuse policy”. Where prisoners fell into this category they were relocated to Ross House where additional support and care could be provided, which appeared to work well. However, inspectors were informed that the process breaks down at the point where the prisoner ought to be listed for a “suspicion test”. These test were not always undertaken, however a positive test was recorded against the individual concerned. This was
picked up by management when suspicion testing figures dropped. This raised concerns for the on-going care, management and progression opportunities for any individual who may fall into this category. Management must ensure that this is regularly audited to satisfy themselves that the appropriate procedures are followed, as they are designed to ensure the safety of the prisoner.

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

Rating: Satisfactory performance

There was a schedule in place for both area and cell searching. A sample search of records for Ross House confirmed that these schedules were being met.

The prison also conducted intelligence led searching and during the inspection an operation of this nature was observed. This involved full searches of nine prisoners who were believed to be in possession of illicit substances. Area searches of the house blocks and the prisoners' individual cells were also carried out. These included use of search dogs. All searches were performed to a high standard.

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

Rating: Satisfactory performance

The systems and procedures for tracking the movements of prisoners and reconciling numbers were well managed. Each house block had its own daily movement board to track prisoners allocated to that area. Observation of prisoners returning to one house block, during the lunch time route, evidenced effective use of the board to reconcile numbers. When the officer identified that one prisoner was missing, she immediately checked as to their whereabouts. The numbers for that area were then communicated to a central point for the full establishment reconciliation of numbers.

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

Rating: Satisfactory performance

Discussions with the relevant manager and a review of records held confirmed that the integrity of the locking systems were being audited regularly by the prison Estates Department.

However, it was noted that there had only been one joint audit conducted between a senior manager and Estates within the past year.

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

Rating: Satisfactory performance
Records for two prisoners held within the SRU at the time of inspection were examined and the content reflected appropriate and lawful use of the powers applied to segregate them.

Whilst Dumyat represents a major improvement to the old ‘back cells’ it was concerning to note that within some cells the level of graffiti was significant, being found on the walls, the table tops and the back of the cell door. Any graffiti found should be cleaned off immediately.

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

Rating: Satisfactory performance

As noted in QI 5.17 records for two individuals held within the SRU at the time of inspection were reviewed. In addition one of the prisoners concerned and SRU staff were also interviewed.

It was evident from both the records and discussions that prisoners within the SRU were being managed in accordance with the law. All timescales in relation to reviews had been met and prisoners were offered the opportunity to make representations and attend case conferences in relation to their management. It was also clear that the prisoners’ needs were trying to be addressed in that they were offered opportunities such as exercise, access to certain personal items such as CDs and periods where they had the chance to associate with others. Where such opportunities were not being taken up by the prisoner, staff altered their approach in an attempt to encourage uptake, for example one prisoner disliked exercising with other prisoners and was therefore offered the opportunity to go for a walk in the grounds with staff instead. The individual regime in place for each prisoner was reviewed at a weekly meeting. A daily record of progress/overview of behaviour was maintained by SRU staff for each prisoner. This was well-documented on a detailed log.

There was a lack of the facility for a prisoner to make a private personal phone call, whilst located in Dumyat, this needs to be addressed as a matter of urgency.

It was also noted that the staff group in Dumyat was predominantly male which created operational issues when certain activities such as searching were necessary. Management should ensure that the gender balance of the staffing complement was appropriate for the location and that sufficient female staff are on shift to ensure that it can operate without the need for assistance from other areas.

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

Rating: Satisfactory performance

The powers to impose enhanced security measures were not frequently used within Cornton Vale. The last application of Special Security Measures was in 2013.
5.20  Force is used only when necessary and strictly in accordance with the law.

**Rating:** Generally acceptable performance

Inspectors reviewed a sample of records held in relation to the use of force and were satisfied that, in these instances, the use of force appeared to have been necessary and conducted in accordance with the law. However, it was noted that the witness statements prepared by staff were not always signed and that a senior manager did not consistently sign the records to evidence that they had been reviewed by him.

Use of force within Cornton Vale was generally spontaneous and therefore the use of video recording equipment to record proceedings was limited. Inspectors viewed records for the last planned removal whereby video recording equipment should have been used. Although the paperwork reflected use of force to be necessary and to have been conducted in accordance with the law, the video footage was not available. The reasons provided for this were operator error; when staff went to download the footage from the camera nothing was found to have been recorded.

As stated previously in QI 3.6, during the management briefing session held prior to the commencement of the inspection, HMIPS was informed that on occasions non-compliant prisoners, deemed at risk of self-harm, were subjected to Control and Restraint procedures in order to facilitate strip searching. This situation should be reviewed with immediate effect.

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

**Rating:** Satisfactory performance

Use of physical restraints within the prison was very rare with plastic cuffs last used in 2013 and the body belt in 2001.

The requirement for application of handcuffs was assessed for every external escort conducted by SPS officers. A review of the risk assessment paperwork relating to this provided that the use of handcuffs under these circumstances was appropriate.

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

**Rating:** Poor performance

The admission and liberation of two prisoners was observed and a fundamental flaw in how prisoners’ property was recorded was found. It was noted that during the admission process staff went through the prisoner’s possessions with them present and separated them into what they could take or wanted to take into the prison from those that would remain in Reception. Items to be taken into the prison were recorded on a property card whereas items remaining in Reception were not recorded anywhere. These items were placed in a bag and secured using a numbered security seal. A similar process applied for valuable property.
Although staff advised that seals on the bags were only usually broken if the prisoner was present, Inspectors were of the opinion that the lack of a signed record for stored items could be open to challenge.

On checking recent audits this issue had been previously identified and the establishment instructed to cease such an approach, the accompanying action plan stated that the practice had stopped. This was clearly a **cause for concern**.

Other than this, the process for the actual storage of prisoner property was assessed as satisfactory with the sealed bags containing non-valuable property stored within a locked cupboard and the valuable property bags stored in a safe located within another locked cupboard. Access to the valuable property cupboard and safe was limited to a small number of staff. The security seals on both types of bag were not usually broken unless the prisoner was present.
STANDARD 6 - RESPECT, AUTONOMY AND PROTECTION AGAINST MISTREATMENT

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

Commentary

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

Inspection findings

| Overall rating: Generally acceptable performance | 🟢 |
| Relationships between staff and prisoners were generally good. However, there was a widespread lack of faith in the formal complaints system, some prisoners stating that they feared reprisal if they spoke out. One feature, common in many conversations with the prisoners, was that they felt that at times a small number of staff behaved in a domineering manner towards them. |
| Prisoners’ privacy was respected but it was not possible to achieve this for those who lived in cramped conditions in the shared cells, something that was not necessary in Cornton Vale given the accommodation available and the number of prisoners. This situation occurred due to the fact that residential areas were unnecessarily ‘mothballed’ at the time of the inspection. |
| Staff exercised their authority in a sensitive way but we found some areas of the prison to be “over controlled”. The system of “progression” seemed to operate reasonably well for adults although it would benefit from greater clarity. The incentives available for Young Offenders (YOIs) needed to be extended. |
| Work places were allocated fairly, balancing the resources available with prisoners expressed preferences with the needs of the establishment. The prisoner consultation arrangements were too ad-hoc and needed to be regularised. |
| Prisoners were kept reasonably well informed about what was happening in the prison but there was scope to make communication more systematic. Prisoners had reasonable opportunities to gain access to independent and community based supports. |
Quality indicators

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

Rating: Generally acceptable performance

The relationships which we saw between staff and prisoners were generally good. Staff behaved in a friendly, interested way towards prisoners and prisoners seemed to be comfortable in approaching staff for help. Women in our discussion groups said that most staff were “sound” and some spoke very highly about particular members of staff reflecting strong levels of trust and respect. However, this predominantly positive message was somewhat undermined by consistent feedback during all four of the discussion groups held prior to the inspection, where the women talked of the inappropriate language used by a handful of officers. We did not observe this directly ourselves, however, over the course of the inspection we continued to receive comments from women that a small number of staff had an intimidating effect on some prisoners by subjecting them to verbal abuse. When asked what action they had taken about this alleged abuse, the issue of their lack of confidence in the complaints system was raised.

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

Rating: Generally acceptable performance

Prisoners located in Younger and Bruce Houses often had to share accommodation. These cells were designed for single occupancy and therefore were very cramped and made it impossible to maintain privacy.

It was a concern that management had chosen to ‘mothball’ residential areas rather than allocate all prisoners single cell accommodation.

Where appropriate all prisoners should have access to single accommodation.

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

Rating: Satisfactory performance

Most prisoners reported being treated sensitively and respectfully by staff. The vast majority of interactions which we observed between staff and prisoners reinforced this view and we did not find any evidence of staff breaching confidentiality.

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

Rating: Generally acceptable performance

Prisoners told us that most staff exercised their authority in a reasonable way and this was reinforced by what we observed during the course of the inspection.
However we were concerned about the reports of inappropriate language used by a small group of staff referred to in QI 6.1 and the over emphasis on security referred to at QI 6.13.

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

Rating: Satisfactory performance

In almost all of the interactions observed between staff and prisoners we saw constructive engagement. Staff were appropriately patient and tolerant, sometimes in very difficult circumstances. This was particularly evident in Ross House where individuals with the most complex problems were located. We also saw clear evidence of officers working with the younger prisoners in Skye House, challenging unacceptable behaviour and carrying out effective de-escalation practices.

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

Rating: Satisfactory performance

During the course of the inspection we were able to observe quite closely the way two prisoners who could be described as having a high level of need as well as presenting a high level of risk. We were impressed at the way staff dealt with these individuals. In both cases they adopted an individualised and flexible approach which was proportionate and effective.

As we have indicated at QI 6.13, we were concerned that management of the route was unduly regimented and “over controlled”.

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

Rating: Generally acceptable performance

There was no formal incentive scheme for adult prisoners. However, although not explicit or formalised, there seemed to be a common understanding that some level of progression could be achieved by moving from one location to another, on to superior accommodation. This was not straightforward, as decisions were based both on security and behaviour. Never the less, this approach did seem to have some motivational effect on women we spoke to.

A statement should be published so that prisoners were clear about how the system of progression operates within the prison.

Within the YOs unit in Skye House, a three tier incentive system did operate. YOs on the lowest level were located within a small section on the ground floor, those on the standard level were located in a separate section on the ground floor and those on the enhanced level were located on the second floor. YOs we spoke with, understood how the system operated and although they said they found the prospect of attaining “enhanced” difficult, it did seem to have a positive impact, as it was something which
they aspired to. Prisoners in Skye spoken with were frustrated that they did not have the same opportunity to progress to the ILUs, in the same way as adult prisoners did, this seemed to us a legitimate complaint.

YO's should have the same opportunity to progress to the ILUs, as adult prisoners.

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

*Rating: Satisfactory performance* 🟢

A weekly board to decide on work allocations was held involving a manager who coordinated the process along with the education manager. Information obtained from the induction process was used to help reach decisions and prisoners normally attended the board themselves where they were able to express their preferences. The prison relied on having full work groups to run the kitchen and the laundry and these were not always popular placements. Despite this we were satisfied that the process followed was fair and realistic and took sufficient account of what prisoners said they needed or wanted, alongside the requirements of running the prison.

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

*Rating: Generally acceptable performance* 🟢

Prisoner consultation meetings were run on each of the house blocks but they did not take place regularly. Prisoners in our discussion groups told us that they were unaware of the consultation arrangements, despite clear evidence of consultation sessions being advertised.

Prisoners should be given the opportunity to participate in consultation meetings on a regular basis.

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

*Rating: Generally acceptable performance* 🟢

The canteen provision followed standard SPS procedures. We were informed that as a result of staff sickness the bi-monthly consultation meetings had not taking place regularly. Women spoke positively about getting access to the “card shop”. This was a local workshop which enabled prisoners to purchase fashion and cosmetic items that were not available through the canteen. Unfortunately the “card shop” was closed during the course of the inspection, although we were informed there were plans to re-open it soon.

Prisoners should be given the opportunity to consult regularly about the products available in the canteen.
6.11 The systems for reserving places on recreational and cultural activities are equitable between prisoners and allow them to exercise personal choice.

Rating: Satisfactory performance

Pre-planned activities took place regularly and prisoners wishing to attend were required to sign up to a list which was normally attached to a flyer, advertising the event. During the course of the inspection we saw adverts for a concert due to be held in the chapel. Decisions about who could attend were based on a “first come first served” basis. We were told, “take up” of recreational and cultural activities was not high and that staff tried to encourage women to participate. We saw evidence of this in Ross House, where staff actively engaged with prisoners to try and involve them in a bingo session.

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

Rating: Satisfactory performance

The arrangements in place followed the standard SPS approach to dealing with prisoners’ monies. These arrangements appeared to work well and we received no complaints from prisoners about them.

Plans were in place to upgrade the finance procedures so that prisoners’ money could be transferred electronically. The establishment had also been identified as a site to pilot the use of information kiosks, which would make it easier for prisoners to manage their finances.

The time it could take for prisoners to gain access to property posted or handed in to the establishment, could at times be inappropriately long. Management need to review processes when the TDOUT was not available and devise another means of providing assurance that the articles contain no contraband. Simply making prisoners wait for a week to 10 days was unacceptable.

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

Rating: Generally acceptable performance

Although the overall atmosphere within the prison was not oppressive, we did find a number of examples where the strong emphasis placed on security, had an adverse impact on levels of respect. For example, the use of orange coloured bands for prisoners taking visits was unnecessary and degrading. The high level of supervision and control exercised when prisoners were moving between activities was also unnecessary and mitigated against the intention of allowing as far as possible individuals to live “normally”, within the confines of the prison.

There should be an effective balance between care and control, in all aspects of prison life.

The use of the orange coloured bands by prisoners at visits should cease immediately.
6.14 The rules in relation to medical supervision of activities and persons in circumstances of increased risk of harm or mistreatment are observed.

Rating: Satisfactory performance

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

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

Rating: Satisfactory performance

The adjudication system was administered fairly. Prisoners were listened to and given the opportunity to explain their own version of what they thought had happened. Use of closed visits was limited and we found no evidence of informal or group sanctions.

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

Rating: Generally acceptable performance

The overall culture within the prison was respectful and in their day to day work, most staff were informed by a rights based approach. However, prisoners reported experiencing poor treatment by a very small group of staff (QI 6.1), there were weaknesses in the complaints system (QI 6.21) and some serious shortcomings with the living conditions (QI 2.7).

Attention should be focused on all aspects of a prisoner’s human dignity and human rights.

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

Rating: Generally acceptable performance

All prisoners were expected to complete an induction programme, some women in our discussion groups said they found the information they received on induction confusing. We also received comments from women in two separate groups who thought that well intentioned advice given to new admissions by staff could raise unnecessary anxiety.

Most prisoners that we spoke to told us that the most effective way of finding out how things worked in the prison was by talking to other prisoners.

Newly admitted prisoners should receive all the information they need to know about how the prison is run at an early stage in a helpful and reassuring way.

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

Rating: Generally acceptable performance

Given the small scale of the establishment and the close relationship that existed between staff and prisoners, a high level of informal communication took place within
the prison. Although there was a wide range of material about events and activities taking place on display in each of the house blocks, we were informed that uptake of activities was quite low.

Information was not communicated systematically across the prison as a whole, there was no newsletter and information was not available on television screens.

Information about events taking place within the prison should be communicated systematically.

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

Rating: Satisfactory performance

Prisoners generally enjoyed good relationships with staff and all of those we spoke to said that they had a member of staff they could trust. In addition to this, as many of the women had served a number of periods in custody at Cornton Vale, they were well known to the staff, who understood their personal backgrounds. These factors helped ensure that where sensitive information needed to be passed on, this was done sensitively and reliably.

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

Rating: Satisfactory performance

There was a quite a wide range of material on display in house blocks and in the visits with contact details about free help lines which provided prisoners with opportunities to pursue independent support and help. These organisations covered topics such as child protection, domestic abuse and bullying and involved both local and national services.

Regular checks should be made to ensure the appropriate notices and contact details were present at each telephone and that the information was up to date.

6.21 The prison complaints resolution system works well.

Rating: Poor performance

Talking to prisoners in our discussion groups prior to and during the course of the inspection, we received a clear and strong message that prisoners did not have confidence in the complaints system. Almost none of the prisoners we spoke to said they thought that if they made a complaint it would be taken seriously or dealt with fairly. A significant proportion of prisoners that we met also seemed to feel that they might be subject to some sort of reprisal if they did make a complaint.

We were disappointed in the standard of replies to complaints. Too many of them were unhelpful and sometimes they failed to answer the actual complaint. In two cases we examined, which involved allegations of staff mistreatment, the responses prisoners received were inadequate, dismissive and did not address the fundamentals of the complaint.
Steps should be taken immediately to establish why the perceptions of prisoners about the complaints system as a whole were so negative. Where necessary, remedial action should be taken to address any weaknesses.

Replies to all prisoners complaints should be courteous and helpful.

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

Rating: Generally acceptable performance

NHS complaint and feedback forms were available in the house blocks and these could be deposited in the secure boxes which were emptied by health staff. However, all forms were noted to be in English only. All leaflets should be available in different languages and formats. As reported in QI 4.2 these boxes need to be replaced with secure ones.

6.23 The system for allowing prisoners to book interviews with independent representatives of civil society works well.

Rating: Satisfactory performance

The new Independent Prison Monitoring scheme was in its early stages of implementation and suitable facilities were available and we were informed that access would be made available where a prisoner requested this.

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

Rating: Generally acceptable performance

We were informed by managers at the prison that the establishment maintained good working relationships with relevant statutory agencies such as the police and the parole board. Where necessary interviews and meetings within the prison were set up. We were advised by the parole board that Cornton Vale suffered, as did most other prisons, from delays in obtaining home background reports.

There should be no unnecessary delays in obtaining home background reports for the parole board.

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

Rating: Satisfactory performance

There were no barriers to prevent prisoners from seeing their legal representatives. The visiting arrangements for professionals worked efficiently and prisoners that we spoke to said it was not difficult to organise a visit with their solicitor. They simply contacted them by telephone and asked them to visit.

Agents who booked to see their client in the morning, took the visit in the main visit room which was an open space. A maximum of four sessions were held to allow sufficient space between the tables in order to maintain privacy.
The afternoon sessions were held in two separate interviews rooms. Double visits could be provided if planned in advance.

We received a small number of complaints from prisoners about the limited space available for private interviews to be carried out. However we found no evidence that this had prevented visits taking place and we observed quite efficient use being made of the facilities available.

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

Rating: Satisfactory performance

Prisoners could receive private visits in a confidential setting. There was no evidence that this type of support had been initiated for prisoners from a foreign national background, but we were informed that if such a prisoner did make this type of request, reasonable attempts would be made to put suitable arrangements in place.

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

Rating: Satisfactory performance

There were facilities available for prisoners to receive private and confidential visits. There was no evidence that this particular type of support had been initiated. We were informed that if a prisoner made a request to meet a parliamentary representative, reasonable efforts would be made to provide suitable arrangements.
STANDARD 7 - PURPOSEFUL ACTIVITY

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

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

Inspection findings

Overall rating: Satisfactory performance

The visiting arrangements in Cornton Vale had been significantly improved by the provision of the Family Centre & Help Hub. This facility not only offered a warm dry place to wait prior to or after a visit session but also provided the visitors with access to a range of services and supports. The staff and volunteers working within it had created a safe and welcoming environment.

The visit area had been improved and the number of visits taken had increased, however, it was noted that the biggest increase in participation was from those that already received visits rather than any significant increase in the number of individual prisoners receiving visits. Management should work to better understand why this was the case and act on their findings to increase the number of prisoners receiving visits.

The introduction of a case management process for prisoners sentenced to less than four years was an encouraging development, however, it was too early to make any comment upon its efficacy. The inspectorate will look at this area during follow up visits.

It was concerning to note that the Shine mentoring co-ordinator was not operating from a base within the establishment, rather working out of the Family Centre & Help Hub. This may explain why some of the feedback from prisoners was less than favourable regarding this scheme. Management need to ensure that this working arrangement does not impact on the effective delivery of this key reintegration support service.

The number of initiatives being operated or implemented in the future was encouraging, however, management need to ensure that they were appropriately resourced and supported in order that the maximum possible benefit, of each, was realised. During discussions some staff did raise concerns that they did not fully understand who were most suitable prisoners for a given initiative. It was essential that each initiative was fully understood by the wider staff and prisoner group.
Quality indicators

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

Rating: Satisfactory performance

Visits operated during weekday afternoons and evenings, at weekends they were in the morning and afternoon. Children’s visits were available on Tuesdays and Thursdays and at weekends. Little Cherubs (younger children) visits were available daily in the St Margaret’s Family Centre with minimum supervision provided by the Family Contact Officer (FCO).

Inspectors observed and were made aware of many initiatives offered to maximise the opportunities for prisoners to enhance and maintain contact with family and friends. These opportunities were further discussed under QI 7.5.

Information regarding visiting arrangements and other services provided by partner agencies was readily available.

Travel requirements for family and friends to this national facility can make regular visits challenging and prohibitively expensive for some.

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

Rating: Good performance

The Family Centre & Help Hub was situated outside the prison and was an excellent facility for use by a range of visitors to the prison. Staffed by prison officers and volunteers, it provided a supportive, friendly and welcoming environment for all visitors to the prison throughout the day. A children’s play area and garden area was accessible and was well used in good weather. Toilet and locker facilities were available. There was a seated “café” area where refreshments and snacks were served by volunteers and prison staff provided information about visits, including information leaflets and assistance for families and friends visiting the prison. Visitor information packs were comprehensive and available. This was an area of practice worthy of sharing.

Visitors were requested to arrive 30 minutes prior to the booked visit to enable them to comply with the necessary identification and security checks. Prison officers were observed to be pleasant and courteous when explaining the visits process, use of lockers and the searching procedure. Front of House staff were also witnessed to be polite and respectful whilst adhering to security procedures.

During the inspection, satisfaction surveys feedback from visitors using the Family Centre & Help Hub was found to be very positive. Further written evidence of the benefits of this facility was recorded in the visitors comments book, which had many positive entries from visitors who had previously used the facility.
7.3 Any restrictions placed on the conditions under which prisoners may meet with their families or friends take account of the importance placed on the maintenance of good family and social relationships throughout their sentence.

Rating: Satisfactory performance

The establishment had one closed visit facility and two agent visiting rooms. At the time of the inspection there were no prisoners on closed visits although there had been three prisoners previously on closed visit status during 2015.

A senior manager, following consideration of the evidence provided, was responsible for approving the closed visit application, although it was reported that closed visits status was not a regular occurrence. A closed visit and review process was in place in accordance with national policy and guidance and prisoner records were annotated accordingly.

At the time of inspection there were three banned visitors to the establishment. Prisoner records were updated to reflect the incident and management reasons for the decision together with review date, in accordance with national policy and guidance.

Inspectors were informed that closed visit and banned visitor status did not impact on access to children visits.

Prisoners located in the SRU arranged visits with family and friends using the same booking system and visits took place in the main visit room.

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

Rating: Satisfactory performance

All prisoners were given a ‘rub down’ search prior to leaving the residential area to attend their visit. Prisoners were allowed to wear their own clothes and on arrival at the visit room prisoners were required to wear an orange security band for ECR identification purposes. At the end of the session visitors left the visit room and then prisoners were removed, which seems counter intuitive from a security perspective. Inspectors did not observe the visit room being searched at the end of the visit sessions.

Visitors were accompanied from the Family Centre & Help Hub to Front of House by a prison officer prior to the visit and were required to undertake security checks before being taken to the visit room. During the inspection visitors were observed walking through the metal detector and being asked to comply with a rub down search, which was undertaken by an officer of the same gender.

The visit room was clean and bright with chairs, tables and furnishings of a good standard. Although small, there were nine visit spaces available during each session. There was a small play area available for children. Vending machines were accessible for refreshments and snacks during visits. A mobility chair provided access to visitors to the visit room if required.
The visit room had CCTV in place which was monitored by ECR staff. Visit sessions were supervised by three prison officers.

During the inspection, observation of two visit sessions (one with three visits and the other with six) evidenced a relaxed and unobtrusive atmosphere with staff interacting with prisoners and visitors. Conversely, prisoners stated that they felt that the visit room was too small and cramped with too many prison staff supervising the visits, which in their opinion resulted in a lack of privacy and quality of family contact. The FCO was present during part of the children’s visit session.

During a weekend visit we observed a prisoner being managed under the SPS policy ‘Management of an Offender under the influence of an illicit substance’. The incident was managed efficiently and professionally by staff, in accordance with national policy guidelines, with no impact on the children’s visit session scheduled immediately thereafter.

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

Rating: Good performance

The prison had a children and families strategy and an action plan to monitor standards for encouraging family contact. An action within the plan was to review and analyse the current visit figures, with a view to changing the visit sessions to meet the needs of the visitors. The review was to be an outcome of a wider regime review project being conducted by a Unit Manager due to be completed by December 2015. HMIPS will monitor the outcome of this review with interest.

There were three full-time FCOs in post and the arrangements observed during the inspection were first-rate. FCOs were located in the St Margaret’s Family Centre and had their own dedicated telephone number which enabled families to get in touch with them directly to discuss contact arrangements. This continued to be an area of practice worthy of sharing.

FCOs provided an induction to admissions in the First Night in Custody within 24 hours and made arrangements with other house blocks to see admissions on a one-to-one basis. FCO assistance with family contact was provided to prisoners in need, with their consent, in a sensitive manner. Information for families was widely available in the Family Centre & Help Hub.

A visit timetable was in place with daily visits and additional sessions available for prisoners to enhance contact with their children. Cherubs visits were available in the St Margaret’s Family Centre where the mother could have a relaxed visit with her children in a family friendly facility with access to a garden area in good weather. The Cherubs visits were facilitated by the FCO with minimum supervision.

A new contract with Aberlour child care trust had enabled the development and introduction of a Positive Parenting Programme, which was implemented at the same time as the inspection.

The prison was committed to providing family events and had encouraged family involvement in a Burns event at a children’s visit session; Mother’s Day; Easter; Family BBQ and several other events. Work was already in progress to facilitate a Halloween
event and Children’s Christmas Party. These events were well attended and an area of continued practice worthy of sharing.

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

Rating: Satisfactory performance

Prisoners had access to telephones and letter writing materials. On admissions prisoners were given 30 pence telephone credit. There were sufficient telephones within the house blocks although the hoods did not afford much privacy in some areas. The phone in Dumyat did not provide any privacy for the prisoners and needs to be addressed.

During the inspection we were informed that in exceptional circumstances visits could take place outwith the normal visit times, between 12:30 and 14:00, facilitated and supervised by FCOs. If these times were not suitable to families and friends then the agents visit rooms could be used. An example of this type of flexibility was given when a flight connection was delayed and the family were unable to arrive on time. In this circumstance the visit was re-scheduled to a later time to facilitate family contact.

The prison did not use video-conferencing for family contact however promoted the “email a prisoner scheme”, which was administered by FCOs. A number of prisoners stated that they would like to see the introduction of a Voice over Internet Protocol (VoIP) family contact facility, particularly those prisoners a long distance from home, including foreign nationals.

The Family Throughcare Officer monitored those prisoners who did not receive visits and actively encouraged contact with family and friends. The ‘Outside In’ project offered prisoners access to one visit per month with a nominated volunteer visitor to support them throughout their sentence.

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

Rating: Generally acceptable performance

A visit programme and timetable was in place. Arrangements could be made for visitors travelling long distances to have extended visits if space was available.

Data between April and August 2015 demonstrated a rise in visits booked from 424 to 519 with the number of visits taken increasing from 232 to 389 in the same period. This management information evidenced the commitment of the prison to support prisoners to sustain family ties during their time in custody, albeit many of the visits opportunities were taken up by the same prisoners.

As noted in QI 7.6 telephones, email and normal mail were available. Telephone calls could be initiated by staff if a prisoner had insufficient funds to contact family. Prison staff assist prisoners to write letters if required.

The prison provided foreign national prisoners £10 per month on their Prisoners Personal Cash to call their family. Inspectors were informed that language line was
available to those prisoners for whom English was not their first language. During a focus group inspectors were concerned about a prisoner who did not appear to have a clear understanding of information provided. This was a weakness. On raising concerns with management we were advised that this individual would be offered access to an Interpreter. The use of language line was checked and it was found that the use of translation services was very low:

- It had only used 10 times since April.
- It had not been used since 23rd June 2015.
- The establishment had only spent £113.10 on the service.

This was a weakness.

Family events and fun days were planned at regular intervals throughout the year to encourage family involvement. These events were well attended and successful.

Three full-time FCOs were in place to help prisoners to maintain family contact. Observation during the inspection provided evidence that this worked well encouraging prisoners to engage with family and friends on admission and throughout their sentence.

The Family Centre & Help Hub was an excellent facility for visitors with information available about the prison and other services provided by partner agencies. The Family Throughcare Officer linked with the FCOs, Throughcare Support Officers, Shine mentors and the ICM Co-ordinator to build and strengthen family relationships to support successful community reintegration, however there was no overall throughcare strategy in place. This was a weakness.

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

Rating: Satisfactory performance

There were a number of areas where prisoners were encouraged to get actively involved in their case management. This included engagement in the Generic Programme Assessment, having decisions made at the Programmes Case Management Board fed back to them; involvement in ICM case conferences via attending them and involvement in the Short Term Case Management Board, where they had input into their case management via collaborative assessment and identification of referrals needed. Cornton Vale had recently introduced the Short Term Case Management Board, and every short term prisoner was offered the opportunity to engage with this (and those who seemed unwilling were revisited by their personal officer to encourage engagement). The booklet that prisoners completed in conjunction with staff was of a good quality.

Prisoners who attended the focus group talked about the decisions made about their programme needs getting fed back to them, along with the reasons why they needed to engage, and appeared content with the decisions made.
Attendance by family members to ICM case conferences appeared relatively low in the last 2 months (14.3% and 25% respectively) although performance in the year to date was 45.2%. However, there was clear evidence of family members being invited to ICM case conferences and staff understood the importance of family involvement. The ICM administrator met with the prisoner beforehand to discuss this, and the leaflet for family members, which was sent out with their invitation was in the process of being updated. The Family Throughcare Officer informed us that they had just devised an induction for family members and at prisoner induction the importance of family involvement was highlighted.

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

Rating: Generally acceptable performance

A number of services which helped maintain and develop a range of social relationships, to aid in a return to the community were available. These included, offending behaviour programmes, where relationship skills, support networks and risk management planning for the community were addressed. A parenting programme, the citizenship programme and a connections programme which looked at relationships, had all been recently introduced.

Regarding throughcare services, in August 2015 there were 37 open cases, however only three were located in the community a further two who had declined to engage after liberation (these cases would be revisited and referred on to other services if they were interested). At the time of inspection there were 40 open cases on the list, who staff were actively working with. Staff would refer these cases on to other agencies before withdrawing their services.

Shine mentors were available, although it seemed that there were some difficulties with this in various local authority areas, for example a long waiting list in one particular area, communication difficulties in a number of cases were also highlighted between Shine and SPS throughcare. The issues that appeared to exist between Shine staff and SPS staff require to be addressed and resolved. Uptake of the Shine mentoring support was low at less than 30% of the eligible prisoners, prison management need to work more closely with Shine to ensure that the prisoners were not losing out. This was a weakness.

Engaging in the work placements within the community also helped women to build and maintain social relationships.

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

Rating: Satisfactory performance

Evidence reviewed showed that prisoner case management was individualised and person centred, using a multi-disciplinary approach. The following processes were reviewed during the inspection and in each case, there was evidence of the approach taken being person centred and taking into account the individual’s needs:
Risk Management Team case discussions and paperwork.

Generic Programme Assessments and Programme Case Management Boards; programme needs identified based on assessment.

Short term case management process and case management boards (PCMB).

ICM process.

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

Rating: Satisfactory performance

The RMT oversaw selection and management of those who were seeking to gain access to the community. Attendance at a RMT and review of the paperwork indicated that the systems and procedures were implemented fairly and effectively, and covered both short and long term prisoners.

The prisoner focus group however reported that they felt programme engagement and the RMT process took too long and that they should be progressed whilst engaging in programmes, before report completion or signing off at the PCMB. Some prisoners said that they were only able to have a few months (or not able to access at all) in the ILUs once they had completed what was required, while others had completed their programmes and were in a good position to progress with some years before their release.

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

Rating: Satisfactory performance

There was evidence from the RMT and from the focus groups that both short and long term sentenced women were being progressed according to their critical dates. Some women however complained that the process for progression took too long and a small number noted they would either not be able to progress by the time they completed programmes, or would only have a few months in the top end or ILU.

In the last two months 100% of ICM case conferences were held on time and compliance with parole timescales was also achieved. Community Justice Social Work (CJSW) attendance at ICM case conferences was 96.8%, however the performance against the provision of four weeks' notice, for CJSW attendance at ICM meetings, was only 87.1%.

Comment from the parole board noted that receipt of Home Background Reports was poor. The lack of any relief cover for parole co-ordinator was also an issue, but the receipt of updated reports on time was adequate with sound prison based social work reports.
7.13 The risk management measures that have to be observed in respect of prisoners serving Orders for Lifelong Restriction and those subject to Multi-Agency Public Protection Arrangements are implemented.

**Rating:** Satisfactory performance  

There was currently one Order for Lifelong Restriction in Cornton Vale; whose case manager was a senior manager and was presently getting her risk assessment and risk management plan updated, prior to submitting them to the Risk Management Authority. Due to the complex nature of the case a multidisciplinary approach had been adopted.

Cornton Vale had a very small number of women who had committed sex offences and were therefore being managed under MAPPA processes. There was a named link person within the prison for information sharing with MAPPA and staff were invited to attend MAPPA case conferences. There were also processes in place for linking in with community partners for non-MAPPA cases, where prisoners presented a risk to the community, and Cornton Vale staff also contributed to, and attended these meetings.

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

**Rating:** Poor performance  

The prison offered a range of employment opportunities for prisoners in work parties; for pass-women with cleaning and pantry duties in the house blocks, gardens and recycling, laundry, kitchen, and the industrial cleaning party. However, additional employment opportunities, in the craft workshop, retail shop, recycle-bike workshop and hair salon, were not available to prisoners due to staff shortages. As a consequence, the range of employment opportunities available to prisoners was insufficient and based almost entirely on the operational requirements of the prison. This was a weakness.

Employment opportunities should be re-instated as a matter of urgency to maximise prisoner participation in purposeful activity. Opportunities for prisoners to leave work parties and attend educational activities were limited by the requirement to sustain these essential work parties.

Almost all employment opportunities included unit certification based on SVQ level 2 qualifications. The majority of prisoners progressed well with these awards and achieved all or part of a qualification. However, there were no opportunities for prisoners to progress to advanced awards beyond SVQ level 2, which is particularly relevant for those prisoners serving longer sentences. There was no association between SPS training qualifications and delivery staff in the education unit. As a result, there were missed opportunities to integrate employment and training with essential education skills for literacy, numeracy and employability.

All prisoners undertook compulsory training in food hygiene and manual handling before they joined a work party. Prisoners underwent additional bespoke training based on their work party allocation. Informally, a few experienced prisoners acted as peer mentors to support other prisoners in work parties.
7.15 There is an appropriate and sufficient range of educational, including physical and health educational, activities available to the prisoners.

Rating: Generally acceptable performance

SPS contracts New College Lanarkshire to deliver educational activity at Cornton Vale. The learning centre was open five days a week, as well as two evenings each week and teaching staff delivered an appropriate range of classes and learning activities to prisoners, overall. Prisoners took part in a suitable range of core skills activities, particularly in communications, numeracy and information communication technology. Core skills subjects were delivered as stand-alone classes, in addition to being embedded in other classwork, such as art and cookery.

The range of opportunities was constrained by the criteria of the SPS contract with New College Lanarkshire. However, the interim learning centre manager had introduced a number of new courses, including modern studies, philosophy and classical studies, which were proving popular with prisoners. These programmes were allowing prisoners opportunities to further develop important personal skills, including listening, critical thinking and an increased level of confidence. A few prisoners undertook flexible learning programmes, sourced from external providers, including programmes from the Open University. At the time of inspection there were limited opportunities for prisoners to participate in music or drama classes.

Education classes were available to all prisoner categories, including untried prisoners and YOs.

Most learning centre activities were certificated and in the last 12 months prisoners had achieved 345 awards from SQA and other awarding bodies.

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

Rating: Satisfactory performance

There was an appropriate range of opportunities provided to prisoners including both group and one-to-one work. The prison offered three offending behaviour programmes: Substance Related Offending Behaviour Programme, Female Offending Behaviour Programme, Constructs (for general offending), as well as Anxiety and Sleep, Parenting Programme, Alcohol Awareness, Drug Action for Change and Survive and Thrive (co-delivered with the NHS) which was for women who had experienced trauma.

Prisoners talked about having excellent relationships with programmes/ psychology staff, and noted that they were non-judgemental and supportive. They found programmes to be beneficial, describing them as ‘brilliant’, but that they would have liked to know more about programmes right at the beginning of their sentence, although all of them were clear about the links between programmes and progression now. It was concerning to hear that some said that they found out about programmes and progression by asking other prisoners as opposed to being informed by staff.

In terms of assessments, in the last year three women declined to engage in a Generic Programme Assessment (GPA). Cornton Vale had only recently started assessing all those women serving 12 months or over, as per SPS guidelines for GPA assessment,
prior to this it was those with 18 months left, which had meant that there were some women, who according to policy should have been assessed, but weren’t.

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

Rating: Satisfactory performance

Offending behaviour programmes had some elements that could be considered social or relational skills training. QI 7.16 outlines a number of groups and one-to-one that ran and served a therapeutic/treatment purpose.

Additionally we were informed that there were plans in place to introduce the following activities:

- peer mentoring
- interpersonal therapy
- women’s aid

HMIPS will monitor progress in this area.

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

Rating: Satisfactory performance

Overall the quality of purposeful activities in the learning centre and in work parties was good and most prisoners who participated in them were well engaged. Relationships between staff and prisoners were positive and respectful, with staff encouraging participation of prisoners in purposeful activity. The quality of purposeful activity available for prisoners in work parties was of a good standard. The prison also provided good quality equipment and facilities in all work areas. Both compulsory and employment related training was delivered to a high standard, appropriately recorded and had very good emphasis on health and safety, including the use of PPE. This training prepared prisoners well for employment in the prison.

The learning centre provided a comfortable and relaxed environment which encouraged prisoners to participate meaningfully in activities. The quality of the classroom accommodation was variable. The life skills classroom, with a fully functioning commercial kitchen was a new addition since the last full inspection and the facility was well used by prisoners to develop and gain essential life and employability skills. However, the art room had no sink, which constrained the activities available, and a lack of storage space resulted in a cluttered teaching space.

The quality of learning and teaching was good and prisoners with English as an additional language received a high level of support by staff. High quality learning experiences had supported a number of prisoners to make good progress with their reading, writing, listening and talking skills.
7.19 The scheduling of activities and individual prisoner’s access to them is organised so that each prisoner takes part in the activities agreed for them.

Rating: Generally acceptable performance

Prisoners were allocated work parties based on their skills, abilities and interests. An Assessment Board met each week to allocate jobs, at which prisoners were also offered opportunities to study in the education unit. However, there were more jobs available in work parties than prisoners available and there was an assumption that everyone should work. This created tension between work party commitments to maintain essential prison functions and the release of prisoners for education.

Management need to understand why a significant number of prisoners remain unoccupied, in the house blocks during the day, given that there was an apparent oversupply of work opportunities.

Overall, prison staff have low expectations of prisoners with significant mental health needs, particularly those in Ross House, and prisoners’ ability to engage in education classes or the full range of work parties. These prisoners were not assessed for their ability to engage in less demanding activities than those required by essential work parties. There was no consideration that these prisoners could benefit from working part-time or in jobs that were not as challenging as those in vital services, such as recycling.

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

Rating: Satisfactory performance

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

All house blocks had outside exercise areas available to prisoners. All prisoners had access to an hour’s daily exercise in the fresh air between 12.30 to 13:30, following lunch. Prisoners informed inspectors that they enjoy the additional time staff facilitated in the fresh air, during the summer evenings. This was positive.

Since the last inspection in 2012 there had been some investment in the exercise areas in Skye, Younger and Wallace Houses which were observed to be in a good state of repair. Bruce had two exercise areas however the one at the rear of the block was no longer in use. The seating areas in front of Bruce and Peebles were satisfactory.

During the inspection we were informed that following a risk assessment the Astroturf areas in the prison were not used due to disrepair and maintenance requirements. We were however informed that the Physical Training Instructors (PTIs) facilitate outdoor bowling and rounders during the summer months. Consideration should be given to the future use of the Astroturf areas in the prison, together with a maintenance plan, to enable these areas to be fully utilised and enhance the outside exercise regime for prisoners.
The exercise area in Ross was austere and claustrophobic however the women were observed during the inspection enjoying the fresh air in the seated area, whilst interacting with staff and socialising with their peers. Consideration should be given to allowing all day access to this secure outside space.

PTIs facilitated a walking club which was enjoyed by the vulnerable prisoners in Ross. **This was positive.**

The SRU had two concrete exercise pens which were used by those in segregation to access the fresh air. These areas were monitored by CCTV by ECR staff. During the inspection a prisoner from the SRU was escorted by three staff to the Community Garden for exercise in the fresh air as part of her care package. **This was positive.**

Exercise in the fresh air was offered during bad weather although uptake was low. Prisoners were provided with waterproof jackets for use during poor weather conditions.

The prison should explore opportunities for utilising the landscaped grounds within the perimeter fence to further enhance periods of exercise in the fresh air.

### 7.21 Prisoners are assisted in their religious observances.

**Rating: Generally acceptable performance**

The Chaplaincy Team comprised representatives of the Church of Scotland, Roman Catholic Church and the Islamic Faith, providing a total of 36 hours of chaplaincy services to the prison on a weekly basis. However due to staff sickness this total was currently not being met. The Chaplaincy Team were located in the Chapel which was located in the St Margaret’s Family Centre.

The Roman Catholic Service was held in the Chapel each Saturday at 10:30 and the Church of Scotland Service was held each Sunday at 10:30. The Imam was available on request. Prisoners from other Faiths were also supported on request. Religious books and prayer mats for Muslim prisoners were available. Prison Fellowship had been recently introduced into the prison.

During the inspection the Church of Scotland Service was observed. The Service was well attended by 34 prisoners from across the prison. A minor incident occurred at the beginning of the service which resulted in a vulnerable prisoner being sensitively removed from the Chapel by prison staff and returned to Ross House. This allowed the service to continue without further undue disruption or delay. **This was positive.**

The Chaplaincy Team had developed an information leaflet which was available throughout the prison and in the Family Centre & Help Hub. Chaplains offered information to convicted prisoners during induction however there were no formal arrangements in place to provide information to remand prisoners in Younger on admission. **This was a weakness** and should be addressed. Prisoners could access Chaplaincy support by requesting via the Chaplain Request Book.
7.22 Prisoners are afforded access to a library, which is well stocked with materials that take account of the cultural and religious backgrounds and prisoner population.

Rating: Satisfactory performance

Prisoners were well served by the library facilities within the prison. The Library was located within the Learning Centre and had been recently upgraded. Its fresh décor and new furniture provided a welcoming environment for prisoners to read and learn. The Library was also used as an additional teaching area, mainly for English, communications and philosophy.

The Library was run in partnership with Stirling Council Libraries Services and this ensured that books were regularly updated and stock rotated. There was a good stock of books, both fiction and non-fiction, with some material available in large print and as audio-books. The partnership with Stirling Council enabled a quick response to demands for books in foreign languages, young adult books, including graphic novels, and resources required for more advanced studies. The pass woman in the Learning Centre was trained to run the library database and was available to log books in and out.

Prisoners could access the Library during their attendance at the learning centre and each house block and work party had an allocated time when they could visit the Library.

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

Rating: Generally acceptable performance

All prisoners had good access to a range of physical activities and the majority of prisoners made good use of the facilities available. All prisoners completed an induction session with a member of staff before accessing the fitness equipment. Access to the gym met the needs of prisoners well. The timetable was comprehensive, providing opportunities for untried, convicted and mixed groups. Activities were varied and included kick boxing, circuit training, metafit and boxercise. Prisoners engaged in low and high intensity sessions as well as targeted activities for specific groups. Appropriate adjustments were made according to prisoner ability and age.

A few prisoners from Ross House participated in bespoke morning sessions for those with special care or mental health issues. Prisoners in Ross also had access to a small in-House gym, for those who did not wish to mix with other prisoners. However, some equipment in this satellite gym was broken and the facility was not used well. This was a weakness.

PTIs had good relationships with prisoners, were approachable, provided a relaxed atmosphere and placed a strong emphasis on health and wellbeing. They promoted a healthy diet and offer fresh fruit platters at all sessions and all activities offered. Prisoners were well consulted on what type of activity they preferred to engage with. PTIs adapted programmes to encourage participation and maximise attendance, particularly for those with poor health or low self-esteem. For example, the early morning Breakfast Club combined physical activity, an enhanced breakfast menu and
opportunities to meet with other prisoners. These sessions were popular and attended well by prisoners. The gym provided certification for Heart Start and manual handling courses, with a regular cohort of prisoners achieving these certificates each month. Awards were also provided for other training undertaken by prisoners; in first aid, sports leaders and active play.

The internal sports facilities were good quality and maintained well, although the gym size and layout restricted the offer of team activities. However, the provision of outdoor activities and opportunities for team sports was insufficient. This was a weakness. As noted in QI 7.20 Astroturf outside each House was not fit for purpose and consequently unused by prisoners. There were no designated or suitably adapted outside spaces where prisoners could participate in ad-hoc or organised physical activity.

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

Rating: Satisfactory performance

Prisoners had opportunities to participate in a range of recreational and self-help activities in the house blocks and in the learning centre. In addition to scheduled gym sessions, most prisoners attended and participated well in sporting and fitness activities funded by the Gannochy Trust. The Breaking Barriers programme attracted almost half the available prison population to each event. These activities improved interaction with families, promoted healthy lifestyles and encouraged interaction with other prisoners. Outside speakers were occasionally used to provide inspiration and encouragement for prisoners when they leave prison.

In most work parties, established prisoners supported new prisoners to develop the necessary skills to work in particular vocational areas. A few prisoners provided informal peer support to other prisoners in areas such as literacy tutoring and supporting the Ross House cookery class. However, there were no formal peer-tutoring schemes operating and for training or awards to support the process. This should be addressed as soon as possible.

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

Rating: Satisfactory performance

Prisoners had access to and participated in a range of appropriate and engaging cultural activities and events. Many of these activities were organised through the learning centre although the activities may be offered in house blocks.

Stirling Council Libraries Service had appointed a reader-in-residence who visited the prison one day a week. She facilitated a book club within the prison, to promote reading, and ran an evening creative writing class with the young offenders. During Book Week Scotland 2014, the learning centre hosted an afternoon with three visiting Scottish crime writers, with readings from the authors and a question, answer and discussion session. An evening film club and learning centre film studies group encouraged prisoners to explore different themes. For example, during Black History Month, prisoners viewed, discussed and reviewed six different films that deal with race issues.
International Women’s Day 2015 was marked with a range of events organised by learning centre staff, including poetry readings, workshops, art activities and a ceilidh-style event. In a separate initiative, the music education organisation, Vox Liminis, led three days of song-writing and recording workshops, culminating in a performance by prisoners.
Standard 8: 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.

Inspection findings

Overall rating: Satisfactory performance

The prison took reasonable steps to ensure prisoners were prepared for their successful return to the community. However, there were some areas requiring improvement.

Suitable pre-release plans, thoroughly informed by multi-agency contributions, were drawn up through the Integrated Case Management (ICM) process. Pregnant women were supported by a multi-agency team ensuring the health, wellbeing and safety needs of the woman and her unborn child were met. The ICM process was enabling appropriate links with supervising agencies in the community. Women who were not subject to statutory supervision were encouraged to accept voluntary help. This included having the support of a Shine mentor. Links with social work departments ensured that children were protected and women had the support needed to maintain contact with their children.

There was great variability in what was offered in different parts of Scotland in terms of follow up to programmes or treatment provided in Cornton Vale. For example it was unfortunate that very beneficial speech and language therapy could not always be continued in the community.

Far greater attention and collaborative working, at a strategic level, must be focused upon ensuring that there was a seamless transition for women leaving custody and returning to their communities, for example, negotiating better arrangements with housing providers to ensure women leaving custody have appropriate accommodation identified prior to liberation. It was concerning that despite women’s accommodation needs having been identified at an early enough stage in their sentences and appropriate agencies being involved in the Link Centre women often had serious difficulties obtaining appropriate accommodation when they were released.

The throughcare team had recently begun to work with women for at least six weeks after their release. The throughcare officers explored what supports were available in the community the woman was returning to and helped her make the most appropriate links.
Quality indicators

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

Rating: Satisfactory performance

A stakeholder mapping exercise had recently been carried out by a senior manager. Close attention was paid to the wide range of partners providing services through the Link Centre. This produced important information about the number, location and qualification criteria for different services, their perceived effectiveness and how they related to each other. The exercise also identified potential overlaps and should enable considered decisions to be taken about the future roles of the different stakeholders. Communication with stakeholders had been significantly strengthened following this work.

ICM case conferences were appropriately convened to allow for suitable pre-release plans to be put in place. While timescales were usually followed, extra case conferences were arranged to meet the particular needs of individuals or to facilitate the attendance of a family member or a significant community based worker.

The plan was well informed by contributions from a range of professionals and family members. The ICM Chair gathered all the information together in preparation for the case conference and encouraged good quality discussion which meaningfully informed the plan. Where key people could not attend the case conference the Chair ensured there was a written report which could inform the discussion. Video conferencing was used where distance from Cornton Vale was a barrier to attendance. Community based social workers generally attended the ICM case conferences, however any non-attendance had a detrimental impact on the relevance and usefulness of the plan. Community based social worker must attend all ICM case conferences.

Short term case management offered those women not subject to ICM the opportunity, on a voluntary basis, to identify their needs on returning to the community and plan accordingly. Key partners played an important role in this planning including the Shine mentor and the Aberlour child development worker if appropriate.

Staff and external agencies were involved in agreeing a plan to support the needs of women and prepare them for integration back into the community. An assessment for each woman identified their needs enabling staff to make referrals to various agencies as required.

Women who were pregnant were supported by a multi-disciplinary team including prison staff and external agencies. Pregnant women were referred to Forth Valley Royal Hospital. The support from staff was aimed at meeting the health, wellbeing and safety needs of the woman and her unborn child. There was a plan showing how the health needs of the woman and her baby would be met during pregnancy and a plan for the birth of the baby. Discussion with one woman confirmed regular contact and discussions with staff about her pregnancy including regular visits to hospital for appointments. We examined health records that showed women’s attendance at hospital appointments and a chronology of significant information about the health of the woman and her baby. Mother and baby meetings enabled a multidisciplinary team
to discuss the needs of the women and agree how each individual woman would be supported to ensure the health, wellbeing and safety of her and her child.

Staff supported pregnant women with managing their addictions. A good example was of a pregnant woman who had reduced her level of methadone from 60mls to 10mls through a support programme facilitated in the prison. The woman had used her initiative to make contact with support services in her local community. These steps should result in improvements to the health and wellbeing of both the woman and her unborn child and will hopefully lead to positive outcomes for the woman and her child should this improvement continue.

As part of the plan for women moving back into their communities, interim measures for some included spending time in the ILUs. The women were given encouragement and support to access the use of community services including the local health centre, GP and dentist. Support was given as required with setting up appointments and attending appointments as part of the through care service.

We found staff to be pro-active in facilitating effective family visits that benefitted women through enabling them to maintain contact with their children and family members. As noted in QI 7.2 the welcoming staff and the pleasant environment in the Family Centre & Help Hub provided a positive introduction for all visitors including the children. Families were encouraged to support women to plan the support they would need once they were liberated through staff in the Family Centre & Help Hub providing a wealth of information about support services in the local communities.

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

Rating: Generally acceptable performance

The ICM process enabled appropriate links with supervising agencies in the community. Prison based social workers prepared an updated Level of Service/Case Management Inventory (LS/CMI) risk assessment and ensured this was passed to the supervising social worker when the woman was released. Community based social workers generally attended case conferences and made links while the woman was in prison. However there were some occasions when a woman did not know her supervising social worker on release. There were examples of ICM case conferences for individual prisoners attended by different social workers. As a result a few women were not benefiting from an established relationship with their supervising social worker prior to release. This was a weakness. Prison staff could usefully consider how they could effectively encourage the attendance of the allocated community based social worker at all ICM case conferences.

Women who were not subject to statutory supervision were encouraged to accept voluntary help. Community plans were drawn up for women who participated in the short term case management workbook. This included having the support of a Shine mentor (see QI 7.9). Throughcare staff stated that in their opinion there were simply not enough Shine mentors to meet the need. As a result mentors, at times, had large caseloads which they could not service as intended. This meant many women were missing out. However throughcare officers were knowledgeable about geographical differences in the level of service from Shine and had identified appropriate
alternatives which they linked women to. For example they found women received very good support from the Venture Trust in some areas. As noted the apparent tensions between SPS and Shine staff need to be resolved as a matter of urgency.

Links with social work departments ensured that children were protected and women had the support needed to maintain contact with their children. We observed a contact visit between a woman and her child. The social worker present commented positively about the easy access to the FCOs to organise contact between women and their children. They said that the environment for children was relaxed and there were toys and resources that enabled them to have quality time with their mother. We witnessed the effectiveness of the multidisciplinary team working together to protect children. Steps were taken to alert all maternity units about a woman who had the same date for the birth of her baby on the day she was due for liberation to enable support and protection to be given to the woman and her child. We examined records linked to a child protection case that contained full detail about protecting a child during pregnancy, birth and afterwards. Health and social care within the prison worked closely with external professionals to gather evidence and support the investigation of concerns around the woman involved. This case was an example where a lack of information from other authorities prevented a true risk assessment to be undertaken to make decisions around protecting the woman and her unborn child early in her prison sentence.

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

Rating: Generally acceptable performance

There was great variability in what was offered in different parts of Scotland in terms of follow up to programmes or treatment provided in Cornton Vale. Part of preparing the pre-release plan involved throughcare staff finding out what may be available to women on release in their communities. Throughcare staff had a reasonable level of awareness of services in different areas, had developed important links with community services and initial feedback was that women were benefiting as a result of this. Much of this important knowledge had been built up by the throughcare staff through their active involvement in the process. Some consideration could usefully be given to ensuring this knowledge was readily available and not dependent on the current post holders.

Many women were benefiting from speech and language therapy while in Cornton Vale. It was unfortunate that this therapy could not always be continued in the community.

The social care officer had an important role in working with particularly vulnerable women, including those with mental health problems. Gathering a social history of vulnerable women and finding out which community based agencies had been involved in the past. Making effective links with these agencies, encouraging them to come to the prison to see the women they have worked with in the past and re-establishing their relationship in preparation for release. This was positive.
8.4 As prisoners near release all reasonable steps are taken to ensure appointments and interviews are in place with relevant agencies.

Rating: Satisfactory performance

Staff were alert to ensuring women had appointments and interviews in place as they near release. Women were encouraged to attend the Link Centre to speak to representatives from Job Centre Plus, SACRO, Shine mentoring etc. Prison staff were acutely aware of the need to have important appointments arranged in advance and of the support women may require to attend these appointments. Throughcare officers enhanced women’s chances of successful reintegration by accompanying them to key appointments on the day of release and over their first six weeks back in the community. This was positive.

Steps were taken to support women with childcare should they need to attend appointments or go out to work. The Aberlour family worker was a newly created post, just commencing work at the time of the inspection. Her role included supporting women with children to access childcare in the community following liberation.

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

Rating: Generally acceptable performance

Despite women’s accommodation needs having been identified at an early enough stage in their sentences and appropriate agencies being involved women often had serious difficulties obtaining appropriate accommodation when they were released. Women who did not have their own accommodation to return to on liberation, often did not know where they were going until the day they leave Cornton Vale. There was considerable local variation in how well agencies responded to women’s accommodation needs. A few let women know what accommodation they were being offered in advance of their liberation. Despite demonstrable commitment to meeting women’s housing needs, including part funding a specialist housing liaison officer, it was not uncommon for women not to have any information about what they were being offered until their first appointment when they were liberated. Greater attention could usefully be paid at a strategic level to negotiating better arrangements with housing providers to ensure women leaving custody have appropriate accommodation identified.

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

Rating: Satisfactory performance

Women nearing release were helped in a number of different ways to find work or enrol for training or education. Women received help from Job Centre Plus staff in the Link Centre and some women had successfully secured employment through Community Jobs Scotland. The recently introduced ‘Citizenship’ course, open to all women in the last four weeks of their sentence, provided participants with a portfolio on liberation. This portfolio included a CV, disclosure letter, Citizenship Card, Royal Environmental Health Institute of Scotland certificate, Food, Health and Wellbeing certificate and a Heart Start certificate. Information on the impact of this promising course was being gathered through a pre and post course questionnaire and written
feedback from women a month after their return to the community. Individual Learning Accounts were set up for women wishing to pursue education on return to the community. This was positive.

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

Rating: Satisfactory performance

Appointments with Job Centre Plus were arranged through the Link Centre and women had their claims set up in advance of their liberation. However their claim did not start until the date of liberation meaning there was typically a two week wait for their first payment. As a result they were dependent on their discharge grant of £72.64 for those 25 and over, or £58.03 for those under 25 to fund their first two weeks back in the community. Any woman unable to work due to sickness had to attend her community GP for a sick line before she could claim the appropriate benefits. This could present an extra barrier to women who have been deregistered by the GP due to being in custody over six months. Staff were acutely aware of the difficulties this posed for women and the potential impact it had to delay their resettlement in the community. Food bank vouchers were now helpfully issued to women returning to Glasgow to live; it would be helpful if this could be applied to the others areas in Scotland.

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

Rating: Satisfactory performance

The provision of photo ID for women through the citizenship card provided an important tool to accessing many community services, removing barriers and encouraging inclusion. This was now being offered to all women and funding had been secured from the Common Good fund to ensure women only had to make a minimal contribution. This was positive.

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

Rating: Satisfactory performance

The throughcare team had recently begun to work with women for at least six weeks after their release. Importantly this period was extended where there was an identified need. They usefully prioritised women’s most basic needs for the first two weeks concentrating on ensuring women had enough food, suitable accommodation, appropriate benefits and were registered with a doctor.

SPS regional support managers for throughcare staff must ensure consistent delivery of processes, approaches and standards across the country. Establishments with national coverage have greater challenges in enabling their throughcare staff to work with women when they return to their communities. Cornton Vale throughcare staff worked directly with women who return to communities within one and a half hours travel time from the prison. There was a recent example of an exception where the woman was particularly vulnerable and was returning to a more distant area.
Throughcare officers had built up useful knowledge on the availability and effectiveness of services in the community. They had developed an understanding of what was available in different localities and how easy support was to access. As a result they were able to ensure women were linked to the most appropriate services. The throughcare officers explored what supports were available in the community the woman was returning to. The plan was appropriately informed by this information.
STANDARD 9 - EQUALITY, DIGNITY AND RESPECT

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

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

**Inspection findings**

**Overall rating: Generally acceptable performance**

During the course of the inspection we gained a sense that there was a willingness by staff to “do the right thing” and staff felt generally supported by the senior management. There were a number of examples of practice worthy of sharing such as the Community Engagement Plan and family visits involving children.

The majority of the feedback we received from prisoners was that they felt staff treated them with dignity and respect.

In relation to self-harm and suicide, Article 2 of the European Convention on Human Rights created a positive and active obligation on the State to protect life, particularly if the person was under the care of a public authority. We would encourage management to ensure that their policies and procedures were in line with this requirement as the response to an in cell fire, which occurred during the inspection, raised potential issues in this area.

As has been noted elsewhere, it was concerning that prisoners consistently reported that staff systematically discouraged prisoners from submitting complaints. The form and content of complaints procedures can be an important indicator of the level of respect accorded to those being cared for and a lack of just complaints may hide underlying issues that need to be addressed.

During discussion with staff it was evident that they recognised that they would benefit if their training and development paid greater attention to gender specific factors and sensitivities, in order that they could respond effectively to women’s needs. While this evidence was mainly anecdotal it delivered a clear general message about the importance staff place on possessing the appropriate training and experience in order to maximise the outcomes of those they care for. Thus, it was important that all prison staff receive gender specific awareness and training.

From discussion with foreign nationals it was clear that they found it challenging to fully understand what was available to them or expected of them, due to language barriers. It was concerning to note how little the translation services had been used in the period from April 2015. Whilst some staff had used their initiative and utilised Google Translate, this could lead to misunderstandings and errors as this facility was not completely reliable. The requirement to ensure that prisoners were communicated with appropriately was wider than just language barriers but must also address issues where individuals who require support with their speech and communication skills have the requisite support available when necessary and appropriate.
Finally, the situation where half the population did not have independent access to toilets during periods of ‘lock up’ was possibly the most significant breach of someone’s human dignity.

Quality Indicators

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

Rating: Generally acceptable performance

Equality and Diversity (E&D) was part of the strategy within Cornton Vale. An E&D plan linked to SPS equality outcomes was in operation for this year. There was also a Community Engagement Plan which focused on both prisoners and staff, which was a good development.

The E&D Forum met four times per year and was made up by SPS staff, who collected concerns from the prisoners which were raised at the meeting by the staff present. However, a number of prisoners spoken with explained that they did not feel the current process was totally effective as there were no prisoners present at the meeting.

There were some key areas where no policy guidance was available, such as those aimed at protecting vulnerable women who may have been subject to human trafficking or the use of restraint for pregnant women, additionally the Mother and Child Unit policy, while comprehensive, was outdated as it did not include references to the duties of public authorities in relation to the UN Convention on the Rights of the Child (UNCRC) in the Children and Young People (Scotland) Act 2014. At the time of the inspection there was a young women who was in her final trimester and may have become a mother whilst still in custody.

A number of measures in relation to managing and monitoring E&D issues should be put in place, these are:

- Prisoners’ representatives should be able to join the E&D group.
- E&D issues should be dealt with in a timely and participatory manner,
- Update policies in accordance to national and international law.
- E&D could expand to external experts in order to provide greater clarity and guidance on this issue and other human rights standards such as lesbian, gay, bisexual and transgender (LGBT).

Existing E&D training appeared reasonably comprehensive, including human rights impact assessments awareness. However, training should also cover international human rights standards and current best practice.

As has been mentioned elsewhere prisoners reported that staff systematically discouraged prisoners from submitting complaints. Prisoners consciously avoided discussing this point during the interviews or focus groups. Prisoners however expressed a lack of confidence in the complaints system. The situation regarding
complainants had potentially significant human rights issues as standards require complaints to be addressed effectively, easily, and without risk of reprisals. Management need to urgently address this situation.

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

Rating: Generally acceptable performance 

The E&D manager and staff demonstrated a reasonable understanding of their role in implementing the E&D strategy and promoting human rights. It was noted that a new Equality manager had recently been appointed. However, this area of work suffered from a lack of attention and consistency and ownership as there had been a number of different managers in charge of this area in a short period of time. This had resulted in the situation where historic records of the meetings either did not exist or had been misplaced.

The E&D Action Plan was relatively new. Therefore, a strategy for communication and participation for both prisoners and staff, to help embed this approach, would be beneficial. The establishing of a range of indicators and an evaluation process were an important part of this process.

Interactions between staff and prisoners were professional. Prisoners reported that they felt staff respected their human rights and vice versa. While there were some examples of specific staff who prisoners wanted to complain about, these were exceptions, which underlined the general positive view of staff. During an interview with a female member of staff they highlighted what they believed to be a lack of gender sensitivity by some male staff. All staff assigned to work with women prisoners should receive training relating to the gender-specific needs and human rights of women prisoners (Rules 32 and 33 UN Bangkok Rules).

The European Prison Rules make clear that the training of all staff shall include instruction in the international and regional human rights instruments and standards, especially the European Convention on Human Rights and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment, as well as in the application of the European Prison Rules.

Staff interviewed suggested that they would welcome the opportunity to undertake language courses relevant for the prison context. They recognised this could improve the good relations with foreign nationals in Cornton Vale. Staff who work with groups with specific needs should be able to obtain specific training for their specialised work (European Prison Rules).

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

Rating: Generally acceptable performance 

As has been noted elsewhere, the overall structural conditions of the establishment were good. Adequate bathing and shower installations were provided. However actual living conditions varied from building to building. The conditions within the cells in Ross House were poor, whilst the general association areas within Ross were bright
and airy. On balance the physical environment seemed to meet the needs of older prisoners.

While there was some evidence of a participative approach in determining how the particular needs of older prisoners should being met, however, management need to ensure that the specific needs of the few were not overwhelmed by delivering a standard service to the many:

- An older prisoner, with HIV, complained that she did not fully understand her medical treatment. Management and staff must ensure that time was taken to ensure individuals understand their treatment, for instance this may require regular reiteration if they were aged, infirm or vulnerable.

- A prisoner who stated they were ‘Low Supervision’ yet claimed they were handcuffed when at external appointments. Human rights standards highlight that instruments of restraint should not be applied for any longer time than was strictly necessary and these were to be imposed only when no lesser form of control would be effective to address the risks posed by unrestricted movement.

- In relation to young prisoners the main issue raised was the lack of access to toilet facilities at night. Some prisoners reported that they had to wait for more than 40 minutes to be allowed to access a toilet, records showed that in a small number of situations prisoners had to wait for over an hour to access to the toilet (See QI 2.7).

- Staff working with the young women indicated their desire to have an increased understanding and awareness of age and gender sensitive issues. Staff working in such an environment should receive specific and appropriate training before working with young people.

- While we were unable to review the vocational and educational programmes for young prisoners. Access to such activities should be on an equal footing with their young male counterparts. All too often young women were offered activities which have been stereotyped as ‘appropriate’. The Bangkok rules are clear that juvenile female prisoners should have equal access to education and vocational training as enjoyed by juvenile male prisoners.

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

**Rating:** Generally acceptable performance 🌟

There was good access to accessible showers and toilets for disabled prisoners in these cells, and there were no prisoners requiring assistance in relation to personal care. The physical environment seemed to meet the needs of people with disabilities.

There was good provision for the mental health services but prisoners stated that they experience some delays in seeing the appropriate professionals. As with QI 9.3, the challenge would be ensuring that plans were made to meet growing demand.

It is important that both recreational and cultural activities were provided for these prisoners.
Persons with disabilities include those who have long-term physical, mental and intellectual or sensory impairments which may hinder their full and effective participation in society on an equal basis with others. We were unsure if a full assessment was undertaken, as required by international human rights standards, to ensure that additional support needs were identified and made available for each disabled prisoner.

The staff supervising prisoners, particularly in Ross House, demonstrated a high degree of knowledge and expertise in terms of dealing with health challenges. They did however indicate that new staff arriving in the area to work were not always trained in areas such as Mental Health first aid. As raised previously, staff who work with groups with specific needs should be able to obtain specific training for their specialised work.

However, as noted in QI 9.3, a prisoner with HIV complained of the lack of understanding of her medical treatment. In medical cases it was important to note that the UN Bangkok Rules highlight that women prisoners with HIV should receive post-test counselling as well as access to preventative health care services.

One particular situation was of concern and we would like to highlight as a human rights concern was in relation to the fire which occurred in Ross House during the inspection. We were informed that the reason the prisoner was left in a smoke filled room for over an hour was because she rejected any help offered.

This situation raised Article 2, right to life, questions. Article 2 created a positive and active obligation on the State to protect life, particularly if the person was under care of a public authority. While we understand safety issues in the prison, it was important that an appropriate and human rights based response was in place to ensure the right to life of the prisoner as well as of staff was respected. Management should review their processes and procedures to ensure they comply with this requirement.

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

Rating: Satisfactory performance

SPS’ and Cornton Vale’s policy reflects recent international developments in this area. Prisoners felt supported in discussing their needs through private and confidential processes. Based on the information available, Cornton Vale demonstrated a high level of commitment in this area.

We note that unlike in England and Wales a gender recognition certificate was not a requirement within the SPS transgender policy for an individual to be managed in a manner that met the needs of their chosen gender. This could be viewed as a positive, however, given that we have since been informed that the transgender person, that we met during the inspection, was no longer seeking gender reassignment and had been moved to a male prison, the SPS should consider reviewing its policy and approach to ensure that it makes reference to the challenges faced by an individual who had commenced a gender reassignment process and the potential for them to review and reconsider their decisions.
9.6 Prisoners who are married or who have entered into civil partnership unions are treated with dignity, respect and according to their individual needs.

Rating: Satisfactory performance

Prisoners were positive about the visiting regime in the prison. There was no distinction made in relation to marital status.

The Family Centre & Help Hub provided an excellent facility to those visiting the prison. Prison officers made positive reference to the value of visits and the benefits of maintaining family contact.

Consideration should be given to looking at means by which families who lived some distance from the establishment, especially foreign nationals, could access VoIP visit facilities such as ‘Skype’ (as noted in QI 7.6).

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

Rating: Generally acceptable performance

Childcare facilities or arrangements that enable women prisoners to participate in prison activities were available in the prison and treated them with dignity.

We observed that visits involving children took place in a conducive environment and allowed open contact between mother and child.

The mother and baby unit was not being utilised at the time of the inspection. However, as noted previously the policy document was out of date. It was important to note that decisions to allow children to stay with their mothers in prison should be based on the best interests of the child (UN Bangkok Rules and UN Convention on the Rights of the Child). Particular efforts should be made to provide appropriate programmes for pregnant women, nursing mothers and women with children in prison.

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

Rating: Generally acceptable performance

The vast majority of prisoners were white British with a small number of prisoners from other racial groups or nationalities. We saw no evidence of particular tensions between different ethnic or nationality groups. Prisoners were treated with dignity. Freedom to practice religion, appropriate food and medical treatment met human rights standards.

Foreign nationals, however, could become isolated and vulnerable due to limited access to translated materials. It was clear that procedures were not very accessible to them, particularly for those who did not speak English. This potentially constituted a barrier for access to legal representation medical services, complaint procedures, and other services, which rely on the ability of a person to communicate. It was noted that at times fellow prisoners were utilised to provide translation for prison staff. Whilst understandable to a degree this could have a serious impact on the right to respect for private life and/ or safety of the prisoners, if it was relied upon totally. Foreign national
prisoners should be given access to professional translation services as and when necessary, but routinely, when matters relating to their sentence, liberation or transfer, to name a few, were being discussed.

There were a number of foreign national prisoners who did not have English as a first language, some of them had a very low level of understanding of English and may well have felt particularly disempowered. Translation services were not sufficiently utilised by staff, which generated frustration amongst this category of prisoners. On checking with the establishment it was concerning to note that less than £120 (see QI 7.7) had been spent on translation services since April 2015. This constituted an important concern and a barrier to communication for foreign prisoners, who were particularly vulnerable. The limited use of formal translation services was a concern.

We did, however, note that some information was available in a number of foreign languages and referred to translation services. However, a number of prisoners informed us that it was not provided to them upon arrival.

There was insufficient written material about the prison available for foreign nationals in a range of languages other than English. For example, there was no information in other languages related to food such as assurances over ingredients.

Email access was available, but given the translation challenges, we advise exploring easier ways of communications for this category of prisoner which ensured respect for family life, while appreciating the need for security and supervision of contact.

Importantly to note, family visits, access to education, vocational training and work and leisure activities all have to be seen from this equality/human rights perspective. The situation of foreign detainees requires sustained attention.

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

Rating: Satisfactory performance

There was generally a respect for prisoners to exercise their religion either alone or in community, including to manifest their religion in worship and observance. Prisoners had good access to Chaplains. Prisoners could celebrate major religious festivals, which were actively promoted.

Food appropriate to the dietary requirements of all faiths represented in the prison was provided, however, some prisoners complained that by the time the food arrived in their House it was not that hot. This was not, however, the experience of the inspectors who dined with the women, on all occasions the food was found to be hot, at the time of serving.

Staff showed confidence in ensuring that they were treating prisoners from all religious groups with dignity, respect and according to their individual needs, however on-going training is recommended as social attitudes and legislation change rapidly.

Consideration should be given to developing education programmes for prisoners who wish to learn about other religions. This approach is proven as a useful tool in breaking down religious and ethnic barriers.
9.10 Prisoners of all genders are treated with dignity, respect and according to their individual needs.

Rating: Not applicable ◯

There were no male prisoners in Cornton Vale.

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

Rating: Satisfactory performance ●

There was a reasonable understanding at all levels of prison staff around sexual orientation policy and procedure. We did not observe any intimidation or bullying by fellow prisoners or staff as a consequence of sexual orientation. However, one prisoner complained that she was subject to separation because of her sexual orientation.

People in prisons under the above characteristics could be in situations of particular vulnerability. It was important that any protection measure given was objective, proportionate and justifiable. Otherwise this could engage Article 3 (ill treatment), 8 (respect for private life) and 14 (prohibition of discrimination) of the European Convention on Human Rights.

In addition, human rights standards recommend that:

- ‘to the extent possible, that all prisoners participate in decisions regarding the place of detention appropriate to their sexual orientation and gender identity’ (Yogyakarta Principles No. 9).

Additional LGBT training would be useful for both staff and prisoners, including on the Yogyakarta Principles, we were not aware of a mandatory SPS training in this area.
STANDARD 10 - ORGANISATIONAL EFFECTIVENESS

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

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

Inspection findings

Overall rating: Satisfactory performance

It was evident that over the last two years or so the Governor and the management team had deployed considerable resources and effort into ensuring that they were working to a coherent plan and that plan was well communicated and understood by staff.

The inspection team became aware, during the inspection, that the senior management team was being reduced by two Unit Managers; any potential negative impact on this reduction on the on-going development of the establishment will be monitored during the follow up process. Whilst the Governor will be supported by a small team in her role developing the strategy for female offenders, it was important that this task does not take up a disproportionate amount of her time and focus of her primary responsibility as Governor in Charge of HMP & YOI Cornton Vale.

It was noted that a small percentage of staff reported to inspectors that they were unsighted on changes and were concerned about the future. Management need to address this issue directly in order to ensure that this potential negative attitude does not adversely or disproportionately impact on the establishment.

Management need to ensure that the wide range of initiatives within Cornton Vale are, and continue to be, appropriately resourced, embedded and communicated in order that the maximum benefit can be achieved and that they become mainstreamed rather than ‘one offs’.

Quality indicators

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

Rating: Satisfactory performance

There were a range of meetings held within the establishment to manage and monitor the day-to-day operational business as well as a strategic delivery plan which followed the SPS wide model.
Having previously identified that there were problems with existing communications methods, a communications group was established by management but led and delivered by 10 First Line Managers. The purpose of this group was to convey a consistent message to all staff during a rolling three month programme. The first quarter had been completed and early feedback from the staff had been positive. During discussions with staff throughout the inspection it was clear that the vast majority acknowledged that they were aware of, and had participated in, this initiative; this approach was seen as a positive development. The communications group approach to the dissemination of information was a practice worthy of sharing.

A significant number of initiatives had been introduced over the last two years and a number of new ones were being planned. However, staff feedback was that too often these initiatives tend to become ‘one offs’ with most staff having limited awareness of the target audience or the benefits to be gained. Additionally, these initiatives were not always built into the continuing regime within the prison. An example of this was when engaging with a group of staff about the reopening of the ‘sensory room’ staff were unsure what was behind its reintroduction and were not sure which prisoners might benefit from it and how; indeed, some staff members did not know how to operate the equipment. It is essential that staff fully understand how best to maximise the benefits of an initiative and have the ability to influence its introduction or removal.

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

Rating: Satisfactory performance

There was evidence that the management team used a wide range of information and data to inform their strategies and objectives. Information sources were used for instance to inform their anti-violence strategy, their family engagement strategy, their community strategy and to measure the performance of the programmes team. Additionally the establishment’s Business Plan was, at least in part, shaped and informed by a number of such sources.

It was encouraging to note that prior to embarking on the communications team initiative an evaluation process was designed and implemented; this demonstrated a clear desire to ensure that resources were not wasted and were focused on producing the desired outcomes. It was also evident that the follow on phase of this initiative had been informed and adapted as a result of the feedback received.

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

Rating: Generally acceptable performance

A number of staff groups and individuals were engaged with during the inspection by several inspectors.

The majority of staff were clear about their roles and responsibilities and how they could make a difference and possessed a reasonable understanding of the roles and responsibilities of their colleagues, in other parts of the establishment.
Whilst there was undoubtedly a wide range of training undertaken within the establishment there was no evidence that on-going refresher training or awareness sessions were built into the programme. Many staff reported that whilst they had undertaken a specific training activity it had been some time ago and they expressed the view that they would welcome and benefit from follow up or on-going training. This was especially commented upon by the Ross and Dumyat staff group.

Succession planning was not integrated within the staff rotation policy, therefore, over time the training and awareness of the staff group was denuded as those staff joining a group did not undertake ‘area specific’ training and were therefore not fully prepared or able to work in their new environment. This was most notable within Ross House where staff rotating into the area did not automatically or routinely receive training such as Mental Health First Aid, trauma informed engagement or awareness of how personality disorders may affect how an individual might react or respond to different strategies or approaches.

It was extremely encouraging to note that the staff within Ross House had a strong drive and desire to expand their knowledge and skills in order to improve the outcomes for those located within the House.

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

Rating: Satisfactory performance

There was a good wide range of means by which the good work the staff undertake was recognised and rewarded within the establishment. In the last year or so staff have received commendations from the Cabinet Secretary, the Chief Executive and the Governor. It was evident that the establishment openly celebrated the successes and contributions of individuals and groups of staff.

A number of staff raised their concerns that they did not think that poor performance was always appropriately addressed and stated their concern that the appraisal system was ineffective in dealing with those who were poor performers.

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

Rating: Satisfactory performance

Through questioning of and discussion with groups of staff and individuals it was clear that a high level of importance had been placed on ensuring that staff were given the information that allowed them to have an insight to and an understanding of other areas of the prison and how best to work with each other.

The majority of staff were able to articulate how the work or activity they were involved in linked in or supported the work of their colleagues, however, as previously mentioned in QI 10.1 a small group of staff stated that they did not know what other areas were doing. The work undertaken by the TSOs was an example; most staff were able to name the individual staff involved and to provide a decent overview of their role and understood how they could assist them in undertaking their role more effectively through quality narratives or PR2 content, yet a small number of staff inferred they did not know about the TSOs or the work they undertook.
10.6 Each functional staff group understands and respects the work undertaken by each of the other functions.

Rating: Generally acceptable performance

As previously stated there was evidence to support the fact that there was a good sense of what other areas and teams were responsible for within Cornton Vale.

However, an area of concern that emerged during the inspection was in relation to what appeared to be an over emphasis on the operational needs of the establishment. It was clear that at times activities were planned without sufficient consideration of the needs or expectations of partner agencies or indeed the prisoners.

During the inspection an intelligence led search was undertaken within a residential area. This activity, whilst localised, had a significant impact on the functioning of the whole prison as the establishment effectively came to a standstill for a number of hours. The planning of this activity did not appear to include partners such as the NHS resulting in the cancellation of scheduled clinics and consultations, thereby wasting valuable time and resources. A consultant Psychiatrist who was on site that day saw none of the patients that he was in attendance to see. The impact of this activity could have been minimised had the NHS and other partners been involved in the planning of this activity thus ensuring that their core activities were maintained or suitably rearranged.

On another occasion there was an incident within a cell; whilst this was potentially a serious situation that rightly required the focus and attention of the staff and managers at the outset, the effects were felt widely across the establishment beyond the initial phase of the incident. The prison came to a standstill for a period, prisoners arriving back from court were held outside the establishment, in the back of G4S vehicles, for an extensive period with no access to toilets. Additionally other core services such as health care were interrupted. Whilst managing such a potentially serious incident must take priority, it should not adversely impact on the delivery of key services unless there were exceptional circumstances.

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

Rating: Good performance

More than most establishments Cornton Vale has had to react and respond to the changing profile of the prisoners they hold and the establishments they need to co-ordinate with. In recent years women have been located in a number of SPS establishments, necessitating the development and redevelopment of close working relationships between sites.

An example of the challenges that this has placed upon Cornton Vale relates to the time that prisoners were decanted to HMYOI Polmont to facilitate the upgrading of residential areas within Cornton Vale. This required staff from Cornton Vale to work very closely with Polmont staff and management for an extended period. Speaking with the staff and prisoners, who were involved in this activity they all openly acknowledged that they gained something from the experience and that it had been a positive experience.
All prisoners from the central belt were initially located in Cornton Vale upon sentencing. Once sentenced, prisoners might transfer to HMP Edinburgh and HMP Greenock. This required constant and on-going contact to ensure that the individual prisoners were located in the most suitable location for them. This required the building and maintaining of a strong and resilient working relationship between staff and managers in all these locations. The only exception to this being the Grampian Regional Unit which received prisoners straight from court for the Northern Community Justice Area; however, prisoners might transfer from Grampian to Cornton Vale for programmes or to receive specialist support.

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

Rating: Generally acceptable performance

Cornton Vale had a number of key partners, many of whom worked within the prison and had responsibilities for prisoners upon release, such as the NHS, Social Work and the Shine Mentoring team.

The prison evidenced effective partnership working with the NHS, prison based and community based criminal justice social work and Police Scotland. The Governor and members of the management team attended and played an active part in a range of external meetings, evidence of this being demonstrated via copies of meeting agendas, minutes and the articulation of those that attend of the subject matter discussed and decisions made.

It was disappointing to note that the staff and prisoners alike did not view the Shine Mentoring Scheme in particularly positive terms. It was felt that referrals were not picked up and as a result opportunities to impact positively on the outcomes for prisoners were being missed. One group of prisoners stated that they did not trust the Shine Mentors, however, on further questioning the issue was that they were not able to work with the mentors long enough to build a trusting relationship. This situation has undoubtedly been aggravated by the fact that the Shine co-ordinator operated out of the Family Centre & Help Hub, which was outside the establishment. Additionally management needed to ensure that the prisoner group had a better understanding of the different roles and responsibilities of the TSOs and the Shine mentors as there was confusion in their minds and this was an inhibitor to building strong and trusting relationships.

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

Rating: Good performance

The establishment was unique in that it had a Unit Manager specifically and solely charged with the responsibility of developing a community engagement strategy and for building and nurturing links with the wider community. Whilst this role was relatively new the community engagement plan they are responsible for appeared to be extensive and constantly evolving.
As noted in QI 10.8 and QI 8.2 it was critical that work was done to improve the understanding of the prisoners regarding the roles and responsibilities of the TSOs and Shine mentors.

The Family Centre & Help Hub had made significant and important inroads to developing and maintaining relationships with community partners. In addition to the SPS staff involved, the Family Centre & Help Hub was supported by over 50 volunteers from the local community, which was impressive. Whilst the facility’s main aim was supporting the children and families of those held in Cornton Vale it also provided a safe and pleasant space for agencies, or SPS staff, to meet women immediately upon release thus ensuring, where possible, that their return to their communities was as well managed and supported as possible.

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

Rating: Good performance

The management team provided examples of a wide range of ‘good news stories’ that had been shared with SPS HQ many of which were covered either within the content of the SPS’ Intranet or were published in The Gallery magazine, the periodic SPS publication for prisoners. Members of the management team commented that whilst they had been successful in attracting positive coverage from local and national print media, on a number of occasions recently, they felt that the negative stories, when published always appeared to be more prominent within the papers.

The level of activity and focus aimed at attracting positive press and media coverage was something that appeared to have received a high degree of management focus over the past year or two, especially by the Governor.
### Prison population profile on 28 September 2015

<table>
<thead>
<tr>
<th>Status</th>
<th>Number of prisoners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Untried Male Adults</td>
<td>0</td>
</tr>
<tr>
<td>Untried Female Adults</td>
<td>55</td>
</tr>
<tr>
<td>Untried Male Young Offenders</td>
<td>0</td>
</tr>
<tr>
<td>Untried Female Young Offenders</td>
<td>2</td>
</tr>
<tr>
<td>Sentenced Male Adults</td>
<td>0</td>
</tr>
<tr>
<td>Sentenced Female Adults</td>
<td>150</td>
</tr>
<tr>
<td>Sentenced Male Young Offenders</td>
<td>0</td>
</tr>
<tr>
<td>Sentence Female Young Offenders</td>
<td>8</td>
</tr>
<tr>
<td>Recalled Life Prisoners</td>
<td>1</td>
</tr>
<tr>
<td>Convicted Prisoners Awaiting Sentencing</td>
<td>12</td>
</tr>
<tr>
<td>Prisoners Awaiting Deportation</td>
<td>0</td>
</tr>
<tr>
<td>Under 16s</td>
<td>0</td>
</tr>
<tr>
<td>Civil Prisoners</td>
<td>0</td>
</tr>
<tr>
<td>Home Detention Curfew (HDC)</td>
<td>18 (not included in total)</td>
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<table>
<thead>
<tr>
<th>Sentence</th>
<th>Number of prisoners</th>
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<tbody>
<tr>
<td>At court</td>
<td>3</td>
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<tr>
<td>Convicted awaiting sentence</td>
<td>12</td>
</tr>
<tr>
<td>Untried/ Remand</td>
<td>57</td>
</tr>
<tr>
<td>0 – 1 month</td>
<td>4</td>
</tr>
<tr>
<td>1 – 2 months</td>
<td>4</td>
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<tr>
<td>2 – 3 months</td>
<td>2</td>
</tr>
<tr>
<td>3 – 4 months</td>
<td>7</td>
</tr>
<tr>
<td>4 – 5 months</td>
<td>4</td>
</tr>
<tr>
<td>5 – 6 months</td>
<td>8</td>
</tr>
<tr>
<td>6 months to less than 12 months</td>
<td>28</td>
</tr>
<tr>
<td>12 months to less than 2 years</td>
<td>31</td>
</tr>
<tr>
<td>2 years to less than 4 years</td>
<td>26</td>
</tr>
<tr>
<td>4 years to less than 10 years</td>
<td>16</td>
</tr>
<tr>
<td>10 years and over (not life)</td>
<td>7</td>
</tr>
<tr>
<td>Life</td>
<td>19</td>
</tr>
<tr>
<td>Order for Lifelong Restriction</td>
<td>1 (not included in total as covered in figures above)</td>
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</table>

<table>
<thead>
<tr>
<th>Age</th>
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<tr>
<td>Minimum age:</td>
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<tr>
<td>Under 21 years</td>
<td>11</td>
</tr>
<tr>
<td>21 years to 29 years</td>
<td>68</td>
</tr>
<tr>
<td>30 years to 39 years</td>
<td>79</td>
</tr>
<tr>
<td>40 years to 49 years</td>
<td>44</td>
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<tr>
<td>50 years to 59 years</td>
<td>18</td>
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<tr>
<td>60 years to 69 years</td>
<td>4</td>
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<tr>
<td>70 years plus</td>
<td>1</td>
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<tr>
<td>Maximum age:</td>
<td>73</td>
</tr>
<tr>
<td>At court (ages not included)</td>
<td>3</td>
</tr>
</tbody>
</table>

| Total number of prisoners                     | 228 (plus 18 HDC)   |

Data supplied by SPS.
Glasgow Sheriff Court

As part of the inspection of HMP & YOI Cornton Vale a visit was made to Glasgow Sheriff Court (GSC), as it manages the highest number of females from Cornton Vale.

On the day of the visit GSC received approximately 110 custodies of which 15 were women.

Conditions for women held in GSC, when viewed from a human decency perspective, were a major concern, the facilities available were not fit for purpose and did not reflect positively on a 21st Century criminal justice system.

The conditions for women within GSC were appalling, women moving to and from the court custody unit to the court itself passed the male toilets, photograph below.

These facilities were unscreened, odorous and clearly visible from the hallway, as were any individuals using the facilities. The female cellular area was small and contained a small number of holding rooms which meant that five or six females were located within each cell which was far from ideal, especially given the number of women that they had to manage within this area with addiction or mental health issues. Additionally this area had only one toilet which was screened from the room but did not have a full door which provided only minimal privacy which was degrading and inhumane for all concerned.
On occasion women about to appear in court were held in cells that had no ‘call buttons’ for attracting staff attention or for seeking their assistance. Many of the women were vulnerable and may have been suffering from mental health or behavioural issues and an inability to attract the attention of staff was concerning. Additionally if a female was held in one of these holding cells the only toilet facilities within the cell was a male urinal. These cells were also extensively covered in graffiti, much of which was offensive.

Holding cell potentially used by females

Graffiti on ceiling

Graffiti on walls

Photographs courtesy of Jim Farish
Inspection Team

David Strang, HM Chief Inspector of Prisons
Jim Farish, Deputy Chief Inspector of Prisons
Ian Macfadyen, Inspector of Prisons
Malcolm Smith, Inspector of Prisons
Alan Forman, Business Manager

Katie Lamb, Care Inspectorate
June Lynch, Care Inspectorate

Ian Beach, Education Scotland
Dr John Bowditch, Education Scotland
Steven McPherson, Education Scotland

Lindsay Armour, Guest Inspector
Allyson Campbell, Guest Inspector
Gordon McKeans, Guest Inspector
Ruth Parker, Guest Inspector

Cath Hailey, Healthcare Improvement Scotland (HIS)
Stephen Heller-Murphy, HIS
Irene Robertson, HIS
Ian Smith, HIS
Justine Craig, NHS Tayside

Paul Noyes, Mental Welfare Commission for Scotland

Diego Quiroz, Scottish Human Rights Commission
### Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
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<tr>
<td>ACT2Care</td>
<td>Scottish Prison Service suicide prevention strategy</td>
</tr>
<tr>
<td>CCTV</td>
<td>Close circuit television</td>
</tr>
<tr>
<td>CJSW</td>
<td>Community Justice Social Work</td>
</tr>
<tr>
<td>CSRA</td>
<td>Cell Sharing Risk Assessments</td>
</tr>
<tr>
<td>EACS</td>
<td>Enhanced Addictions Casework Service</td>
</tr>
<tr>
<td>ECR</td>
<td>Electronic control room</td>
</tr>
<tr>
<td>FCO</td>
<td>Family Contact Officer</td>
</tr>
<tr>
<td>GP</td>
<td>General Practitioner</td>
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<td>GPA</td>
<td>Generic Programme Assessment</td>
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<td>GSC</td>
<td>Glasgow Sheriff Court</td>
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<tr>
<td>HDC</td>
<td>Home detention curfew</td>
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<tr>
<td>HMP</td>
<td>Her Majesty's Prison</td>
</tr>
<tr>
<td>HMIPS</td>
<td>Her Majesty's Inspectorate of Prisons for Scotland</td>
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<tr>
<td>ICM</td>
<td>Integrated case management</td>
</tr>
<tr>
<td>LGBT</td>
<td>Lesbian, gay, bisexual and transgender</td>
</tr>
<tr>
<td>ILUs</td>
<td>independent living units</td>
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<tr>
<td>LSCMI</td>
<td>Level of service/case management inventory</td>
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<tr>
<td>MAPPA</td>
<td>Multi-Agency Public Protection Arrangements</td>
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<tr>
<td>OST</td>
<td>opiate substitute treatment</td>
</tr>
<tr>
<td>PBSW</td>
<td>Prison based social worker</td>
</tr>
<tr>
<td>PPE</td>
<td>personal protective equipment</td>
</tr>
<tr>
<td>PER</td>
<td>Prisoner Escort Record</td>
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<tr>
<td>PR2</td>
<td>The SPS electronic prisoner records system – version 2</td>
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<td>PSS</td>
<td>Prisoner supervision system</td>
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<td>PTIs</td>
<td>Physical Training Instructors</td>
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<td>Quality Indicator</td>
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<td>RMT</td>
<td>Risk management team</td>
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<td>SOP</td>
<td>Standard Operating Procedure</td>
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<td>Scottish Prison Service</td>
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<td>Scottish Qualifications Authority</td>
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<td>Separation and reintegration unit</td>
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<td>Short term case management</td>
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<td>Scottish vocational qualification</td>
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<td>TDOU</td>
<td>Tactical Dog Operations Unit</td>
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<td>Throughcare Support Officers</td>
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<td>YOI</td>
<td>Young Offenders Institution</td>
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<td>YOs</td>
<td>Young Offenders</td>
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HM Inspectorate of Prisons for Scotland is a member of the UK’s National Preventive Mechanism, a group of organisations which independently monitor all places of detention to meet the requirements of international human rights law.