



HMIPS

HM INSPECTORATE OF
PRISONS FOR SCOTLAND

INSPECTING AND MONITORING

REPORT ON HMP INVERNESS

FULL INSPECTION

13–24 NOVEMBER 2017

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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.prisoninspectatescotland.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 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.

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

2. A written record of the evidence gathered is produced by the Inspector allocated each individual standard. 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 Inverness is situated close to the city centre of Inverness.

Role

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

Brief history

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

Accommodation

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

In addition to the two main accommodation halls, there are three smaller wings.

Design capacity

The design capacity is 98. At the time of the inspection the prison held 104. Of this number 27 were adult untried prisoners. Fifty five were sentenced prisoners serving less than four years, five were sentenced prisoners serving four to 10 years, and two were life sentence prisoners. There were also 15 prisoners who were convicted awaiting sentence.

Date of last inspection: 10 – 18 February 2014

Healthcare provider: NHS Highland

Learning provider: Fife College

HMP Inverness Overview by HM Chief Inspector of Prisons for Scotland

Introduction

HMP Inverness is one of the oldest remaining prisons in Scotland, having been opened in 1902. Whilst efforts have been made to maintain its cleanliness and upkeep, some areas are no longer fit for purpose. Access for prisoners with disabilities is limited and facilities in the Health Centre fall short of what is required for the delivery of modern health services.

The last inspection of HMP Inverness was conducted in 2014. This inspection was carried out in November 2017. I am grateful to the guest inspectors from Healthcare Improvement Scotland, the Care Inspectorate, Education Scotland, the Scottish Human Rights Commission and other prisons in Scotland for their assistance with this inspection.

Inspection Findings

In relation to the ten Standards for Inspecting and Monitoring Prisons in Scotland used to inspect HMP Inverness, three were assessed as satisfactory and seven as generally acceptable.

Many of the prisoners in HMP Inverness were well known to the staff, having served a number of sentences there. Throughout the inspection, it was clear that there were positive relationships between staff and the prisoners, which contributed to a sense of safety and order in the prison. I was impressed with the level of commitment and flexibility shown by the staff to meet the needs of the prisoner population. Staff in the Reception area in particular demonstrated a professional approach in their dealings with all prisoners admitted to the prison.

In a number of areas of prison life, it was apparent that staff relied on well-intentioned informal processes in their dealings with prisoners. Whilst this may be understandable where the prisoners are well known to the staff, there are disadvantages to such an approach. Prisoners who are in the prison for the first time and who are unfamiliar with the routines may miss out on having their needs met. More importantly, there is a risk that the lack of documented processes and absence of recorded decision making may leave staff vulnerable to challenge and without evidence to support their actions.

It was disappointing to note that there had been a very high turnover of senior leaders in HMP Inverness since the last inspection in 2014. The Governor in Charge was the fifth in as many years. Continuity of leadership is an important factor in developing relationships within the prison and providing consistency of direction for the staff. Such a rate of change of Governors had clearly been unsettling for the prison and had contributed to a lack of progress since the previous HMIPS inspection report. The situation was compounded by the fact that there was a disproportionately high number of staff in “acting up” positions – two of the four senior managers and half of the First Line Managers. This situation is compounded by the need to develop plans for the new HMP Highland.

HMP Inverness had insufficient places to accommodate all the prisoners from the local authority areas in the north of Scotland. As a result, there was a high turnover of prisoners as they were regularly transferred to prisons in other parts of Scotland. These transfers often happened at short notice, without the ability to put plans in place. This inevitably disrupted continuity of medical care and participation in work and other activities in the prison. Processes which should have been in place to support prisoners, such as Community Integration Plans, were lacking and there had been no Risk Management Team meetings in the nine months prior to the inspection. Greater commitment to effective Integrated Case Management was required. There was an evident disconnect between the residential staff team and those working from the Links Centre. Senior management within the prison have a responsibility to address these shortcomings, in particular within the Offender Outcomes area.

There were no female prisoners in HMP Inverness at the time of the inspection. However there was a dedicated area that could be utilised to accommodate them. I would encourage the SPS and HMP Inverness to make use of this facility to allow female prisoners to be closer to their family and friends, especially as they near release.

In general, prisoners were positive about the provision of healthcare and there was good access to a range of specialist services. The lack of adequate facilities in the Health Centre and the need to cover for staff absences provided particular challenges for the Healthcare Team. There were concerns about the lack of confidentiality for patients relating to their healthcare needs and treatment. Rooms in the Links Centre used for interviews were without ceilings and therefore not soundproofed.

There was a limited range of work activity available for prisoners in HMP Inverness, most working in the services essential to the running of the prison. The absence of a systematic scheduling process meant that it was not clear where prisoners were meant to be, or a clear audit of purposeful activity. The small gymnasium was popular with the prisoners and there were good relationships between prisoners and staff.

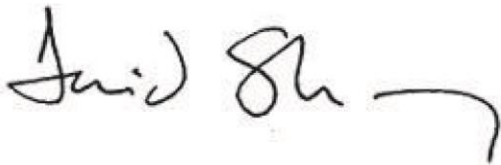
Visits were available for families on every day of the week. Given the distances that families had to travel to the prison, visit sessions of only 30 minutes seemed unnecessarily short. A new Prison Visitors Centre run by Action for Children had opened in July 2017 and was located in the centre of Inverness next to the railway station. Plans were in place to increase the awareness and use of the Visitors Centre to support families visiting the prison.

As in other prisons in Scotland, access to benefits and to housing remained a challenge for people leaving prison. The dedicated Throughcare Support Officers (TSOs) were able to support a number of prisoners, but their capacity was inevitably limited by the geography of the region. It was encouraging to note that it was possible to support prisoners in their applications for Universal Credit through a dedicated internet link with DWP.

Next Steps

This report identifies a number of areas of good performance which are worthy of sharing and which I hope will be taken up by other prisons in Scotland. It also highlights where improvements can be made. I look forward to seeing these improvements introduced through the prison's future plans. In relation to the health and wellbeing findings, NHS Highland's action plan will continue to be monitored by HMIPS and Healthcare Improvement Scotland.

HMIPS will continue to monitor the progress in HMP Inverness, through regular monitoring visits by Independent Prison Monitors (IPMs).

A handwritten signature in black ink, appearing to read 'David Strang', with a long horizontal flourish extending to the right.

David Strang
HM Chief Inspector of Prisons for Scotland

14th March 2018

Summary of Inspection Findings

Standard 1 Lawful and transparent custody

Generally acceptable performance	
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Standard 2 Decency

Generally acceptable performance	
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Standard 3 Personal safety

Satisfactory performance	
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Standard 4 Health and wellbeing

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

Satisfactory performance	
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Standard 6 Respect, autonomy and protection against mistreatment

Satisfactory performance	
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Standard 7 Purposeful activity

Generally acceptable performance	
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Standard 8 Transitions from custody to life in the community

Generally acceptable performance	
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Standard 9 Equality, dignity and respect

Generally acceptable performance	
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Standard 10 Organisational effectiveness

Generally acceptable performance	
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Good Performance

There were six good performance Quality Indicators: 1.1, 1.2, 1.5, 2.8, 4.10 and 6.1.

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 co-operates fully with agencies which have powers to investigate matters in prison.

Inspection findings

Overall Rating: Generally acceptable performance 

Grading this standard was challenging as there were a number of areas where the staff clearly undertook their role with professionalism, care and humanity, whilst working in a physical environment that was far from satisfactory. However, one aspect of significant concern was an apparent informality of process that could have potentially significantly increased risk levels.


A Cell Sharing Risk Assessment was undertaken where significant potential risks were identified, yet the two individuals were cleared to share a cell. The staff involved, recognising the potential issues had undertaken to speak to each individual prior to making their decision and noted their observations on PR2, yet took the decision that cell sharing was appropriate. To compound this, the individuals continued sharing a cell for a period of two weeks.

It was very evident that the Reception staff were dedicated and professional, but above all they were caring and compassionate. New arrivals first encounter at HMP Inverness was with Reception staff where they were treated with humanity, care and professionalism.

The main administrative functions, within HMP Inverness, worked in a supportive and collaborative manner with other functions. The general administration functions and the operational side of the establishment were well integrated. This was noticeable in a number of areas, particularly in relation to the management and oversight of warrants and key dates for prisoners.


Quality Indicators

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

Rating: Good performance 

The Reception staff undertook their roles with care, compassion and professionalism. Whilst they had previously encountered many of the individuals that arrived at Reception, they made no assumptions and took them through each stage of the process. Despite the physical limitations of the buildings they provided the level of care that was appropriate to the individual. Maintaining confidentiality was challenging due to the layout of the area, however staff did what they could to mitigate this where possible. All prisoners' identities were confirmed appropriately and duly recorded on PR2. The Reception staff and the general administration staff worked well together and the processes applied were robust and resilient.

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

Rating: Good performance 

Staff in Reception took care to ensure that they were applying the correct criteria to each admission. In doing so they ensured that prisoners were appropriately classified and located in a suitable location. It was noted that Reception, Residential and NHS staff worked well together to ensure that individuals were appropriately classified and located. All three groups of staff ensured that the relevant sections of PR2 were updated as required. It should be noted that a good number of those admitted were complex cases, many suffering from mental health or addiction issues which necessitated close collaboration between different staff groups.

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: Satisfactory performance 

As noted in QI 1.1 and 1.2, individuals were appropriately assessed upon arrival and allocated to an appropriate area of the establishment. Staff worked around the limitations of the physical environment as effectively as possible. However it was often the case that prisoners were displaced into other areas, resulting in some quite complex regime planning, particularly in B Hall.

The number of offence related protection prisoners was high and this created the biggest single challenge for staff and management. HMIPS were informed that it was extremely challenging to locate these individuals in establishments that were better equipped to deal with their needs. SPS management should put in place procedures to ensure that offence related protection prisoners are moved to an appropriate location as soon as possible after conviction.

Additionally the SPS must bring forward population management plans to address the needs of offence related protection prisoners, which will alleviate the pressure on establishments not equipped to hold this category of prisoner and expedite their access to appropriate offence related programmes.

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

Rating: Poor Performance 

It was clear that staff understood the Cell Sharing Risk Assessment (CSRA) process and actively engaged with it. However, Inspectors came across a particularly concerning situation which was immediately brought to the attention of management. A situation had arisen where a non-smoking Muslim prisoner was sharing a cell with an individual who smoked and had been identified on PR2 as a racist. Staff had identified these issues and spoken with the individuals, however took the decision to place them in the same cell, a situation that prevailed for a period of two weeks. Whilst this decision did not result in any apparent issues, it is HMIPS' opinion that it was a high risk decision given the information that was available, and the situation should not have been allowed to continue for such duration. Additionally this situation should have been escalated to senior management at the earliest opportunity for verification.

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

Rating: Good performance 

The staff in Reception were trained and confident in calculating all but the most complex of warrants. When such a warrant was received the staff within the general administration area were appropriately trained and provided assistance to Reception staff as and when required. With the exception of the more complex cases, prisoners were informed of their key dates within Reception, at the time of their arrival. Where this was not achievable, the following day administration staff informed the hall staff of the critical dates, and hall staff informed the individual. Staff in all areas had a strong understanding of their responsibilities in this regard, and knew where support was available if required.

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

Rating: Generally acceptable performance 

It was clear that the establishment's approach to Health and Safety, Fire Safety, Food Hygiene etc. was structured and supported by management. What was less evident was evidence that such activities were 'embedded' within the core duties and responsibilities of the wider staff group. In the main staff saw these issues as being the responsibility of management or the dedicated advisors, rather than being one of their core responsibilities. Management must ensure that they develop an approach to these issues where staff are made aware of their individual responsibilities for

maintaining a safe environment for all those working, living and visiting HMP Inverness.

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: Generally acceptable performance 

HMP Inverness deployed a number of approaches to oversee and monitor action plans derived from inspection, audit or monitoring findings. They had recently changed from a purely self-auditing approach to one supported by a dedicated FLM.

It was noted that the establishment had received a number of positive external audits on key processes. However, the volume of internal audits, currently running at 60 per annum, appeared to place a significant pressure on the resources allocated to this task locally. Management must ensure that the resources they have dedicated to this are appropriate for the scale of the task.


STANDARD 2 - DECENCY

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: Generally acceptable performance 

The challenges of being housed in an old building were apparent in HMP Inverness. Although the building was kept clean, parts of the fabric of the building were showing signs of age. The majority of prisoners shared cells which resulted in cramped living conditions with limited space for essential aspects of daily living, such as eating meals.

The building also posed some challenges in terms of accessibility for those with limited mobility or were wheelchair bound, this must be addressed.

Prisoners regularly being transferred to other establishments caused additional pressure for some of the work parties, such as the cleaning and kitchen parties. That said, the flexibility and commitment of staff working in the establishment was evident, and there was ample evidence of good relationships between staff and prisoners. It was these good relationships and the clear commitment of staff that resulted in core services being provided.

Quality Indicators

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

Rating: Poor Performance 

The majority of double cells were cramped and there was insufficient space for two people to eat in an appropriate location. In A and B Hall one person was required to sit next to the wash-hand basin to eat. Much of the cell furniture was old and required replacement. The single occupancy cells for enhanced prisoners in C Hall were in better condition, but were still cramped.

The two safer cells in B Hall gave Inspectors cause for concern. Whilst appreciating that people were held in them to ensure their safety, the cells had only a mattress on

a concrete plinth and the toilet did not have a screen around it to offer privacy. The cells in the SRU were clean and appeared to have been recently painted but again the toilet was unscreened, however, the lack of dedicated staffing and configuration of the facilities was a cause for concern.

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: Satisfactory performance 

The establishment was clean and passmen were observed cleaning in all areas. The staff responsible for the cleaning regime provided evidence of a comprehensive programme of training provided to prisoners in the cleaning party. This included manual handling, safe use of chemicals and infection control. A robust process was followed using colour coding to prevent cross-contamination.

Despite the robust processes in place, Inspectors had concerns about potential infection control issues arising from individuals eating in their cells, especially where toilets were unscreened.

Minor biohazards were cleaned by prisoners who were trained to do so, and they received a small financial bonus for doing so. More serious biohazards were managed by an externally contracted company who arrived within a few hours of being contacted.

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: Satisfactory performance 

Inspectors witnessed prisoners requesting and being provided with cleaning products to clean their cell. There was a robust process in place for cleaning cells that were vacated. There was a form that listed the tasks that should be completed and the form was signed by the passman and the staff member who checked it.

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

Rating: Generally acceptable performance 

The beds in all of the shared cells were bunk beds. Mattresses were standard issue and some prisoners reported they were not very comfortable. Inspectors saw evidence of people having more than one in order to try and create comfort. Staff and prisoners seemed clear on the process for requesting a replacement 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: Satisfactory performance 

The bedding was laundered regularly. Staff informed Inspectors that on admission prisoners were provided with clean bedding along with a set of clean towels. As with some other establishments, prisoners could not supply their own bedding; Inspectors were informed that this was due to fire safety standards. Sheets, pillow cases and duvet covers were replaced on an annual basis to ensure they retained the necessary fire retardant levels.

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 

Prisoners were provided with basic toiletries on admission. There was also a supply held on Halls for people who may require them on an on-going basis. On admission, prisoners were issued with three new pairs of boxer shorts and three new pairs of socks.

Prisoners could purchase additional or different toiletries from the canteen list. The canteen list appeared to be regularly updated.

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

Rating: Generally acceptable performance 

Each cell had a toilet but as commented on under QI 2.1 the provision was in a number of cells far from ideal. There was a wash hand basin in each cell, which also appeared to be used for washing other items including cutlery. Prisoners were able to access a shower every day, and there were shower facilities in each of the halls.

If someone was due at court or had an appointment early the next day, they were able to shower the night before or if possible staff would open their cell early.

During the inspection there was an issue with the hot water and prisoners reported that there had been similar issues on previous occasions.

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: Good performance



On admission to the establishment prisoners were given clean clothing, they also had access to warm weatherproof jackets for outside exercise during inclement weather. The service provided by the laundry was particularly good. Prisoners listed any personal items to be laundered then signed a form which accompanied it. Prisoners working in the laundry double checked the items against the list and reported any discrepancies. Once laundered they were delivered back to the prisoner's cell.

One aspect of note however was that the frequent transfer of prisoners caused difficulty in maintaining a full complement in this and other work parties.

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

Rating: Generally acceptable performance



The food menu changed over a three week cycle and was based on a healthy eating philosophy.

Prisoners came to the serving area in B Hall to collect their meal, the food was observed to be good quality, not suffering from any degradation by being stored in heated trolleys, as is the case in most other establishments. It was disappointing to note that there was no opportunity for communal eating as all prisoners were required to eat in their cell. The prisoners observed serving the food showed consideration and had an awareness of individual need. On more than one occasion they directly assisted people to get their food.

Inspectors were informed that all staff working in the kitchen either had an SVQ Level 2 Qualification (or equivalent) in Food and Drink preparation. In addition they had completed an allergy awareness qualification. The kitchen work party experienced the same challenge presented by large numbers of transfers.

2.10 The meals served to each prisoner conform to their dietary needs, cultural or religious norms.

Rating: Satisfactory performance



Halal and vegetarian options were available at each meal and were clearly marked on the menu. The kitchen evidenced partnership working with colleagues in healthcare for those who required a particular diet for medical conditions.

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: Satisfactory performance ●

It was encouraging to note that both staff and prisoners felt that the positive personal relationships between them was one of the main reasons for the general sense of safety and good order in HMP Inverness. Inspectors from all disciplines commented that positive interactions between staff and prisoners were evident across the establishment.

Unfortunately, staff and prisoners reported that the recent influx of, what they referred to as “Spice” or Novel Psychoactive Substances (NPS) but referred to by management as unknown substances, had created some uncertainty and anxiety within the establishment. It was clear that in recent weeks staff and prisoners had witnessed individuals acting in an unusual and unpredictable manner, and it had been put down to the effects of these “unknown substances”. Staff and prisoners reported that it was their belief that it was, in the main, entering the prison by means of paper soaked in the substance arriving in prisoners’ mail. We would encourage SPS management to establish a clear and consistent approach to the management and handling of what would appear to be an emerging issue across the Scottish prison estate.

HMP Inverness is a small establishment that was dealing with a complex mix of different prisoner categories. Despite its small size it was encouraging to note that staff managed this complex environment in a fair and equitable manner. Each distinct group, despite their sometimes dispersed locations within the establishment, had good access to the full range of activities on offer. HMIPS often witness the smaller or more challenging groups of prisoners being disadvantaged, that was not the case in HMP Inverness. Staff and management should be commended for their approach and the outcomes they have achieved in this regard.

Of particular note was the positive manner in which prisoners were received and managed during the initial period of their stay in HMP Inverness. The Reception and NHS staff worked closely in what can only be described as a challenging and less than satisfactory physical environment. Prisoners were received by staff who understood their role and the immediate care they received from NHS staff was compassionate and considered.

Finally, yet again HMIPS have to report that the lack of a national Anti-bullying strategy has created a situation where there is no clear way to review an establishment's management of those who bully or those subject to bullying. HMIPS are encouraged to note, and have received assurances, that SPS HQ intend to publish a revised Anti-bullying strategy during the first half of 2018. HMIPS would encourage SPS to ensure that it is in place as early as possible as staff and prisoners deserve to know how such instances should be addressed, managed and reviewed.

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 

It was evident throughout the establishment that the relationships between staff and prisoners were positive. During focus groups prisoners were asked if they felt safe in HMP Inverness, and their resounding response was yes. On further enquiry they attributed much of that sense of safety to the relationships they had with staff. It was noted that staff had developed an approach to managing different categories of prisoners which was controlled and safe, yet offered equality of access to the regime, even when they were displaced within the establishment. This was particularly encouraging to see as displaced prisoners in many other establishments often have impoverished access to the regime. Management and staff should be applauded for their approach.

Prisoners and staff both reported concerns and anxiety about the recent impact of what they described as 'Spice', which is more generally described as NPS, being introduced into the establishment, and the effect it had had on the regime following a recent incident. This is a common emerging theme from recent inspections, where staff and prisoners have expressed concerns about how the unpredictability of prisoners who had allegedly consumed NPS had adversely affected the sense of safety and order in establishments.

SPS HQ must undertake some research into the effects of NPS and/or other unidentifiable substances on the atmosphere, stability and levels of tension within their prisons.

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

Rating: Generally acceptable performance 

As noted in QI 1.6, Health and Safety was taken seriously by management, and the staff allocated responsibility for monitoring compliance were knowledgeable and dedicated. However, the fact that the general staff group does not necessarily see it as a core part of their role was somewhat concerning. Management need to ensure that work is undertaken to embed Health and Safety awareness, understanding and

responsibility within every role within the establishment. That said, the establishment was well maintained and the Health and Safety Co-ordinators were knowledgeable and felt supported by management.

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

Rating: Satisfactory performance ●

A full range of Safe Systems of Work were available, and were altered and adapted as required. This was not a particularly onerous task in HMP Inverness as the range of activities was significantly narrower than that available in other SPS establishments.

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

Rating: Satisfactory performance ●

Positive interactions and relationships were evident throughout the establishment, and this was undoubtedly a major factor in the general sense of calmness, safety and order that was described by staff and prisoners alike. From the point of arrival in Reception, prisoners were dealt with in a dignified manner. Where a more robust approach was deemed necessary this was achieved primarily through good interpersonal interactions. Records showed that where force had been used it was de-escalated at the earliest opportunity. Removal from association was utilised within HMP Inverness, being undertaken in line with the legal requirements and what appeared, from the records that were checked, to be for the minimum appropriate duration.

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

Rating: Satisfactory performance ●

Reception and NHS staff worked well together to ensure that individuals arriving were appropriately assessed, and where necessary managed under the “Talk to Me” Strategy. Reception staff made sure that individuals were provided with the information they required for their initial period in custody, and residential staff augmented that information once they arrived in the Hall. Management should ensure that information is provided in a format and language that is accessible for those who do not speak English or who may have difficulty reading.

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 ●

Staff were knowledgeable in the “Talk to Me” strategy that is deployed should someone be showing signs of being low in mood or potentially suicidal. Records

showed that case conferences were appropriately convened and plans were developed on an individualised basis. Where an individual had self-harmed or was implying they may self-harm, a multi-disciplinary approach was adopted and plans were put in place to support the individual. Management should ensure that staff fully understand the difference between self-harm and suicidal thoughts, as they were not always able to articulate how they would address those that were stating they had thoughts of self-harm. The default position was to utilise the “Talk to Me” Strategy, which is not appropriate for all such cases.

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: Generally acceptable performance 

With the exception of one particular case detailed under QI 1.4, staff in HMP Inverness were sensitive to and appropriately dealt with situations where individuals were potentially at risk from others. Whilst there were far fewer foreign national prisoners in HMP Inverness in comparison to some other establishments, management should ensure that all staff are made aware of how to access translation services. This is important in order to ensure that staff are aware that they can access these services if they are having difficulty understanding the needs of certain individuals, or where there is a risk of isolation through the inability to freely communicate with others, thereby becoming a barrier to integration.

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 

In line with other establishments, HMP Inverness utilised a tactical tasking and co-ordination approach to assess developing and emerging risks. Evidence was provided that demonstrated action had been taken as result of such activity, to ensure the safety of the individual or others. Given the limitations of the physical estate, it was occasionally necessary to transfer a challenging individual to another establishment to manage an emerging risk. Management should ensure that such occurrences are only used as a last resort, given the distances involved for families and friends to travel to other establishments to visit.

As mentioned in QI 3.1 the reported recent influx of NPS into the establishment has resulted in a degree of uncertainty in relation to behaviour and the potential risk posed by any individual. This situation is challenging for staff and management in the assessment of risk, as well as creating increased levels of anxiety in the establishment.

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: Generally acceptable performance 

In line with comments made in previous reports, the lack of a national anti-bullying strategy leaves establishments feeling isolated and uncertain about how best to deal with bullying in a consistent and sustainable manner and that satisfies all legal requirements. As a result HMP Inverness had no single or consistent approach to dealing with bullying. Whilst HMIPS accepts the establishment's assurances that no individual subjected to bullying was transferred or moved location, the lack of a formalised approach meant no hard evidence could be provided to support this assertion. Where individuals needed to be kept separate for their own safety, the establishment had robust and well-practiced procedures to ensure that individuals would not inadvertently come into contact. They also ensured that they did not suffer an impoverished regime.

However, we are encouraged to note that a revised approach to bullying will be introduced during the first half of 2018. We hope to see this fully implemented soon after its introduction.

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

Rating: Generally acceptable performance 

As mentioned in QI 3.9, the lack of an anti-bullying strategy made it difficult to establish clear evidence regarding the support and assistance provided to those subject to bullying, or indeed the number who had been subjected to bullying in the establishment.

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: Generally acceptable performance 

The lack of an anti-bullying and intimidation policy is a concern; however, it was evident that the establishment did not tolerate unacceptable behaviour from prisoners or staff. Where a concern was brought to the attention of management via a PCF2, or other means, an investigation would be undertaken.

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: Satisfactory performance ●

An initial response to incidents or alarms existed and staff were aware of their role should there be a requirement to respond. Additionally the establishment had an extensive range of Standard Operating Procedures (SOPs) and contingency plans. The establishment had introduced a SharePoint system to ensure that all such plans and SOPs were readily available to staff. Additionally a system existed to ensure they were regularly reviewed and updated as necessary. On checking the system all contents were found to be current and none were beyond their published review dates.

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

Rating: Satisfactory performance ●

All staff had access to a personal alarm and radios as required. A system existed for regular testing of both systems as well as arrangements being in place for the repair of any item that became faulty.

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: Satisfactory performance ●

As detailed in QI 3.12, an extensive range of SOPs and contingency plans existed. Staff training was also organised in a manner that allowed all staff to maintain competency in all of their core skills. The establishment also participated in annual incident management training, where key role holders were given the opportunity to role play in a number of theoretical and practical exercises.


STANDARD 4

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 

Throughout the inspection, Inspectors found the Healthcare Team to be a well-motivated and caring workforce. The Clinical team was small and it was clear that the delivery of some services was person dependent. Due to the size of the Nursing Team, flexibility to cover services in the case of annual leave or other absences was very limited. In these instances the Addiction Specialists and the Mental Health Nurse were required to cover essential duties, such as medication administration, which disrupted their clinical duties.

A wide range of specialist services visited the prison and waiting times for access to these services were equivalent to those in the community.

Prisoners were, on the whole, positive of the healthcare being provided in the prison, and told Inspectors that there was good access to healthcare.

The previous inspection in 2014 reported that the Health Centre was not fit for purpose because the limited accommodation space where patients were seen and care delivered was insufficient. Inspectors were concerned that there had been no change to the accommodation space available for the delivery of healthcare since the previous inspection.

Inspectors were also concerned that the Healthcare Team had not addressed all of the areas for improvement identified during the last inspection. These included, maintaining confidentiality while administering medications and improving patient referral forms.

Inspectors found weaknesses in the way in which the Healthcare Team audited and quality assured their working practices, such as checking emergency equipment across the prison. Nursing staff had limited access to both clinical and management supervision, and development opportunities for nursing staff within the prison were limited.

NHS Highland were in the process of undertaking a training needs analysis, and were reviewing staff skills and the skills mix required within teams to support safe

and effective delivery of care. NHS Highland will be asked to complete an action plan in response to concerns raised in this standard.

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 

Prisoners could access a range of specialist services including psychiatry, dental, podiatry, out of hours services, blood borne virus (BBV) and optical services.

A comprehensive GP service was provided from a local medical practice. They delivered medical services between 08:00 and 18:00 Monday to Friday. With additional attendance every Saturday morning to provide medical assessments for those prisoners admitted the previous evening. There was a one week waiting time for a routine appointment.

A dedicated Nursing Team was employed to provide healthcare within the prison. This team consisted of registered general nurses, a Mental Health Nurse, two addictions nurses and an Addictions Case Worker. With the exception of the Clinical Manager all of the nursing staff were on an Agenda for Change Band 5. There was no Band 6 charge nurse to support the Clinical Manager or to provide leadership in the absence of the Clinical Manager. This was an area for improvement.

Maintaining a consistent workforce was an on going challenge for NHS Highland. NHS Highland bank staff, and core staff working extra hours, were frequently used to cover shifts due to the number of nursing staff on either short or long term sickness.

The addiction specialists and the Mental Health Nurse covered essential duties such as medication administration, which reduced the time available to deliver their own clinical duties. In addition, as there were no healthcare support workers or pharmacy assistants in post, clinical staff were routinely required to carry out non-clinical duties such as medication ordering.

4.2 Prisoners have direct confidential access to a healthcare professional.

Rating: Generally acceptable performance 

There were clear processes in place to collect, triage and record self-referrals. On reviewing the referral forms and information leaflets we observed that although they covered a range of services, they were poorly laid out and written in small print. We were informed that referral forms in other languages were not available to prisoners.

For prisoners in the SRU, all referrals to the Healthcare Team were given to the Prison Officer. Prisoners could ask Officers for an envelope to maintain confidentiality.

During their initial interview with Healthcare staff, prisoners were given an information pack which included information on health improvement and health screening, as well as information on how to access healthcare services.

For consultations a translation service “language line” was available to those for whom English was not their first language.

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

Rating: Poor performance 

Due to the design and age of the prison, there was limited accommodation to provide healthcare. Only one main clinic/treatment room was available within the Health Centre. This room was used daily by the GP and other services such as the Psychiatrist, BBV nurse, sexual health and any visiting specialist to the Health Centre. Nursing staff therefore had limited access to the room and had to work around the room availability to carry out their duties, including ECGs, dressings and patient reviews.


The Addictions Team and the Mental Health Nurse carried out many of their interventions in small interview rooms in the Links Centre. The rooms had open ceilings and did not maintain confidentiality as conversations could be overheard. This is a concern.

The processes for the retention of patients’ health records ensured that confidentiality for each patient was maintained. Appointment slips and test results from health staff were given to patients in a sealed envelope marked as confidential.

Inspectors observed a supervised drug administration where the Prison Officer stood directly next to the prisoner therefore the conversation with the nurse could be overheard. This breached patient confidentiality.

All in-possession medications were supplied to prisoners in small clear plastic pouches. Each pouch was labelled with the patient’s name, identification number, drug, dose and frequency of administration. Once the medication from a pouch was used up, the pouch was placed in the domestic waste bag. Prisoners with responsibility for recycling waste open domestic waste bags and sort the contents. These prisoners would be able to see the labels on the plastic pouches containing the patient’s name and medication details. This breach of patient confidentiality is a concern.

4.4 Healthcare provided in the prison meets accepted professional standards.

Rating: Poor performance 

There were clear systems in place for checking Nursing and Midwifery Council registrations and supporting revalidation for nursing staff. Knowledge and skills framework personal development plans and scheduled review dates had not been

taking place as regularly as required; staff were however, up-to-date with their mandatory training. Beyond mandatory training, no other training plan was in place for healthcare staff within the prison. Inspectors were told this was due to challenges with staffing, and staff having difficulty being released from their post to attend courses.

There was no formal NHS induction to the Health Centre within HMP Inverness. The induction process was provided by SPS only. Policies and protocols were available in the Health Centre, in hard copy, and wider NHS policies are available on the NHS intranet.

The Addiction Team had access to clinical supervision however neither the Mental Health Nurse nor the general nurses had access to clinical supervision. This is an area for improvement.

There were no formal processes for assessing clinical decision making or clinical examinations for general nursing staff.

NHS Highland told us that a training and skills needs analysis was planned for all clinical nursing staff.

Prescription Kardex's were hand written and amended by the GP, then photocopied and faxed to the pharmacy for dispensing. Therefore, there was potential for writing being difficult to read or being misread. Faxing is not a secure method of communication to use when it contains any patient identifiable information. This process could lead to a breach in confidentiality if the fax is sent to the wrong number, or if it is accessible to people who should not receive this information. This is a concern.

Inspectors observed the administration of controlled drugs and found variation in the practice and process of administration and recording. Not all administration was in line with the Nursing and Midwifery Council guidelines and NHS Highland's policy for the administration of controlled drugs. This is a concern.

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 

The Healthcare Team had submitted waiting list information for all clinics and specialist services as part of their self-assessment. Waiting times were acceptable and met NHS Highland's target for access to clinical services. Dental and optician services were provided for prisoners by community based providers and were accessed through appointments arranged by healthcare staff.

There was a high turnover of the prison population due to prisoners transferring in and out, sometimes after only a few weeks. This made offering and maintaining services challenging. However, at the point of admission, if a prisoner had on-going

investigations or treatment in secondary care services, they would be supported to ensure this continued.

The nursing complement consisted of only one full-time equivalent Mental Health Nurse, creating a person-dependent mental health nursing service. On average patients received a mental health assessment within a week. If the Mental Health Nurse was not available to complete the assessment, an arrangement was in place for urgent referrals to be seen by the addiction nurses. However, the addiction nurses were unable to provide follow up support to patients.

A Consultant Psychiatrist held a weekly clinic and could be contacted for advice concerning urgent referrals. There was no clinical psychology provision within the prison and the Mental Health Nurse was not trained to support prisoners who had experience of trauma. This was reported to be a resource and training issue.

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

The Mental Health and Addiction Team took a collaborative approach to the management of patients identified as having addictions as well as mental health issues. This was good practice.

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 

Prisoners who suffered injury within the prison were seen immediately by the Healthcare Team. If the injury was serious they would attend the local accident and emergency department.

Prisoners could make a confidential referral to the Mental Health Team, but as discussed in QI 4.5, there was no clinical psychology available for prisoners who had experienced complex trauma, and the Mental Health Nurse was not trained in supporting prisoners with experience of trauma.

Prisoners who had experienced abuse could access support from the Rape and Sexual Abuse Service Highland, and confidential counselling from CrossReach.

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

Rating: Generally acceptable performance 

All prisoners arriving at HMP Inverness were screened on admission by a Registered Nurse. The Nurse assessed if the prisoner was fit to be detained in custody, and

placed any health care markers into the prisoner's PR2 record to highlight health concerns to SPS staff as necessary.

The admission screening reviewed the prisoner's present and past medical health, and covered hepatitis and sexually transmitted infection status, assessment of mental health and suicide risk, regular prescriptions were confirmed, and a weight, blood pressure and pulse check. All Registered Nurses had undergone training in the "Talk to Me" Strategy, but access to further mental health risk assessment training for primary care nurses was not provided.

Prisoners were screened for alcohol and drug use on arrival and had the opportunity to discuss issues in relation to problematic use of these. For those prisoners admitted to the prison in withdrawal, a detoxification programme would be offered. Information was recorded on the patient's electronic VISION health records. The following day the prisoner would be seen by the GP for a health assessment. The GP had access to patient records and medication prescription information. All prisoners were issued with an information pack explaining all healthcare services offered at HMP Inverness and were given information on how they could access these services.

The room to see new arrivals in Reception was not fit for purpose. The room had no door, hand washing sink or a computer to check past history. This was a concern.

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

Rating: Poor performance 

As discussed in QI 4.5, even though patients referred to the Mental Health Nurse were seen promptly, the process for reviewing, discussing and managing cases could be improved to make it more robust. Furthermore the Mental Health Nurse did not receive clinical or line management supervision and support to undertake their role. This was a concern.

Although the Mental Health Nurse could discuss cases with the Psychiatrist at the weekly clinic, there were no formal processes to ensure that all cases on the mental health caseload were discussed and reviewed.

There were weaknesses in the current mental health documentation with no clinical risk assessment or formulation tools in place. Assessment documentation was largely medical and did not take into account the wider social determinants of a prisoner's health. Care plans were found to be prescriptive and not risk informed or outcome focused. There was no recorded evidence of patients being involved in the development of their care plan. This was a concern.

NHS Highland were aware of the issues identified with the mental health service in the prison. Plans were in place to review and align the documentation with NHS Highland's mental health teams, develop outcome focused care plans and ensure that the Mental Health Nurse received the appropriate level of supervision, training and support.

When a prisoner was considered at risk of self-harm the plan of care was jointly agreed through the “Talk to Me” process.

Care plans for patients with physical health issues were also found to be prescriptive and were not outcome focused.

Cells were available for prisoners with physical and mental disabilities however these were not fit for purpose. For example, in the disabled cell, the call bell was mounted on the wall on the opposite side of the cell to the bed. This would mean that the prisoner could not summon help if it were needed when he was in bed.

Inspectors were told that access to and monitoring of personal care support within the prison was challenging due to difficulties in securing an external social care provider. This is a concern. As a result the NHS Highland bank nursing service provided social care.


The prison had access to a community based Occupational Therapist, which was good practice.

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

Rating: Generally acceptable performance 

There were no long-term condition management clinics held within the prison. Currently patients with long term conditions such as asthma, diabetes, chronic obstructive pulmonary disease, and coronary heart disease would be seen at the GP clinic. The Clinical Manager described a number of other clinics which used to take place for prisoners, such as the well-man clinic but due to the limited availability of staff these had been stopped. NHS managers told Inspectors that a training and skills needs analysis was planned to determine the feasibility of implementing long term condition clinics. The Consultant Psychiatrist held a clinic once a week supported by the Mental Health Nurse.

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

Rating: Good performance 

A weekly BBV service was run by a specialist BBV community nurse. This service was comprehensive and patients progressed from initial blood testing to treatment in a few months. All prisoners were offered a Hepatitis B vaccination programme and an opt-out service for Dry Spot Testing for Hepatitis B and C. This was good practice. Blood spill kits were available in the Health Centre, and within the prison setting the services of the SPS cleaners were utilised for the cleaning of bodily fluids.

The Public Health Department of NHS Highland were the lead agency if an outbreak of infection was suspected or confirmed. The staff in the Health Centre followed NHS Highland’s guidance on the identification and management of an outbreak of infection. There was an up-to-date outbreak management box in the Duty Room for

staff to refer to. This included posters to be displayed in the event of an outbreak of infection and patient information leaflets for those affected. Nursing staff described the last outbreak of infection and the actions taken. This was good practice.

The provision of Take Home Naloxone (THN) was well established, with regular training being provided. The placing of THN into the prisoner's property provided the greatest chance of uptake on liberation. This was practice worthy of sharing. No injecting equipment was available for prisoners on liberation.

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

Rating: Generally acceptable performance 

Staff were not consistently following Health Protection Scotland's national infection prevention and control manual. This included the carrying out of hand hygiene, and the use of personal protective equipment, such as gloves. Alcohol-based or alcohol-free hand rub was available in the Health Centre, and Inspectors observed some staff using it. None of the clinical wash hand basins in the Health Centre were compliant with national guidance, including the clinical wash hand basin in the Dental Room which had been recently upgraded.

The majority of near patient equipment, such as blood pressure monitors and tympanic ear thermometers were clean. Inspectors were shown daily and weekly cleaning checklists for near patient equipment which had been devised in collaboration with the NHS Highland's Infection Prevention and Control Nurse. They had been changed and now included some items to be checked to ensure they were complete and ready for use, rather than clean and ready for use. This was confusing and none of the cleaning checklists we saw were reliably completed.

All dental instruments were decontaminated at the Centre for Health Science at Raigmore Hospital. No dental instruments were decontaminated on-site at the prison. This complied with best practice.

The Health Centre was audited annually by NHS Highland's Infection Prevention and Control Nurse, and an action plan was produced to address any non-compliance. Inspectors were shown a completed action plan from the last audit.

The standard of environmental cleanliness was generally good throughout the Health Centre. Inspectors observed the prisoner with responsibility for cleaning in the Health Centre. He used the appropriate colour-coded cloths for each area to minimise the risk of cross contamination. He was also wearing appropriate personal protective equipment for the tasks being completed.

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 

As discussed in QI 4.5, the Psychiatrist and the Mental Health Nurse ran a weekly clinic to review and support patients at risk of self-harm or suicide. Access times to services were good, though they were person-dependent. As already stated, there was no provision of clinical psychology. Neither was the Mental Health Nurse trained to support prisoners with experience of trauma. This was reported to be a resource and training issue.

As discussed in QI 4.8 there were weaknesses in the way the Nursing Team documented patients' assessments and developed person-centred care plans for patients.

The SPS "Talk to Me" Strategy was in place and patients identified as being at risk of suicide or self-harm were referred to the Mental Health Team for assessment.

The Mental Health Team took a collaborative approach to care and held fortnightly multi-disciplinary meetings to discuss patients. This was good practice.

4.13 Preventive healthcare practices are implemented effectively in relation to the care and treatment of those exhibiting self-harming and addictive behaviours.

Rating: Generally acceptable performance 

At the time of inspection, the Addiction Team consisted of two Addiction Band 5 Nurses and one Addiction Case Worker. The team voiced concerns about being able to provide a consistent case work approach due to competing demands.

As discussed in QI 4.1, the small team meant there was an expectancy for the team to cover duties out with their specific role. The team was observed to be professional and demonstrated an empathic manner towards their patients. Regular multi-disciplinary meetings were held to discuss cases. These were attended by representatives from mental health, addictions and alcohol services. Each case was discussed and handed to the most appropriate team member. This was good practice. Although the team could contact an Addictions Consultant out with the prison to discuss prisoners receiving, or preparing for opiate replacement therapy (ORT) as well as seek general support or advice, it was done on an as required basis as no formal arrangement was in place. An addiction specialist did not attend the prison to review or monitor prisoners on ORT. This was a weakness.

At the time of inspection around 20 prisoners were receiving methadone and a further 7 received Suboxone. Inspectors were informed that due to staff capacity no prisoners were started on Suboxone in prison. This removal of choice to both prescribers and prisoner does not facilitate patient-centred care. NHS Highland told Inspectors that they would review this once there is a full complement of staff.

A full laboratory urinalysis was not taken before commencement on ORT. Taking a full urinalysis determines which opiate/opioid has been taken and reduces the chance of prisoners with no opiate dependence starting treatment. This was a concern.

As discussed in QI 4.4, with the exception of mandatory training, staff had limited training opportunities and Inspectors saw no evidence that they had training plans in place. We were informed that this was due to staffing issues and staff not being released from their post to attend courses.

The Addiction Team had access to monthly clinical supervision. This was good practice.

Staff facilitating harm reduction sessions were observed by Inspectors to be very motivated. However the quality of the sessions delivered varied.

The Drugs Action for Change (8 session programme) was of a very high standard, and used relevant materials and content. Prisoners attending this programme were given a laminated action plan and certificate. All prisoners spoke highly of the work they had completed and were very thankful to the staff for facilitation. This is good practice.

Inspectors were concerned about the format of the pre-liberation session. The harm reduction aspect of the pre-liberation session could be improved by using material that is more up-to-date, accurate and visually engaging. It was the enthusiasm of the staff delivering this that held the prisoners attention. The risk of overdose and the provision of Naloxone were also discussed.

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

Rating: Generally acceptable performance 

HMP Inverness had developed a health improvement strategy for 2017-2020, but due to time constraints and staffing issues Inspectors were told that many of the recommendations had not been actioned. Likewise, the Health Promotion Group made up of both SPS and healthcare staff had stopped running for the same reasons. This was a concern.

Health promotion posters were displayed in the Health Centre and in some of the halls. They included testicular health, information on BBV, drugs information and Naloxone information posters. The Library also contained several books on ways to improve health. This was good practice.

Inspectors were told that health improvement events, such as national non-smoking day, were held within the prison in collaboration with SPS. The Smoking Cessation Service visited the prison weekly and seven people were waiting to be seen by the Service.

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: Satisfactory performance 

Staff were able to explain the boundaries between professional and ethical issues. Healthcare staff were aware of the demands of delivering healthcare within the prison setting and the requirement for security. Regular meetings were held with prison management to discuss issues, review incidents and to improve practice.

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: Generally acceptable performance 

All new prisoners to HMP Inverness were offered a health assessment by a GP and a Registered Nurse. The prisoners' admission/transfer pathway was completed within each prisoner's electronic VISION health record, by nursing staff. During this assessment any concerns raised by the prisoner were appropriately actioned. This could be a referral, review or further assessment.

As discussed in QI 4.7, the room to see new prisoners in Reception was not fit for purpose, having no hand washing sink or door. This was a concern.

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 

A clear process was in place for recording patient records coming in and out of the prison, and VISION electronic health records were completed for all prisoners. Paper health records were held in a secure office within the Health Centre and could only be accessed by health staff. There was a clear process for the transfer of notes between establishments using secure bags.

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 

Systems and processes were in place to ensure healthcare staff made appropriate notifications in cases where there was potential of physical or psychological harm to prisoners. All staff were aware of this procedure and were comfortable that it did not conflict with their professional expectations. Staff were clear in their duty to pass on

any intelligence that may compromise the health and wellbeing of the prisoner or the safe running of the prison.

If a prisoner wished to report sick they could see a member of the Nursing Team. Healthcare managers told Inspectors that this was not always the best use of clinical staff time and discussions were on going with SPS to review this practice.

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.

Rating: Satisfactory performance 

Healthcare staff demonstrated a clear understanding of their duty of care, and escalated concerns through the intelligence reporting system. Regular communication between the healthcare and SPS management teams meant concerns were discussed and looked into promptly.

Prisoners who complained of mistreatment received support and were given a medical assessment. Information affecting the welfare of prisoners was passed on to the appropriate SPS manager who would initiate an investigation, and involve the police if necessary. Prisoners would be offered counselling and appropriate protective measures where required.

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: Generally acceptable performance 

The Primary Care Nursing Team responded to medical emergencies. They carried radios and responded immediately to code red (bleeding and circulation) and code blue (airway and breathing) emergencies. The prison had access to a responsive GP service who could attend the prison at short notice.

Emergency bags, portable oxygen, suction machines and defibrillators were located in the Health Centre. Some of the emergency equipment bags within the prison contained out of date medications. A list of what equipment each emergency equipment bags should contain was not available which was a concern. All nursing staff were trained in basic life support.

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: Generally acceptable performance 

Mental health nursing staff liaised with the appropriate community mental health teams to ensure continuity of care on release. Prior to release patients were

informed of the arrangements being made and that appointment letters would be issued.

For vulnerable or complex prisoners multi-agency case conferences were held prior to release. These were attended by healthcare staff who liaised with the TSOs to ensure continuity of care. Prisoners were given a five-day supply of their medication on release. The Primary Care Team contacted and provided the community GP practice with a copy of the prisoner's care plan.

Inspectors were concerned to see that some prisoners with only one or two days left of their sentence were being transferred from other prisons to HMP Inverness, or from HMP Inverness to other prisons. This was often done without discussion with healthcare staff and without the prisoner's prior knowledge. This practice often meant throughcare arrangements were hastily put in place prior to a prisoner's liberation, and did not meet the prisoner's individual needs. If a prisoner was receiving on going treatment or support, such as from the Mental Health Team or the BBV service, this caused disruption their treatment. This was a concern.

Further to this, Inspectors observed and were told that prisoners could be transferred from one prison establishment to HMP Inverness, only to be transferred back the following day. Medications were not permitted to go with the prisoner and this meant that potentially prisoners could miss administrations times of medications. It is not acceptable for patients to miss medication due to being transferred in this way. The health risks especially to patients suffering from long term conditions are high. This is a concern. Prisoners should not routinely be transferred to another prison for short periods of time. If it is unavoidable prisoners must have access to their prescribed medication at the prescribed time. The most effective way to ensure this is for the medication to transfer along with the prisoner.

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: Satisfactory performance 

Staff were respectful and courteous in their dealings with prisoners, staff and visitors, without undermining the safety and security of the establishment.

The processes in place for both prisoner admissions and liberations were generally considered and humane. On admission prisoners were treated well and a satisfactory process existed, as they were during liberation.

Where there was a need to impose Special Security Measures on prisoners, or decisions had been taken to locate a prisoner in the SRU, it was found that the associated documentation was appropriately and accurately completed.

The establishment had robust processes and procedures in place to ensure regular checks and searches were conducted in the prison buildings, grounds and perimeter areas. A detailed and wide ranging suite of SOPs existed that covered the main activities and actions that staff would be required to undertake.

One common theme that occurred in this and a number of other areas was a well-intended informality in relation to recording actions and engagements. Management must ensure that the good and well intentioned work undertaken by staff is recorded appropriately to ensure decision making is transparent and auditable.

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 ●

During the course of the inspection, staff were observed dealing with visitors to the establishment in a professional manner. A formal process for checking all visitors' identification was in place. For those new to the establishment, staff explained clearly the process for access and egress.

There was no general route movement, the process for moving prisoners to and from their place of work was carried out by the work party officers and staff runners, which worked well. Other routine prisoner movements were observed during the inspection and were carried out in a professional manner. Interpersonal skills were used effectively to engage with prisoners in a positive manner. The staff in HMP Inverness presented a positive culture and a 'can do' attitude. It was encouraging to note that staff carried out additional duties where necessary and were willing to do so.

It was commented upon by prisoners and staff alike that staff shortages and ad-hoc double shift working did, on occasions, impact on the overall regime available.

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

Rating: Satisfactory performance ●

Patrols of the establishment perimeter were completed on a daily basis by operation members of staff. During these checks routine checking of the perimeter intruder detections system (PIDS) was undertaken. A log noting that a patrol had been completed was kept within the Gate/Electronic Control Room (ECR). Staff had access to SOPs within SharePoint as a reference, should they wish to refer to them at any time.

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

Rating: Satisfactory performance ●

During prisoner admissions, the staff working in the Reception area carried out their role in a professional manner. The Inspector witnessed good team work between uniformed and nursing staff, allowing prisoners to be dealt with as quickly as possible, within a safe environment. Each admission was treated on an individual basis, where needs were identified. During the liberation process all procedures were carried out appropriately.

It was noted that prisoners were liberated with their personal property contained within a clear plastic bag, staff advised that they normally provided holdalls but were waiting for new ones to arrive. In general Reception staff were very well organised and they interacted well together and demonstrated understanding and sensitivity when appropriate.

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

Rating: Generally acceptable performance 

All systems and processes for access and egress were covered in SOPs available on a SharePoint site accessible by all staff, additionally hard copies were also available within the Gate area. There was signage on display to explain the searching process.

The booking in of visitors was carried out courteously and respectfully, in an efficient and effective manner. Feedback from prisoners and prisoner's family was that they had a positive experience when visiting the establishment. However, half hour timeslots presented a problem for those travelling from a distance. Also, searching visitors in sight of others was not good practice and the visits area did not allow for sufficient privacy.

Management should consider extending the half hour timeslots and explore other more suitable options to search visitors and to offer more privacy during visits.

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

Rating: Satisfactory performance 

The process for allowing vehicles access to the establishment was controlled under local SOPs. Staff evidenced the searching of vehicles but did not utilise all of the equipment available on all occasions. Establishment mail was handled using recent SOP introduced by SPS. The occurrence book provided full details of entries and departures.

Proformas, used by prisoners when they required items, such as clothing, to be brought in by their visitors were readily available.

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

Rating: Generally acceptable performance 

HMP Inverness had protocols in place to ensure that prisoners under escort were risk assessed and managed accordingly. Procedures were in place to notify the relevant authorities when high profile prisoners were under escort. These were accessible on the establishments SharePoint site. HMP Inverness had minimal requirement for the Risk Management Team (RMT) process. The HDC process was

overseen by the Head of Offender Outcomes, who was also the decision maker for HDC. The HDC process appeared to be working well.

5.7 The risks presented to others in the prison by any prisoner are assessed and appropriate supervision is enforced.

Rating: Generally acceptable performance 

During the inspection there was one prisoner on Rule 95 and one prisoner on Rule 41. There were no prisoners on SSM. Information on appropriate supervision was available in hard copy, on PR2 and SharePoint.

Prisoners presenting a risk to others in the prison were highlighted through assessment and intelligence reporting. However, plans for the management of prisoners were not well documented. There were informal practices in place, but the decision making rationale was not well documented. Management should ensure that accurate documentation is maintained and informal practices are formalised.

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

Rating: Generally acceptable performance 

As highlighted in QI 3.6, the establishment managed prisoners identified at risk of self-harm or suicide using the national "Talk to Me" Strategy. During the inspection two prisoners were being dealt with under the "Talk to Me" Strategy. The supporting paperwork appeared to be comprehensive in most cases, however, there was no record of one of the meetings that had taken place. A new audit tool for duty managers had been introduced to help improve the quality of entries which will identify areas that are incomplete. The records reviewed indicated that the assessed level of supervision was being adopted.

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

Rating: Satisfactory performance 

The establishment population was a mix of mainstream and protection prisoners. HMP Inverness had developed procedures for the management of prisoner movements that was effective and efficient. All movements of prisoners to and from activities, including appointments to the Health Centre, Links Centre, work and prisoner visits were carefully co-ordinated to ensure maximum safety.

Documentary evidence relating to the use of investigatory powers and CCTV policies were available and up to date.

5.10 The systems and procedures to maintain the security of prisoners when they are outside the prison are implemented effectively.

Rating: Satisfactory performance 

When prisoners were escorted by staff, for example to local hospitals, the establishment utilised systems and procedures that dealt with risk at an appropriate level. As noted under QI 5.6, the appropriate authorities were informed if high risk escorts were taking place. All documentary evidence was available. The establishment had recently been externally audited and received substantial assurance in relation to this matter.

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

Rating: Generally acceptable performance 

Adjudications were observed during the inspection and were undertaken with care and consideration and in line with the law and prison rules. The Adjudicator clearly explained each stage of the process to the prisoner and managed the process in a relaxed but professional manner. A sample of recent Orderly Room paperwork was checked and had been completed appropriately. The awards given varied and were not overly punitive.

There did not appear to be an established process for the review, management and reintegration of prisoners at the end of the Rule 41 or 95 process. However, in line with a number of areas within HMP Inverness, it appeared to be done informally. Management must ensure that the good and well intentioned work undertaken by staff is recorded appropriately to ensure decision making is transparent.

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

Rating: Satisfactory performance 

The quality of searching varied, particularly rub down searches, but there were no areas of concern. During the movement of prisoners, Cell Sense Metal Detectors were used effectively. All searches were undertaken within the law and prison rules. Searching of prisoners and their property in Reception was observed and dealt with professionally.

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

Rating: Satisfactory performance 

The Drug Testing Unit was well laid out and fit for purpose. Due to staff shortages, testing was limited to prevalence and risk testing for HDC. Only five tests had been completed during September and October 2017. The staff were experienced and enthusiastic and appeared flexible in their approach, allowing testing to be carried

out at various times of the day. The staff were able to fully explain the testing process and provided records to confirm testing was taking place.

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

Rating: Satisfactory performance ●

As noted in QI 5.2, perimeter checks were logged and reports were submitted where appropriate. The First Line Manager (FLM) recorded them and had a schedule in place for the searching of all buildings and ground areas within the prison.

The IMU presented information to the Tactical Tasking Co-ordination Group for action, this produced a series of tasks relating to searching, based on the analysis of the information available and outcomes were recorded.

Management should ensure that adequate resources are dedicated to the preventative and predictive work that the IMU undertakes.

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

Rating: Satisfactory performance ●

The tracking of the movement of prisoners was controlled by the ECR. The ECR and Reception maintained 'live' prisoner number boards as well as a movement diary for all admissions and departures. Numbers were checked and confirmed at various times throughout the day.

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

Rating: Satisfactory performance ●

The Estates Team within HMP Inverness were responsible for checking the locking system. They had comprehensive records and plans for maintenance, with assurance audits being carried out by the Head of Operations. There were processes in place to deal with reported issues and they were on call to provide assistance to the establishment out of hours. The key vend system allowed the Operations Managers to check and interrogate the allocation and use of every key bunch.

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: Generally acceptable performance 

During the time of the inspection there was one prisoner located within the SRU, and one prisoner on Rule 95. All paperwork pertaining to Rule applications were in order and met the required timescales for submission and approval.

The planning process for those segregated appeared satisfactory, however, the plans, would benefit from being more focused and clearly identify responsibility for decision making and accountability.

The SRU was unmanned which gave Inspectors cause for concern in relation to the ability of staff to respond quickly and appropriately to any situation that may arise within the unit and the impact on the regime available in B Hall resulting from the staff not being available there.

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: Generally acceptable performance 

The SRU was a small two cell unit. Extensions for Rule 95 were rare and most related to indiscipline prior to Disciplinary Hearings, or identified short-term risks from IMU. Paperwork relating to those held under Rule 95 conditions were dealt with appropriately. However, focus on reintegration plans needs to become more of a priority for those who require it.

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

Rating: Satisfactory performance 

During the inspection there were no prisoners on SSM. SSMs had been used in the past in accordance with guidelines. This was confirmed by the establishments SharePoint site and PR2. Information from a number of areas including the IMU and the Violence Strategy Group supported this process.

5.20 Force is used only when necessary and strictly in accordance with the law.

Rating: Satisfactory performance ●

Since January 2017 there were 25 instances where 'use of force' had been recorded, of which two were planned and video recorded. All paperwork was held within the IMU and on examination appeared to be in order.

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

Rating: Satisfactory performance ●

The use of physical restraints had not been used for several years, however, FLMs were able to describe and confirm the SPS process they would deploy if necessary.

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

Rating: Satisfactory performance ●

The establishment had a clear and robust system in place for storing prisoners' valuable property safely and securely. There was an adequate storage facility within the Reception area which was clean, tidy and easily accessible. All monies and valuable property was safely secured and monies were taken to the general administration office the following day.

Staff were able to explain the Prisoner Personal Cash and wages system, and how to retrieve monies left from previous sentences. Duty Managers working at the weekends were required to carry out assurance checks to ensure prisoner property was stored accurately and appropriately.

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: Satisfactory performance 

Relationships and communications, observed and reported, between staff and prisoner were very positive. Staff exercised their authority appropriately, and prisoners and staff both reported that any complaints were generally dealt with informally, without the need to submit formal complaints. Staff were conscious of the requirement to respect privacy in their dealings with prisoners, however the age and configuration of the building made this difficult.


Whilst work places and progression to enhanced areas were allocated fairly, there was a degree of informality to the process. Managers recognised the requirement to address this, and plans were in place to formalise it and allow consultation and input into the process.

Whilst prisoners were kept informed of events within the establishment, consultation was generally ad hoc. Prisoner Information and Action Committee (PIAC) meetings had only recently been reinvigorated.

Throughout the inspection the issue of processes being informal was a recurring theme. Whilst there is no doubt that the staff were doing their best to provide a fair and equitable regime the lack of formal and recorded processes meant that clarity and transparency was lacking which is an undesirable situation.

Quality Indicators

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

Rating: Good performance 

All Inspectors commented on the positive relationships between staff and prisoners. All areas were visited on numerous occasions and this was found to be consistent. Being a small, local establishment with a number of repeat offenders, most staff had known the majority of prisoners for a significant period, and there was a mutual respect shown by and toward staff.

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

Rating: Generally acceptable performance 

Staff acknowledged the requirement to afford privacy where required, however the design of the buildings and the lack of interview rooms made this difficult. Core Screen interviews were conducted in prisoners cells, occasionally whilst their cell mate was present. Staff advised that if required they could utilise the staff office or the FLM office for confidential conversations. Additionally, within the Health Centre confidentiality was difficult to achieve due to the design with others in close proximity, especially when medication was being issued. The Links Centre had a number of rooms that were used by a variety of both internal and external agencies to interview prisoners, however there was no roof to the rooms so full privacy was not afforded.

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

Rating: Generally acceptable performance 

Inspectors did not witness any instances of staff breaching confidentiality and received no complaints. However, as previously stated, the lack of suitable interview rooms did not allow privacy. Of the interactions Inspectors observed, staff were aware of the limitations and took appropriate measures in order to respect confidentiality. The identification of privileged correspondence was done in accordance with national guidelines, ensuring that any privileged correspondence was identified and treated confidentially.

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: Satisfactory performance 

Interactions between staff and prisoners were respectful and the majority of prisoners were content to be located within HMP Inverness. Staff rarely used formal processes such as disciplinary reports, and used their authority in an appropriate

manner in order to maintain control. This meant that the regime ran in an orderly fashion with minimal disruption, despite staffing constraints and the multiple classifications of prisoners.

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 

The standard of behaviour and conduct observed was good, and Inspectors did not observe staff having to make challenges. There was one prisoner complaint regarding staff behaving unacceptably during a search. However it was fully investigated and found to have been appropriate.

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: Generally acceptable performance 

There were very few occasions when limitations on prisoners' ability to access facilities were imposed. However there was one prisoner serving a punishment within the SRU, and another prisoner who had had his regime restricted for medical reasons. All paperwork was found to be in order with the appropriate authority in place.

Due to the fabric and design of the building, restrictions existed for prisoners with mobility issues attending education, the Library or recreation as they were located upstairs. Whilst there was a chair lift in place, Inspectors were informed by staff that it was not used in case there was a requirement to evacuate and staff were unwilling to utilise the 'Evac' chair provided. This situation meant that certain individuals were being discriminated against and reasonable adjustments were not being made to allow full participation.

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 a system of privileges available allowing suitable prisoners to progress to the enhanced area of C Wing. There were also work parties designated as enhanced, and a separate "items in use list" for those prisoners attaining that level, regardless of their location. In spite of there being an application form for accessing the enhanced area, progression to it appeared to be managed informally, with staff identifying those suitable and completing the form. The process for progressing to the enhanced area should be formalised, to ensure transparency.

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: Generally acceptable performance 

The process for allocating work parties was again managed informally in most cases, with staff that had previous knowledge of prisoners allocating jobs dependent on space, or prisoners approaching work party officers and asking to be given a workplace. There were plans to introduce a more formal process that would involve prisoners being interviewed for vacancies, but at the time of the inspection this had not yet been implemented. Despite this informality local knowledge ensured that most prisoners were allocated to an appropriate work party.

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

Rating: Generally acceptable performance 

To a degree there were consultation events such as PIAC meetings held between prisoners and staff. However, this did not appear to be a well embedded system which took place on a regular basis. There was a distinct lack of minutes of meetings available to Inspectors and the sense was, as expressed by a number of staff, that these meetings had recently been reinvigorated. To balance this, however, it was apparent that the positive relations which existed within the prison were prevailing to prevent this from becoming a major issue.

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

Rating: Generally acceptable performance 

The prison canteen was visited by Inspectors who witnessed the preparation of canteen orders. The canteen was stocked with similar products to other establishments and it was found to follow standard SPS procedures. Staff reported that during PIAC meetings or by filling in the comments section on the canteen order prisoners could request a change. However prisoners reported that they had continually asked for changes to be made and had either not received feedback or been ignored. Some also felt that there were too many sweet items on the list. Prisoners should be given the opportunity to consult regularly on the products available and where these cannot be changed, feedback provided.

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 

It was clear that the prison went to some effort to ensure equitable access for all prisoners groups, both during regular events such as recreation and gymnasium but also when extracurricular events were held. Despite the limitations on availability of

space and staffing, it was commendable that all prisoner groups had equitable access to activities.

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 ●

Prisoners accessed their own personal cash in line with other SPS establishments. The system appeared to be well embedded. Access to property was managed between Residential and Reception staff, with a different 'items in use lists' for untried and enhanced prisoners.

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

Rating: Satisfactory performance ●

A number of checks were carried out on prisoners who had been held under rule conditions. All paperwork was in order and in line with SPS policy. There were very few prisoners held for more than the initial 72 hours and the use of SSM was limited. The SRU was not used unless necessary due to the design, location and not having dedicated staff.

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 ●

During the inspection there was one prisoner being managed on Rule 41. This was done in line with guidelines. Any prisoner identified at risk of harm was also managed in accordance with SPS guidelines.

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

Rating: Satisfactory performance ●

Although there were very few Orderly Rooms during the inspection and only one prisoner being managed on Rule 95, previous paperwork was inspected to ensure compliance with natural and administrative justice. Additionally it was noted that closed visits were used sparingly and, in all cases where restrictions were applied, the right to representation was adhered to.

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

Rating: Satisfactory performance ●

The application of the law was consistent through all prisoners groups. Access to relevant materials was available to all on request.

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

Rating: Satisfactory performance ●

Positive staff and prisoner relations ensured that prisoners were kept well-informed about prison procedures, with staff answering any queries that prisoners had. Posters displayed appropriate information and prison rules were available in each residential area.

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

Rating: Satisfactory performance ●

Prisoners were informed of events via posters or by staff informing them. All events were available for all prisoners with no group being disadvantaged.

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

Rating: Satisfactory performance ●

Any critical information that came into the establishment from a family member was passed to the residential area and conveyed to the prisoner by an Officer. Staff were also able to advise that where necessary any information could be passed to a family member, either by allowing a telephone call or by an Officer contacting family members.

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

Rating: Satisfactory performance ●

Posters advising access to Independent Prison Monitors and the complaints process were visible in all residential areas, and copies of prison rules and complaint forms were readily available. Staff and prisoners commented that most complaints were dealt with informally, but if required prisoners were aware of the complaints process.

6.21 The prison complaints resolution system works well.

Rating: Satisfactory performance ●

There were very few formal complaints lodged with most being addressed informally. Where a complaint was made there was evidence that the process had been adhered to and a fair and reasonable response had been recorded. Where complaints had been escalated to ICC, care was taken that an appropriate chair was identified, and those checked were answered appropriately.

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

Rating: Satisfactory performance ●

Patient feedback and complaint forms were available in each hall. There was a clear process in place for responding to and managing complaints from prisoners. All complaints received from prisoners were seen by a member of the Healthcare Team to determine whether a local solution could be found. This could be the GP, Clinical Manager, Nurse, Addictions Worker, Dentist or Psychiatrist. If the complaint could not be resolved locally or if the prisoner was not satisfied with the way the complaint has been dealt with, it would be referred onto the NHS feedback team.

6.23 The system for allowing prisoners to book interviews with Independent Prison Monitors works well.

Rating: Satisfactory performance ●

Posters advising prisoners of the process, as well as forms and post boxes, were available in all residential areas. Additionally staff stated that due to the size of the establishment, prisoners were able to approach IPMs when they were in the prison.

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

Rating: Satisfactory performance ●

Senior Managers and FLMs reported that there were positive relations with Police Scotland, the Parole Board and the Scottish Public Services Ombudsman. Where necessary interviews and meetings were held.

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 reported barriers to prisoners having access to their solicitor, and although access was only available in the afternoons this did not cause any issues. Meetings took place within the visits area and afforded the required privacy of being in sight and out of hearing. Additionally, video conferencing (VC) was available

within the Links Centre, allowing solicitors who had difficulty attending the establishment due to its geographical location to securely discuss issues with their clients.

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 

There was evidence of representatives of non-UK citizens being informed of the admission of a prisoner, and support had been put in place for a Polish prisoner to communicate with his Embassy. Staff reported that if necessary arrangements would be made to allow access if required.

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

Rating: Satisfactory performance 


Whilst managers reported that this had not been requested recently, if it were necessary, visits would be accommodated within the agent's visits area in order to allow confidential access.

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: Generally acceptable performance 

Prisoners had a number of opportunities over the course of the week to access visits with family. However visit sessions were only 30 minutes long which was problematic for families travelling a distance. There was recognition that work was required to increase family involvement in prisoners' lives through visits and case management. Although prisoners had access to family visits on a Sunday afternoon, there were limited opportunities for prisoners to engage with their family in other roles and activities.

Due to the fabric of the building, activities were mostly delivered within the Links Centre. There were a limited number of rooms which on occasion caused some difficulties, but staff appeared to manage this issue. The staff involved in purposeful activity were generally found to be motivated and it was evident that they had good working relationships with prisoners. Staff used their positive relationships with partner organisations to support services within the prison. As a result a range of activities were available, but sadly they were often poorly attended. There appeared to be a lack of understanding of the needs of the prison population, and as a result there was overlap and duplication of work between different services.

It was also noted and was somewhat concerning that prisoners had attended the same approved activity on multiple occasions, and were repeat offenders. This suggested that the activities available were not effectively targeting the offending needs of the population.

There were difficulties identified with prisoners being able to access the opportunities available. On one occasion it was noted that a first-aid course was poorly attended because prisoners had to work in the kitchen, or were completing an approved activity. There was no scheduling of the available activities to identify such conflicts and prevent them.

The difficulties involved in effectively targeting prisoners' needs was a significant problem in HMP Inverness. This meant that few met the criteria to be considered for

progression to less secure conditions, despite the Integrated Case Management (ICM) Co-ordinator checking daily.

However, by contrast the HDC process appeared to be working well.

An area of concern was the lack of RMT meetings at the establishment. Additionally, it was concerning that complex high risk individuals were not being discussed at RMT, and instead were being managed informally. This presented a potential risk to the establishment and those within it.

Quality Indicators

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

Rating: Generally acceptable performance 

There was a good range of visit sessions available on weekdays and at weekends. However a number of the sessions lasted only 30 minutes, which was considered by staff and prisoners to be too short, particularly for families travelling a distance. Prisoners could book a double visit as certain visit sessions were often under subscribed, despite there only being 6 spaces available at each session.

Family visits had been introduced on a Sunday and were managed by the Family Contact Officer (FCO). Unfortunately these visits were poorly attended and staff were unsure of the reasons why.

A Prison Visitor Centre opened in July 2017. The Centre was off-site, being located in central Inverness, next to the train and bus stations. To date the facility had had a low level of foot fall. The establishment and partner agencies had recognised that work was required to optimise the impact of the centre and overcome any barriers to the development of services. Work was at an early stage to improve utilisation of the facility.

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

Rating: Generally acceptable performance 

Front-of-house staff were required to complete SVQ qualifications to ensure they had appropriate training and skills. The processing of visitors was observed and the staff interacted positively with them. A number of visitors were consulted about their experience of attending the prison, all of whom reported that staff had treated them with respect and had been friendly and helpful.

Visitors were searched in the Visit Room, in full view of everyone which did not protect the privacy of visitors. It was recognised that there were limitations posed by the existing building, but a screened area could be used to search visitors prior to entering the Visit Room. All visitors observed during visit sessions were female, but there were no female staff in the Visits Room or front-of-house area. This meant

calling a female FLM to the area to conduct rub-down searches, taking her away from other duties. It was reported that the gender split of staff available for searching was often problematic.

The visitor waiting area in the prison was small but bright and there was ample seating. Notices were displayed and there were a range of leaflets available. The newly developed Visitor Centre was advertised and there was also information for visitors regarding help with travel costs.

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 closed visits area was used for one visitor during the inspection. The closed visits list was reviewed by the night shift manager on a three-monthly basis or as required. This process appeared to operate well.

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: Generally acceptable performance 

The Visit Room was small with space for six prisoners and up to three visitors each. Up to three members of staff were in attendance to maintain security and order. The size of the room meant that maintaining privacy was challenging as staff, other prisoners and their visitors could overhear other conversations.

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: Generally acceptable performance 

The opportunities for prisoners to interact with family members in parental roles were limited within the establishment. There were plans to improve this but they required implementation.

A 45 minute children's visit session took place on a Sunday afternoon. During these sessions the furniture in the Visit Room was replaced with bean bags. Prisoners were allowed to move around the room to interact with their child, rather than having to remain seated. One prisoner was observed reading to his child. The establishment and the Visitor Centre were keen to maximise contact between prisoners and their families. There was positive feedback from prisoners Inspectors spoke to, who welcomed the opportunity to interact with their children. A Christmas party was being arranged to allow fathers to provide a gift to their child.

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: Generally acceptable performance 

Accumulated visits were available in HMP Inverness and it was reported that one prisoner from HMP Perth had recently attended for one. The application for his family visit was completed ahead of his transfer, following helpful liaison between the two establishments. Prisoners could also access Exceptional Escorted Days Absence and inter-prison visits. These were managed appropriately in line with SPS policy. There were facilities within the Visitor Centre that allowed for Video Conferencing to remote sites, which would reduce travelling and help maintain family contact. Unfortunately it had not yet been utilised. Discussions had taken place regarding the development of this service but no firm plans were yet available.

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

Rating: Satisfactory performance 

Prisoners had regular access to telephone booths in the halls and recreation area, to help them to maintain contact with family members and friends. Lists and time slots ensured fair access to the telephone. Residential staff were also observed to provide additional access to the telephones during the day if required. Writing materials were available within the halls to allow prisoners to write to family members via the traditional mail system. The “email a prisoner with reply service” had been introduced, and it was reported that this had been well received following some initial suspicions from prisoners. In the initial phase the use of the service trebled. Current statistics were not readily available.

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

Rating: Generally acceptable performance 

Of the 17 ICMs that took place between April to September 2017, there were two occasions where family members attended. In the past, the ICM Co-ordinator had liaised with a prisoner and community partners to allow family members to participate via VC. This took place because the ICM Co-ordinator knew the prisoner and utilised established relationships with community partners to facilitate it. This showed staff willingness to try to engage family members, as well as positive working relationships with community partners. However it was not an established process. The ICM Co-ordinator reported a decline in family input in recent years but had not been able to find a solution. Some prisoners reported that they had not asked family to attend due to the travelling distance.

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 

Recreation was available daily, and a focus group of prisoners reported that it was well-attended. The group also spoke positively about relationships with staff. This particularly group were repeat offenders who had struggled in the community. They reported that, on their return to custody, they knew they could rely on established relationships with staff to help them find suitable support that they could not always readily access in the community.

The "My Relationships" programme had been developed by Links Centre Staff, in partnership with Social Work, an approved activity aimed to help prisoners build relationships and develop their communication skills. It had been delivered once and eight people had completed the programme. Due to prisoners being transferred out, there were reported difficulties in identifying a sufficient number of participants for a further group therefore it had been postponed. Staff that developed the programme were driven and believed it to be a gap in the services offered.

The TSOs provided prisoners with support prior to liberation to build relationships with key people, in preparation for release. This service had been well received but had encountered some challenges due to the geographical area covered.

The Chaplaincy Service and Prison Fellowship provided religious services but also pastoral guidance and support with personal issues, which often related to difficulties with relationships. The Chaplains do not have a dedicated space to meet with prisoners or a desk/computer of their own. This could be a limitation if the Links Centre was busy and they often met with prisoners in their cells.

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

Rating: Poor performance 

All of the 17 ICMs that took place from April to September 2017 had been completed within relevant timescales and took account of the individual's circumstances. However, there appeared to be an over reliance on entries on PR2, and a lack of information about the discussions in the minutes. As no ICMs took place during the course of the inspection it was not possible to evaluate the approach through observation. The effectiveness of ICM management appeared to be hampered by prisoners being unwilling to engage in the generic assessment process, as they were aware that if an offending behaviour programme was identified they would require to transfer to another establishment.

There was evidence of inconsistencies in Personal Officers entries on PR2 to support the sentence management process. Management had implemented an audit process to ensure that Personal Officers were updating PR2, which may improve engagement.

RMTs had not taken place for around nine months, possibly longer. The ICM Co-ordinator advised that he completed a daily check to identify those who met the criteria for progression, and completed the paperwork to refer these cases to the RMT. There were few cases that met the criteria for progression because prisoners had refused to do the generic assessment. The result was that prisoners did not address their offending behaviour needs.

Whilst there were few cases meeting the criteria for progression, there had not been an RMT to discuss complex cases. The local process was that if a complex prisoner was identified the relevant paperwork would be completed and referred to the ICM Co-ordinator, in order to convene an RMT. The ICM Co-ordinator advised that he rarely received a referral from the halls, and that this was indicative of complex prisoners being managed informally in the halls. This was an area of risk and vulnerability to the organisation as well as the staff and other prisoners.

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: Generally acceptable performance 

The process to identify prisoners for release or progression to more open conditions was reliant upon the ICM Co-ordinator liaising with Reception daily to identify new admissions, and thereafter calculating dates for those eligible. It was reported that Personal Officers were not driving the paperwork for referrals to RMT and relied on the ICM Co-ordinator following up with individuals. There were a number of individuals who could work towards meeting the criteria for progression but this did not happen regularly. The reasons are detailed in QI 7.10. It was reported that a meeting had taken place during the week of the inspection to try to improve the RMT process.

There was an HDC Co-ordinator who completed a daily search of PR2 to identify prisoners who met the criteria to apply. When cases were identified she delivered the paperwork to the prisoner to complete and then forwarded any applications to Social Work for them to complete their reports. Positive relationships were observed between the HDC Co-ordinator and prisoners, and prisoners reported positive experiences of the process. The process appeared to be completed within relevant timescales. However, it was noted that some prisoners were transferred to other establishments during the HDC, staff reported that families had contacted the Inverness HDC Co-ordinator to report that they had experienced a delay as a consequence. The HDC process appeared to be functioning effectively and there was evidence of good practice in identifying prisoners for release.

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

Rating: Generally acceptable performance 

ICMs were sampled from April to September 2017, and all appeared to be compliant in relation to pre-release timescales. Parole was not common due to the sentence

profile within the population. As previously highlighted, there were no RMTs during the course of the inspection and staff reported that there had not been any in the last nine months. Staff reported a lack of interest in prisoners seeking access to progression, and it was believed that this was due to a reluctance to move to another establishment, and therefore away from family. However, progression was not occurring regularly due to an unwillingness to engage in the generic assessment process, which meant that prisoners were not targeting their offending behaviour and therefore could not meet the criteria for progression. The barriers were that offending behaviour programmes were not running in the establishment, and many prisoners were unwilling to transfer to other establishments to have these needs met. There were no other means for them to address their offending behaviour needs within the establishment.

7.13 The risk management measures that have to be observed in respect of prisoners serving Orders of Lifelong Restriction and those subject to Multi-Agency Public Protection Arrangements are implemented.

Rating: Satisfactory performance 

At the time of the inspection there were no prisoners in HMP Inverness serving an Order for Lifelong Restriction (OLR), and there had not been any for a number of years, due to a lack of psychology provision within the establishment. A number of individuals had been assessed for these sentences whilst on remand in HMP Inverness, but they did not return following sentencing. The ICM Co-ordinator was clear on how OLR prisoners would be managed if they were to receive one. The Multi-Agency Public Protection Arrangements were implemented as required by the ICM Co-ordinator.

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

Rating: Poor performance 

The prison offered a very limited range of employment and training opportunities for prisoners. There were only four work parties available, which were based entirely on the operational requirements of the prison. They included kitchen, laundry, recycling of waste and hall and prison-wide pass duties. There were 45 employment places for around 60 prisoners who were eligible for work and training. However, a number of these places were part-time and did not engage prisoners sufficiently well. Prisoners undertook essential training to allow them to work safely in their employment. However, this training was very elementary and did not allow them to develop a wider range of employability skills. The prison did not offer any certification for their training with accredited awarding bodies in vocational areas, such as manual handling, food hygiene or industrial cleaning. This was a missed opportunity to ensure prisoners were better prepared for release with qualifications that could assist employment. Management should ensure appropriately certificated employment and training opportunities are extended to maximise prisoner participation in purposeful activity.

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 

Fife College delivered the educational activity within the Learning Centre at HMP Inverness. The Centre was well used by prisoners for classroom activities, social interaction and visiting partner agencies. A useful satellite library, within the Learning Centre, provided opportunities for prisoners to access books and magazines when the main library was closed. Teaching staff delivered an appropriate range of programmes, five days per week, for all prisoner populations. During induction, Learning Centre staff made prisoners aware of the full range of opportunities available to them through a helpful induction booklet, and at a later date encouraged those who did not wish to participate.

Prisoners participated well in a suitable range of educational activity including project based learning, one-to-one tuition and formal classes. Around 23 classes (SCQF Levels 2-5) were offered each week centred on essential skills and expressive arts. Essential skills sessions included Information Communications Technology, numeracy, communication and employability skills. The expressive arts classes offered opportunities for prisoners in art, creative writing and music. A good range of accredited e-learning was available to prisoners and many prisoners were successful in gaining certificates for these courses. A few learners studied distance learning modules available through Dumfries and Galloway College. Almost all Learning Centre activities were certificated. In the previous 12 months 31 unit awards from SQA, and 421 short course certificates from other awarding bodies had been achieved by prisoners. However, almost all learning activities offered to prisoners were short, discrete modules which limited the length, scope and level of study available.

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

Rating: Poor performance 

There were a range of opportunities available within HMP Inverness, provided by a combination of SPS, NHS and Third Sector staff. A programme titled 'My Relationships' highlighted in QI 7.9 is relevant to this QI. The staff providing the approved activities were motivated and demonstrated good working relationships with prisoners and other professionals. Drug Action for Change was being delivered to four people at the time of the inspection. However two people had completed this course previously and had returned to custody. This suggested that, at least in part, it was not sufficient to support their recovery and pathway to desistance. Alcohol awareness was offered although staff reported that it was difficult to engage prisoners in this. SMART Recovery was jointly run by NHS and SPS staff as well as prisoners. An additional helpful feature was that SMART Recovery provided a link to the community that could be maintained for prisoners on release. There were a number of services providing support in relation to addictions.

It appeared as though referrals were considered and then divided up between the addictions services. There did not appear to be any differentiation between the addiction services provided by partner agencies. There were examples of good working relationships between these agencies and SPS staff and there were a range of services being provided by partner agencies. A number of prisoners and staff spoke positively of the CrossReach Service. A volunteer from CrossReach was providing person-centred counselling on two half-day sessions per week.

Whilst there were a range of opportunities available in-house, provided by motivated staff, there was a lack of offending behaviour programmes or ways for prisoners to effectively target their needs. The suite of approved activities provided development opportunities, but not always in the depth required to prevent repeat offending.

It was also noted that there appeared to be a gap in relation to understanding the needs of the population and then responding appropriately to this. This is a concern.

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

Rating: Generally acceptable performance 

The Links Centre had 32 appointments booked in one morning during the inspection. However, only five of the 14 individuals who had booked to attend were present. This is a concern. Of those that did not attend, four were required by the kitchen work party, two refused to attend, one was at hospital and two were attending the Drug Action for Change Group. There was no booking or timetabling of prisoners time which prevented prisoners from attending all of the events they were booked in for. It also prevented the best use of time and resources invested by Third Sector partners and staff, as events were often poorly attended or incomplete.

The concept of delivering Life Skills had been developed as a joint venture between SPS and Fife College. Regular employability courses had been delivered over the last two years, and were aligned to the SQA award. Uptake and completion had been low and this was attributed to it taking six to eight weeks to complete. Proposals were being considered to deliver it as a modular approach so that individuals could complete the modules they were interested in or would benefit from which would also prevent sentence length and transfers to other establishments being such a barrier. However this was yet to be implemented. This is a concern.

Following a reported need there had been two budgeting courses facilitated in the last two years. It was delivered by a Third Sector partner over six to eight weeks. However, it was reported that a barrier to completion was again short sentences and transfers out of the establishment. The Life Skills Officer reported a desire to implement a structured programme. Work had been developed but not implemented due to low staffing levels and low numbers of suitable prisoners. Working relationships had been developed with High Life Highland who provided literacy support to prisoners on a routine basis, and there were plans to implement High Life Highland intervention in the prison in 2018.

The library service was co-delivered with High Life Highland. Whilst the library service aimed to provide access to resources, it was noted that prisoners had positive relationships with the staff providing this service, which was an opportunity for pro-social modelling of appropriate relationships.

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: Generally acceptable performance 

The quality of the accommodation and equipment in the Learning Centre was good, and provided a relaxed environment for prisoners to participate in academic and practical activities. The relationships between Learning Centre staff and prisoners were very positive and respectful, which encouraged prisoners to participate meaningfully in a range of good quality learning activities. Almost all prisoners enjoyed and engaged well with their chosen activities. Project work was used well by staff to offer choice to prisoners, build their confidence and assess their core skills. Core skills were embedded within almost all Learning Centre activities, and staff were skilled at supporting prisoners to engage in their studies. Staff encouraged prisoners to evaluate the quality of the activities provided. This evaluation was used well by staff to identify key themes for improvement such as course content, progress with development of skills and potential barriers to prisoners completing and achieving their qualifications. Overall, the quality of purposeful employment activities was good.

In work parties the relationships between most prisoners and staff were positive and respectful, which resulted in a work environment that promoted purposeful working. However in some work parties, such as pass activities, prisoners were not always fully occupied or engaged. The prison provided good quality equipment and Personal Protective Equipment (PPE) in work areas such as the kitchen and recycling of waste.

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 

Most convicted prisoners who wished to work were offered some work opportunity. An allocation board met weekly to identify vacancies and the list of prisoners available to work. They then allocated prisoners to a particular work party. However, prisoners had no input to their allocation which was agreed solely by prison staff. Some staff reported that the regular turnover of prisoners led to work parties having insufficient numbers. Consideration of issues such as reducing part-time working and reassessing job roles may provide a solution at times of higher turnover.

Prisoners were able to attend education classes and gym sessions during the working day, around their work party. However, on some occasions, this left the work party short-staffed. The size of the prison allowed easy movement and escort

of prisoners between residential halls, workplace, Learning Centre and the gym. At times, staff shortages led to delays in prisoners attending their scheduled activities. On occasion, there were too many prisoners requesting attendance at the gym for the spaces available. However, prison staff were flexible and put on extra sessions to allow those prisoners who wanted to attend to do so.

All prisoners had the opportunity to attend the Learning Centre for nine hours of educational activities each week. Learning Centre staff also supported prisoners, who were physically unable or unwilling to attend scheduled classes, with their education in residential halls. During the three months prior to the inspection, around 60% of prisoners who were scheduled to attend the Learning Centre attended and engaged in the planned activities. The main reason for non-attendance was refusal to attend. Other reasons included prisoners due in court, called to work parties and having other appointments such as medical or family visits.

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 ●

During the inspection prisoners were observed taking exercise despite inclement weather. They were provided with high visibility waterproof jackets. A small group of mainstream prisoners spoke positively about access to exercise, and this appeared to be consistently made available to those wishing to take the opportunity. Staff reported that when they were understaffed, regimes staff were utilised in order to ensure exercise was accommodated.

7.21 Prisoners are assisted in their religious observances.

Rating: Satisfactory performance ●

There were three part-time Chaplains who conducted religious services and provided pastoral guidance. The Chaplains were from the Roman Catholic Church and Church of Scotland, but they met with prisoners of any faith. Referrals were made by requesting a visit via a book in each residential area, or a referral through PR2. Attendance numbers at religious services fluctuated. There were occasions when no prisoners attended and maximum numbers reached around 17. Signage in the halls clearly sign-posted weekly religious services on a Sunday morning.

The Church of Scotland services tended to take place in the Recreation Room, with the Roman Catholic services taking place in the small multi-faith space room, in the corner of the Recreation Room. Whilst the main room was of an adequate size, it was found to be cold during the inspection. The Prison Fellowship delivered Fellowship meetings within the Links Centre every Tuesday afternoon. Volunteers from the Prison Fellowship attended the weekly Sunday service to support the Chaplaincy Team and also provided support to prisoners upon release.

The population of HMP Inverness was reported to be broadly non-denominational or Christian although the exact make up was unknown. The Chaplains were able to organise prisoner meetings with other faith leaders upon request.

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

Rating: Satisfactory performance 

The recently refurbished Library provided a comfortable space for prisoners to browse and choose reading material. It was open two half-days each week and all categories of prisoner were able to visit it. Although there were no formal records of prisoner usage, it was estimated that around 25% of prisoners used the facility each week.

The Library contained a reasonable stock of books, including fiction, non-fiction and reference books, including legal texts. However, there was a limited range of books in languages other than English and no books in large print or audio format. Prisoners were able to access and order books from Highland Council Library Services, which were usually available the following week, and this service supported prisoners well. The Library was run in partnership with High Life Highland, the agency that manages Highland Council Library Services, and this partnership worked well. At the time of the inspection, there was funding provided for the services of a Library Assistant who managed the catalogue and borrowing. She also provided advice to prisoners on book availability and alternative reading options. However, there was limited joint-working between the Library and Learning Centre to promote initiatives such as the six book challenge and book clubs.

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

Rating: Generally acceptable performance 

Gym staff had good relationships with prisoners and provided a relaxed atmosphere for prisoners to engage in fitness activities. They placed a strong emphasis on promoting a healthy diet combined with appropriate regular exercise. Prisoners were encouraged to plan their physical activities in consultation with gym staff, who provided bespoke personal fitness programmes and advice on diet, nutrition and steroid awareness.

All prisoner populations had an opportunity to access a small, well-equipped gymnasium five days per week, three evenings each week, and at weekends. However, due to staff shortages, the facility was not always available to prisoners during the evenings and at weekends. All prisoners completed an induction session before accessing the fitness equipment. Prisoners had access to fresh gym clothing, towels and showers within the gym facility, and most prisoners made good use of this arrangement. The majority of prisoners made good use of a range of modern exercise equipment in the fitness centre. However, the range of activities available was limited almost exclusively to cardio-vascular exercise and the use of weights.

There was no other space available for prisoners to undertake physical exercise activities, apart from a small outdoor all-weather football pitch. This was only available if there was sufficient interest from prisoners. Activities for older or less able prisoners were very limited.

The Learning Centre worked in partnership with gym staff to provide opportunities for prisoners to work towards an accredited qualification in Personal Fitness. However, there were no other opportunities for prisoners to achieve certificated awards during their physical training activities.

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: Generally acceptable performance 

Most prisoners participated in a range of recreation activities during daily recreation periods. Traditional activities such as pool, table tennis and darts were available within the Recreation Room. Prisoners were also able to access personal TVs within their cells.

A few prisoners acted as informal Peer-tutors within work parties, with more experienced prisoners providing support to prisoners undertaking new roles. This arrangement supported these prisoners well and complemented the formal training provided by prison staff. There were two Listeners in the prison who were available to listen to and support other prisoners in confidence. This was particularly useful for new prisoners and the process was used regularly. The local Samaritans group provided formal training for prisoners undertaking the role of Listener and the process was managed well by a Prison Officer. A new cohort of prisoners had been identified to continue the service and were expected to undertake training in the near future.

The Learning Centre provided sessions in the Links Centre to support prisoners who were registered blind, transgender, from an ethnic minority, or had learning difficulties or mobility problems. Fife College extended additional support, from their Inclusion Team, for prisoners with additional support needs as and when required. The Learning Centre also provided ESOL support as one-to-one and small group sessions to support learners when the need was identified.

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

Rating: Generally acceptable performance 

Most prisoners were encouraged to participate in a variety of cultural events and activities that took place within the prison throughout the year. For example, the Learning Centre engaged with the FCO and Action for Children to develop a theme of "Hope" for Prisoner's Week. Prisoners also designed posters to promote a Gospel Praise concert and produced creative displays for the celebration of St Andrew's and Burn's Day.

The Learning Centre worked effectively with the Chaplaincy and voluntary organisations to provide cultural activities for prisoners and accredited their core skills. For example, workshops were organised with Fèis Rois to provide opportunities for prisoners to learn more about the Gaelic language and culture through music and song. Eden Court Creative offered performing arts classes for prisoners, and supported them to produce a video production for Prisoner's Week, which was highly commended in the 2017 Koestler Awards. Through the Learning Centre, prisoners were provided with opportunities to engage in a good range of cultural activities. These included the design of murals with professional graffiti artists, project work with Libertie and Vox Liminis, Christmas crafts and personal gifts for their family. The Learning Centre holds awards ceremonies each year to exhibit prisoners' work and celebrate their achievements.


STANDARD 8 - TRANSITIONS FROM CUSTODY TO LIFE IN THE COMMUNITY

Prisoners are prepared for their successful return to the community.

Commentary

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: Generally acceptable performance 

Links Centre staff, including TSOs, the ICM Co-ordinator and community agencies worked well together to assist successful reintegration. Further work and commitment was required to ensure a more collaborative approach by residential staff. They were not as involved as deeply as they could or should be in supporting this work, by identifying need and using Community Integration Plans (CIPs) to begin the reintegration process. Links Centre staff had tried to promote the work they were doing with residential staff but this had not yet had the desired impact. Further work was required by FLMs and senior managers to establish a culture of collaboration between all staff to support successful reintegration.

Induction was delivered by residential staff, rather than Links Centre staff, due to constraints on staff time. However, this had resulted in the induction delivery time being much shorter than desirable. When prisoners accessed services in the Links Centre they were able to do this without having to wait too long. This included a range of support looking at housing, addictions, mental health, finances and counselling through statutory and Third Sector partners. There was a strong sense that proactive support to address issues around housing, finances and health matters existed, despite the existence of challenges outwith their control, in particular waiting time to access universal credit and identification of and access to appropriate housing.

ICM processes were working well, with strong involvement of prison and community Social Work and Police Scotland. More routine involvement of other key partners, such as Personal Officers and health staff would add value to the process. Pre-release plans needed to be clearer and more detailed. Two TSOs were working tirelessly, over a large geographical area, actively engaging with individuals who may benefit from their support. They had strong relationships with Links Centre staff, had good links with outside agencies and were fully supported by management.

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: Generally acceptable performance 

The Links Centre staff in HMP Inverness were extremely keen to involve a range of agencies in the on-going development of activities to assist improved community reintegration. Serving a local prison population had enabled them to establish good local links and working relationships with agencies such as the Department for Work and Pensions (DWP), Job Centre Plus and local authority housing. Agencies such as the Citizens Advice Bureau (CAB), Job Centre Plus, CrossReach and High Life Highland attended the Links Centre on set days each week. They provided support and advice in relation to needs such as tenancy and arrears, literacy and numeracy and counselling. With some prisoners returning to Moray on release, contacts had also been established with Arrows¹ and Moray local authority housing.

The provision of direct services for the smaller number of prisoners returning to Orkney, Shetland or Eileen Siar was more challenging and was normally done by telephone.

Social Work services also provided additional support for more vulnerable prisoners who had a learning or physical disability, ensuring there was a connection between prison and community based services.


The Persistent Offenders Project (POP) was a partnership service between The Highland Council, NHS Highland, Police Scotland, SPS and Apex Scotland. POP targeted the most persistent offenders within the area, providing more intensive support in the community. This service is funded from April 2017 to March 2018 at which point it will be evaluated to consider future viability.

There were a range of local and national agencies providing services within the prison to prepare prisoners for release. However there was a lack of a clear planning processes and limited co-ordination to meet individual prisoners. This often meant prisoners were in touch with multiple agencies dealing with similar issues, creating duplication of effort, and other prisoners were not in touch with any agency that could assist them.

CIPs were not being utilised which meant a lack of co-ordinated effort to plan for release in relation to short term prisoners. This was a concern.

¹ Arrows is a Quarriers Service providing drug and alcohol support in Moray

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: Poor performance 

HMP Inverness holds very few long-term prisoners. However, it holds a number of sex offenders, many of whom were subject to supervised release orders or extended sentence. Pre-release ICMs were taking place timeously. Planning and holding ICMs were often challenging in respect of long term prisoners, as they often transferred in and out of HMP Inverness. This meant they did not have their pre-release ICM in the prison. The ICM Co-ordinator, prison and community-based Social Workers, and Police Scotland routinely attended and contributed to ICMs. However, Personal Officers did not routinely attend, and this had created a deficit in constructive discussion about prisoners by officers who may know them best. Instead the ICM Co-ordinator pulled information from PR2 into the ICM minute, which was often out-of-date and without context. Similarly addictions and mental health staff often could not attend, but would normally provide an update. The absence of key staff affected the quality of discussion and planning of pre-release ICM.

The quality of the ICM minutes required significant improvement. There was no explicit pre-release plans. The focus continued to be on what was happening within the prison, and any issues discussed that required to be addressed on release did not have a clear action or conclusion. This was a significant concern.

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 

HMP Inverness did not run any programmes. However it provided approved activities such as SMART Recovery, Drug Action for Change, Victim Awareness and White Ribbon, although they did not always run routinely. Staff advised the regular transfer of prisoners made it difficult to run approved activities in a consistent manner as prisoners identified as suitable would be transferred to another prison.

A consistent theme from prisoners and staff was that when the need to complete a specific programme was identified, it could not be completed because the provision was not available. Prisoners would therefore need to transfer to another establishment to complete the programme. As previously discussed in standard 7, most prisoners did not want to transfer out of HMP Inverness, and waiting for liberation or HDC was seen as a preferred option. This situation was a barrier to accessing and completing programmes that were identified as necessary to address potential future offending behaviour. A lack of programmes and the regular transfer of prisoners often meant starting an intervention that could then be continued or reinforced in the community was limited.

Where prisoners were engaged in treatment for drugs, alcohol or mental health issues within the prison, efforts were made to link them into support services on release. For addiction services this was generally available. Sometimes access to mental health support was not as easily accessible. If prisoners were de-registered with their GP they had to wait until they were re-registered on release before a referral could be made for mental health support. This was more straightforward for those already involved with the Psychiatrist in the prison.

TSOs routinely supported prisoners to set up and attend health appointments on release. Overall availability of support and interventions to address issues around addiction and health were stronger than interventions to tackle offending behaviour.

8.4 As prisoners near release all reasonable steps are taken to ensure appointments and interviews are in place with relevant agencies.

Rating: Generally acceptable performance 

Core screening and CIPs should aid the identification of need and the follow-up actions required, but this was not being completed as it should. Many prisoners did not have a CIP. This is a significant concern.

Links Centre staff had undertaken a pilot using the “My Compass” tool. It was a more inclusive, interactive and person-centred approach to identifying need and enabled staff to plan what needed to be done as well as track progress with the prisoner using a scoring system. This approach to screening and planning appeared to be useful, and it would be helpful to consider this type of model alongside any wider SPS developments. All prisoners being released on statutory measures had a pre-release ICM, but it was not always clear what support was in place for release. Pre-release plans needed to be SMARTer².

Links Centre staff, along with partner agencies including Social Work and TSOs worked hard to put support in place and reach out to all prisoners who may not have asked for support through core screening or where CIPs were not in place or acted upon.

TSOs offered their services to prisoners six weeks prior to release. They met with prisoners and undertook an initial assessment, and then looked to put supports in place in the community. TSOs were setting up appointments with a range of agencies based upon need, such as the DWP and Job Centre Plus, housing, health, addictions and High Street banks. TSOs covered a large geographical area so had to manage their time effectively and liaise well with community partners. Strong working relationship with DWP, Job Centre Plus and housing assisted this.

Criminal Justice Social Work had substance misuse workers based in the prison that also provided support in the community on release. New Routes were supporting young people up to the age of 25 years. At the time of the inspection the worker was on sick leave and it was not clear to staff who would be supporting younger prisoners in their absence.

² Specific, Measurable, Achievable, Realistic, Time-limited

There was a range of helpful partners and agencies setting up appointments and arranging support for prisoners on release, but the process for this was disjointed and operated on an informal rather than business-like fashion.

There was no single effective system in place to ensure prisoners had a main contact that would help them plan for release.

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

Rating: Generally acceptable performance 

Links Centre staff and in particular TSOs, had established strong working relationships with Highland Council housing staff. There were significant challenges in accessing housing in Inverness, with many prisoners leaving prison unclear where they were going. TSOs were confident that they could find somewhere for prisoners to live on release, albeit this was often identified on the day of release and may not always be the most suitable type of accommodation. Local housing support services, either through the council or Third Sector partners, helped support those moving into accommodation with issues such as door management, budgeting and finances. Arrows provided housing support to prisoners returning to Moray. The Sex Offenders Liaison Officer worked closely with staff involved in the ICM process to identify suitable housing for sex offenders.

The CAB offered a useful service whereby prisoners could advise them if they had a tenancy on entering prison, and they helped advocate on their behalf to manage this whilst in prison. Some prisoners reported being unsure how issues raised had progressed, and others were not aware of the service.

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

Rating: Poor performance 

This was an area that required further development as there were little options available, or targeted efforts to improve access to training, education or employment. Staff reported that many prisoners were not ready for training, education or employment, but there were little options available. The prison did not offer recognised qualifications or awards through education, so prisoners were not able to acquire skills or qualifications for work. Fife College were running a Life Skills course which enabled prisoners to focus on some basic skills for work, such as job leads, interviews, timekeeping and behaviour. This also contributed to units for SVQ. Outwith this there were few opportunities for wider education and training.

Staff reported that the prison was not doing as much as it should to look at employment options. This was said to be linked to a lack of resources, low level of prisoner interest and the regular transfer of prisoners. Staff had some good ideas that they wanted to develop in terms of barista training, manual handling and health and safety qualifications, but these had not developed.

Managers recognised there was a deficit in this area and it required further development, but there was no clear strategy or leadership and direction to address this.

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

Rating: Generally acceptable performance 

Links Centre staff and TSOs worked with prisoners to arrange access to finances on release. This included arrangements with a national bank locally, to set up bank accounts to access Universal Credit. Appointments to get identity verification and apply for Universal Credit on the day of release were put in place by TSOs. Universal credit applications were taking up to six weeks to be processed with liberated prisoners being reliant on release grants. The prison had very recently managed to get internet access for prisoners which enabled them to make application for benefits, job searches, and set up their own email account.

TSOs had established working relationships with local food banks to access provisions for prisoners on release. The CAB was working with prisoners who had tenancies to try and minimise the accruing of rent arrears while they were incarcerated, and put in place a plan to manage this in conjunction with housing services. This was challenging with a mixed picture of success. Timing was crucial, if the CAB did not engage with prisoners at the earliest opportunity, the time may have elapsed to progress this. It was dependent on good information getting to prisoners at core screening to ensure they knew about the service the CAB could offer.

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

Rating: Generally acceptable performance 

The Links Centre staff and TSOs were working hard to identify and engage with short-term prisoners, to help support their reintegration to the community. However, staff found it challenging to continue to work with those who wanted support due to the high levels of prisoner transfers. Many short-term prisoners were serving sentences of less than 12 months so were not allocated a Personal Officer. This meant they were often not referred by residential staff to the Links Centre and TSOs. If they were able to access them they received useful help, advice and support to transition into community.

Long-term prisoners were having pre-release ICMs, but few were taking place due to the low number of this category of prisoner. Most prisoners released on statutory licence were sex offenders. Community and prison-based Social Work were well engaged in this process along with the prisoner and ICM Co-ordinator, but there was often an absence of other key agencies. The quality of pre-release plans needs to improve, as it was not always clear what the plan was or who was responsible for taking action.

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

Rating: Satisfactory performance 

Most prisoners returned to the local community. Therefore pre-release ICM meetings were well-attended by community-based Social Workers, who worked closely with prison Social Work staff. The meetings considered risk and needs assessment, but they needed to have a clearer plan that made explicit what was to happen on release. Tackling needs, such as housing, may be difficult but plans needed to be more explicit. There were examples of prison-based Social Work linking well with their colleagues in community-based areas of Social Work for prisoners who were more vulnerable.

In relation to short-term prisoners, TSOs offered a service six weeks before release to help with resettlement. Prisoners would benefit from residential staff working more closely with them to help make the links from prison to community. There was a disconnect between residential, Links Centre and TSO staff that was impacting on effective practice. Links Centre staff had tried to promote a stronger understanding of their work to residential staff, to encourage better joined up working, but this had not resulted in progress. Work was required to encourage residential staff to better understand their role in assisting effective prisoner reintegration to the community.

TSOs were providing good support on preparing for and on release. They were setting up and attending appointments with prisoners and had a strong belief in the work they were doing. The large geographical area they covered was challenging, but they had developed ways of managing this. TSOs worked with prisoners for up to three months post-release, but longer if this was required.


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.

Commentary

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 

The prison and its staff were committed to ensuring that prisoners experienced a life with dignity in prison. However, it was clear that staff shortages and the need to transfer prisoners at very short notice to prevent overcrowding presented a challenge to delivering this duty. This was further exacerbated by the material conditions of the prison, the regular staff shortages or double shift working and the multiple prison regimes that existed as a result of the prisoner mix.

However, prisoners reported that staff treated them with dignity and respect, and both interviews and observations evidenced a positive atmosphere between staff and prisoners.

Inspectors encountered a number of examples of good practice, including the support given to prisoners to facilitate visits and have contact with the outside world. The father and child cinema event and the live literature programme, were examples of innovative practices to address issues facing the prison population in relation to family life. There was also a visible campaign to eradicate violence against women within the prison. There was positive evidence that the needs of prisoners in the process of transitioning from one gender to another were identified and provided for.

Human rights were not explicit in the “vision” or the Equality and Diversity (E&D) strategy. An explicit reference to human rights is important as it covers all prisoners and staff, and not only those who have protected characteristics. This was reflected in the level of understanding of human rights, and to a lesser extent of equality and non-discrimination throughout the prison and staff - which was reasonable, but could be enhanced.

There appeared to be an emphasis to the legality aspect of equality law in the strategy, without going beyond it to explore both best practice and the good relational benefits that derive from it. The E&D strategy was a descriptive statement of the Equalities duty that lacked reference to the contextual environment and the specific needs of HMP Inverness. There was no action plan to ensure the strategy was effectively delivered.

There were significant limitations to providing adequate material conditions for prisoners, particularly those with physical disabilities and older prisoners. There was a feeling of high social density and lack of spatial privacy, which appeared to be contributing to the feeling of helplessness that some prisoners experienced.

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 

Human rights were not explicit in the “vision” or the E&D strategy. This was reflected in the level of understanding of human rights, and to a lesser extent of equality and non-discrimination throughout the prison and staff, which was reasonable but could be enhanced. There was an emphasis on the legality aspect of equality law in the strategy, without going beyond it to explore both best practice and the good relational benefits that come from it.

E&D meetings were held quarterly and generally chaired by the Governor supported by a functional head. Lead responsibility for co-ordinating the work was assigned to a Unit Manager. Minutes confirmed there was very little progress achieved between meetings. Furthermore, there was no direct representation of prisoners in these meetings. The principal means for prisoners to raise E&D issues or complaints was through PIACS, however these were not held frequently.

There were no E&D complaints for the 2016-17 year, but some prisoners interviewed were unaware of the processes for raising E&D issues or the system in place. Information about the complaints process and IPM posters were displayed in most residential areas, but complaint forms were not readily available in all areas.

Data on protected characteristics was collected during the admission process and enhanced from information gathered during first night in custody, etc. However there were inconsistencies and gaps in the data on foreign nationals and disabled people. Failure to record this information could lead to support needs being missed.

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

Rating: Generally acceptable performance 

An E&D structure was in place (see QI 9.1), however, there were challenges in ensuring the experience of prisoners on the halls was accurately reflected, and that the structure leads to improvements for prisoners. Inspectors were advised that the approach to dealing with E&D issues was highly individualised. Often, rather than structured mechanisms for identifying issues, they arose from relationships between staff and prisoners and from general case management. This approach depended heavily on the quality of individual relationships, and may lead to differential

treatment. This again highlighted the importance of up-to-date training on a continuing basis for all staff.

Prisoners were clear that staff treated them with dignity and respect. There appeared to be a positive atmosphere between staff and prisoners with some minor exceptions.

An action plan with SMART objectives would be helpful for the effective implementation of an E&D strategy.

It is important that each accommodation unit should ensure the availability of all relevant forms relating to key processes such as complaints. Complaints system and IPM posters were displayed in most residential areas, but complaint forms were not, for example F Wing and the Links Centre.

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


Rating: Generally acceptable performance 

There were a number of young persons in custody and a larger number of older prisoners. Whilst staff gave due consideration to the needs of older prisoners in relation to their situation and Fire Safety Risk Assessments, most were located across different accommodation units. This made it difficult to assess and provide for their disabilities and mobility needs, which ranged in severity. Some prisoners reported that they could not take part in activities because of access issues in some parts of the prison. Older prisoners risked being isolated by a physical environment and regime that they could access. For example, recreation was located in a second floor accessed via narrow stairs, which was not suitable for those with severe mobility needs and/or deteriorated health conditions.

The preparation for release of older prisoners differed from the rest of the prison population, as they were least likely to reoffend and were unlikely to gain employment. There was difficulty finding accommodation for older prisoners on release, and there should be greater focus on preparing them for accessing community services and living independently. This is critical for successful reintegration.

Older prisoners should not be held in locations that are not configured to meet their needs.

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

Rating: Poor performance 

HMP Inverness had only one 'partially' adapted accessible cell but there were a number of prisoners with physical disabilities. There were severe limitations to providing adequate material conditions for prisoners, particularly those with physical disabilities. However it is important to note that prisoners reported that most of their

needs were met by staff readily available to assist. As with older prisoners, disabled prisoners were not able to access all parts of the prison, and therefore their regime was limited in relation to recreational activities and education, leading to a risk of isolation. During the inspection, it was not possible for a prisoner in a wheelchair to access the recreation room and education, both of which are located in a second floor. Whilst there was a chair lift in place, Inspectors were informed by staff that it was not used in case there was a requirement to evacuate and staff were unwilling to utilise the 'Evac' chair provided. This situation meant that certain individuals were being discriminated against and reasonable adjustments were not being made to allow full participation.

Prisoners with additional needs, such as a learning disability, or those not proficient in English would struggle to follow the information provided during induction. This may explain some of the gaps in knowledge among some prisoners.

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 

For those transitioning the situation appeared well managed. The information available, including the case conference notes, suggested good practice was being followed. Inspectors noted that individual wishes were being met and a clear offer of on-going support was made.

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: Generally acceptable performance 

It is important that SPS and HMP Inverness enable and support the right to private and family life for foreign nationals or those prisoners whose family are not able to attend visits. Alternatives including Skype should be considered where appropriate to ensure that good quality family contact can be maintained irrespective of where those family members reside.

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

Rating: Not applicable 

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

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

Rating: Generally acceptable performance 

Prisoners reported being treated with dignity and respect, regardless of their racial group or nationality. There were no reports of racial tension or incidents amongst those interviewed, including a number of foreign nationals. HMP Inverness had five foreign nationals at the time of the inspection. As noted in other prison establishments, foreign nationals are potentially a marginalised group whose isolation can be exacerbated by language barriers. Inspectors were concerned with the lack of information and communication provided to foreign nationals. This may constitute a barrier for access to legal representation, medical services, complaint procedures, and other services.

Inspectors spoke to a number of prisoners for whom English was not their first language and therefore struggled to communicate. None of them recalled having the assistance of an interpreter. This is a concern. Management should ensure staff and prisoners are made aware of the process for accessing interpreting services.

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

Rating: Generally acceptable performance 

Prisoners in HMP Inverness could exercise their right to freedom of religion or belief. However, some religious minorities expressed difficulties in obtaining religious texts and artefacts. Inspectors were told that whilst staff and the Chaplaincy were approachable, it could take a significant time to see them.

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

Rating: Satisfactory performance 

Only male prisoners were held in HMP Inverness during the inspection. Whilst a number of prison, medical and care staff were female, there were no gender related issues raised.

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

Rating: Satisfactory performance 

No issues in relation to sexual orientation were raised.


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.

Commentary

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: Generally acceptable performance 

A lack of continuity of senior leadership has contributed to the challenges facing HMP Inverness. Since the last HMIPS inspection in 2014 there have been four Governors in Charge. At the time of the inspection, two of the four senior managers were “acting up” to their current role and half of the FLMs were in acting up positions. Effective leadership is built on positive staff relationships and these take time to development. Staff members spoke of their frustration at the high turnover of senior managers and the uncertainty which such changes inevitably brought.

There was a need for clear leadership in relation to a number of processes such as ICM and RMT. Greater coordination of activities supporting prisoners in preparation for their liberation would ensure better outcomes for prisoners and for society. There was an evident disconnect between residential staff and those working in the Offenders Outcome area.

It was evident that staff in HMP Inverness took pride in the work they were doing and were committed to providing professional and caring support to those in prison. Good partnership arrangements were in place which facilitated positive outcomes beyond the walls of the prison. A good example was the Persistent Offenders Project, a joint project with Highland Council, NHS Highland, Police Scotland and Apex Scotland, designed to reduce offending by this population.

Staff from HMP Inverness were actively involved on the Highland Community Justice Partnership and the Highland Alcohol and Drug Partnership.

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: Generally acceptable performance 

A particular challenge for HMP Inverness arose from there having been four Governors in Charge since the last inspection in 2014. Combined with a number of senior posts being occupied by managers in an “acting” capacity, this inevitably led to some lack of continuity in direction and leadership. This lack of continuity was apparent to and commented upon by staff throughout the prison. At the time of the inspection, six out of the twelve FLMs and two of the four senior operational management team were “acting” in the role. HMP Inverness would clearly benefit from a period of stability in the senior management team.

A Business Improvement Plan was in place for 2017-18, which set out the key priorities for the prison. Plans were in place to ensure that the prison's priorities linked directly to the SPS corporate priorities. There was scope to improve the communication with staff throughout the prison.

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

Rating: Generally acceptable performance 

A schedule of regular management meetings was in place. At these meetings, performance data was regularly reviewed. However, the performance information was quite limited so there would be benefit from considering more comprehensive management information. This would assist with the problems identified in Standard 8 of a lack of coordinated planning for supporting prisoners' preparation for release.

HMP Inverness had a robust system for conducting audits to provide assurance on key processes and activities, however it was not clear how these linked to improving outcomes. They had a good level of compliance for the audits required by SPS headquarters.

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: Satisfactory performance 

Staff throughout HMP Inverness took pride in their work and had a clear sense of their priorities. Training plans were well maintained and up-to-date, with a good level of completion of mandatory training. In many posts, staff showed a high level of flexibility, often being required to perform more than one function. Their willingness to respond positively to such demands was impressive.

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 

HMP Inverness operated a Reward and Recognition Committee to consider those who had been nominated for recognition. In suitable cases, staff were recommended to receive appropriate recognition for their endeavours. Funding applications for courses were also considered and funds allocated. Two members of staff had recently received a joint team Butler Trust award, in recognition for their work in the prison. The Governor held regular staff forums to help improve communication. There was a system in place for managing underperforming members of staff, but this was rarely used.

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

Rating: Generally acceptable performance 

There were a number of staff vacancies and posts covered by staff in “acting” capacities throughout the prison functions, including healthcare. Additionally, the high turnover of senior managers in leadership roles had had an adverse impact on the consistency of leadership and direction for staff. It was therefore even more important to ensure that staff were bought in to the changes which were planned for the prison.

10.6 Each functional staff group understands and respects the work undertaken by each of the other functions.

Rating: Generally acceptable performance 

In general, staff were aware of the duties undertaken by other staff groups in the prison. There were regular meetings between SPS staff and the Health Centre staff, with generally positive relationships resulting. In the Links Centre the diverse range of organisations worked well together.

There were, however, areas of work in the prison where there were less positive levels of understanding and support. There was scope for greater engagement of staff working in residential areas to understand and support the reintegration of prisoners back into the community. A more collaborative approach between residential staff and those working in the Links Centre was required.

The lack of an integrated timetable of activities meant that some prisoners were required to be in multiple locations at the same time. Management need to ensure that they suitably and appropriately utilise the resources at their disposal.

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

Rating: Satisfactory performance ●

HMP Inverness was not able to provide accommodation for all prisoners in Scotland who reside in the north of Scotland. As a result, there was a high level of transfers of prisoners to other prisons in Scotland. There were satisfactory arrangements in place to facilitate these transfers. Due to the distant location of HMP Inverness there is a greater need to keep staff informed about developments and learning occurring elsewhere, and therefore specific efforts are required to meet this need.

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

Rating: Satisfactory performance ●

There was a good range of outside agencies providing services in the prison, with some excellent examples of constructive joint working. There were good links with agencies such as the DWP and local authorities. CAB, Job Centre Plus, CrossReach and Highlife Highland all attended the Links Centre regularly, to provide support for prisoners in preparation for their reintegration into the community.

The POP was a good example of a partnership service between HMP Inverness, The Highland Council, NHS Highland, Police Scotland and Apex Scotland. It targeted the most prolific persistent offenders, coordinating activity both within the prison and in the community.

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

Rating: Satisfactory performance ●

The Governor of HMP Inverness was an active participant in the Highland Community Justice Partnership, and the Highland Alcohol and Drug Partnership. This sent a strong message about the commitment of the prison to work with other service providers providing support for people leaving prison at the end of their sentence. There were plans to develop multi-agency plans to create single CIPs for all those being liberated from the prison.

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

Rating: Satisfactory performance ●

HMP Inverness had good links with local community organisations and had engaged well with local interest groups. SPS have announced plans to replace HMP Inverness with a new prison to the east of Inverness – HMP Highland. SPS undertook consultation on their plans for the new prison. This resulted in considerable interest from local communities, who expressed their views on the

location of the new prison. There will be more opportunities over the next three years to engage further with local media and communities as the plans come to fruition.

Annex A

Prison population profile as at 13 November 2017 (Data provided by SPS)

Status	Number of prisoners	%
Untried Male Adults	27	26
Untried Female Adults		
Untried Male Young Offenders		
Untried Female Young Offenders		
Sentenced Male Adults	61	59
Sentenced Female Adults		
Sentenced Male Young Offenders	1	1
Sentence Female Young Offenders		
Recalled Life Prisoners		
Convicted Prisoners Awaiting Sentencing	15	14
Prisoners Awaiting Deportation		
Under 16s		
Civil Prisoners		
Home Detention Curfew (HDC)	4	

Sentence	Number of prisoners	%
Untried/Remand/Convicted awaiting sentence	42	40
0 – 1 month		
1 – 2 months		
2 – 3 months	1	1
3 – 4 months		
4 – 5 months	7	7
5 – 6 months	2	2
6 months to less than 12 months	21	20
12 months to less than 2 years	10	10
2 years to less than 4 years	14	13
4 years to less than 10 years	5	5
10 years and over (not life)		
Life	1	1
English recall	1	1

Age	Number of prisoners	%
Minimum age:	20Y 6M	
Under 21 years	1	1
21 years to 29 years	37	35
30 years to 39 years	36	35
40 years to 49 years	20	19
50 years to 59 years	6	6
60 years to 69 years	3	3
70 years plus	1	1
Maximum age:	72Y 4M	

Total number of prisoners	104
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Acronyms

CAB	Citizen's Advice Bureau
CCTV	Closed-circuit Television
CIP	Community Integration Plan
CSRA	Cell Sharing Risk Assessment
DWP	Department for Work and Pensions
E&D	Equality and Diversity
ECR	Electronic Control Room
ESOL	English for Speakers of Other Languages
FCO	Family Contact Officer
FLM	First Line Manager
GP	General Practitioner
HDC	Home Detention Curfew
HMIPS	Her Majesty's Inspectorate of Prisons
ICC	Internal Complaints Committee
ICM	Integrated Case Management
ICT	Information Communications Technology
IMU	Intelligence Management Unit
IPM	Independent Prison Monitor
LTP	Long-term prisoner
NPS	Novel Psychoactive Substances
OLR	Order for Lifelong Restriction
ORT	Opiate Replacement Therapy
PCF	Prisoner Complaint Form
PEEPS	Personal Emergency Evacuation Plan
PIAC	Prison Information and Action Committee
PIDS	Perimeter Intruder Detection System
PIN	Personal Identification Number
POP	Persistent Offenders Project
PPE	Personal Protective Equipment
PR2	The SPS electronic prisoner records system – Version 2

REHIS	The Royal Environmental Health Institute of Scotland
RMT	Risk Management Team
SCQF	Scottish Credit and Qualifications Framework
SMART	Self management and recovery training
SOP	Standard Operating Procedure
SPS	Scottish Prison Service
SPSO	Scottish Public Services Ombudsman
SRU	Separation and Reintegration Unit
SVQ	Scottish Vocational Qualification
THN	Take Home Naloxone
TSO	Throughcare Support Officer
VC	Video-conferencing
VISION	Electronic health record



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