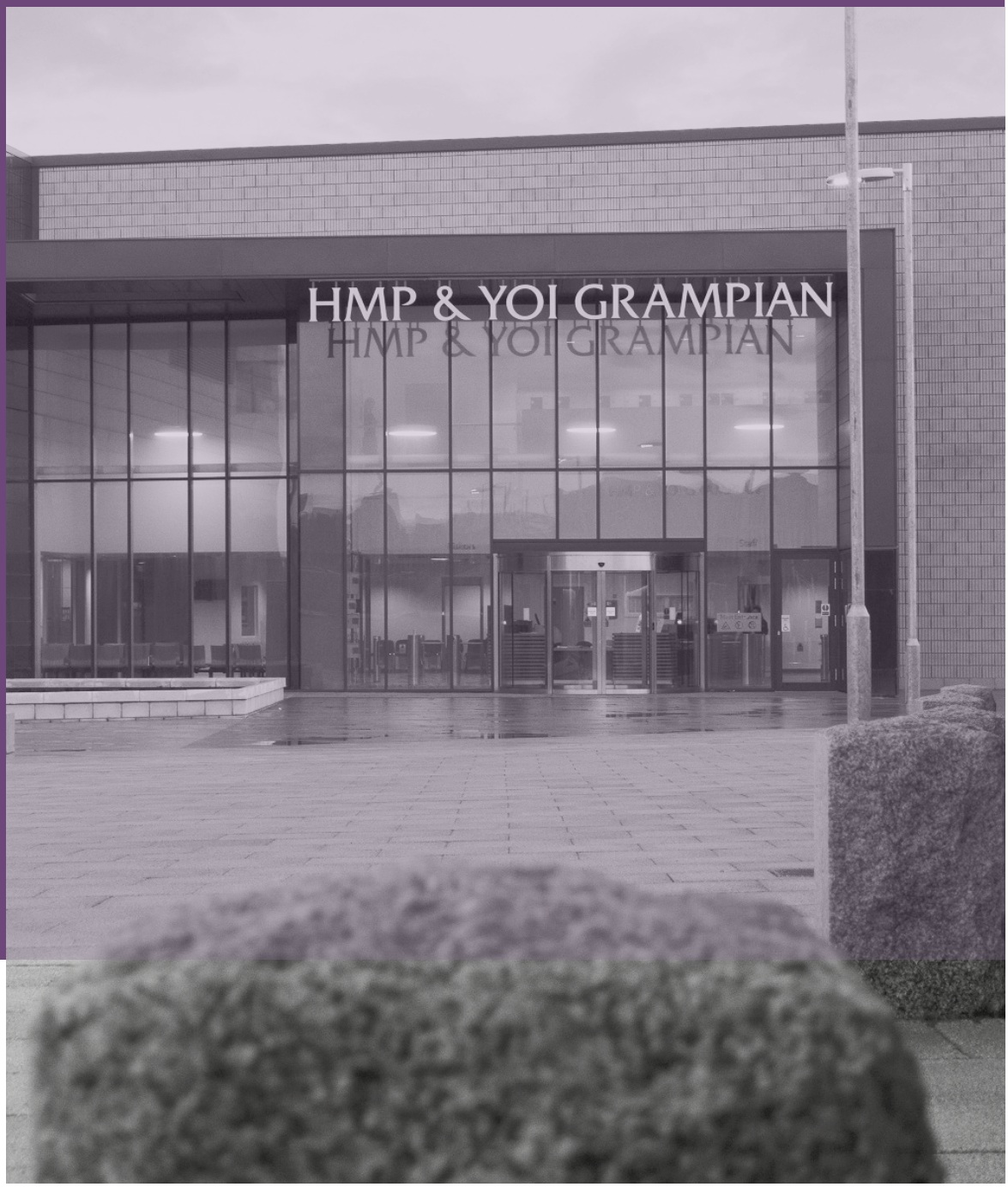
HMIPS
HM INSPECTORATE OF
PRISONS FOR SCOTLAND

INSPECTING AND MONITORING

FULL INSPECTION REPORT ON HMP YOI GRAMPIAN

FULL INSPECTION – 4-15 FEBRUARY 2019



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EVIDENCE REPORT

INTRODUCTION AND BACKGROUND

This report is part of the programme of inspections of prisons carried out by HM Inspectorate of Prisons for Scotland (HMIPS). These inspections contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies known as the National Preventive Mechanism (NPM); which monitor the treatment of and conditions for detention. HMIPS is one of several bodies making up the NPM in the UK.

HM Chief Inspector of Prisons for Scotland (HMCIPS) assesses the treatment and care of prisoners across the Scottish Prison Service estate against a predefined set of Standards. These Standards are set out in the document 'Standards for Inspecting and Monitoring Prisons in Scotland', published in May 2018 and can be found at **https://www.prisonsinspectoratescotland.gov.uk/standards**.

The Standards reflect the independence of the inspection of prisons in Scotland and are designed to provide information to prisoners, prison staff and the wider community on the main areas that are examined during the course of an inspection. They also provide assurance to Ministers and the public that inspections are conducted in line with a framework that is consistent and that assessments are made against appropriate criteria. While the basis for these Standards is rooted in International Human Rights treaties, conventions and in Prison Rules, they are the Standards of HMIPS. This report and the separate 'Evidence Report' are set out to reflect the performance against these standards and quality indicators.

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

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

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

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

1. A colour coded assessment marker

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

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

This report provides a summary of the inspection findings and an overall rating against each of the nine standards. The full inspection findings and overall rating for each of the quality indicators can be found in the 'Evidence Report' at the back.

KEY FACTS

Location
HMP YOI Grampian is located on the south side of the Aberdeenshire town of Peterhead.

Role
It opened on 3 March 2014 and was the first purpose built community facing prison within Scotland, capable of housing over 500 prisoners, both male and female, adult and young offenders from the [Northern Community Justice Authority Area]

Brief history
On 4 June 2008, it was announced that HMP Aberdeen and HMP Peterhead were to close and one new prison would be built on part of the old Peterhead site, to be known as HMP YOI Grampian.

Accommodation
It comprised three main accommodation blocks Banff Hall for female prisoners, Ellon Hall for male prisoners and Cruden Hall which at the time of inspection held no prisoners, Dyce Hall which is the Separation and Reintegration Unit and two Community Integration Units, one for men and one for women.

Design capacity
The establishment design capacity is 552. However, with the closure of Cruden hall the current maximum design capacity is 474.

Date of last inspection:
30 November to 8 December 2015.

Healthcare provider:
NHS Grampian.

Learning provider:
Fife College

OVERVIEW BY HM CHIEF INSPECTOR OF PRISONS FOR SCOTLAND (HMCIPS)

HMP YOI Grampian opened in March 2014, as one of the newest of the fifteen prisons in Scotland; an attractive modern and spacious building, benefiting from good levels of natural light and thoughtful colourful design elements throughout. Worthy of note was the layout and design of Banff Hall, which housed female prisoners, and includes the pleasant mother and baby cells.

This was the second full inspection for HMP YOI Grampian, following a previous inspection in 2015. The first inspection in the early life of HMP YOI Grampian provided a useful assessment of the progress that had been made since its opening, and provides an interesting comparison to this inspections findings.

Designed to be a "community facing prison", to accommodate all offenders from the north of Scotland, an occurrence of serious disorder in 2014 resulted in the removal of the male young offenders and the closure of one of the smaller halls, Cruden. It was disappointing but understandable, given the difficulties of staff recruitment, that some of the highest quality of prison estate in Scotland continues to lie empty.

The inspection team found an establishment that had matured, and despite a small number of significant incidents in 2018, was largely calm and purposeful with emerging signs of stability and progress. Overall, most prisoners told inspectors that they felt safe in HMP YOI Grampian; staff were respectful and courteous in their dealings with prisoners and there was evidence of positive engagement. However, some prisoners reported that they felt intimidated because of verbal abuse from other prisoners and there were mixed views on staff perceptions of safety. Staff shortages clearly influenced their confidence.

The staff cultures of two prisons, HMP Aberdeen and HMP Peterhead, had been integrated, and the consequent staff group were supportive of each other and had a 'can-do' culture despite very challenging circumstances. This had taken significant effort on the part of the whole team and reflected consistent strong senior leadership.

However, the serious staff shortage issues preclude moving from a steady state to a developmental agenda. Significant risk issues emerged and were escalated during the inspection in the operational running and stability of Ellon Hall, where the majority of prisoners were held. In reality, almost all areas of the prison were negatively impacted by staffing shortages, even where significant efforts had been made to protect consistency in key roles and ensure management oversight. Predictable regime delivery, activity access, personal officer support for progression, and time out of cell are critical components to good order and discipline. These were at risk with the current staffing issues; the establishment stability should be considered as fragile.

The need to focus on core functions essential to the smooth running of the prison, and the challenges posed by long-term staffing shortages was understandable. However, there may be opportunities for better utilisation of management resource as the prison moves further into the developmental phase of organisational change.

Continued co-operative working with the SPS Headquarters to find new solutions to staffing difficulties, and maintaining funding for partner organisations will be critical for lasting safety and security.

Rule 23 of the United Nations Standard Rules for the Treatment of Prisoners (**the Mandela Rules**) states that every prisoner who is not employed in outdoor work shall have at least one hour of suitable exercise in the open air daily, if the weather permits. A similar recommendation has been provided by the **CPT** during their visits to the UK "steps should be taken to ensure that prisoners are guaranteed the basic requirement of at least one hour of outdoor exercise per day." Non-offence protection prisoners were not routinely afforded this basic right, and in common with offence-protection prisoners, to reach exercise areas, they had to walk through residential areas housing mainstream prisoners and suffered routine verbal abuse. The lack of opportunity posed by staffing shortages to use Cruden Hall to further develop and simplify the regime and population management should remain a priority.

Community and partnership supports were positive, purposeful and linked to pockets of innovative practice across a wide range of disciplines in the establishment. Many of these partnerships complement the core provision, provide an enriched regime and were worthy of commendation and replication. I was particularly impressed with the range of good practice, partnership links, and initiatives to achieve changed outcomes e.g. Street Sport, Community work, DVD on visiting HMP Grampian, bring your local MSP to the visit etc.

The inspection team were concerned that existing well-established and beneficial partner services, dependent on external funding, might be lost or eroded due to resource pressures. For example, the excellent family centre at HMP YOI Grampian adjacent to the entrance of the prison was much valued by both visitors and staff, who frequently use the excellent café facilities. The family centre offered information, support, advice and guidance to families, and their integrated working with community partners was an instance of good practice worthy of sharing. This would be a huge loss if funding was withdrawn.

There were numerous examples of good practice in case management and HMP YOI Grampian are to be commended for their work. Despite staffing shortages in the establishment, specialist case management posts had been protected to ensure continuity. Case management staff demonstrated commitment and expertise and were supported by skilled senior management delivering an overall high quality service. It proved impossible however to resource similar experienced, regular and consistent personal officer support despite staff best intentions.

The strongest area of performance in HMP YOI Grampian related to the preparation of prisoners for their successful return to the community. Multi-agency, partnership working was central to the planning for the release of both short and long-term prisoners. The case management process was effective and engaged a wide range of internal and external partners, with a clear commitment to supporting prisoners both before and after their release.

The Community Integration Unit (CIU) facilities, supported by the throughcare support officers (TSO) were excellent. The TSO team deserve praise for their work in running the CIUs, developing positive relationships with the community, the judiciary and social work partners, whilst sourcing sound work placements. With a purpose built design and committed and motivated staff, the unit presented a significant opportunity for broader life skills practice, inhibited only by the restrictions of national criteria.

Given HMP YOI Grampians obvious proficiency with case management and through care processes, their geographic location and positive relationships with community partners, there are opportunities to pilot a national remand throughcare process for SPS if adequately resourced.

Overall, there was a suitable and sufficient range of education, training and employment (ETE) activities, with examples of good practice and innovative partnerships delivered in an attractive and welcoming area. The library was a well-resourced and busy facility, valued by prisoners for its popular organised activities, and the health point impressed inspectors. Whilst there was a limited choice of ETE for women and protection prisoners, HMIPS were more concerned that there was an unacceptable level of regime opportunities available for prisoners on a non-offence protection regime.

The activities and spiritual needs of prisoners were fully catered for by a proactive chaplaincy team with an inclusive ethos and numerous examples of innovative service delivery.

The importance of supporting positive family relationships was recognised and considerable efforts were made to help prisoners to maintain good contact with a range of innovative practice including video links through the Apex Trust.

Within HMP YOI Grampian, it was noted that many of the challenges experienced by Aberdeenshire Health and Social Care Partnership (AHSCP) were a reflection of national themes experienced within many prisons across Scotland. These included recruitment difficulties, inability to use electronic prescribing and the lack of a national formulary. The staff were however still committed to delivering high quality healthcare, and inspectors found a number of examples of good practice with, in particular, the relationship between the Partnership and Public Health, the best the Health inspectors had seen.

It was encouraging to see that since our last visit in June 2018, the AHSCP had continued to progress with the Grampian Health and Wellbeing Programme Board, established to facilitate joint improvements to services in substance misuse, mental health and healthcare service delivery.

Substance use and the mental health delivery programmes had produced visible improvements and positive service developments. However, inspectors were concerned to see that the healthcare service delivery project had not progressed at the same rate, and elements of primary care and pharmacy services remained poor. Identified significant risks in these areas were escalated during the inspection to both management teams in the NHS and the SPS.

One major concern for HMIPS was that nursing staff were unavailable to conduct a medical assessment of prisoners who were admitted to the establishment after 21:30. Late arrival prisoners did not therefore receive the critical clinical reception screen to assess their withdrawal status, provide essential prescribed medication, assess their risk of self-harm or suicide and determine whether they were fit to be in custody. Inspectors raised these and other issues with pharmacy as an immediate significant concern to both the AHSCP and the SPS.

Separate from the healthcare concerns, the admission processes within the establishment were very robust, with clear checks taking place regarding the legality of each prisoners warrant. Staff demonstrated empathy when engaging with prisoners to ensure that they understood the reasons for them being sent to the establishment and the length of time they were likely to be there.

Next Steps

I am pleased to see the positive developments and initiatives that have been taken forward. With 42 areas of identified good practice, this is a good platform to build on for the future. However, the staffing crisis must remain as the critical focus for the SPS, and the escalated areas of concern in Ellon Hall and healthcare need to be urgently addressed by the SPS and the AHSCP. I look forward to seeing these improvements progressed before our next inspection.

HMIPS will continue to monitor the progress in HMP YOI Grampian through the Independent Prison Monitors, and will return to HMP YOI Grampian late 2019 to review what progress has been made in healthcare and staffing.

Wendy Sinclair-Gieben

Chief Inspector of Prisons for Scotland

SUMMARY OF INSPECTION FINDINGS

Standard 1 Lawful and transparent custody
Satisfactory

Standard 2 Decency
Satisfactory

Standard 3 Personal safety
Generally acceptable

Standard 4 Effective, courteous and humane exercise of authority
Satisfactory

Standard 5 Respect, autonomy and protection against mistreatment
Generally acceptable

Standard 6 Purposeful activity
Satisfactory

Standard 7 Transitions from custody to life in the community
Good

Standard 8 Organisational effectiveness
Satisfactory

Standard 9 Health and wellbeing
Poor

SUMMARY OF INSPECTION FINDINGS

HMIPS Standard 1
Lawful and Transparent Custody

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

The prison ensures that all prisoners are lawfully detained. Each prisoner's time in custody is accurately calculated; they are properly classified, allocated and accommodated appropriately. Information is provided to all prisoners regarding various aspects of the prison regime, their rights and their entitlements. The release process is carried out appropriately and positively to assist prisoners in their transition back into the community.

Inspection Findings
Overall Rating: Satisfactory Performance

The admission processes within the establishment were very robust, with clear checks taking place regarding the legality of each prisoners warrant. Staff demonstrated empathy when engaging with prisoners to ensure that they understood the reasons for them being sent to the establishment and the length of time they were likely to be there. One major concern for HMIPS was that no nursing staff were available to conduct a medical assessment of prisoners who were admitted to the establishment after 21:30. This was immediately escalated as an area of high risk. SPS staff placed the prisoner on 15-minute observations overnight until they had seen a nurse.

Once reception staff had completed the admission process, prisoners were located in the relevant residential area dependent on their classification and were given key information about the prison regime including the hall routine, making requests, visits and the complaints process. National induction took place but it was very limited for adult male prisoners who were on protection. A peer mentor assisted with the delivery of it to women, which was good practice, and HMP YOI Grampian should consider introducing it for adult male prisoners also. Reception and national induction staff had a good understanding of translation services and how to use them, but knowledge of this was limited amongst residential staff.

Staff demonstrated a good knowledge of the cell sharing risk assessment (CSRA) process and how to record it on PR2. However, there were no records to confirm primary and secondary assurance checks of this process were undertaken.

The pre-release processes conducted by the court desk staff and management were very robust, ensuring that dates on the warrant had been accurately calculated and that no outstanding warrants were in place. The court desk staff also checked in advance what travel arrangements were required for each prisoner being liberated, particularly if someone was returning to one of the islands. Once all of the prisoners being escorted to court had left reception the staff immediately contact the residential halls to ask them to escort prisoners who were being liberated to reception, in order that this process could be conducted timeously. The front of house staff conducted relevant checks; however, concerningly they were done beyond the secure area.

HMIPS Standard 2
Decency

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

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

Inspection Findings
Overall Rating: Satisfactory Performance

HMP YOI Grampian is a modern prison therefore the inspection team expected high standards of decency. The prison had good facilities and overall was generally well maintained. The external areas were neat and tidy, as were all of the main activity areas including the gymnasium and visits areas. At times, the main corridor from the 'Street' to Ellon Hall was littered but was regularly cleaned during the inspection week.

The condition of cells varied with graffiti observed in a number of areas, mainly Ellon and Dyce Hall. Banff Hall appeared to be cleaner with no evidence of graffiti. The accessible cells were of a good standard and fit for purpose for wheel chair users.

Generally, standards of clothing were appropriate but there were instances where this clothing was not always available in the required range and sizes; particularly in the First Night in Custody areas. There was a good supply of appropriate inclement weather jackets. Although mattresses and pillows viewed were in good condition, a consistent comment that is also reported during other inspections was that they did not allow a good night's sleep.

All residential areas had access to in-cell sanitation including a shower. The accessible cells were of a good standard and the mother and baby cells were of a high standard. Toiletries were freely available and for those that wished to do so there was an extensive canteen list to purchase more popular brands. Cleanliness was of a reasonable standard. However, infection control was a concern due to a lack of training courses in the British Institute of Cleaning Science and Biohazards courses, which could result in a risk of cross contamination and should therefore be remedied as soon as possible.

Catering came out very well within this Standard with good quality food, good choices and many opportunities to choose a healthy option. Catering staff held regular meetings with prisoners to discuss food choices and healthy alternatives. The majority of prisoners spoke positively about the meals that were provided. HMP YOI Grampian worked hard at meeting the needs of those with dietary or religious beliefs, which appeared to work well.

The opportunity for parents to bake their children a birthday cake was an excellent way to assist in the parent child relationship.

HMIPS Standard 3
Personal Safety

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

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

Inspection Findings
Overall Rating: Generally Acceptable

Inspectors were impressed by the commitment of the staff team in HMP YOI Grampian to get things right with regard to personal safety. It was clear that staff wanted to ensure that the establishment was safe and orderly and that no one came to harm.

Despite the commitment of the staff team, inspectors found a mixed picture in terms of policy and practice with regard to this Standard.

The establishment had a good multi-agency approach to addressing issues of lower level and more serious incidents of violence, with implementation of their Safer Prison SOP. Although this allowed for discussion of possible incidences of bullying, the lack of an over-arching anti-bullying strategy was a concern. In addition, the excessive use of the auxiliary cell located in the SRU should be reviewed as a priority.

Overall, staff and prisoners said they felt safe but there were some notable exceptions, including non-offence protection prisoners being accommodated on mainstream halls. Concerns were also consistently raised with inspectors about staffing levels in general, but also about the consistency of staff teams leading to concerns over personal safety.

TTM processes were properly enacted and a robust audit process was in place. The delay of mental health input to support the process was a concern and raised with the Healthcare team.

Health and Safety practice within the establishment had some positive elements. However, action needs to be taken to address some areas of concern, such as the completion of accident reporting paperwork and adherence to supplementary policy on issues such as blood borne viruses.

HMIPS Standard 4
Effective, Courteous and Humane Exercise of Authority

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

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

Inspection Findings
Overall Rating: Satisfactory performance

There was clear evidence to support some good performance within the establishment, however it was undermined by the lack of supporting documentation. All staff were aware of the security within the establishment and whilst they were trying their best, they were working under extreme staff shortages.

There was clearly a caring approach and emphasis on dignity during all searches, orderly room proceedings, and case conferences that were witnessed during the inspection.

There was clear evidence that the removal of individuals was being carried out in a humane way, and supporting documentation and reviews were present after every incident. However, it was disappointing to note that not all planned removals were recorded.

It was concerning to see hard copies of individuals Special Security Measures (SSM) forms sitting out in the staff consoles in full sight of prisoners walking past. HMP YOI Grampian should find another way of keeping SSM forms safe and secure, away from the population, to protect prisoner confidentiality.

All admissions were treated with courtesy and respect during the transition into and out of the establishment, and there was a continuous improvement team looking at items allowed in use.

All traffic entering and exiting the establishment were robustly searched and staff were polite and respectful on all occasions.

The establishment had excellent links to Police Scotland to ensure a joint approach to dealing with emerging issues such as NPS use.

There was evidence of appropriate use of Rule 41, 95 and SSM, with good supporting documentation.

The route movement was controlled but lengthy, with the average time taking approximately 35 minutes.

It was disappointing to note that intelligence led Mandatory Drug Tests (MDT) were not being carried out. During the previous inspection this was regarded as good practice and was now a single point of failure. HMP YOI Grampian should reconsider this approach and look at the impact of not implementing intelligence led MDT testing.

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

Staff throughout the establishment were aware of the importance of security. All searching observed was conducted to ensure dignity was maintained throughout. All staff spoken to were aware of the appropriate use of force (UOF) and it was encouraging to see the importance placed on this by the management team, where every UOF was reviewed, which included viewing all available Close Circuit Television (CCTV). All UOF and violent incidents were reviewed at the fortnightly Safer Prisons Forum.

Whilst the use of separation was generally proportionate and lawful there were occasions where both Rule 95 and Rule 41 were used back to back, extending the period a prisoner was removed from association to up to six days. HMP YOI Grampian and the SPS should review this approach to avoid using two separate rules consecutively when dealing with individuals with problematic and changeable behaviour.

Case conferences observed and documentation checked confirmed that the focus was reintegration, and prisoners were encouraged to give their input and to agree on reintegration plans. Where required, specialist support staff were invited to attend.

HMIPS Standard 5
Respect, Autonomy and Protection Against Mistreatment

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

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

Inspection Findings
Overall rating: Generally Acceptable

Overall, the findings from inspection in this Standard were generally acceptable but there were some areas of poor performance.

It appeared that staff were aware of the principles underpinning how and when information should be shared between prisoners and their families. Prisoners also indicated that they had positive experience of staff being supportive when difficult information had been shared.

In general, staff prisoner relationships were observed as respectful, but inspectors were concerned about the management of inappropriate behaviour and language, which in turn raised concerns about the management of control and order in Ellon Hall. Of note was the lack of challenge by staff when protection prisoners were being repeatedly verbally abused on route to exercise. This was a high-risk area and concerns were escalated to the senior management; recommendations are made in relation to this.

It was noted that confidentiality was typically respected and practices were generally acceptable. However, there were some issues regarding security of information in relation to staff use of computers. Prisoners were able to walk behind the staff console and view the SSM booklets and PR2 screens. This was escalated at the time of the inspection. However it was apparent that the prison were working to improve confidentiality and it was noteworthy that the business improvement manager (BIM) for example was working with law firms to ensure that legal correspondence was appropriately marked so that it could be processed accordingly.

The regime was unpredictable with frequent changes, delays and cancellations to services because of staffing shortages. On examination of the records, Protection prisoners appeared to be disproportionately affected. This was an area of poor performance and recommendations are made in relation to this.

Overall, the canteen and catering processes appeared to be working well and to the satisfaction to the prisoner population.

Although there were recreational activities available for all, there were variations across the different cohorts, with protection prisoners being disproportionately affected by restrictions or conflicts. We have recommended a review of the regime timetabling so that prisoners do not need to choose between entitlements.

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

Similarly, although the information available to prisoners was generally acceptable, recommendations are made to improve access for non-English speakers.

Prisoner complaints were operating satisfactorily with good audit processes in place. An ICC was observed chaired by a unit manager. The complaint was dealt with compassionately and sensitively whilst providing the individual with a clear reason for the decision. The process and relevant documentation was shared with the individual and he left with a clear understanding for the decision. Although improvements to the complaint process could be made to support those with lower levels of literacy; this was an area of good practice.

The Independent Prison Monitoring (IPM) scheme was advertised in all of the residential areas and prisoners and staff were aware of the IPM role.

HMIPS Standard 6
Purposeful Activity

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

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

Inspection Findings
Overall rating: Satisfactory performance

In summary this was a solidly performing area whose otherwise good performance was marred by the lack of equity of access to opportunities for offence and non-offence protection prisoners.

There was a suitable and sufficient range of employment activities available to most prisoners, which provided opportunity to develop work-related skills. Major work parties included: catering; gardens; industrial cleaning; laundry; pass duties and recycling. Other work parties, such as hairdressing, mentoring and creative media, provided a few prisoners with further choice.

Worryingly, female prisoners and male prisoners on an offence-related protection regime had a limited choice of work parties and prisoners on a non-offence protection regime had no work party choice.

There was a wide and sufficient range of appropriate educational opportunities for prisoners. There was a good range of levels of activity, from personal support in basic literacy, to larger class groups of mainly SCQF level 3/4/5 work, through to Open University. The provision was based in a bright, modern, well-equipped and appropriate learning centre. Prisoners were happy with the subject choices on offer, and the subjects were consistent with developing self-confidence, communications skills and employability. Prisoners were suitably consulted on the offer, and regularly invited to give feedback through direct discussion and well-organised and regular focus groups.

Almost all prisoners were able to access high quality indoor and outdoor sporting and fitness facilities through a well-understood weekly schedule. However, prisoners on a non-offence protection regime had no scheduled access to the gymnasium.

The gymnasium was well equipped with a suitable range of exercise and training equipment, an indoor games hall and outdoor all-weather football pitch. Prisoners were also able to access a range of cardio equipment in small satellite gyms located in each residential hall. All prisoners completed an induction session with a Physical Training Instructor (PTI) prior to accessing the fitness equipment.

HMIPS Standard 6
Purposeful Activity - Continued

The team of PTIs had positive and respectful relationships with prisoners, and this contributed strongly to the gymnasium having a relaxed atmosphere, which encouraged prisoner participation in health and wellbeing activities. Prisoners were consulted routinely on the type of activities they prefer to engage with. The PTI team also had strong and effective working relationships with external partners, such as a local senior football club and boxing club, which supported sporting initiatives and activities for prisoners. Effective internal partnership working with Fife College and NHS Grampian had resulted in health and wellbeing assessments and useful advice and support sessions for prisoners.

The prison library was managed well through a useful partnership with Live Life Aberdeenshire, the cultural and sports arm of the local authority. The library was well located, roomy, bright and welcoming. Stock was rotated regularly, and the range of resources available included an appropriate level of more specialised materials covering information on prisoner rights, books in various languages, and large print books. The link with the local authority also allows quick access to such things as books with coloured filters to help those with dyslexia. Requests and specialised resources were made available very quickly when asked for, typically within a few days. The library service was made available to all prisoners; including a service for the SRU. There was a very high level of use, and impressively, 87% of the resident population used the library service in January 2019.

There was an acceptable and appropriate range of cultural, peer support and self-help activities offered. However, there were very few leaflets or posters highlighting equalities or cultural activity, limiting the wider awareness. The education unit staff planned a wide range of displays, promotions and events based around traditional celebrations, promotions and a calendar that takes account of wider cultural and diversity key dates. The prisoners were supported well in producing artefacts for the Koestler awards, with 111 entries last year.

There was an effective small team of trained peer mentors within the prison who work well to assist newer prisoners in such things as basic literacy, understanding prison systems and settling in to make the best of prison opportunities. In addition, there were Samaritan trained Listeners who helped to support prisoners who identified as needing this personal support.

Exercise was offered daily in the fresh air for the majority of prisoners and most exercise areas were reasonably new, of appropriate quality, and were clean and tidy, except for those in the Separation and Reintegration unit (SRU). Outdoor clothing supplied was sufficient, of a good quality and clean.

HMIPS Standard 6
Purposeful Activity - Continued

The prison did not however meet the requirement of universal access for all prisoners. During the inspection, those on non-offence protection indicated that they were not offered exercise in the fresh air; this was observed during the inspection. Offence protection prisoners had a separate exercise time designated. However, they raised complaints that they had to walk through residential areas housing other prisoners, and suffered from abuse, which made them reluctant to participate.

The chaplaincy team has an appropriate multi-faith membership and demonstrated both an inclusive ethos and a pastoral focus. Excellent relationships were consistently reported between members of the chaplaincy team, other members of prison staff and prisoners. The weekly chaplaincy programme was full of a range of services and events. All prisoners were visited individually soon after admission and their specific religious needs and access to articles of faith recognised and addressed. A church service observed was upbeat and women attending described an uplifting experience with fellowship and coffee after the service being much appreciated. The chaplaincy team expressed a desire to see the wider prison developing more trauma informed practice. In this context, it is a concern that no alternative bereavement support service other than the chaplaincy team are available on site.

HMP YOI Grampian visits area was situated on the first floor with disabled access. The visit facility was large, bright and welcoming. A large play area was available with toys of good quality that were clean and well maintained. Relationships with staff, families and partners were positive, but staff shortages amongst visit staff had impacted to an extent on the availability of familiar faces. Family members booked visits and visit allocation was not restricted as long as spaces were available. Visit sessions were mixed including women, men and protection populations, this appeared to work well with a relaxed atmosphere. The children's visit session was child-centred and an example of good practice. The children's visits were very well supported, a number of partner agencies attended, hot food was available and specific activities had been arranged to encourage prisoners to participate with their children. Specific family events were organised throughout the year and were well received. Facilities for professional visitors were good, and a virtual court facility was available and had been used recently.

HMP YOI Grampian had a family centre adjacent to the entrance of the prison that was much valued by both visitors and staff who frequently used the excellent facilities. The establishment has a spacious parking area and was well signposted; there were however no rail facilities and families generally have to travel a considerable distance by car or bus. Action for Children run the centre with a mix of employed staff and volunteers and HMP YOI Grampian had sited a Family Contact Officer on the premises out of uniform. There were innovative examples of working across custody and community boundaries. The way in which the Family Centre provided information advice and guidance was an example of best practice.

HMIPS Standard 6
Purposeful Activity - Continued

HMP YOI Grampian had developed a comprehensive families plan and strategy with a multi-disciplinary steering group. This was monitoring implementation of the national SPS family strategy. It was disappointing to learn that HMP YOI Grampian had few parenting skills opportunities and that those which had been in place were likely to be lost due to funding cuts.

Procedures to admit visitors to the establishment were observed. Staff were polite and respectful and search procedures were sensitively and appropriately managed. Waiting areas were bright and clean with appropriate information on display.

A specific problem facing visitors to HMP YOI Grampian was its location, with families often having to travel a considerable distance. The establishment had recognised this and operated both the 'e mail a prisoner' scheme and 'video visits' supported by APEX at a central Aberdeen location during the day. The establishment had made active representations to service providers and helpful alterations to bus service timetables were, as a result, reported to commence soon.

Facilities were in place to accommodate morning visits for those under specific visit restrictions or for families with specific needs. Particular care was taken to individualise service responses and a number of examples were provided of situations where staff made special efforts to assist. HMP YOI Grampian offers and accommodates prisoners for accumulated visits in accordance with national policy.

Few prisoners were on closed visits at any specific time and there were robust monthly review processes in place. The only slight concern noted was that prisoners placed on closed visits and their families were notified that this was for a three-month period, although each case was in fact reviewed monthly.

HMP YOI Grampian provides a range of therapeutic treatment and cognitive development opportunities. Nationally recognised courses are available and the establishment complied with national processes for programme assessment, allocation and notification to prisoners. The SPS psychology and programmes officer teams were co-located with social work and had positive working relationships with other staff including the clinical psychologist from the NHS. Staff shortages had caused problems in both the psychology and programmes officer teams. Evidence was provided of effective contribution to risk assessment and case management practice with high-risk cases being small in number and manageable. Care was taken to ensure that complex cases were allocated to personal officers with appropriate experience, though the need for wider support and development of the personal officer group was raised as needing to be prioritised.

HMIPS Standard 6
Purposeful Activity - Continued

Concern was expressed that the planned national reallocation of psychology resource would impact on the level of support that could be offered to local initiatives. Concern was also raised about the implementation of the national SPS programmes waiting list, which was causing significant disruption to prisoners who had to transfer south to participate. A designated life skills area existed but its use was prioritised for the most vulnerable individuals. There did not appear to be comprehensive life skills or pre-release opportunities available for the bulk of the Grampian population to maximise the development of social and relational skills.

HMP YOI Grampian operate well-organised, high quality, case management processes. The Case Management Board (CMB) had a comprehensive list of attendees both internal and external to the prison from statutory and third sector organisations. The process was very well-organised and chaired by a member of prison staff demonstrating obvious commitment to their role. As cases were discussed the importance of community mental health support and NHS connectivity was consistently evident. The establishment Early Release and Lifer Liaison (ERLO/LLO) First Line Manager was performing well. Effective 'pull through' systems had been developed which ensured that individual prisoners were not missed for progression despite lack of consistent personal officer support.

The Throughcare Support Officer (TSO) team perform well and take responsibility for additional innovative areas of practice including support for Community Integration Unit (CIU) work placements and sessions at court, developing positive relationships with both the Judiciary and social work partners. Given HMP YOI Grampian's obvious proficiency with case management and throughcare processes, their geographic location and positive relationships with community partners, there are opportunities to pilot a national remand throughcare process for SPS if adequately resourced. Concerns were expressed that existing well-established and beneficial partner services might be lost or eroded due to resource pressures. Particular concerns were expressed about the number of prisoners whose throughcare was being disrupted because of transfer to HMP Barlinnie to cope with local population pressures.

The skill and experience of the Deputy Governor as chair of the RMT was acknowledged by a number of participating staff. National changes to the RMT process were described as positive and assisting in both strengthening assessment and in maintaining consistent high quality of reporting. Despite staffing shortages in the establishment, specialist case management posts had been protected to ensure continuity wherever possible, it had proved impossible however to maintain regular and consistent personal officer attendance. The senior team was well connected to community MAPPA representatives, and a comprehensive tracking process for risk and progression cases was evidenced by the responsible First Line Manager.

National changes to Home Detention Curfew (HDC) had led to a dramatic fall in the numbers eligible to apply for consideration. High quality CIU facilities were available for both male and female populations, but spaces were underused because insufficient prisoners met the national criteria.

HMIPS Standard 7
Transitions from Custody to Life in the Community

Prisoners are prepared for their successful return to the community.

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

Inspection Findings
Overall rating: Good

There were extensive structures in place, which supported partner agencies working to deliver jointly agreed release plans. Prison managers were meeting with strategic planning groups at community justice authority and local authority level. However, future planning was not communicated well enough with partner agencies and agencies were unsure of future involvement as contracts ended.

The Links Centre provided a good location, which helped joint working and was accessible to prisoners. It was a concern that staff shortages amongst prison officers was preventing prisoners from accessing appointments when staff were diverted elsewhere from operational necessity. Agencies in the Links Centre worked well together and inspectors observed good relationships.

There were no advocacy services on offer and foreign language translation was limited at point of admission and throughout the sentence.

There was a good CMB and progression system, with good systems in place that helped to overcome staffing inexperience. There had been no recent training of Personal Officers, with knowledge of the role demonstrably uneven amongst staff. A reinvigorated personal officer scheme is needed to address these shortcomings.

Performance improved substantially during pre-release planning. The throughcare support officers (TSO) role was very well developed and made a key contribution before and after release. The family centre provided good support to families, with strong joint work by third sector agencies in supporting families and prisoners, both practically and emotionally. The Keeping it Together initiative involving partner organisations and SHMU used video and other media to provide advice support and information to families of those involved in the criminal justice process is good practice.

TSOs were carrying out some very good and unusual activity around the Community Integration Units (CIUs) prisoners and work placements, sustaining effective continuity. They continue to provide good support post release but community effectiveness was limited by poor IT. If provided it could offset some of the pressure of recent staffing shortages. The court attendance system and the prompt intervention allowed key information from TSOs to be shared in the court at an early stage to allow a more informed decision by the judiciary. This early intervention and well-established joint working is an area of good practice in HMP YOI Grampian.

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

Some difficulties were encountered in supporting and ensuring access to development programmes. Staffing pressures limited the number of programmes run and access to programmes by prisoners was governed by national prioritisation policies. The national waiting list is not resolving the progression issues and is considered disruptive.

HMIPS Standard 8
Organisational Effectiveness

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

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

Inspection Findings
Overall rating: Satisfactory

With one or two exceptions, the prison performs satisfactorily against this Standard. It was clear that the challenges stemming from the staffing situation had been significant and relentless since the tail end of 2017, so the deployment of resources had rightly focussed on maintaining core operational functions. This had impacted adversely in a number of ways, not least the inability to make progress with implementing a new Equality and Diversity action plan, which must now be given greater priority.

The SMT showed leadership in trying to find new ways to address their recruitment challenges and now need the support of SPS in implementing more durable solutions, rather than continuing to rely on detached duty cover.

In the longer term, there is also scope for HMP YOI Grampian and SPS to make greater use of new technology to improve prisoner access to information and services, support prisoner contact with families and reduce paperwork for prison staff.

In general, staff understood how their work contributed to the prison's priorities and were clear on their own roles, and there was a good culture of mutual support across the prison. Indeed during the inspection process it was emphasised how much that mutual support meant to staff. Whilst efforts had been made by management to recognise good performance and value the contribution made by staff in often difficult circumstances, there was scope to further embed such a culture at all levels of the establishment.

The desire of SMT to provide a 'soft landing' for new recruits after their induction programme at the SPS College was an excellent concept, although it appeared from discussions with staff that the staffing challenges facing the prison meant that had not always been achieved in practice. There was a clear commitment at all levels of the organisation for developmental training, but the recruitment challenges had often meant staff having to learn from line managers or other staff who were themselves inexperienced. The difficulty in securing staff time for training or to act as instructors had created difficulties in meeting targets for completion of mandatory training, but the process was well monitored. It was pleasing to see recognition of the importance of the FLM role, but more could be done to support this group in particular and those acting up.

HMIPS Standard 8
Organisational Effectiveness - Continued

There was evidence that poor performance and disciplinary issues were being appropriately handled and absence management was now being addressed more systematically.

There was very clear evidence of the prison fostering strong supportive professional relationships with a wide range of partner organisations and of good communication and effective partnership working. This was a real strength for the prison and there was much to commend here, particularly the partnership with those supporting the excellent family visitor centre, the various throughcare initiatives, the radio and media production work, library, education, employment related and other purposeful activity.

There were inevitably concerns, however, about the longer term sustainability of some of these initiatives, particularly where third sector partners were dependent on securing funding from external sources. A greater focus should therefore now be given to the longer term strategic planning of services, role of partner organisations and how to address funding uncertainties or prepare for future change.

Finally, it was noted that whilst action had been taken on the different recommendations made in the last HMIPS report on HMP YOI Grampian three years ago, it had not always been sufficient to address the underlying issues raised. Moreover, different colour coding systems were in place for monitoring different action plans within the prison. A single Red Amber Green (RAG) scoring system should be applied consistently for monitoring all action plans. More attention should also be given when closing specific action points on whether the underlying issue raised by the relevant scrutiny body had been fully addressed or further action was needed.

HMIPS Standard 9
Health and Wellbeing

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

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

Inspection Findings
Overall rating: Poor performance

General

Within HMP YOI Grampian, it was noted that many of the challenges experienced by Aberdeenshire Health and Social Care Partnership (AHSCP) were a reflection of national themes experienced within many prisons across Scotland, such as not having electronic prescribing, difficulties with recruitment and a lack of a national formulary.

It was encouraging to see that since our last visit in June 2018, the Partnership had continued to progress with the Grampian Health & Wellbeing Programme Board, which was established to manage proposed improvements to services and facilitate change. The Programme Board had responsibility for project managing three agreed work streams to improve patient care:

- Substance use
- Mental health, and
- Healthcare service delivery.

During the inspection, inspectors saw examples where substance use and mental health delivery programmes had produced visible improvements and positive service developments. However, inspectors were concerned to see that the Healthcare service delivery project had not progressed in the same way. This was reflective in the areas of concerns raised within the report, such as the development of primary care and pharmacy services within the prison.

The staff spoken with were committed to delivering high quality healthcare and driving improvement. Inspectors also found a number of examples of good practice during the inspection.

Inspectors noted that the ongoing challenge of recruiting and retaining staff were not on the operational or the board risk register. While inspectors are aware that this was a challenge for NHS Grampian in general, the risks associated of not having a full complement of staff to effectively deliver services within the prison environment must be included on both risk registers. There were concerns that the continued reliance on bank/agency staff could result in a dilution of the skill-mix of permanent staff. Business continuity plans should be drawn up for times when staffing levels are either at the minimum or fall below the minimum.

HMIPS Standard 9
Health and Wellbeing - Continued

Primary care

Individuals who arrived at the prison during the day were formally assessed using a standardised health screening tool, to assess their immediate health needs and their risk of self-harm or suicide. However, it was worrying to find that it was not uncommon for individuals who arrived from the islands at night to not be assessed until the following morning. This does not comply with the SPS TTM strategy and was escalated during the inspection.

Information on how to access services, including the confidential self-referral system was given to prisoners on arrival and during their stay in prison. Appointment waiting times were within recommended guidelines but were not routinely displayed for prisoners. Patients' attendance and access to healthcare appointments and interventions continued to be an issue, even though prisoners were asked to complete a form explaining their non-attendance. A new appointment card system was due to be introduced.

Prisoners could access Healthpoint, a one-stop health information point located within the prison library, but due to limited staffing, access was not always possible. A range of clinics were held in the health centre many of which relied on the availability of trained staff, such as BBV testing.

Mental Health

Prisoners identified as requiring support with their mental health had access to a wide range of treatments and interventions. Those referred to the clinical psychology service and psychiatrist were seen promptly, and all prisoners, including those with complex care needs, were seen to be involved in decisions about their immediate and ongoing care. However, variation in the way staff approached the triage process meant that the basis for decisions was not consistent and almost all referrals were directed to the mental health team, even though it was not at its full complement.

On arrival, prisoners risk of self-harm or suicide was assessed and those identified as being at risk were placed onto TTM accordingly. However, as previously mentioned prisoners admitted to the prison at night were not assessed by a healthcare professional in line with the SPS TTM strategy. Inspectors raised this as a significant concern to the Partnership and the SPS.

The mental health team had a well-established working relationship with community mental health services. Arrangements were in place to notify community services in advance that a patient was expected to return into the community so that the appropriate support could be put in place in time for their release.

HMIPS Standard 9
Health and Wellbeing - Continued

Substance misuse

Anyone requiring support with substance misuse was identified at their initial health screening on arrival to the prison. Those already on ORT or who requested ORT were assessed and commenced treatment in a timely manner.

The substance misuse team took a whole person approach and held weekly multi-disciplinary meetings to discuss patients care and progress. Individuals referred to the team received a comprehensive assessment of their needs and had access to a range of psychological interventions, such as cognitive behavioural skills for relapse prevention and to maintain their recovery.

Staff were trained in, and had access to training, in a wide range of psychological interventions such as NES core behavioural training and motivational interviewing. Plans were also in place to introduce monthly coaching in a range of psychological skills to support ongoing delivery of psychology care.

As with the mental health team, the substance misuse team had developed strong relationship with a wide range of external and third sector agencies, including CREW (harm reduction and outreach charity) and the alcohol and drugs agency who provided 1-1 sessions, group work and programmes to support prisoners prior to liberation. A standardised discharge tool was used to notify the receiving community services of an individual's release and to make sure individuals were linked into appropriate support services on liberation.

There was little evidence of collaborative working between the mental health and the addictions team to identify the appropriate support and treatment for individuals. This was an area that both teams expressed plans to address.

Long-term conditions

Not all individuals with a long-term physical health condition were identified on arrival at the prison, and those that had been were not always followed up in line with current best practice, or, had appropriate care plans and accurate and detailed assessment documentation. This was brought to the attention of the Partnership and progress will be monitored.

Similarly, staff were not informing individuals of their test results, documenting the results or following these up with medical staff when they were outside of normal parameters. This was escalated to the health centre manager for action.

HMIPS Standard 9
Health and Wellbeing - Continued

Medical and Pharmacy Service

Despite not having a dedicated pharmacy team, the prison pharmacy service had developed a strong working relationship with the Lloyd's pharmacist and staff. However, the way the pharmacy service was being delivered within the prison gave rise to significant concerns around patient safety.

Multi-disciplinary medical/pharmacy management meetings did not take place; staff responsible for ordering and managing the day-to-day pharmacy services did not possess specific pharmacy experience; limited kardex monitoring and medicine optimisation took place, and routine and spot checks of in-possession medication were not carried out.

The pharmacy did not hold a current Home Office CD licence and medication was administered to fit in with the prison regime rather than at clinically appropriate times. Both of these issues were escalated as significant concerns.

Maternity Services

The prison had established good links with NHS Grampian maternity services, and the women attended appointments at the maternity hospital in addition to seeing the midwife inside the prison. Each women was allocated a named prison social worker and a community based social worker who worked together to support the women maintain contact with their baby or young child during their stay in prison.

The women were located in the dedicated mother and baby cell, had access to a wide a range of equipment, and were offered a comprehensive package of care. A dedicated mother and baby officer was available to ensure the support and advice offered to the women reflected their individual needs.

Culture and Leadership

Complaints, comments and feedback forms were readily available to prisoners within the halls. Overall responsibility for managing and responding to complaints, as well as leading any investigations, sat with the health centre manager, who had introduced a named nurse model which had led to improved response times; early resolution of complaints and a reduction in number of complaints.

The recruitment and retention of staff continued to be a challenge for the healthcare team and is an issue that mirrors NHS Grampian as a whole. Many posts lay vacant necessitating the ongoing use of bank/agency staff, and there was concern that the healthcare team was often operating at below acceptable staff levels to delivery safe care. A general lack of leadership among the nursing team was identified, with less senior staff expected to make clinical decisions without support from senior colleagues. This should be addressed once the team leads and clinical nurse manager have completed leadership and management training.

Staff competencies were not regularly assessed and clinical supervision was not offered to all nursing staff groups. Line management had recently been re-introduced and the health centre manager and the clinical nurse manager held weekly capacity and workforce meetings with the nursing team.

ANNEX A

SUMMARY OF RECOMMENDATIONS

For the Governor

Recommendation 1: HMP YOI Grampian reception staff should ensure that the information booklets are in the language indicated on the front cover.

Recommendation 2: HMP YOI Grampian management should ensure that all residential staff are aware of the translation services available to prisoners and how to access them.

Recommendation 3: HMP YOI Grampian management should ensure that a process is in place to evidence primary and secondary assurance of the CSRA process.

Recommendation 4: HMP YOI Grampian management should consider expanding the use of peer mentors to assist with the induction process for adult male prisoners.

Recommendation 5: HMP YOI Grampian management should ensure that all protection prisoners have full access to national induction.

Recommendation 6: The SOP governing the liberation process should be followed at all times, whereby a clear handover takes place between reception and front of house staff within the agents visits area.

Recommendation 7: HMP YOI Grampian should consider moving the air conditioning unit inside or provide more protection in its current location.

Recommendation 8: HMP YOI Grampian should increase their escort cover to a suitable level to allow the estates team to reduce the number of agile requests with a red status.

Recommendation 9: To allow a feeling of self-worth and dignity, HMP YOI Grampian should ensure that prisoners are given every opportunity to keep their cells clean, and cell-cleaning periods should not be missed.

Recommendation 10: HMP YOI Grampian should make every effort to reduce new admissions being allocated to cells where there is graffiti, particularly where it is offensive and inappropriate.

Recommendation 11: In line with job descriptions, HMP YOI Grampian should deliver adequate BICS and biohazard training. No person should undertake tasks where they have not undergone the appropriate training.

Recommendation 12: HMP YOI Grampian should ensure that cleaning audits take place to ensure that standards of cleanliness are met.

Recommendation 13: All laundry stores should have an appropriate quantity of bedding.

Recommendation 14: The washing machines and tumble dryers in Banff Hall should be utilised.

Recommendation 15: The process for returning laundry to the correct location should be reviewed and refined.

Recommendation 16: HMP YOI Grampian should ensure there is a sufficient amount of toiletries and hygiene products available in all stores to meet the needs of prisoners in that area, and in particular first night in custody prisoners should be given their full entitlement.

Recommendation 17: HMP YOI Grampian should ensure that only those wearing appropriate clothing are permitted within the kitchen area.

Recommendation 18: HMP YOI Grampian should ensure that sufficient quantity and quality of clothing is available to all prisoners throughout the prison.

Recommendation 19: HMP YOI Grampian should take action to improve the fabric and the cleanliness of the safer cells in Ellon Hall, and a window covering should be sourced for the safer cell in Banff Hall.

Recommendation 20: As a matter of urgency, HMP YOI Grampian should review the regimes and location for offence and non-offence protection prisoners in Ellon Hall, and their location.

Recommendation 21: The use of the auxiliary cell in the SRU should be reviewed and action taken to significantly reduce its use, with a view to ceasing it all together.

Recommendation 22: The paperwork used to record the use of the auxiliary cell should be consistent with entries on R2 and HMP YOI Grampian should review their processes around this.

Recommendation 23: HMP YOI Grampian should look to adopt a more proactive approach to addressing challenging behaviour in the SRU, as opposed to repeated use of the auxiliary cell.

Recommendation 24: HMP YOI Grampian should take immediate action to ensure the Think Twice Strategy is fully implemented across the establishment.

Recommendation 25: Immediate action should be taken to ensure consistent and effective support is available to people who are experiencing bullying and harassment.

Recommendation 26: HMP YOI Grampian should take action to address the gaps in health and safety practices and ensure relevant staff are trained to meet the requirements of their posts.

Recommendation 27: HMP YOI Grampian should ensure that all planned control and restraint removals are recorded.

Recommendation 28: HMP YOI Grampian should find another way of keeping SSM forms safe and secure and away from the population to protect prisoner confidentiality.

Escalated Recommendation 29: HMP YOI Grampian should ensure that regular and consistent searching is carried out throughout the establishment, and that it is properly documented and escalated as appropriate.

Recommendation 30: Items in use proformas should record the date of applying for the items and the timescales should be reviewed and trigger points identified if this flags up lengthy delays.

Recommendation 31: HMP YOI Grampian should re-introduce suspicion testing on the male population.

Recommendation 32: HMP YOI Grampian may wish to consider allowing low supervision prisoners to move up and down the route unescorted to free up staff time.

Recommendation 33: HMP YOI Grampian should ensure that all staff are aware of the policies or SOPs and how to implement them in relation to the sharing of information.

Recommendations 34: HMP YOI Grampian must ensure that inappropriate behaviour is consistently challenged and positive behaviours are consistently reinforced to ensure a safe environment.

Recommendation 35: HMP YOI Grampian must take necessary steps to protect protection prisoners from abuse.

Recommendation 36: HMP YOI Grampian must ensure computer screens and personal information cannot be viewed by prisoners.

Recommendation 37: HMP YOI Grampian must ensure prisoners in Ellon Hall have the opportunity to secure their cells when not in them.

Recommendations 38: HMP YOI Grampian should ensure that staff are familiar with all documents including SOP's relative to their working environment, in particular to managing staff shortages.

Recommendations 39: HMP YOI Grampian should ensure that prisoners are aware of the available regime and have equity of access to it.

Recommendations 40: Prisoners should be consulted about changes to the regime and it should be effectively communicated.

Recommendations 41: As with QI 5.4 improve communications regarding available regime.

Recommendations 42: As with QI 5.4 ensure equity of access in relation to the available regime.

Recommendation 43: Improve access to information for non-English speakers to safeguard themselves against mistreatment.

Recommendation 44: Improve access to the regime so that prisoners are not required to choose between entitlements.

Recommendations 45: HMP YOI Grampian should ensure that staff have the required information to allow them to inform those in their care of the SPSO process.

Recommendations 46: HMP YOI Grampian should ensure that those that have lower levels of literacy are supported to complete the required paperwork, without reliance on other prisoners, unless it is a peer supporter.

Recommendation 47: The education unit should promote their service further using noticeboards and personal contact to ensure greater take up of provision.

Recommendation 48: HMP YOI Grampian should revise their regime plans to ensure that all prisoners are offered access to time in the fresh air.

Recommendation 49: HMP YOI Grampian should ensure all exercise areas are clean and consider how these could be developed to contribute further to positive health and wellbeing.

Recommendation 50: HMP YOI Grampian should remove barriers to access by revising routes to exercise to ensure that these are safe and challenging abuse of any kind promptly and appropriately.

Recommendation 51: HMP YOI Grampian should ensure the specification and implementation of security check procedures for the exercise process are robust.

Recommendation 52: The existing chaplaincy plan should be refreshed taking account of learning on trauma informed practice for both staff and prisoners and how this might be extended across the wider establishment.

Recommendation 53: Arrangements should be made to facilitate attendance at services by those on non-offence protection to promote inclusion.

Recommendation 54: HMP YOI Grampian should ensure relief cover arrangements are in place for the visits booking line on occasions when the administration staff are not available.

Recommendation 55: HMP YOI Grampian should ensure that information about visits is refreshed and accessible; including for prisoners whose first language is not English.

Recommendation 56: HMP YOI Grampian should ensure that any information recorded about families has appropriate consent arrangements in place and is GDPR compliant.

Recommendation 57: HMP YOI Grampian should track those prisoners who are socially isolated and consider implementing alternative forms of support.

Recommendation 58: HMP YOI Grampian should reintroduce video links for families in the Shetland Islands, and make more use of video link in general to facilitate contact with families.

Recommendation 59: Prisoners and families should not be routinely notified that their closed visit period is for an initial three-month duration.

Recommendation 60: HMP YOI Grampian should ensure consistent contact between prisoners and identified personal officers, who report feeling confident in carrying out their duties to a high standard with access to appropriate support and development opportunities.

Recommendation 61: HMP YOI Grampian should review the availability of life skills and pre-release opportunities to make these accessible to a wider population.

Recommendation 62: HMP YOI Grampian should arrange for appropriate technology equipment to support effective remote working for the TSO group.

Recommendation 63: The SPS should review the use of Cruden Hall as part of the progressive footprint for throughcare.

Recommendation 64: Future planning should be better communicated to partner agencies to support further development.

Recommendation 65: HMP YOI Grampian should ensure that prisoner's attend appointments in the link centre on time.

Recommendation 66: HMP YOI Grampian should reintroduce advocacy services to assist prisoners to exercise their rights.

Recommendation 67: HMP YOI Grampian should ensure that those staff involved in personal officer roles have the appropriate training and time to carry out the role.

Recommendation 68: There is a need for a more defined personal officer scheme, with protected time, to improve the delivery of the personal officer function.

Recommendation 69: Development of a full Equality and Diversity Action plan must now be prioritised and those tasked with its development given sufficient time and support to complete the exercise speedily.

Recommendation 70: Training in Equality and Diversity impact assessments should be prioritised and a systematic programme of assessments carried out across the prison.

Recommendation 71: A single RAG scoring system should be applied consistently for the monitoring of all action plans.

Recommendation 72: When action points are assessed for closure, more attention should be given to whether the underlying issue raised by the scrutiny body had been fully addressed or whether further action was still required.

Recommendation 73: HMP YOI Grampian should undertake more strategic planning around the type of services needed in future, the role of partner organisations in providing those services and how any funding gaps might be addressed.

For the SPS

Recommendation 74: The SPS should improve the standard of mattresses and pillows to allow prisoners to get a better night's sleep, and allow them to be more prepared physically and mentally for the next day's activity.

Recommendation 75: SPS should consider amending the TTM paperwork so that there is a clear and easily accessible record of required checks being completed.

Recommendation 76: SPS should ensure that the interpretation of children's visits criteria is as inclusive as possible and consistently implemented across establishment sites.

Recommendation 77: SPS should consider introducing phones for each cell to facilitate easier contact between prisoners and families.

Recommendation 78: Scottish Government and the SPS should urgently seek funding routes to maintain and further develop parenting courses for serving prisoners at HMP YOI Grampian.

Recommendation 79: SPS should keep the national processes for psychology resourcing and access to programmes under review, ensuring that the experience of users and staff are recognised and any unintended barriers to participation in addressing offending minimised.

Recommendation 80: The SPS should consider the resourcing of a pilot throughcare process for remand prisoners at HMP YOI Grampian.

Recommendation 81: The SPS should review the national waiting list for programmes as it does not appear to be resolving the progression issues and was disruptive in HMP YOI Grampian.

Recommendation 82: The SPS should take the necessary steps to provide TSOs with the necessary IT to allow them to operate more effectively in the community while mobile working.

Recommendation 83: SPS HQ to work creatively with HMP YOI Grampian to urgently identify and implement solutions to their recruitment challenges, as existing detached duty arrangements are not effective or sustainable in the longer term.

Recommendation 84: SPS HQ and HMP YOI Grampian should jointly explore the potential to make greater use of new technology to improve access to services and support contact with families as well as easing administrative burdens on staff.

Recommendation 85: SPS should consider if some college courses could be delivered locally.

Recommendation 86: SPS and HMP YOI Grampian management should ensure that prisoners are taken to their appointments timeously.

Recommendation 87: HMP YOI Grampian management should ensure that they do everything possible to ensure that prisoners are taken to their appointments timeously.

For the Scottish Government

Recommendation 88: Scottish Government and the SPS should urgently seek funding routes to maintain and further develop parenting courses for serving prisoners at HMP YOI Grampian.

For NHS Grampian

Recommendation 89: The NHS should take action to address the delay in mental health support for people who are subject to TTM.

Recommendation 90: NHS Grampian should consider how mental health services both in the prison and the community could be better linked with case management and release processes.

Recommendation 91: The Partnership and SPS should work together to ensure that there is a robust process in place to ensure that those prisoners arriving late into the prison receive a formal health screening assessment.

Recommendation 92: SPS and HMP YOI Grampian management should ensure that prisoners are taken to their appointments timeously.

Recommendation 93: The Partnership and SPS must work together to ensure that they are accurately collecting data on the number of missed appointments, reasons for them, and the impact it has on the delivery of healthcare.

Recommendation 94: The partnership must ensure that sufficient trained and competent staff are available to undertake core duties in the health centre, including venepuncture and blood-borne virus testing.

Recommendation 95: The Partnership must ensure that health promotion information displayed for prisoners around the prison includes information on how to access condoms, Naloxone training and the risks of taking drugs.

Recommendation 96: The Partnership should develop local protocols covering joint working and information sharing.

Recommendation 97: The Partnership should review the mental health referral process ensuring that there is transparency on how long patients will need to wait for assessments.

Recommendation 98: The Partnership must ensure that patients with long-term physical healthcare needs are reliably identified, the appropriate care packages are put in place which are discussed and agreed with the patient and documented in the their record.

Recommendation 99: The Partnership must ensure that patients who have test results outside accepted parameters are referred to an appropriate member of the healthcare team to ensure any corrective actions are taken. This information must be recorded in the patient record.

Recommendation 100: The partnership must review how the Pharmacy service in HMP YOI Grampian is delivered to ensure that the service is managed and delivered safely and effectively.

Recommendation 101: The Partnership must ensure that medication is administered as prescribed to minimise the risk of harm to patients. This includes ensuring that doses are not taken too close together or outwith the time of day at which they are prescribed.

Recommendation 102: The Partnership must ensure that all staff involved in the administration of controlled medicines check the patient identity, drug, dose and amount to be administered to minimise any errors.

Recommendation 103: The Partnership must ensure that all care plan documentation for pregnant women focussed on outcomes and incorporates the woman's personal strengths and wishes.

Recommendation 104: The Partnership must develop policy to manage patients who require palliative or end of life care.

Recommendation 105: The Partnership must ensure that all staff managing complaints receive appropriate training to ensure that complaints are correctly managed.

Recommendation 106: The Partnership must ensure that hand hygiene audits are regularly undertaken by an appropriately trained member of staff, and that actions are taken to address any non-compliances noted.

Recommendation 107: The Partnership must ensure that the development and provision of infection prevention and control guidance and tools are prioritised within the prison to minimise risks to patients and staff.

Recommendation 108: The Partnership must ensure that all staff are competent to undertake their roles, and that there is a regular assessment of staff competencies to maintain patient and staff safety.

Recommendation 109: The Partnership must ensure that clinical supervision is offered to all clinical staff and that these staff are encouraged to take up this supervision. This will ensure that staff are supported in their reflections of actions they have taken, and have the opportunity to discuss their decision-making, especially in more stressful or complicated situations.

Recommendation 110: The Partnership must ensure that training for healthcare managers within HMP YOI Grampian is prioritised. This will ensure healthcare managers are given the skills to effectively manage healthcare services in the prison, promote confidence and resilience in the management team, and provide assurance to the board and staff that healthcare management within the prison is robust.

Recommendation 111: The Partnership must assess and manage the risks associated with the use of a significant number of bank/agency staff whilst maintaining staff and patient safety.

Recommendation 112: The Partnership and SPS must work together to ensure that they are accurately collecting data on the number of missed appointments and the impact of this on delivery of healthcare.

ANNEX B

SUMMARY OF GOOD PRACTICE

Good practice 1: The court desk pre-release process was an area of good practice.

Good practice 2: HMP YOI Grampian prisoner reception had their own washing machine to wash any clothes for new admissions. After the clothes are washed they are placed on the persons clothing rack.

Good practice 3: The response to admissions receiving a choice of meal within 24 hours was excellent, as was the access to multi-lingual menus that had clear guidance on options and nutritional value.

Good practice 4: The approach to catering for religious dietary requirements was good practice. The boxes supplied to cater for Ramadan were excellent. It allowed for a clear separation of foodstuffs and kept it at the appropriate temperature.

Good practice 5: HMP YOI Grampian give prisoners whose children are celebrating their birthday whilst visiting them an opportunity to bake a birthday cake in the kitchen. Prisoners apply to the kitchen and are taken in to bake their children's cake, which is then delivered to the visit area for the child.

Good practice 6: In Banff Hall consideration had been given to keeping people on TTM involved in a daily regime.

Good practice 7: The establishment had adopted a multi-disciplinary approach involving the analysis and understanding of subversive, aggressive or violent behaviour that included colleagues from psychology, and a Safer Prison Strategy. This approach contrasts positively with one that concentrates solely on violence reduction.

Good practice 8: Inspectors observed a multi-agency substance misuse meeting that was independently chaired by Public Health. The discussion centred around the inclusion of HMP YOI Grampian as part of the community served by public health and how to ensure appropriate services were in place for people, both within the establishment and on release.

Good practice 9: Staff had also worked effectively in partnership with a local foodbank to support prisoners preparing for release with cooking masterclasses and recipes to produce dishes that could be created from a typical foodbank box.

Good practice 10: The PTI team had strong and effective working relationships with external partners, such as a local senior football club and a local boxing club, which supported sporting initiatives and activities for prisoners.

Good practice 11: The link with the local authority allowed quick access to such things as books with coloured filters to help those with dyslexia. Requests and specialised resources were made available very quickly when asked for, typically within a few days.

Good practice 12: The library had a well-planned and designed HealthPoint area.

Good practice 13: The education unit staff planned a wide range of displays, promotions and events based around traditional celebrations, promotions and a calendar that takes account of wider cultural and diversity key dates.

Good practice 14: There was an effective small team of trained peer mentors within the prison who work well to assist newer prisoners in such things as basic literacy, understanding prison systems and settling in to make the best of prison opportunities.

Good practice 15: The excellent relationships and practices at HMP YOI Grampian are worthy of sharing. Specifically the provision of chaplaincy visits to individual prisoners following admission, informal fellowship time after services and the development of a quiet space for mindful reflection are to be commended.

Good practice 16: The operation of children's visits at HMP YOI Grampian represents good practice and is worthy of sharing.

Good practice 17: The family centre at HMP YOI Grampian's information advice and guidance service to families and their integrated working with community partners is good practice worthy of sharing.

Good practice 18: The use of 'video visits', supported by APEX, at a central Aberdeen location during the day.

Good practice 19: The individualised care offered to visitors including a specific example of equipment and accommodation support offered to a visiting new mother with twins is an example of good practice and worthy of recognition.

Good Practice 20: The HMP YOI Grampian Case Management Board process for short-term prisoners is worthy of sharing.

Good Practice 21: The processes used by HMP YOI Grampian to gather information on the throughcare experience of prisoners who are readmitted, and analyse data to engage in professional dialogue with partners are worthy of sharing.

Good Practice 22: The engagement of Throughcare Support Officers with the Aberdeen court process and the Judiciary is worthy of sharing.

Good practice 23: Holding multi-disciplinary pre-meet discussions within the women's hall immediately prior to the CMB meetings ensured that pre-release planning was consistent and thorough.

Good practice 24: The Keeping it Together initiative was a very good development.

Good practice 25: A housing officer was committed to the prison for two days a week that made effective continuity for planning for prisoners' release.

Good practice 27: A positive development in Aberdeen City was the rapid rehousing project that identified permanent housing available from the date of release.

Good practice 28: Cooking skills sessions for prisoners using menus derived from typical low cost shopping or foodbank provisions prior to release.

Good practice 29: The TSOs had positive and effective joint working relationships with community justice social workers based in the Aberdeen Sheriff Court.

Good practice 30: HMIPS commend the development of an online video so families visiting the prison for the first time are aware of how to get there and what to expect during a visit.

Good practice 31: At the time of the inspection, a new process was being introduced by the healthcare team whereby patients were given appointment cards with details of their first and follow up appointments.

Good practice 32: It was clear to inspectors that the occupational therapist was a core member of the healthcare team and integral in supporting the assessment, planning and provision of health and care needs of individual prisoners.

Good practice 33: Family members and friends were informed about and provided with Naloxone training in the family hub.

Good practice 34: Patients who were not receiving ORT therapy in the community but who requested this in the prison were assessed quickly so that ORT could be commenced promptly.

Good practice 35: The substance misuse team took a wider integrated approach to support patients and held a multi-disciplinary group weekly meeting to discuss patients care and progress. This group included a medical officer, psychologist, substance misuse team, SPS and social work.

Good practice 36: Quarterly substance misuse strategy meetings took place and were led by the public health consultant who had a special interest in substance misuse. They also led the NHS Grampian drug-related death monthly meetings.

Good practice 37: Plans were in place to offer monthly coaching sessions to the substance misuse nursing team to support the ongoing development of psychological skills for the delivery of psychological care.

Good practice 38: A standardised discharge tool was used to share relevant information to the receiving services when the prisoner was released. A discharge pack was also given to the patient.

Good practice 39: The healthcare team comprised of an occupational therapist who was able to quickly assess whether patients required aids or adaptations to their cell.

Good practice 40: The health centre manager had introduced a named nurse model meaning each prisoner was allocated a named nurse on admission to the prison. In the event of a prisoner making a complaint, the named nurse would discuss the complaint with the individual within five working days of the complaint being submitted, in order to seek early resolution. Although the named nurse model was a fairly new development, inspectors observed, and were told that it had not only improved response times, but had also led to a reduction in the number of complaints and an increase in early resolution.

Good practice 41: The clinical psychologist provided clinical supervision to the mental health nurses and substance misuse nurses on a monthly basis.

Good practice 42: There was strong evidence of collaborative working with third sector organisations in relation to substance misuse services.

ANNEX C

SUMMARY OF RATINGS

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

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

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

ANNEX D

HMP YOI GRAMPIAN – PRISON POPULATION PROFILE AS AT 23 JANUARY 2019

Status	Number of prisoners	%
Untried Male Adults	101	22%
Untried Female Adults	9	2%
Untried Male Young Offenders	0	0%
Untried Female Young Offenders	1	0%
Sentenced Male Adults	305	65%
Sentenced Female Adults	35	8%
Sentenced Male Young Offenders	0	0%
Sentence Female Young Offenders	0	0%
Recalled Life Prisoners	2	0%
Convicted Prisoners Awaiting Sentencing	1	0%
Prisoners Awaiting Deportation	5	1%
Under 16s	0	0%
Civil Prisoners (Fines)	0	0%
Home Detention Curfew (HDC)	9	2%
Sentence	**Number of prisoners**	**%**
Untried/Remand	111	25%
0 – 1 month	0	0%
1 – 2 months	2	0.33%
2 – 3 months	0	0%
3 – 4 months	3	1%
4 – 5 months	2	0.33%
5 – 6 months	0	0%
6 months to less than 12 months	38	8%
12 months to less than 2 years	78	17%
2 years to less than 4 years	82	18%
4 years to less than 10 years	90	20%
10 years and over (not life)	17	4%
Life	29	6%
Order for Lifelong Restriction (OLR)	2	0.33%

Age	Number of prisoners	%
Minimum age:	20	
Under 21 years	1	0.02%
21 years to 29 years	129	28%
30 years to 39 years	192	42%
40 years to 49 years	83	18%
50 years to 59 years	30	7%
60 years to 69 years	11	3%
70 years plus	8	2%
Maximum age:	81	
Total number of prisoners	**454**	

ANNEX E

INSPECTION TEAM

Wendy Sinclair-Gieben, HM Chief Inspector of Prisons
Stephen Sandham, Deputy Chief Inspector of Prisons
Sue Brookes, Lead Inspector
Calum McCarthy, Inspector of Prisons
Kerry Love, Business Manager
Stephen Finnie, Scottish Prison Service
Robert McAinsh, Scottish Prison Service
Adele Stevenson, Scottish Prison Service
Dr John Laird, Education Scotland
Dr John Bowditch, Education Scotland
Andrew Fogarty, Education Scotland
Ian Binnie, Care Inspectorate
Catherine Haley, Healthcare Improvement Scotland
Kenneth Crosbie, Healthcare Improvement Scotland
Dawn Wigley, Healthcare Improvement Scotland
Helen Samborek, Healthcare Improvement Scotland
Catherine Logan, Healthcare Improvement Scotland
Laura Wilson, Healthcare Improvement Scotland
John Campbell, Healthcare Improvement Scotland
Cathy Asante, Scottish Human Rights Commission
Sean Griffin, Scottish Human Rights Commission

Evidence Report

HMIPS Standard 1

Lawful and Transparent Custody

Quality Indicators

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

Rating: Satisfactory Performance

Staff within reception spoke with each prisoner immediately upon arrival to check their understanding of what had happened to them whilst at court, and why they had been sent to or returned to the establishment. Staff confirmed that each admission knew the length of time they had been sent/returned to prison and when they would return to court and further explained this to them where appropriate.

One new admission observed was of Polish nationality. Staff checked his understanding of English and whether he required any interpretation services to assist him with his understanding of the reception process. The prisoner had a sufficient understanding of English and translation services were not required for any of the admissions observed during the inspection. However, when questioned staff were able to explain the process for accessing translation services which was via a phone located in a private room.

Information booklets for prisoners were on display within reception and inspectors saw a folder with booklets in different foreign languages. On further investigation, one of the booklets was in a different language to that identified on the front page. However, a folder was located on SharePoint with booklets in numerous languages that were accurate. Staff should ensure that the booklets made available to prisoners and in the correct language.

Recommendation: HMP YOI Grampian reception staff should ensure that the information booklets are in the language indicated on the front cover.

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

Rating: Generally Acceptable Performance

Upon arrival at the residential areas, prisoners received an induction that provided information on the hall regime, making requests, the visits process and the pin phone system. This was then reinforced during the national induction process where staff ensured prisoners had received the necessary information with further explanation offered where necessary.

Within the residential area, there was little awareness amongst staff of how to access and utilise translation services, to ensure foreign national prisoners

understood the regimes, rules and behaviours expected of them. Most staff had a general awareness that translation services existed, but not how to access them.

Recommendation: HMP YOI Grampian management should ensure that all residential staff are aware of the translation services available to prisoners and how to access them.

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

Rating: Satisfactory Performance

Prior to accepting prisoners into the reception area staff checked that the seven legal points on the warrant were correctly annotated to ensure legal detention of each individual. Staff also checked the Person Escort Record (PER) for any risks or issues that had been identified during police custody. They also questioned the escort staff regarding the behaviour of each prisoner within the court custody suite and whilst in transit, updating PR2 if necessary.

Upon admission to the reception area, SPS staff engaged with each prisoner to check if they understood what had happened at court, how long they had been remanded for or their length of sentence, and enquired how they were feeling.

One prisoner had been convicted and returned to the prison having already spent time within the establishment on remand. It was clear that he did not expect to be convicted and returned to prison, and it was good to see staff interview the prisoner in a private room regarding this change of circumstances, to gain an understanding of how he was feeling and whether or not any support was required.

Medical needs were also checked on the PER and where they existed they were passed to nursing staff who then interviewed each prisoner in a private room to ensure confidentiality.

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

Rating: Good Performance

SPS staff conducted admission interviews in a private room ensuring confidentiality at all times. The room was equipped with a SPIN computer with access to PR2, which allowed the personal details of the prisoner to be recorded or where appropriate updated during the interview.

Whilst observing an interview, the staff member encouraged the prisoner to share key information to allow them to make an informed judgement as to how the prisoner was feeling and coping with the circumstances of being in prison. The member of staff conducted the interview very well, ensuring that the prisoner was fully informed as to the circumstances regarding their remand into custody and how long this would be for. They also clarified their personal circumstances in terms of family or friends who could support them whilst in custody. At end of the interview, the staff member

made an informed decision to place the prisoner on the SPS Talk to Me (TTM) Strategy with 60-minute observations. They explained the process very well to the prisoner.

During the admission process, the prisoner's property was checked and logged on their property card, which they were asked to sign to acknowledge that all property was present and correct. An up to date photograph was also taken against a height chart thus ensuring all personal details were current and up to date.

To ensure confidentiality there was a private room within reception for nursing staff to undertake medical assessments.

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

Rating: Satisfactory Performance

Upon admission to the reception area, every prisoner was assessed to identify any specific needs or issues. This included examination of the PER, questioning of the escort staff and discussion with the prisoner. Any identified needs or issues were then taken into account when allocating the prisoner to a specific location within the residential areas. All adult male prisoners were allocated to the Admission, Assessment and Allocation Unit within Ellon Hall. Any adult male prisoners identified as requiring protection were located with others protection prisoners in a separate area within Ellon Hall. All women were located within the First Night in Custody area in Banff Hall.

Each prisoner was informed where they were being located and what would happen next, with regards to receiving further information within the residential area.

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

Rating: Generally Acceptable Performance

Cell Sharing Risks Assessments (CSRA) were completed for all prisoners who required to share a cell in each of the residential areas. Staff demonstrated a good knowledge of the CSRA process and how to record it within PR2. An example was shown of the process followed for two new admissions sharing a cell, where one was in custody for the first time. The notes section had been clearly annotated with the reasons identified for cell sharing taking place. Both prisoners confirmed that they had been consulted and were happy with the arrangement.

A tracker exists on SharePoint to identify where vaping preferences had not been met. This allowed HMP YOI Grampian to record where vaping preferences were not met supporting PRL.

No evidence could be found that confirmed primary and secondary assurance of the CSRA process was being undertaken by local management. One First Line Manager (FLM) explained the process they followed, which included them

conducting 100% assurance checks due to the low number of prisoners requiring to share a cell, but they did not have any records to evidence these checks. Two other FLMs stated that they had not undertaken assurance checks for a period of time. No evidence could be found of Unit Managers conducting secondary assurance checks.

Recommendation: HMP YOI Grampian management should ensure that a process is in place to evidence primary and secondary assurance of the CSRA process.

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

Rating: Good Performance

Key dates for warrants were calculated within the reception and the warrant details were entered on PR2 by staff on the same day the prisoner was admitted to the establishment. Prisoners was informed of their key dates within the reception area. Monday to Friday, the court desk staff conducted secondary assurance of the warrant calculation the day after prisoners were admitted. At weekends, secondary assurance was conducted by reception staff for Friday night admissions, to ensure that the establishment met the requirement to complete this process within 24 hours of admission.

Staff training records confirmed that sufficient numbers of both reception and administration staff had successfully completed the SPS Foundation and Intermediate warrant training courses.

Any detains or liberations in error were reviewed in line with the relevant SPS Governors and Managers Action notice. The establishment followed the procedures to ensure the relevant notifications were made to key staff within SPS Headquarters, and logs were maintained with the results of the investigation noted and any lessons learned were shared.

Good relationships existed between the establishment and local court officials to allow discrepancies with warrants to be checked and corrected where necessary. If an updated warrant was required, court desk staff recorded the details on a live log to ensure that a new warrant was received and checked for accuracy before being placed in the prisoner's file.

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

Rating: Generally Acceptable Performance

Residential staff within the Admission, Assessment and Allocation Unit within Ellon Hall provided adult male prisoners with key information within 24 hours of admission, and this was replicated in the hall where protection prisoners were located. The information provided included the hall routine, making requests, visits and the

complaints process. Within Banff Hall, a peer mentor provided this information to women admitted to the First Night in Custody area.

Recommendation: HMP YOI Grampian management should consider expanding the use of peer mentors to assist with the induction process for adult male prisoners.

National induction staff conducted the core screen for every prisoner within 48 hours of admission. If staff identified a language issue they used Language Line to assist them to speak with individuals, and thereafter they referred them directly to education colleagues for support to learn English.

Adult male prisoners go through an intensive two-week national induction programme. New programmes started twice per week, on a Monday and Thursday, to ensure that no one waited an extended period of time following admission. The national induction programme expanded on the key information already given to prisoners within the residential areas and included completion of the skills profiler. If any learning difficulties were identified from the skills profiler, the prisoner was automatically referred to education colleagues for support. The national induction programme also included sessions on employability and sessions that were compulsory for all prisoners to complete to make them eligible to work within the prison e.g. manual handling, food hygiene, infection control and health and safety.

The peer mentor in Banff Hall delivered areas of the national induction programme to women admitted to Banff Hall and was supported by national induction staff. Employability staff delivered the areas of national induction related to work as well as the compulsory sessions identified above for the women to be eligible to work. Women had a dedicated slot within the education timetable on a Wednesday afternoon to complete the skills profiler.

Protection prisoners had very limited access to national induction. National induction staff went to their residential area to deliver sessions on a one to one basis. However, due to the hall regime they had very limited access to the prisoners, with a maximum of one hour in the morning and thirty minutes in the afternoon available. Therefore, protection prisoners were not receiving full access to the national induction programme.

Recommendation: HMP YOI Grampian management should ensure that all protection prisoners have full access to national induction.

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

Rating: Satisfactory Performance

The release dates for prisoners approaching their liberation date were recalculated by court desk staff one-week in advance of their liberation date, to check accuracy and any outstanding warrants that may affect the date. The court desk staff also made contact with residential staff to double check with the prisoner that the address recorded on PR2 was the address that the prisoner would be travelling to. This

allowed staff to prepare any special travel arrangements e.g. travel to one of the island locations.

One day before each prisoner was due to be liberated a court desk manager, using a 'Pre-authorisation of Liberation Scroll' form, checked the dates on the warrant again. The manager also checked again for any outstanding warrants to assure the liberation process.

Once movements to courts had been completed each morning, reception staff called the residential areas to request that prisoners due to be liberated were escorted to reception. Once in reception, the prisoner's identity was checked and they were allowed to change into their own clothes. Reception staff had a stock of spare clothing that could be issued to a prisoner if necessary.

Any property the prisoners had was checked and signed for by the prisoner before being handed to them. However, mobile phones were handed over to them at the front of house just prior to exiting the establishment. Reception had a stock of black drawstring bags available for prisoners to place property in, to ensure privacy on release. A discharge grant or travel warrant was issued to each liberation depending on circumstances.

Two liberations were observed where reception staff escorted the prisoner from reception through the agents' visits area and directly out to the turnstile at the front of house. The Standard Operating Procedure (SOP) for HMP YOI Grampian stated that staff from the front of house area should meet reception staff in the agents' visits area, within the secure area of the prison where the handover process should be completed. The front of house staff should conduct checks on the prisoner's identity within this secure area before escorting them to the front door and completing the release process. The front of house staff did conduct checks; however, they were done beyond the secure area.

Good practice: The court desk pre-release process was an area of good practice.

Recommendation: The SOP governing the liberation process should be followed at all times, whereby a clear handover takes place between reception and front of house staff within the agents visits area.

HMIPS Standard 2

Decency

Quality Indicators

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

Rating: Satisfactory performance

HMP YOI Grampian is a relatively new prison and generally the buildings, accommodation and facilities were in good order, clean and of an appropriate standard. Each cell was fitted with in-cell sanitation.

A call-button for emergencies was available, answered by staff at the main console on each level, and staff were observed responding to these within reasonable timescales. All areas had checklists to ensure accommodation met the required standards for occupation, including an acceptance form for the cell that highlighted the contents and cleanliness of the cell. Important information including when and how to use the call button were included. Dyce Hall information booklet also included a section on their expectation of cleanliness.

During the inspection, some corridors were observed as not being as clean as would be expected in a recently built prison, but the cleaning party dealt with this. Other areas such as the library, regimes buildings and health centre were well lit, clean, warm and ventilated. One area of concern was the air conditioning unit, which was positioned outside the prison and appeared to be rusty and in need of refurbishment. Inspectors were informed that the unit would be painted, but could be in danger of malfunctioning due to weather damage resulting in reduced services to the front buildings, including the offices and visits. It would be reasonable to suggest that money be provided to move the unit to a more protected position away from the weather conditions. Inspectors were informed that budgets would be reduced considerably in year 2019.20, which could affect plans for improvement and maintenance.

The estates team were able to evidence a comprehensive programme of maintenance, broken down by week, month and year, with a number of dashboards to indicate completion of work and outstanding issues. An example was that all cells were checked annually to assure the governor they were fit for purpose. The team reacted to agility reports submitted by staff, by prioritising work based on risk. They had a RAG tracking system that was reviewed weekly and action taken where appropriate. The team consisted of 21 staff and was currently two short, which was manageable but not ideal in the long term. Although 10% of agility requests were red, it was noted that during the previous 12 months estates staff had carried out 760 escorts of contractors, whilst the prison only carried out 703. This was due to staff shortages and a reduction in escort variable cover from three to one operations officer. If there was suitable escort cover then the number of agile requests with a red status would be reduced significantly.

Recommendation: HMP YOI Grampian should consider moving the air conditioning unit inside or provide more protection in its current location.
Recommendation: HMP YOI Grampian should increase their escort cover to a suitable level to allow the estates team to reduce the number of agile requests with a red status.

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

Rating: Poor

Most of HMP YOI Grampian had single cell occupancy. A range of cells were observed to be reasonably clean and fit for purpose whilst awaiting new occupants. Where cells were less clean it appeared to be mostly down to the occupant rather than the establishment, but this was not always the case. Although there were sufficient cleaning materials available within each residential area to allow prisoners to keep their cells clean, the cell cleaning periods during the day were being missed on occasion due to prisoners being locked-up.

There were examples of cells not being in such good condition, particularly the safer cells in Ellon Hall and a number of other cells where curtains were missing and graffiti was on view. In Dyce Hall for example, a number of cells had graffiti with derogatory language displayed on the walls, which appeared to have been there for some time. Inspectors were informed that it was difficult to initiate cell painting due to their high occupancy levels. However, during the inspection some of these cells were painted due to low occupancy. Inspectors spoke to the prisoner painting party who explained that they were given a weekly timetable to paint cells, which was evident during the inspection. Another area that noticeably required some cleaning were the exercise yards in Dyce Hall, which had a form of green algae on the floors.

Almost all of the accessible cells were occupied, although only one prisoner was deemed to be disabled. These cells were clean and appropriate for use for those with limited mobility, which was confirmed by the one disabled prisoner who was in a wheel chair. Worthy of note was the mother and baby cells in Banff Hall, which were of a high standard and met the needs of women who were pregnant or had a small baby. At the time of the inspection, one room was occupied by a pregnant prisoner who was appreciative of her surroundings.

The pantry areas along with the communal areas in the halls were reasonably clean despite no British Institute of Cleaning Science (BICS) courses being delivered for over 12 months. The standard of cleanliness could be the result of good information/tasking sheets in the residential and regime areas, which included information on colour coding linked to the required colour of cleaning equipment. However, these information sheets did not cover all aspects of BICS training, including maintenance of equipment. Failure to deliver these courses was because of officers being reassigned to other duties, and the prison was relying on prisoners returning to HMP YOI Grampian that had BICS trained over the last three years. A sample of six passmen informed inspectors that none had any formal BICS training

even though this was part of the job description. The lack of formal training was a concern as it heightened the risk of cross contamination or spread of infection. There was no evidence of cleanliness audits, from out with these areas, being carried out for assurances purposes. There were two male prisoners and one female prisoner trained in biohazard control standards. The establishment operated a call-out rota to deal with any such circumstances and this rota was maintained and managed by the industrial cleaning staff and published on SharePoint. However, there was only one Biohazard course delivered in the last 12 months. An SOP – blood & body fluid spillages – explained the procedures for biohazards spillages. Infection control meetings were held to discuss issues ranging from the control of vermin to food waste and recycling, and an annual planner was in place to check a number of topics under infection control.

Recommendation: To allow a feeling of self-worth and dignity, HMP YOI Grampian should ensure that prisoners are given every opportunity to keep their cells clean, and cell-cleaning periods should not be missed.
Recommendation: HMP YOI Grampian should make every effort to reduce new admissions being allocated to cells where there is graffiti, particularly where it is offensive and inappropriate.
Recommendation: In line with job descriptions, HMP YOI Grampian should deliver adequate BICS and biohazard training. No person should undertake tasks where they have not undergone the appropriate training.
Recommendation: HMP YOI Grampian should ensure that cleaning audits take place to ensure that standards of cleanliness are met.

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

Rating: Generally Acceptable Performance

All cells had a mattresses and a pillow that were generally in good repair. Although it is accepted by HMIPS that the quality of mattresses meets the recognised SPS standard, prisoners reported that they were uncomfortable and often struggled to get good night's sleep. Therefore were unable to function at their best the following day. Prisoners stated their appreciation for being able to buy their own bedding through a sundries purchase. There were mattress trackers to indicate when a replacement was due. New mattresses were stored in the unoccupied Cruden hall and were easily accessible if a new one was required.

The quantity and quality of laundry seemed to vary across the establishment. In Banff Hall there appeared to be a sufficient stock of laundry, which was well managed and organised by a laundry pass person. In Ellon Hall, shortages seemed more problematic and depending on the flow of prisoners, i.e. the FNIC seemed to struggle to keep a good level of acceptable stock. All areas appeared to have good access to the establishment laundry. However, on checking both Ellon and Banff Hall laundry stores a number of sheets and pillowslips belonging to other areas were observed, concluding that return procedures should be reviewed. During the inspection of Banff Hall laundry store, it was disappointing to find that three washing

machines and tumble dryers were not being utilised. HMIPS encourage HMP YOI Grampian to re-introduce these machines to allow the hall residents to wash their own personal belongings.

The laundry process was observed whereby prisoners could place their items to be laundered into a net bag that was then sealed, and the serial number from the seal was recorded against their cell number. This was designed to return the correct laundry, however this did not always appear to work. General complaints suggested that the women who worked in the laundry were removing items from the men's bags, particularly jogging bottoms. There was a process to investigate any incidents of laundry items going missing. From January 2018 to the time of the inspection, HMP YOI Grampian had received 28 claims due to laundry, and 19 of those were offered compensation.

Recommendation: All laundry stores should have an appropriate quantity of bedding.
Recommendation: The washing machines and tumble dryers in Banff Hall should be utilised.
Recommendation: The process for returning laundry to the correct location should be reviewed and refined.
Recommendation: The SPS should improve the standard of mattresses and pillows to allow prisoners to get a better night's sleep, and allow them to be more prepared physically and mentally for the next day's activity.

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

Rating: Generally acceptable performance

A range of toiletries and personal hygiene materials were available to all prisoners. They had access to washing and toileting facilities within their cells and all areas provided basic toiletries that were free of charge. Prisoners reported no issues getting specific items if required with a good choice of toiletries available for purchase from the canteen.

All FNIC areas provided an admission bag that should contain a number of toiletries, cutlery, duvet cover, pillow and pillowslip, clothing for the hall and appropriate underwear. However, due to stock issues in Ellon Hall, FNICs bags were not always complete. Banff Hall did not have the same issues and the female prisoners had access to a dressing gown, socks and a nightdress. Within the male residential areas, there was no evidence that men were given the same access to dressing gowns or pyjamas.

In Banff Hall, female hygiene products were accessible without women having to ask staff for them. Prisoners reported there were a number of occasions when they were consulted on changes to the range of toiletries available from the canteen and that some changes had not been made. However, this may have been due to cost or availability.

Although each cell had its own toilet and wash hand basin there was also adequate toilet and hand washing facilities available for use by prisoners throughout the establishment. Towel changes were regularly offered and if required each area appeared to be able to facilitate a towel change out with the allocated times. As the establishment had in cell showers, prisoners had many opportunities to uphold personal hygiene, and within Banff Hall there were two baths that were regularly used.

Recommendation: HMP YOI Grampian should ensure there is a sufficient amount of toiletries and hygiene products available in all stores to meet the needs of prisoners in that area, and in particular first night in custody prisoners should be given their full entitlement.

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

Rating: Generally Acceptable Performance

Prisoners had access to a range of clothing suitable for the activities they undertook. There was a good process in place for exchanging clothing when required and for clothes being regularly laundered. Reception had a clean and ample supply of prison clothing for distribution to new admissions. The reception area had a specific slot in the main laundry to deal with any laundry requirements for those being admitted into HMP YOI Grampian. The clothes were washed, dried and placed on the persons clothing rack.

On inspecting the FNIC areas, it appeared that at times there was a short supply of duvets and pillow cases, and in the women's laundry store there was a shortage of small and extra small jogging trousers. Generally, the clothes available to prisoners were in good condition and allowed them to maintain a sense of personal identity and self-respect. However, there were instances where this was not always the case. During the inspection the stock of male prisoner clothing in all three laundry store areas appeared to be inconsistent in both quantity and quality. The FNIC area reported that they struggled to keep up with requirements and that a lot of clothing was taken up to the second and third floors, and it was difficult to get these items returned. A change in colour for FNIC or closer monitoring of those leaving level one may mitigate this. In addition, the size of the clothing did not appear to be a standard size. A sample viewed of a medium size t-shirt appeared smaller than a standard size small. When talking to protection prisons in Ellon Hall C3 it was noticeable to a number of inspectors that the quality of their clothing was poor. When questioned, prisoners stated that they thought this was due to their offence and receiving what they would call hand-me-downs.

Within the regimes areas there appeared to be an ample supply of personal protection equipment to carry out the role safely. Most of those in the kitchen were dressed in appropriate whites. However, there were instances when this was not the case and this should be addressed. As with other prisons, HMP YOI Grampian allowed prisoners to wear their own clothing, which was popular amongst prisoners.

Prisoners commented that allowing them to wear personal clothes helped them to feel more empowered and better within themselves. Very good quality jackets were available within the halls for use during inclement weather.

Recommendation: HMP YOI Grampian should ensure that only those wearing appropriate clothing are permitted within the kitchen area.
Recommendation: HMP YOI Grampian should ensure that sufficient quantity and quality of clothing is available to all prisoners throughout the prison.

Good practice: HMP YOI Grampian prisoner reception had their own washing machine to wash any clothes for new admissions. After the clothes are washed they are placed on the persons clothing rack.

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

Rating: Good performance

The meals served were observed to be of a good standard and adequate quantity, and appeared to meet the healthy choice requirements. The NHS certified HMP YOI Grampian with a healthy living award for the period July 2018 to July 2020 for meeting the national standards of good practice, making it easier for its customers to eat healthily. The menus were prepared on a three-weekly cycle and offered a good choice that catered for individual prisoner needs. The menu cycles changed every six-months to reflect a summer and winter menu.

Menu choices were distributed to all areas in advance to allow prisoners to make their choice. New admissions to the prison had their choice of meal within 24 hours. If a specialised menu was required i.e. vegetarian, the kitchen strived to supply a suitable choice for their next meal. Menus were translated into a number of languages and most menus could be translated within 24 hours. All the menus indicated either a vegetarian option or a healthier choice. The menu was based on Athena, a report that indicates nutritional value for each item on the menu.

Good practice: The response to admissions receiving a choice of meal within 24 hours was excellent, as was the access to multi lingual menus that had clear guidance on options and nutritional value.

Prisoners commented that having experienced food in other establishments the food was of a better standard. Some prisoners made a personal choice not to eat prison food and bought items to eat from the canteen and sundries list. They were given ample time to heat their choice of food during meal times. Fruit was available every day and generally it was found to be of a good quality. However, inspectors observed that the standard was not always good, with some bruising. Inspectors were told this was possibly due to transportation from the kitchen, or fruit from the previous day that had been handled a number of times.

Whilst observing a lunch service in Ellon Hall level three the meals arrived just prior to serving, and were distributed as per the menu, with an officer informing prisoners of their choice. On sampling it was found to be of a good standard. It was noted that regardless of choice, prisoners could help themselves to extra salad if they wished. Catering staff carried out weekly spot checks in all areas to check that hygiene rules were being followed, that the food was at the correct temperature at point of service and to take any complaints. On the days they did not visit an assurance sheet was filled out. However, it appeared that some areas failed to comply with this request on a regular basis.

Food hygiene rules were witnessed being observed and evidence was provided of temperature checks of the hot plates. However, these were not completed on the day the inspectors viewed food being served.

There was evidence of prisoner focus groups taking place and action points being generated, but women prisoners reported that they saw little change.

There was evidence to support the provision of a range of dietary requirements, including cultural and for medical purposes. The kitchen manager FLM met with those who had dietary requirements, and all admissions with healthcare markers in PR2 were interviewed to establish any dietary needs.

The approach to catering for religious dietary requirements was good practice. Kosher meals were supplied for those of a Jewish faith. All Muslim meals were Halal. The catering staff met the NHS if required to cater for special medical diets. Prior to Ramadan, the kitchen FLM meets with the Imam and attends the Muslim prayers to speak to prisoners about Ramadan. At that time, the FLM will request a volunteer to help prepare and cook food for Ramadan. The boxes in which the food for Ramadan was supplied were excellent and the best HMIPS have seen during inspections.

Inspectors were made aware of reports of potential food tampering in the protection areas. It was claimed that barrows could be identified as being on route to the protection areas. Although difficult to make conclusions, having observed the barrows and discussed this with the kitchen FLM, inspectors were content that food leaving the kitchen was unidentifiable and reasonable steps were taken to reduce the risk of tampering with food. However, it might be worth checking these systems on a regular basis.

HMP YOI Grampian give parents the opportunity to bake their children a cake if they have a visit that coincides with the child's birthday. The parent is brought down to the kitchen, given the ingredients and instruction to bake a cake and when baked brought back to the kitchen to decorated it. The cake is then delivered to the visit room to be shared with the family.

Good practice: The approach to catering for religious dietary requirements was good practice. The boxes supplied to cater for Ramadan were excellent. It allowed for a clear separation of foodstuffs and kept it at the appropriate temperature.

Good practice: HMP YOI Grampian give prisoners whose children are celebrating their birthday whilst visiting them an opportunity to bake a birthday cake in the kitchen. Prisoners apply to the kitchen and are taken in to bake their children's cake, which is then delivered to the visit area for the child.

HMIPS Standard 3

Personal Safety

Quality Indicators

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

Rating: Satisfactory Performance

HMP YOI Grampian evidenced a consistent application of the TTM Strategy for people who were identified as being at risk of suicide or self-harm. Inspectors checked the paperwork for those who were currently or recently subject to the TTM Strategy. It was properly completed and there was evidence of a two-tier audit process undertaken by the FLM and the Unit Manager.

There was evidence of cell safety checks being carried out in line with assessed need. Prisoners reported a mixed experience of the cell checks saying some staff lifted the door hatch whilst others opened the door and spoke to them directly. Prisoners' preference was for the latter.

Within TTM case conference notes, inspectors saw evidence of delays, sometimes significant, in mental health support being provided. This was a cause for concern that was echoed by both prisoners and staff.

The safer cells in Ellon Hall appeared shabby and in need of decorating and cleaning. Given the vulnerability of people held in the safer cells, and that they could sometimes be there for long periods, HMIPS would like to see the fabric of the cells improved and cells being properly cleaned. The safer cell viewed in Banff Hall was of a better quality, but inspectors noted there was no window covering and an external light was close by meaning the cell was never dark, which could make it very difficult for anyone located there to sleep.

Inspectors were told that in Banff Hall consideration had been given to keeping people on TTM involved in a daily regime, and evidence of this was seen. Inspectors thought this was good practice, which should also be followed in Ellon Hall whenever possible.

Staff training was up to date and copies of minutes were shared from the "Local Suicide Prevention Group Meeting" which was a multi-agency discussion with clearly agreed actions.

Inspectors were also pleased to see that the Listener Scheme was back up and running, with plans for more prisoners to be trained to deliver this service.

Recommendation: SPS should consider amending the TTM paperwork so that there is a clear and easily accessible record of required checks being completed.

Recommendation: The NHS should take action to address the delay in mental health support for people who are subject to TTM.
Recommendation: HMP YOI Grampian should take action to improve the fabric and the cleanliness of the safer cells in Ellon Hall, and a window covering should be sourced for the safer cell in Banff Hall.

Good practice: In Banff Hall consideration had been given to keeping people on TTM involved in a daily regime.

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

Rating: Poor

HMP YOI Grampian recorded details of prisoners with protected characteristics, and inspectors checked a random sample on PR2 for evidence of identified support needs being met. The detail recorded in PR2 was scant, with the majority of records containing no detail. Inspectors were given evidence of more detailed plans for those with accessibility needs, where there was a detailed Personal Emergency Evacuation Plan for a prisoner who required assistance in the event of fire. Evidence was also provided of a comprehensive multi-agency discussion about a prisoner with a protected characteristic, which gave reassurance that matters were taken seriously and dealt with appropriately.

Reception staff were able to clearly articulate the action they would take should anyone clearly have a protected characteristic.

HMIPS had strong concerns about the regimes in place for offence and non-offence protection prisoners in Ellon Hall. The location of offence protection prisoners in a hall between long and short-term prisoners meant that there was significant opportunity for intimidation and abuse, which was witnessed by inspectors. Inspectors also witnessed this causing additional pressure for staff who had to ensure the long and short-term populations were behind grill gates before offence protection prisoners could be moved, either in a group or individually. Non-offence protection prisoners were accommodated in small numbers on mainstream halls, resulting in them having an extremely restricted regime. Inspectors found that a significant number of offence and non-offence protection prisoners had extremely limited access to purposeful activity, time in the fresh air or recreation was extremely limited. Inspectors found numerous examples where people were spending 22 to 23 hour a day locked in their cell, which breaches Rule 23 of the United Nations Standard Rules for the Treatment of Prisoners (the Mandela Rules).

Recommendation: **As a matter of urgency, HMP YOI Grampian should review the regimes and location for offence and non-offence protection prisoners in Ellon Hall, and their location.**

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

Rating: Poor

Inspectors saw some good practice with regard to the analysis and understanding of subversive, aggressive or violent behaviour. The establishment had adopted a multi-disciplinary approach that included colleagues from psychology and a Safer Prison Strategy, as opposed to one that concentrated solely on violence reduction, which was positive.

There were clear processes in place for collecting, collating, analysing and sharing relevant information with all relevant parties, including at FLM level. The way detail was collected and shared enabled lower level incidents as well as more serious incidents to be logged and tracked, assisting the implementation of preventative measures.

Inspectors observed a multi- agency substance misuse meeting, which was independently chaired by Public Health. The discussion centred around the inclusion of HMP YOI Grampian as part of the community served by public health, and how to ensure appropriate services were in place for people both within the establishment and on release. Inspectors thought this was an example of good practice.

However, inspectors were concerned about the frequent use of the auxiliary cell (silent cell) located in Dyce Hall, the Separation and Reintegration Unit (SRU). Between July 2018 and January 2019. Inspectors found that the cell had been used on seventeen occasions. From examining paperwork, it was indicated that the cell was used for a period of 24 hours for each person held there. However, on cross-referencing this with information recorded on PR2 this was not the case, and the amount of time people spent there varied from a few hours to overnight. Inspectors would expected the paperwork and the entry on PR2 to be consistent, and HMP YOI Grampian should review their processes around this. Inspectors also saw evidence of the cell being used for the same person on more than one occasion. In general terms inspectors would have liked to have seen a more proactive approach to addressing challenging behaviour as opposed to the repeated use of this cell, particularly for those who were located there on more than one occasion.

Recommendation: The use of the auxiliary cell in the SRU should be reviewed and action taken to significantly reduce its use, with a view to ceasing it all together.
Recommendation: The paperwork used to record the use of the auxiliary cell should be consistent with entries on PR2 and HMP YOI Grampian should review their processes around this.
Recommendation: HMP YOI Grampian should look to adopt a more proactive approach to addressing challenging behaviour in the SRU, as opposed to repeated use of the auxiliary cell.

Good practice: The establishment had adopted a multi-disciplinary approach involving the analysis and understanding of subversive, aggressive or violent behaviour that included colleagues from psychology, and a Safer Prison Strategy. This approach contrasts positively with one that concentrates solely on violence reduction.

Good practice: Inspectors observed a multi-agency substance misuse meeting that was independently chaired by Public Health. The discussion centred around the inclusion of HMP YOI Grampian as part of the community served by public health and how to ensure appropriate services were in place for people, both within the establishment and on release.

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

Rating: Poor

The establishment had yet to implement the SPS Anti-Bullying Policy, Think Twice. Inspectors noted that work was underway to implement the policy by the deadline of 31 March 2109, but could not find a current or interim anti-bullying policy.

Inspectors saw some good work being done, details of which are recorded in QI 3.3 in terms of the Safer Prisons Forum and anti-bullying posters on some wings. However, inspectors concluded that there was no overarching anti-bullying policy in place at the time of the inspection.

Recommendation: HMP YOI Grampian should take immediate action to ensure the Think Twice Strategy is fully implemented across the establishment.

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

Rating: Poor

In the absence of an overarching strategy, staff told inspectors that if any concerns were raised with them they would escalate the issue to their line manager.

Staff were aware that certain actions were available to them, such as people being moved to other areas, and minutes of conflict resolution meetings that had taken place in Banff Hall were shared. Inspectors agreed that the conflict resolution meeting was a positive intervention, but questioned some of the language used in the minutes. For example the participants were often referred to as “ladies”. Inspectors would have preferred the use of the word “women” or something gender neutral like “parties” or “participants”. There was no evidence that the use of conflict resolution meetings were consistent across the prison.

Inspectors did not find any evidence of a person-centred approach being taken to the issue, or consistent policy based support being offered to victims of bullying or harassment.

Recommendation: Immediate action should be taken to ensure consistent and effective support is available to people who are experiencing bullying and harassment.

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

Rating: Generally acceptable performance

HMP YOI Grampian had a Staff Alarm/Violent Incident Response SOP in place that clearly stated what should happen in the event of violence and a staff alarm being activated. Inspectors were told that the SOP was about to be updated to reflect changes in the security managers shift pattern. The shift was reverting to an early/late shift pattern to ensure support was in place for an extended period of the day.

The paperwork completed following violent incidents showed the number of staff responding to recent episodes. In speaking to staff, some articulated that they did not have complete confidence in the response protocol, as they felt at times it could take quite a long time for support to arrive. This was not reflected in the paperwork but is important to record as a perception by some.

Inspectors saw completed use of force paperwork and evidence that there was an audit/quality assurance process in place. The audit process had highlighted that on occasion there could be delays in paperwork being completed as e.g. agency staff were not available to enable clarification or to rectify mistakes. There was also differing quality in the completion of the paperwork.

Evidence was provided of alarms being regularly tested, and of the process being modified so that patrol staff could carry this out more effectively at the weekend.

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

Rating: Generally acceptable performance

The establishment had a comprehensive Health and Safety Policy in place that was last reviewed on 14 November 2018. Responsibilities were clearly set out in the policy and inspectors had sight of the Grampian Safety Tracker, which followed progress of agreed actions. Inspectors had concerns about the time it was taking to get some of the agreed actions completed e.g.to ensure there were the required

numbers of first aiders in the establishment. Inspectors noted that this situation was improving.

The establishment evidenced that regular health and safety checks were carried out in all areas of the prison and minutes from Health and Safety/Fire Safety Officer Committee meetings were provided to show areas of concern were discussed. There was evidence to show that required safety checks were carried out and that action had been taken in response to a letter received from the Scottish Fire and Rescue Service in September 2018.

Inspectors had concerns about some of the health and safety practices in HMP YOI Grampian, namely issues raised regarding the completion of Accident at Work Reports, records of weekly fire safety checks and records of staff training being up to date in some core areas, such as personal protection training (PPT) and fire awareness. Inspectors saw copies of accident at work reports that were insufficient.

Inspectors also saw evidence that training was not up to date for some operational and non-operational staff in core areas such as PPT and fire awareness. The latter may account for weekly checks of fire doors or fire escapes not being recorded as having been completed. Of particular concern was an accident at work (H&S) report that showed incorrect procedures had been followed with regard to blood borne viruses.

Recommendation: HMP YOI Grampian should take action to address the gaps in health and safety practices and ensure relevant staff are trained to meet the requirements of their posts.

HMIPS Standard 4

Effective, Courteous and Humane Exercise of Authority

Quality Indicators

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

Rating: Generally acceptable performance

The evidence provided clearly followed national policy. Internal processes were very good and there was a good audit trail of removal forms. Of those sampled, all paperwork was completed and reviewed by the Head of Operations. Any points raised from the removal forms were actioned accordingly.

All planned removals should be recorded to protect those involved in the removals and the prisoner being removed. Although there was significant evidence to support removals being recorded, there were a minority of instances where recording had not taken place. In all cases PR2 was updated and the SOP reflected national guidelines.

Recommendation: HMP YOI Grampian should ensure that all planned control and restraint removals are recorded.

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

Rating: Satisfactory performance

Inspectors attended a case conference for an extension to Rule 95 (12), a multi-disciplinary hearing with partnership working. It was encouraging to see cross-functional working with Prison Based Social Work (PBSW), the personal officer, the FLM and the Unit Manager in attendance. Although the NHS were not present, they sent an overview of the individual being discussed. There was encouraging input from those present and the prisoner was afforded many opportunities to raise any concerns or views he had. Identified plans were reviewed and updated where needed. It was encouraging to hear the prisoner's point of view throughout the case conference, good, bad or in different. There was clear and concise understanding from all parties of the direction of travel expected by the prisoner and those present to support this transition.

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

Rating: Satisfactory performance

There were no concerns raised by inspectors regarding the process. Everything was in accordance with the policy and compliant with a caring approach. In all orderly rooms observed there was scope for the individual to have their say and all factors were taken into consideration during the process, including the punishment. In all cases the individual on report had it explained to them that they had the right to appeal and how to do this.

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

Rating: Generally acceptable performance

Special Security Measures (SSM) were completed locally in the residential areas and PR2 was updated and reviewed regularly, as per national policy. At the time of the inspection, there were only four prisoners on SSM and all paperwork and PR2 records were updated and reflected their current position. It was concerning to see hard copies of individuals SSM forms sitting out in the staff consoles. When questioned staff explained it was the only way they knew who was on SSM and why.

Recommendation: HMP YOI Grampian should find another way of keeping SSM forms safe and secure and away from the population to protect prisoner confidentiality.

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

Rating: Poor

Inspectors observed searches being conducted, which were carried out in a caring manner and in line with SPS policy. The carrying out of searches in Ellon Hall were inconsistent and it was only when inspectors asked to see a search that one was carried out. In this example, the search observed was of a double cell and it was carried out with a caring approach and in line with national policy. The inspector spoke to both women who reported that they had been dealt with fairly and with dignity, and praised the staff for doing a difficult job. When questioned by inspectors, prisoners appeared to be unclear as to when they were last searched or had ever been searched. One prisoner reported that since his admission three and a half months ago he had never been searched. On speaking to staff in various areas there was a clear indication that searches were not taking place due to the regime, medication issues and more importantly staff shortfalls. This was escalated during the inspection as an area of concern.

It was disappointing to find little evidence of a paper trail for searches, the process for searching was not being carried out and searching did not reflect the records on PR2. A list of proposed searches for the following week was generated and sent to

the FLM of the area. These searches should have been scheduled into the daily regime and when complete the form returned to the sender. Reviewing these lists, it was clear to inspectors that there was a failure in returning these forms and therefore the process was incomplete. Where the process was not adhered to, the FLM who sent the lists emailed the respective areas but did not escalate these issues to the respective Unit Manager. There was also evidence that where searching was carried out, the recording on PR2 was not consistent.

Escalated Recommendation: HMP YOI Grampian should ensure that regular and consistent searching is carried out throughout the establishment, and that it is properly documented and escalated as appropriate.

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

Rating: Generally acceptable performance

Staff throughout the residential areas were knowledgeable about the process regarding items allowed in use. Reception staff were also very knowledgeable in the process and the reception officer informed inspectors that she was leading a small project to review the items allowed in use. SOPs were in place and readily available.

It was encouraging to see information booklets available in reception and residential halls informing prisoners of the process of getting items in use.

When an individual submitted a proforma to add to their items in use, reception staff checked the individual's property card and, if allowed, the pro-form was completed and property was allowed into the establishment at the earliest opportunity. When speaking to the female population they had no issues with the quantity, process or items allowed in use. However, within the male population there were conflicting findings. Of those questioned, there was a clear indication that the process was flawed as many male prisoners stated they waited weeks for their property to be allowed in use. On checking the proformas, inspectors could identify a date of issue for items in use but could not identify a date when these items were applied for, therefore making it difficult to challenge when prisoners complained as to the length of time it took for items to be distributed.

It was encouraging to see how much space there was in the reception area to hold prisoners property, with all valuable property being stored in a lockable unit and checked on property cards.

Recommendation: Items in use proformas should record the date of applying for the items and the timescales should be reviewed and trigger points identified if this flags up lengthy delays.

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

Rating: Satisfactory performance

A sample of Personal Escort Forms (PER) were reviewed to examine the assessment process for risk and needs where any prisoner leaving the prison under escort took place. In all cases it appeared that PERs were fully compliant with policy. Any risks or needs were annotated on the PER form and staff were fully brief. Staff spoken too had a good understanding of this process and were comfortable to escort those deemed necessary.

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

Rating: Poor Performance

Inspectors met with the Mandatory Drug Testing (MDT) officer who was part time and only carried out these duties two days per week. He gave a comprehensive overview of the process in place within HMP YOI Grampian, including a good database containing all information needed for MDT testing including suspicion testing.

However, at the time of the inspection there had not been any suspicion testing carried out on the male population for some time. Most, if not all, testing was carried out for progression purposes and for those on the frequently testing programme. Drug testing was being carried out in Banff hall but their own female staff completed it. The tests that were carried out were in line with policy.

It was disappointing to note the position with MDT at HMP YOI Grampian considering that in the previous inspection report from December 2015 the MDT process was viewed as being good practice.

Recommendation: HMP YOI Grampian should reintroduce suspicion testing on the male population.

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

Rating: Satisfactory performance.

Clear processes were in place to ensure the safety of those populations moving in and around the establishment. There was good communications between the Electronic Control Room (ECR) and staff during the movement of prisoners. The route movement was complex and lengthy. From the point of calling staff for the route to completion it took 35 minutes and in that time only 64 prisoners moved. Safety is paramount to this movement and this was evident during the route movement. The staffing lining the route on this occasion did a good job.

It would have been nice to see the occasional low supervision prisoner moving up and down the route without staff escorting them, following an appropriate risk assessment process being undertaken. SOPs were available and up-to-date. All staff and prisoners spoken with regarding the route movement felt safe during any transition.

Recommendation: HMP YOI Grampian may wish to consider allowing low supervision prisoners to move up and down the route unescorted to free up staff time.

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

Rating: Good performance.

Good performance in terms of staff knowing their roles, understanding the process and excellent use of the tools available to them to aid their search. The paperwork was good for building and grounds searching, and SOPs were up-to-date.

HMIPS Standard 5

Respect, Autonomy and Protection Against Mistreatment

Quality Indicators

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

Rating: generally acceptable

HMP YOI Grampian considered the needs of prisoners in relation to the sharing of information in the event of a death or serious illness of a relative. They had a SOP to ensure that the accuracy of the notification was assessed prior to informing the prisoner. The responsible parties for each task were detailed in the SOP and there was a template available for the call handler. Overall, staff in the halls were aware of the general process and were advised that it would be an FLM who dealt with it.

Prisoners commented that the staff in HMP YOI Grampian were better than experienced in other prisons and one prisoner gave an example of when he had been supported by staff when he had three bereavements in the space of one year. He reported staff treating him with compassion when delivering the news and providing him with support thereafter.

In terms of change of circumstances, e.g. a prisoner becoming ill or being admitted to hospital, an email containing an excerpt of the prison rules was sent to the management team in December 2017. This email specified that staff should ask the prisoner if they wish their next of kin to be informed. When hall staff were asked about this, they knew of the key principles for sharing information but advised that it was generally the FLM who dealt with it. The guidance stipulates that prisoners are also consulted regarding their wishes in relation to their families attending TTM case conferences. Staff confirmed that this would take place, however a TTM case conference was not observed during the period of the inspection.

Prisoners in all levels of Ellon Hall and those consulted in Banff Hall indicated that staff were supportive and allowed the opportunity to access the telephone in the event of an emergency.

Recommendation: HMP YOI Grampian should ensure that all staff are aware of the policies or SOPs and how to implement them in relation to the sharing of information.

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

Rating: Poor performance

During the inspection, inspectors observed that staff were not consistently challenging inappropriate behaviour and language towards protection prisoners.

Unchallenged disrespectful and unacceptable behaviour was also observed on a number of occasions during the course of the inspection and this is not acceptable. Both mainstream and protection prisoners commented that staff were not able to manage the level of inappropriate behaviour towards protection prisoners.
There were also a number of concerns about the control and order in Ellon Hall with evidence of inconsistent management. Inspectors observed inappropriate behaviour not being challenged on a number of occasions. However HMIPS also noted evidence of misconduct reports on abusive behaviour being completed and noted two examples of Rule 98 temporary confinement in a cell or room forms for abusive behaviour. When staff were asked about challenging inappropriate behaviour they indicated that it was not possible for them to challenge all instances of it due to staffing shortages

Prisoners also indicated that a lack of consistency in staffing meant that prisoners were not being consistently managed or challenged. Prisoners informed staff that the inconsistency was exploited and indicated that this explained the high level of drug use in Ellon one. There was no suspicion drug testing taking place to be able to triangulate this piece of information.

Staff gave an example of concern, when on one occasion they wanted to close the section grill gates to limit movement and improve order. Prisoners threatened to have a sit down protest if this occurred and as such, the decision was taken not to close the grill gates to avoid an incident.

There were mixed views on how safe staff felt depending on where they worked or if posts were not covered. During the inspection staff noted that there were violent incidents where staff had been assaulted and that they felt scared at times particularly with the long term prisoners.

Prisoners indicated they were sympathetic to the staffing shortages. They described how they had positive relationships with staff and helped to run the hall. As a result there were some concerns about collusion and a lack of appropriate boundaries. Prisoners were noted to be present behind the staff console and reported completing some of the staff roles to assist. Both prisoners and staff reported that the hall would not run successfully if it were not for the good will of prisoners.

In terms of encouraging good behaviours, an incentives and privileges scheme had been introduced. However, some prisoners indicated that this was not always applied effectively and they attributed this to the inconsistency of staffing. They advised that if they spoke to a member of staff who did not regularly work in their hall this often meant the task was not completed. In addition, three separate prisoners asked were not able to say who their personal officer was, so this appeared to be a barrier to having tasks completed.

Prisoners in Ellon Hall Level 1 that it was very difficult to get progression to either the Community Integration Unit (CIU) or Open Estate. His case file was reviewed and there was no clear reason for the delay in his case being heard at RMT. Staff appeared to lack knowledge of the RMT and progression process, so were not supporting prisoners to drive their progression application. This was further

hampered by a lack of personal officer or a lack of awareness about who their personal officer was.

In Banff Hall, the statement of intent indicated that they worked in a “gender specific individualised approach”. Staff were observed guiding prisoner’s behaviour and were supportive in the interactions observed. There were no concerning behaviours observed in Banff Hall.

In summary, the lack of consistent challenging of inappropriate behaviour and language was resulting in a high-risk environment in Ellon Hall.

Recommendations: HMP YOI Grampian must ensure that inappropriate behaviour is consistently challenged and positive behaviours are consistently reinforced to ensure a safe environment.
Recommendation: HMP YOI Grampian must take necessary steps to protect protection prisoners from abuse.

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

Rating: Generally acceptable performance

All staff spoken to appeared to have awareness about the importance of confidentiality and were aware of the process of notifying a data security breach and who to report it to. Staff were observed speaking to prisoners about discrete issues in interview rooms.

However, prisoners were observed walking behind the staff console when personal information was displayed on a computer screen. In addition, staff left the screen unlocked whilst working away from the computer and prisoners were present. One member of the inspection team challenged the staff member in relation to allowing this, as it had occurred on several occasions. In addition, the screen on the staff computer in Banff Hall could be viewed from the upstairs gallery due to the clear screen over the staff console, and this could impact upon confidentiality and security of information. This is not acceptable and was escalated to the Governor.

Discussions with the BIM were triangulated with information from the information security breach national data collection. It was found that the biggest area where confidentiality was being breached was via solicitors not accurately marking confidential legal mail (18 cases out 30 cases). There was a process in place for this and on each occasion a telephone call was made and followed up with written information about how to appropriately send confidential mail to the prison. The processes in place for managing this appeared robust and the national policy was being implemented by the BIM. Staff were asked about privileged and legal correspondence and they appeared to have a general understanding about mail and confidentiality and some awareness of how legal and privileged mail should be handled.

All prisoners consulted indicated that they had access to safes in their cells and were satisfied that this was appropriate for safely storing small items. However, it was

noted that a vacant mother and baby cell in Banff Hall did not have a safe. The prisoners in Ellon Hall indicated that prisoner confidentiality was generally good. However, prisoners had requested keys for cell doors to prevent other prisoners from accessing their cells. This action had been outstanding from the co-production meeting in January 2018 despite workable solutions. These types of keys were available for prisoners in Banff Hall.

The hoods over the hall telephones did not provide much confidentiality, however prisoners did not seem to have complained about this. This was identified during the last inspection and had not been addressed.

There had been an issue raised at the co-production meeting in 2018 that staff speak about staff/prisoners to other prisoners with no consistency between divisions. Staff in Banff Hall spoke about handling information sensitively and only disclosing personal information with the consent of the individual. There were no concerns of inappropriate disclosure observed or from the prisoners who were asked.

Overall, it was noted that confidentiality was typically respected and practices were generally acceptable. However, there were some issues regarding security of personal information in relation to staff computers that was unacceptable and as such was raised during the inspection. It is for this reason that recommendations are made.

Recommendation: HMP YOI Grampian must ensure computer screens and personal information cannot be viewed by prisoners.
Recommendation: HMP YOI Grampian must ensure prisoners in Ellon Hall have the opportunity to secure their cells when not in them.

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

Rating: Unacceptable performance

Prison regime plans were available in some halls although some had been covered with other posters. In general, the regime could have been more clearly advertised to prisoners. It was noted by prisoners, staff and management that the regime had been subject to change because of low staffing. There were a number of examples whereby the regime did not run as expected leading to an unpredictable regime.

Of significant concern, as reported by both staff and prisoners, was that the protection regime was most commonly affected by staffing shortages. Staff indicated that they had not been provided with a protocol to follow in the event of shortages so made the decision to remove resources from protection prisoners because they were the most compliant and least likely to complain. Some offence protection prisoners had reported that they felt discriminated against by staff and reported being threatened with transfer if they caused a fuss. Furthermore, it was noted that on occasions non- offence protection prisoners were not being offered the opportunity to access time in the open air, which is not acceptable. Although staff indicated that they did not have a protocol to follow it would appear that there was a SOP to guide them in the restriction of the regime. Given their lack of awareness of this document,

it would appear that this requires to be disseminated, implemented and monitored for compliance.

Co-production meetings appeared to take place and this gave prisoners an opportunity to be consulted on changes to the regime and matters that would affect them. It also provided an opportunity for prisoners to have their issues addressed. However, this had not prevented the regular changes and cancellations to the regime thus far. It is important that during these meetings the participants concerns are listened to and given due care and attention. In addition, at the time of the inspection the co-production members distributed the information about the meeting to the halls. It was suggested by participants in the meeting that there should be a noticeboard to display these minutes; the inspection team were advised these had been ordered but were not yet available.

Overall, it appeared that the regime was not predictable as there were frequent changes, delays and cancellations to services and protection prisoners were disproportionately affected by this.

Recommendations: HMP YOI Grampian should ensure that staff are familiar with all documents including SOP's relative to their working environment, in particular to managing staff shortages.
Recommendations: HMP YOI Grampian should ensure that prisoners are aware of the available regime and have equity of access to it.
Recommendations: Prisoners should be consulted about changes to the regime and it should be effectively communicated.

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

Rating: Generally Acceptable

The labour allocation board was designed to take into account the needs and desires of the individual in helping to identify relevant work parties and activities etc. However, protection prisoners had limited options in comparison to mainstream populations. It appeared that those on protection were discriminated against in terms of their access to a regime as it was noted as being the one most commonly cancelled (see standard 5.4 for further information). It was noted that on occasion non-offence protection prisoners had not been given the opportunity to engage in recreation. Furthermore, the verbal abuse they received at recreation appeared to discourage them taking up this opportunity; this was reflected in comments from both mainstream and protection prisoners.

There was a lack of information in the halls about the activities and events taking place and some prisoners reported this. Some of the programme information on noticeboards was out of date. Prisoners said that at times they had been advised about the regime via the TV system but this was no longer happening. There was a general feeling that the regime was not working well and that prisoners were finding

recreation boring. There were complaints that there were no balls for the table tennis tables in one hall for a number of months. There was a lack of consistency in the activities available in the sections during recreation. This had been raised at the coproduction meeting to try to secure board games, further pool tables and table tennis balls and bats. At the time of the inspection however this had not been resolved.

The co-production meeting had the potential to be a successful medium for collaboration with the different prisoner groups if fully implemented and expanded. There was evidence via the co-production minutes and observed at a co-production meeting that some prisoner requests were acted upon. However, some request had been unresolved for months. For example, a request from January 2018 for vitamins/better quality protein to be added to canteen took some 13 months to progress

Overall, the canteen and catering processes appeared to be working well and to the satisfaction of the prisoner population. There appeared to be an appropriate selection of products available through the canteen. The co-production meeting allowed for consultation on this and allowed prisoners to add and remove items. Where requests could not be accommodated it seemed that the reasons for this were valid. It was good practice that this information was then communicated back to the prisoners via the co-production meeting.

Although there were recreational activities available for all there was some variation across the range of populations, with protection prisoners being disproportionately affected by restrictions and little evidence of any regime for non-offence protection prisoners.

Recommendations: As with QI 5.4 improve communications regarding available regime.
Recommendations: As with QI 5.4 Ensure equity of access in relation to the available regime.

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

Rating: Generally Acceptable

It was noted that Independent Prison Monitoring (IPM) and Scottish Public Services Ombusman (SPSO) information was advertised on the noticeboards in the halls. All halls advertised that copies of the prison rules were available on request.

The prison library provided access to a number of documents to help prisoners safeguard themselves, including legislation that was available to read in the library or copies could be printed upon request for prisoners to take away. The library also had information available for a number of services and processes including the RMT processes, Alcoholics Anonymous, voting rights and Scottish Government texts. There was also a health point in the library with the option to confidentially request

information that would be sent to the prisoner's cell. The health care referral form was considerate of those who have lower levels of literacy; using images to convey the service as well as words. The information available in the library could be provided in large print and magnifying screens were available to help those with sight problems. However, one concern was that non offence protection prisoners only got access at lunchtime, meaning that they had to make a choice between exercise and the library. In addition, staff shortages meant that it was only open 112 days out of a potential 346 in 2018 (statistics provided by library providers). There were no operational staff available to take prisoners to their session, obstructing access to this information. There were also some issues in getting prisoners to the library if they did not move with the route and varying support from operational staff to accommodate it out with the route movement. However, it was positive that those in the SRU still had library access, giving them reading materials to help pass the time but also access to factual information, legislation etc. to be able to safeguard themselves.

See text in QI 5.7 re PCF forms. Staff and prisoners were asked about how those with lower levels of literacy would be able to access services and complete PCF forms. This appeared to be mostly achieved through informal and good will support of other prisoners.

Foreign nationals were able to access materials in their own language. However, it was not clear how they knew about accessing the library service. There appeared to be a barrier for those accessing information to safeguard themselves if English was not their first language. Staff described that on occasions two individuals learnt how to operate in the system by copying the behaviour of others. Although these individuals had been provided with a dictionary it would be advantageous to utilise translation services more frequently to ensure that they are safeguarded and have access to the relevant information.

There had been a number of services available to prisoners via the Link Centre to help safeguard themselves, but some services including the Law Society and Shelter were no longer operating. Prisoners expressed disappointment at this but it would appear that the provision was lost due to resourcing implications.

The agent's visits area was being appropriately used and although busy appeared to be operating well. Agents indicated being treated appropriately and staff being helpful. The video link service to courts was being regularly used. Prisoners were happy with this as it negated the need for what could be lengthy periods of travel. A virtual court diary was in operation to plan access to the facilities and these operated from the agent's visit area. Although there was a risk of noise transmission from the staff gym area, this appeared to be well managed.

Although the findings in relation to this indicator were generally acceptable, some recommendations are made to improve access for non-English speakers and make changes to the regime in order that prisoners do not need to choose between entitlements.

Recommendation: Improve access to information for non-English speakers to safeguard themselves against mistreatment.

Recommendation: Improve access to the regime so that prisoners are not required to choose between entitlements.

5.7 The prison complaints system works well.

Rating: Satisfactory

There had been an issue in Ellon Hall in March 2018 whereby complaint forms were not regularly available. This was raised at a coproduction meeting and was noted as being rectified by 24/04/18. At the time of the inspection PCF forms were available in all halls. However both staff and prisoners indicated that this was not consistent. Some staff indicated that they did not think having forms in the hall was a helpful approach as it appeared to encourage complaints. Some FLMs wanted to encourage prisoners to talk to staff to try to resolve issues in the first instance rather than immediately utilising the complaints process. It would appear that staff did not always support this process and actively referred prisoners to an FLM to deal with matters.

Prisoners indicated that it took a long time to get a response to complaints. However when the complaints paperwork was reviewed it appeared that most were completed within the relevant timescales. The most common complaint was that property was going missing from the laundry. Despite the introduction of a new policy there were still problems and complaints as a result.

There were no concerns in relation to the recording or answering of complaints. Discussion with the BIM indicated that all complaints were being tracked. If they were not escalated and were dealt with by an FLM they are filed in the halls. The rationale for this was to prevent documents with different destructions periods being contained within the warrant file. There were robust audit processes in place for the complaints system and this appeared to be an area of good practice. This triangulated with the SPS Audit and Assurance Services documentation in relation to an audit of prisoner complaints from January 2019.

The SPSO phone number was available on the prisoner phone list and there were posters available within the hall directing prisoners to ask their personal officer for more information. However when asked staff did not appear to know what this service was.

All cases escalated to the Independent Complaints Committee (ICC) were dealt with by the BIM who collated the data. There was an ICC on almost every Wednesday afternoon. An ICC was observed and this was chaired by a unit manager. The complaint was dealt with compassionately and sensitively whilst providing the individual with a clear reason for the decision. The process and relevant documentation was shared with the individual and he left with a clear understanding for the decision.

It appeared however that those who had lower levels of literacy may struggle to access the complaint system as the personal officer system does not appear to be working well, and currently such individuals would be reliant upon the good will of

other prisoners in assisting them with the paperwork. In addition, those who do not speak English appeared to be disadvantaged.

Recommendations: HMP YOI Grampian should ensure that staff have the required information to allow them to inform those in their care of the SPSO process.
Recommendations: HMP YOI Grampian should ensure that those that have lower levels of literacy are supported to complete the required paperwork, without reliance on other prisoners, unless it is a peer supporter.

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

Rating: Satisfactory

The IPM service was advertised in every hall and boxes were available for prisoners to make referrals. Staff seemed to have a general understanding of the IPM service. Staff and prisoners both indicated that there were times when the forms were not available in the hall and this was attributed to staff shortages. Prisoners seemed to be aware of the IPMs and had been advised about them through induction. Some were sceptical about their independence but seemed to use the service. One prisoner indicated that he had been trying to see an IPM for 12 months. He advised that he had not used the box in the hall because “I don’t believe in it”. When this case was checked, it appeared that he had been seen by the IPMs on numerous occasions over the last 12 months so his complaint was not consistent with the recorded information.

Overall it would appear that the system was operating satisfactorily.

HMIPS Standard 6

Purposeful Activity

Quality Indicators

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

Rating: Generally acceptable

Overall, there was a suitable and sufficient range of employment activities available to most prisoners, which provided opportunity to develop work-related skills. Major work parties included catering; gardens; industrial cleaning; laundry; pass duties and recycling. Other work parties, such as hairdressing, mentoring and creative media provided a few prisoners with further choice. However, female prisoners and male prisoners on an offence-related protection regime had a limited choice of work parties, and prisoners on a non-offence protection regime had no work party choice.

Relationships between prisoners and staff were positive and respectful and this created an appropriate and purposeful environment for working and learning. The quality of employment activities in work parties was a good standard overall and most prisoners who participated in them were usefully engaged. However, prisoner involvement in the planning of work activities was limited.

Only a few of the employment activities included opportunity for prisoners to undertake relevant industry-recognised vocational qualifications routinely, such as catering, food hygiene and Portable Appliance Testing (PAT). Staffing issues had resulted in fewer prisoners being presented for vocational awards compared with previous years. For example, no prisoners had been presented for British Institute of Cleaning Science awards in the last 12 months, compared with almost 400 awards in the previous year, and this reduced prisoners' employability skill set upon liberation.

The small training kitchen provided a particularly realistic environment for a limited number of prisoners to gain useful practical and vocational skills, alongside Scottish Vocational Qualifications (SVQ).

Good practice: Staff had also worked effectively in partnership with a local foodbank to support prisoners preparing for release with cooking masterclasses and recipes to produce dishes that could be created from a typical foodbank box.

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

Rating: Overall satisfactory

Generally, prisoners were able to access and participate in the purposeful activities that were agreed for them. An employability board met regularly and assigned prisoners to an appropriate work party. Prisoners were able to express preferences but these were not always possible to accommodate due to operational issues. Overall, the majority of prisoners were able to participate in an appropriate work party that took account of their needs and ability. Prisoners taking part in work parties were also able to attend education classes and gym sessions without it impacting negatively upon their wages.

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

Rating: Overall satisfactory

There was a wide and sufficient range of appropriate educational opportunities for prisoners. There was a wide and sufficient range of appropriate educational opportunities for prisoners. There was a good range of levels of activity meeting a wide range of needs, from personal support in basic literacy, to larger class groups of mainly SCQF level 3/4/5 work, through to Open University. Options were open to convicted males and convicted and remand female prisoners, with a more limited but adequate offer available to protected prisoners. The provision was based in a bright, modern, well-equipped and appropriate learning centre.

There were good and purposeful working relationships within the education unit between staff and prisoners. Prisoners were happy with the subject choices on offer, and the subjects were consistent with developing self-confidence, communications skills and employability. Choices were clear, and there was very little wait for educational opportunities, whether this was individual support or joining class groups. Prisoners were suitably consulted on the offer, and regularly invited to give feedback through direct discussion and well-organised and regular focus groups.

Across the prison there was an adequate awareness of what was on offer by prisoners. However, there was still a reasonable number who did not seem to know the options available. Those prisoners who engaged in education saw the value of accreditation, and there was a good number of useful qualifications gained. The education unit supported a wide range of accredited awards, including Award Scheme Development and Accreditation Network (ASDAN) and Duke of Edinburgh awards.

Good quality delivery was supported well by a number of partnerships. Activities such as Cell Block Science with Aberdeen University, Steps to Excellence with Aberdeenshire Community Learning and Development staff, and Meet the Author and a reading group with the local library service worked well to enrich the

experience. The Cell Block Science project was also used well to introduce and support family learning, with science activities for the partners and children, as well as visit opportunities for the families to a science centre.

The prison worked with Station House Media Unit (SHMU), a charity and community media organisation based in Aberdeen based. This gave prisoners access to high quality media equipment and training, aimed at building communications, confidence and self-esteem. This provision worked well for the low numbers of prisoners engaging. They produced magazines and radio programmes for national prison radio. In addition, they provided filming and support for the prison Story Book Dads/Mums programme, which was very helpful to parents and families. There is potential for the education team and SHMU to align their work more effectively to ensure greater impact and avoid the risk of duplication.

The main barrier to the effectiveness of the education provision was the regular low staffing issues that did not allow enough resource to escort prisoners to and from the education unit.

Recommendation: The education unit should promote their service further using noticeboards and personal contact to ensure greater take up of provision.

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

Rating: Good performance

Almost all prisoners were able to access high quality indoor and outdoor sporting and fitness facilities through a well-understood weekly schedule. However, non-offence protection prisoner's regime had no scheduled access to the gymnasium. Facilities were well used by most prisoner groups but usage was lower amongst female prisoners. The gymnasium was well equipped with a suitable range of exercise and training equipment, and an indoor games hall was used well by prisoners for activities such as racquet sports and circuit training. An outdoor all-weather football pitch was also available for prisoner use. Prisoners were also able to access a range of cardio equipment in small satellite gyms located in each residential hall. All prisoners completed an induction session with a Physical Training Instructor (PTI) prior to accessing the fitness equipment.

The team of PTIs had positive and respectful relationships with prisoners and this contributed strongly to the gymnasium having a relaxed atmosphere, which encouraged prisoner participation in health and well-being activities. Prisoners were consulted routinely on the type of activities they prefer to engage with. Targeted classes, such as an over-35s session, yoga classes and a running club were popular and these were better meeting the needs of more prisoners. Over the last year, the PTI team had been running a successful series of monthly themed events, which encouraged prisoner engagement in a wide range of enjoyable sporting challenges.

The team also had strong and effective working relationships with external partners, such as a local senior football club and local boxing club, which supported sporting initiatives and activities for prisoners. Effective internal partnership working with Fife College and NHS Grampian had resulted in health and wellbeing assessments and useful advice and support sessions for prisoners.

Good practice: The PTI team had strong and effective working relationships with external partners, such as a local senior football club and a local boxing club, which supported sporting initiatives and activities for prisoners.

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

Rating: Good performance

The prison library was managed well through a useful partnership with Live Life Aberdeenshire, the cultural and sports arm of the local authority. The library was well located, roomy, bright and welcoming. Stock was rotated regularly, and used the wide range of resources available through the local authority.

The range of resources available included an appropriate level of more specialised materials, including information on prisoner rights, books in various languages, and large print books. The link with the local authority also allows quick access to such things as books with coloured filters to help those with dyslexia. Requests and specialised resources were made available very quickly when asked for, typically within a few days.

The library service was made available to all prisoners, tried, untried, women and protected prisoners, including a service for the SRU. There was a very high level of use, and impressively, 87% of the resident population used the library service in January 2019. In 2018, the library issued 25,977 items.

Staff engaged well with prisoners, and pro-actively encouraged reading and progression to more challenging and interesting texts. They supported author visits twice a year, and had recently established a reading group led by a member of the local authority staff. There were periodic thematic displays around cultural dates such as Armistice Day and Christmas. Prisoners were consulted well on library use and improvement.

The library also had a well-planned and designed HealthPoint area, where prisoners could find information in simple booklets and pamphlets. This was staffed by healthcare professionals periodically to align with health promotions such as smoking cessation or heart week. The good location in the corner and a table with a jigsaw available made it easy for prisoners to access this area with a level of anonymity and privacy. The area also had a very simple card and box system for prisoners to write down health queries and put them in the box, and healthcare staff followed these up. In one particular example, this discrete initial enquiry led to a follow up that identified and dealt with a cancer issue at an early stage.

The main impediment to the fully effective use of the library was lack of SPS staffing to escort prisoners to and from the library. Of the 248 days the library service was on offer in 2018, there was limited escort staff available for 112 of them severely restricting library use.

Good practice: The link with the local authority allowed quick access to such things as books with coloured filters to help those with dyslexia. Requests and specialised resources were made available very quickly when asked for, typically within a few days.

Good practice: The library had a well-planned and designed HealthPoint area.

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

Rating: Satisfactory

There was an acceptable and appropriate range of cultural, peer support and self-help activities offered. These activities were primarily driven through the education unit. Although this was a useful focus for such opportunities and had a good numbers of participants, it meant that those who did not engage in education within the unit had limited opportunities for wider cultural and social activity. Across the prison estate, there were very few leaflets or posters highlighting equalities or cultural activity, limiting the wider awareness.

The education unit staff planned a wide range of displays, promotions and events based around traditional celebrations, promotions and a calendar that takes account of wider cultural and diversity key dates. Thematic activity and displays were organised well to engage prisoners to reflect on, for example, an Ann Frank Exhibition, National Numeracy Day, Science Week and World Book day. Good links with the SHMU media team also allowed for work to be done to a high standard on Story Book Dads/Mums, and in the production of thematic radio programmes and promotional radio jingles to advertise events. There was a particularly strong programme of health related thematic activity. This included such things as a focus on healthy eating and lifestyle on world heart day, and a major cycle challenge. The gym staff and health staff promote and support these activities well.

There were many self-help activities supported through educational programmes such as Steps to Excellence, and through a vibrant and active chaplaincy service. The chaplaincy provision had a significant focus on pastoral and personal support, and worked well with a number of prisoners to encourage reflection and self-improvement.

The prisoners were supported well in producing artefacts for the Koestler awards, with 111 entries last year. Twenty-one of these entries were awarded prizes. This was motivational, and encouraged collaborative project work across different areas of the prison.

There was an effective small team of trained peer mentors within the prison who work well to assist newer prisoners in such things as basic literacy, understanding prison systems and settling in to make the best of prison opportunities. In addition, there were Samaritan trained Listeners who helped to support prisoners well who identified as needing this personal support. Although there were low numbers of prisoners engaged in this work, they were having a positive impact.

Good practice: The education unit staff planned a wide range of displays, promotions and events based around traditional celebrations, promotions and a calendar that takes account of wider cultural and diversity key dates.

Good practice: There was an effective small team of trained peer mentors within the prison who work well to assist newer prisoners in such things as basic literacy, understanding prison systems and settling in to make the best of prison opportunities.

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

Rating: Unacceptable performance

Exercise was offered daily in the fresh air for the majority of prisoners. Most exercise areas were reasonably new, of appropriate quality (though generally quite sterile in appearance), and were clean and tidy. Prisoners held in the SRU were offered exercise daily, however the exercise areas were small and of institutional design unlikely to support positive wellbeing and were dirty. Rule 41 paperwork was viewed which demonstrated specific attention consistently being paid to the need for fresh air and exercise within prisoner care plans. Numbers of mainstream prisoners observed attending exercise during inspection were reasonable in both Banff and Ellon Hall despite the cold weather. At present staff shortages in Banff Hall meant that other women not wishing to go out for exercise were locked in their cells to facilitate the exercise process. Outdoor clothing supplied was sufficient, of a good quality and clean, and staff indicated laundry arrangements were in place and regular.

The prison does not however meet the requirement of universal access for all prisoners. Non-offence protection prisoners indicated during the inspection process that they were not offered exercise in the fresh air. Staff indicated that there was no specific time in the regime to offer them exercise, and as a compromise they were usually offered time out of their cells inside the hall.

Rule 23 of the United Nations Standard Rules for the Treatment of Prisoners (the Mandela Rules) states that every prisoner who is not employed in outdoor work shall have at least one hour of suitable exercise in the open air daily, if the weather permits. A similar recommendation has been provided by the CPT during their visits to the UK “steps should be taken to ensure that prisoners are guaranteed the basic requirement of at least one hour of outdoor exercise per day.”

The prison also did not meet the requirement of non-discrimination of any kind. Offence protection prisoners had a separate exercise time designated, however as previously mentioned they raised complaints that they had to walk through residential areas housing mainstream prisoners and suffered from abuse, which made them reluctant to participate.

Searching procedures observed in Ellon Hall showed prisoners who had been through security checks/searches then having contact with those who were waiting to be checked before going out on exercise, this practice represents a risk and should be stopped.

Recommendation: HMP YOI Grampian should revise their regime plans to ensure that all prisoners are offered access to time in the fresh air.
Recommendation: HMP YOI Grampian should ensure all exercise areas are clean and consider how these could be developed to contribute further to positive health and wellbeing.
Recommendation: HMP YOI Grampian should remove barriers to access by revising routes to exercise to ensure that these are safe and challenging abuse of any kind promptly and appropriately.
Recommendation: HMP YOI Grampian should ensure the specification and implementation of security check procedures for the exercise process are robust.

6.8 Prisoners are assisted in their religious observances

Rating: Good performance

The chaplaincy team had an appropriate multi-faith membership, including volunteer support from the Prison Fellowship and demonstrated both an inclusive ethos and a pastoral focus. Excellent relationships were consistently reported between members of the chaplaincy team, members of prison staff and prisoners (the lead chaplain had notably been recognised as a 'woman of influence' by female prisoners in a wall painting leading to their accommodation area). Relationships with the night shift security managers allowed access issues to services to be resolved quickly where there might be potential inter-prisoner conflict. Because of distance from the central belt, contact with national SPS chaplaincy advisors was less frequent, though a visit was scheduled to occur soon and relationships were described as positive. Chaplaincy staff felt valued by the establishment senior management team (SMT) and report attending a multi-disciplinary morning meeting with the Governor on Mondays. A chaplaincy plan had been available previously and was due to be refreshed. The weekly chaplaincy programme was full of a range of services and events.

All prisoners were visited individually soon after admission and their specific religious needs and access to articles of faith recognised and attended to, with additional contact to build relationships during an induction group. Prisoners in the SRU were visited individually every Sunday.

Support was available to observe religion with church services available for all prisoners (with the exception of non-offence protection prisoners who were offered 1:1 support). A church service observed was upbeat and included modern songs

sourced from social media. Attendance was reported as averaging between 20/30 individuals at each service depending upon the population group. Women attending described an uplifting experience with fellowship and coffee after the service being much appreciated (this was available to men after their services). Some planned events/celebrations such as Eid/Remembrance, took place and were used to promote inter-faith activity, but these were not extensive and could be further developed as part of a co-ordinated equality and diversity agenda led by the establishment SMT.

The team were involved in wider multi-disciplinary discussion on issues such as mental health, children and families, and violence reduction. They would like to participate more but current resource constraints prohibits this. The chaplaincy team had been adversely affected both by prison staff absence (with examples of provision being cancelled such as prison fellowship evening sessions) and by the difficulty of recruiting chaplaincy provision. This had caused workload pressures, although the chaplaincy team felt that they currently had adequate personal/professional supports available to them. A number of examples of innovative service delivery and partnership working were evident including the Restorative Justice 'Sycamore Tree' project with Integrate Scotland, a recovery café, and the establishment of a mindfulness and meditation area named 'soul space'.

Whilst the Chaplaincy team were not routinely involved with formal case work processes they had access to throughcare and CMB lists, and engaged appropriately in circumstances where they had significant contact with individuals. Examples were provided of both forging successful throughcare links with partner organisations (the 'Benaiah' women's rehabilitation facility) and offering continuing personal short-term contact post release with identified prisoners where required.

The chaplaincy team expressed a desire to see the wider prison, as well as those staff working with women, developing trauma informed practice. In this context, it was a concern that no alternative bereavement support service other than the chaplaincy team was available on site. Some third sector services for abuse counselling (Open Secret) had been lost and provision of these support services was due to revert to the NHS. There was a feeling that prison staff might find difficulty nurturing others if they did not feel nurtured themselves.

Recommendation: The existing chaplaincy plan should be refreshed taking account of learning on trauma informed practice for both staff and prisoners and how this might be extended across the wider establishment.
Recommendation: Arrangements should be made to facilitate attendance at services by those on non-offence protection to promote inclusion.

Good practice: The excellent relationships and practices at HMP YOI Grampian are worthy of sharing. Specifically the provision of chaplaincy visits to individual prisoners following admission, informal fellowship time after services and the development of a quiet space for mindful reflection are to be commended.

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

Rating: Good performance

The HMP YOI Grampian visits area was situated on the first floor with disabled access. The visit facility was large, bright and welcoming. A large play area was available with toys of good quality that were clean and well maintained. A small external area was available (though currently unsuitable for play activities) and it was planned to redevelop this. Relationships with staff, families and partners were positive, but staff shortages amongst visit staff had impacted to an extent on the availability of familiar faces.

Family members booked visits and visit allocation was not restricted as long as spaces were available. In focus groups some families reported potential problems with visit booking line access. Staff report that the booking line was staffed morning, afternoon and evening, though delays may occur after public holidays, when administration staff were not available or at peak times like Christmas. Family Contact Officers (FCOs) reported being authorised to agree double visits when families required that facility. Visit sessions were mixed and included women, men and protection populations. This appeared to work well with a relaxed atmosphere, though the establishment may wish to consult protection groups to establish if there are any perceived barriers which would justify a separate visit session opportunity. Visit information was available, though in discussion prisoners requested that this be refreshed, especially on noticeboards in the halls where staff were often 'too busy' to provide information and to improve accessibility for foreign nationals. The FCOs planned to conduct 'drop in' question and answer sessions in the halls.

The visit programme had been produced in consultation with prisoners and visitors and provided a range of visit opportunities including children's visits. Visit consultation forums were in place. At the time of the inspection a weekday evening children's visit session had been cancelled. The reason given for this was that the session had been underused and staff had been redistributed to cope with shortages and to maximise attendance at other sessions.

The children's visit session was observed and it was child-centred and an example of good practice. The children's visits were very well supported, a number of partner agencies were in attendance, hot food was available and specific activities such as 'street sport' had been arranged to encourage prisoners to participate with their children (during other visit sessions food was available from a small snack shop run by prisoners and from dispensers). Space in children's visits was adequate for privacy, 15 prisoners each with a partner and up to four children could be accommodated in each session. Homework engagement opportunities between parents and children were available. A wide interpretation of national policy criteria was used so that children's visits were as inclusive as possible. It may assist if further clarification was provided to other establishments by SPS as more restrictive practices at other locations were reported. FCOs indicated that in consultation with

other partner organisations they had begun to electronically record some information about families to support a positive children's visit experience. Whilst this was being done with the best of intentions, this practice should be checked to ensure appropriate consents and protections are in place, and that all records kept are General Data Protection Regulations (GDPR) compliant.

Family contact staff were available and relationships were described as positive. Staffing of key roles had been relatively consistent and well resourced; though staffing shortages had sometimes meant that FCOs had less time to spend with families and children. FCO cover was available throughout the day and evening when visits were in progress. It was planned to develop a 'manual' for key roles to ensure continuity of service. The FCO staff had been active in engaging with casework and throughcare staff, providing advice to families on key issues such as HDC and attending case conferences when appropriate. Specific family events were organised throughout the year (a barbeque, 'relax kids' yoga and film nights) and were well received. Key role holders in the visit area had received training in Get It Right For Every Child (GIRFEC) and child protection, linked effectively with social work partners and had also had some exposure to information about adverse childhood experiences and corporate parenting. Staff expressed a desire to know more about trauma informed practice.

Facilities for professional visitors were good, with staff described as being helpful. Flexibility was available for professional visitors to 'walk in' without booking if space was available. Specific examples were given of alternative arrangements made for professional visitors to accommodate their needs.

Some prisoners expressed frustration at difficulties in contacting families, particularly on admission. The systematic introduction of individual phones for each cell (with a limited number of pre-set approved contact numbers) would address such concerns, provide family contact for those prisoners isolated from the regime and access to helplines overnight.

Recommendation: HMP YOI Grampian should ensure relief cover arrangements are in place for the visits booking line on occasions when the administration staff are not available.
Recommendation: HMP YOI Grampian should ensure that information about visits is refreshed and accessible; including for prisoners whose first language is not English.
Recommendation: HMP YOI Grampian should ensure that any information recorded about families has appropriate consent arrangements in place and is GDPR compliant.
Recommendation: SPS should ensure that the interpretation of children's visits criteria is as inclusive as possible and consistently implemented across establishment sites.
Recommendation: SPS should consider introducing phones for each cell to facilitate easier contact between prisoners and families.

Good practice: The operation of children's visits at HMP YOI Grampian represents good practice and is worthy of sharing.

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

Rating: Good performance

HMP YOI Grampian had a family centre adjacent to the entrance of the prison, which was much valued by both visitors and staff, who frequently used the excellent café facilities. Hot food was available on weekdays at lunchtime. The establishment had a spacious parking area and was well signposted. However, there were no rail facilities and families generally had to travel a considerable distance by car or bus.

The family centre was run by Action for Children who have had reasonable continuity of tenure to facilitate planning. There was a mix of employed staff and volunteers and HMP YOI Grampian had sited a FCO on the premises out of uniform, which demonstrated innovative partnership working across custody and community boundaries. This engagement with the wider community had expanded into liaison with the court services, the education sector (with teacher training) and links with local foodbanks. Specific sessions had been organised for families to meet informally and cook together at the Aberdeen community kitchen. There were further innovative examples of working across custody and community boundaries with initiatives such as 'club 10' providing sessions for young visitors inside the prison during visits and also offering peer group support within the community setting. Some throughcare support had been offered on individual occasions, and this was an area of work that the Family Centre staff would like to expand upon.

Information, advice and guidance for families was available about the prison and wider community services and rights issues. A computer has been installed in the centre and this was used to support families in completing applications such as those for Assisted Prison Visits. A film had been made for families about the experience of imprisonment in partnership with SHMU and Alcohol and Drugs Action entitled 'Keeping it together'. Families had also been offered training in the use of Naloxone in the event of an overdose. The way in which the Family Centre provided information advice and guidance is an example of good practice.

HMP YOI Grampian had developed a comprehensive families plan and strategy with a multi-disciplinary steering group. This was monitoring implementation of the national SPS family strategy. Staff were able to articulate that future priorities had been discussed and included a greater focus on issues such as domestic abuse, child protection, trauma and attachment. Staff were aware of the needs of care-experienced children and had been active in providing an on-site briefing about the prison to local foster carers.

With all this wonderful activity in progress, it was disappointing to learn that HMP YOI Grampian had few parenting skills opportunities, and that those that were in place were likely to be lost due to funding cuts. Existing parenting groups offered by Action for Children would run out of funding at the end of the financial year. The only other initiative in the establishment was run by Fife College who had produced a parenting module as part of their curriculum. Whilst these efforts are recognised,

this important area of work requires greater focus and organisational support to access funding.

Procedures to admit visitors to the establishment were observed. Staff were polite and respectful and search procedures including those for children's visit sessions were sensitively and appropriately managed. Drug search dogs were available to the establishment and levels of access were due to be increased. Waiting areas were bright and clean with appropriate information on display. The FCO office was accessible to families.

Recommendation: Scottish Government and the SPS should urgently seek funding routes to maintain and further develop parenting courses for serving prisoners at HMP YOI Grampian.

Good practice: The family centre at HMP YOI Grampian's information advice and guidance service to families and their integrated working with community partners is good practice worthy of sharing.

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

Rating: Good performance

A specific problem facing visitors to HMP YOI Grampian is its location, with families often having to travel a considerable distance. The establishment had recognised this and operated both the 'e mail a prisoner' scheme and 'video visits', supported by APEX, at a central Aberdeen location during the day. However, prisoners from other areas, particularly those whose families were living in Highlands and Islands did not have the same opportunities. Previously, HMP Peterhead provided this facility to families in the Shetland Islands, but this no longer appears to be the case. Due to the expense and time spent travelling to visits, HMIPS would encourage HMP YOI Grampian to reintroduce these links.

Special arrangements were routinely made to be flexible with visitors who might arrive late because of traffic delays. Recent changes to public transport timings because of the building of the Aberdeen bypass had been unhelpful. The establishment had made active representations, and alterations to service timetables were, as a result, reported to commence soon. A specific event had been organised to arrange for Members of the Scottish Parliament to travel by public transport from Aberdeen, visit the establishment and receive a briefing. This event had been successful and resulted in a greater shared understanding of the difficulties families faced. This innovative method of engagement is an example of good practice. A free bus service was available for children's visits on two Saturdays a month, with costs shared by the prison Common Good Fund and Action for Children.

Facilities were in place to accommodate morning visits for those under specific visit restrictions or for families with specific needs. Particular care was taken to individualise service responses (especially for children), and a number of examples were provided of situations where staff either in the visits area or family centre made

special efforts to assist. In one example a mum visiting with new born twins was provided by the establishment with equipment at an identified bed and breakfast location to enable her to travel and stay overnight without additional luggage, this is an example of good practice.

HMP YOI Grampian offered and accommodated prisoners for accumulated visits in accordance with national policy. It was noted however that few prisoners located at HMP YOI Grampian opted for accumulated visits because their visit allocation was so flexible. In practice, families preferred to travel even quite extended distances or opt for a more permanent cross border transfer. It is possible that a significant number of prisoners may not receive visits and may be socially isolated, but this was not tracked, and no alternative 'video conference or 'Skype' type of support existed to facilitate contact.

Recommendation: HMP YOI Grampian should track those prisoners who are socially isolated and consider implementing alternative forms of support.
Recommendation: HMP YOI Grampian should reintroduce video links for families in the Shetland Islands, and make more use it video link in general to facilitate contact with families.

Good practice: The use of 'video visits', supported by APEX, at a central Aberdeen location during the day.
Good practice: The individualised care offered to visitors including a specific example of equipment and accommodation support offered to a visiting new mother with twins is an example of good practice and worthy of recognition.

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

Rating: Satisfactory

In general, HMP YOI Grampian managed visit restrictions in accordance with national process and took account of the best interests of visiting children. Good panel and appeal processes were in place in respect of children's visits. Examples were given where prisoners were retained on children's visits despite being on closed visits with other visitors.

Few prisoners were on closed visits at any specific time and there were robust monthly review processes in place. Access and egress managers routinely took responsibility for informing prisoners in person of the outcome of decisions, however this duty was sometimes passed on to hall staff or managers who may not have the full information. The closed visit area was situated on the first floor adjacent to the main visit area. The visit cubicles were of reasonable size and were clean and tidy. An accessible room was available should that be required. Prisoners located in the SRU were not automatically placed on closed visits. Their visits were in the main visit area, but if this was not possible, the establishment sometimes accommodated them in the agents visit area, ensuring that their visit was held under open conditions. The only slight concern noted was that prisoners placed on closed visits

and their families were notified that this was for a three-month period. Although each case was in fact reviewed monthly, and some prisoners were returned to open conditions earlier, it is important that there should be no confusion. The three-month period is set in the rules as the minimum review period and expectations should not be set for staff, prisoners or families that this will be the normal exclusion period from open visits.

Recommendation: Prisoners and families should not be routinely notified that their closed visit period is for an initial three-month duration.

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

Rating: Generally acceptable

HMP YOI Grampian provided a range of therapeutic treatment and cognitive development opportunities. Nationally recognised courses were available including 'Pathways' (for substance misuse), 'Constructs' (for cognitive skills), 'Discovery' (for violence) and the Female Offending pilot programme 'Ultimate Self' which was being delivered on a 1:1 basis. The establishment complied with national processes for programme assessment, allocation and notification to prisoners.

The SPS psychology and programmes officer teams were co-located with social work and had positive working relationships with other staff including the clinical psychologist from the NHS. Staff shortages had caused problems with both vacancies and absence in the psychology and programmes officer teams. These had been more acute in the last six months, though essential services had been preserved. Case management plans for prisoners located in the SRU (based on the 'good lives' model) and brief interventions in respect of bullying were both planned/under development, but had not been implemented because of the impact of staff shortages. This was disappointing as the 'good lives' model was noted as good practice during the last inspection.

Evidence was provided of effective contribution to risk assessment and case management practice at both the RMT and the Case Management Board (CMB), with high risk Order of Lifelong Restriction (OLR) and Multi-Agency Public Protection Arrangements (MAPPA) cases being small in number and manageable. Care was taken to ensure that complex cases were allocated to personal officers with appropriate experience after discussion at the RMT, though the need for wider support and development of the personal officer group was raised as needing to be prioritised. 'AIR MAP' training had been completed with prison staff when the prison opened, but this process was not being completed and little additional professional development (other than that available as part of transition training on promotion) had been offered. Personal officers expressed a desire for refresher training on progression issues, but also indicated that information was available 'if you went looking for it'. There was concern that whilst specialist case management services and programmes were being maintained, their impact was diluted by the lack of consistency and experience of hall staff to support individuals, and that the personal

officer scheme did not function well. The hall post described as 'case work relief' by staff was very rarely filled because of staff shortages and hall staff indicated that completion of Integrated Case Management (ICM) paperwork was becoming unmanageable for them. During the inspection, prisoners described not knowing who their personal officer was, or not having had the opportunity to spend time with them.

The psychology team were piloting a specific risk assessment tool with women in respect of violence in custody called Dynamic Assessment of Situational Aggression (DASA). Wider contributions were made to the 'safer prison' strategy group and forum (where individual violent incidents and cases were discussed), and psychologists offered reflective practice sessions to staff in both Banff and Dyce halls, which were appreciated. Research on the outcomes of work in respect of violence was underway. Concern was expressed that the planned national reallocation of psychology resource would impact on the level of support which could be offered to local initiatives such as these.

Concern was raised about the implementation of the national SPS programmes waiting list, which was causing significant disruption to prisoners who had to transfer south to participate. This was illustrated by a subsequent observed ICM case conference where a prisoner was leaving for HMP Barlinnie the next day and was stressed about health and family contact concerns which had yet to be resolved. The case conference co-ordinator undertook to address these issues for the individual concerned. The additional pressure of transfer was described as demotivating and acting as a barrier to participation in addressing offending. In addition, the transfer of prisoners between sites meant that both during programme delivery, and on return, the benefits of consistency of relationships were not being maximised. The women particularly did not wish to travel and the low numbers assessed as appropriate for group work in Grampian meant that 1:1 work was preferable.

A designated life skills area existed but its use was prioritised for the most vulnerable individuals. During the course of the inspection this area was closed and its operation was described as often impacted by staff shortages. There did not appear to be comprehensive life skills or pre-release opportunities available for the bulk of the Grampian population to maximise the development of social and relational skills, despite some emerging good practice in respect of the use of occupational therapy and early access to the Community Integration Units for identified small numbers of individuals.

Recommendation: HMP YOI Grampian should ensure consistent contact between prisoners and identified personal officers, who report feeling confident in carrying out their duties to a high standard with access to appropriate support and development opportunities.
Recommendation: SPS should keep the national processes for psychology resourcing and access to programmes under review, ensuring that the experience of users and staff are recognised and any unintended barriers to participation in addressing offending minimised.

Recommendation: HMP YOI Grampian should review the availability of life skills and pre-release opportunities to make these accessible to a wider population.

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

Rating: Good performance

HMP YOI Grampian operated well-organised, high quality, case management processes using both the ICM format for long-term prisoners and a CMB for those serving shorter sentences. Both of these meetings were observed during inspection.

The initial ICM case conference was well chaired from an asset based perspective, with well-established positive relationships evident. The contribution from Prison Based Social Work PBSB) was of a high standard. A personal officer and a Community Based Social Work (CBSW) attended but their input was limited. Sensitive handling of family issues, motivation and expectation setting were evident. Some issues could have been explored in greater depth in respect of offending motivation and relapse prevention, but given that this was an initial ICM case conference the essentials were covered. Arrangements were made to follow up concerns expressed by the prisoner and offers of future family engagement, and these issues were addressed with empathy. The team offered the possibility of future support from the family centre to enable the prisoner's partner to attend whilst their child was with her.

The CMB had a comprehensive list of attendees both internal and external to the prison from both statutory and third sector organisations. The process was very well organised and chaired by a member of prison staff demonstrating obvious commitment to their role. A pre-interview took place with each prisoner and a list of those cases due circulated to all relevant parties to offer contributions. Care was taken to identify and meet individual need and circumstances. As cases were discussed the importance of community mental health support and NHS connectivity was consistently evident. A nurse from the establishment was unable to attend because of staffing shortages. Some helpful third sector partners (SHMU) providing critical linkage between internal and external services were under threat because of potential resource cuts. Linkage with Police Scotland had been established through the delivery of the 'positive lifestyles' initiative and further development on through-care issues was planned. The CMB team actively sought to gather information on re-admissions to establish what had worked well for that individual and what could be improved in the community on their next liberation, this was good practice. Data collation and generation of management information was in progress with a locally designed 'prisoners journey' system. This was promoting more effective dialogue with community partners in respect of throughcare provision.

In addition to these processes, HMP YOI Grampian had also moved to implement specific assessment and weekly case support approaches for the women in Banff Hall. Case review processes with mental health support and care and safety

planning for those vulnerable to self-harm were regular, and staff were supported with reflective practice sessions.

The establishment Early Release and Lifer Liaison (ERLO/LLO) FLM was performing well despite a lack of formal training prior to taking up post. Effective 'pull through' systems had been developed (and were demonstrated), which ensured that individual prisoners were not missed for progression despite lack of consistent personal officer support. Case discussions indicated that the LLO knew his lifer population and their personal circumstances well. Because video links could be of poor quality at parole hearings the ERLO/LLO made special efforts to ensure that all papers were prepared in writing and shared in advance. The number of adjourned parole hearings were perceived to have risen as part of a national trend. Consistent relief cover was in place to support service delivery. A letter had been issued to all lifers as an introduction, and specific individuals had been prioritised for support in discussion with the experienced Unit Manager responsible for case management services. An innovative lifer's case conference on admission, to introduce all of their key professionals, was being trialled for the first time and showed early promise as an item of potential future good practice.

The Throughcare Support Officer (TSO) team performed well and took responsibility for additional innovative areas of practice, including support for Community Integration Units (CIU) work placements and sessions at court, developing positive relationships with both the Judiciary and social work partners. Given HMP YOI Grampian's obvious proficiency with case management and through care processes, their geographic location and positive relationships with community partners through their CMB, there were opportunities to pilot a national remand through-care process for SPS if adequately resourced. The TSOs indicated that they continued to meet targets despite being a member of staff short, but were hampered by the lack of appropriate technology provision such as phones and laptops for remote working. This was particularly significant because of the large geographic areas they covered. The TSOs described different working relationships with their local authority areas with arrangements in Aberdeenshire as opposed to the city being 'more fragmented'.

The TSO team had engaged actively with hall staff, delivering presentations to explain their role, and had taken the FCO out with them to make links in the community. The TSOs approached all eligible short-term prisoners eight weeks prior to liberation to engage, with alternative through-care supports available to women (SHINE) and for young men under the age of 26 (New Routes). The team picked up remand prisoners who had previously benefitted from support after a sentence. Concerns were expressed that existing well-established and beneficial partner services (such as those for housing/homelessness) might be lost or eroded due to resource pressures. Particular concerns were expressed about the number of prisoners whose through-care was being disrupted because of transfer to HMP Barlinnie to cope with local population pressures. This was clearly also very disruptive for family members including children. Re-opening Cruden hall would provide opportunities to address these alongside other population and location issues.

Recommendation: NHS Grampian should consider how mental health services both in the prison and the community could be better linked with case management and release processes.
Recommendation: The SPS should consider the resourcing of a pilot throughcare process for remand prisoners at HMP YOI Grampian.
Recommendation: HMP YOI Grampian should arrange for appropriate technology equipment to support effective remote working for the TSO group.
Recommendation: The SPS should review the use of Cruden Hall as part of the progressive footprint for throughcare.

Good Practice: The HMP YOI Grampian Case Management Board process for short-term prisoners is worthy of sharing.
Good Practice: The processes used by HMP YOI Grampian to gather information on the throughcare experience of prisoners who are readmitted, and analyse data to engage in professional dialogue with partners are worthy of sharing.
Good Practice: The engagement of Throughcare Support Officers with the Aberdeen court process and the Judiciary is worthy of sharing.

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

Rating: Satisfactory

A number of participating staff acknowledged the skill and experience of the Deputy Governor as chair of the multi-disciplinary RMT. National changes to the RMT process were described as positive and assisted in both strengthening assessment and in maintaining consistent high quality reporting. Despite staffing shortages in the establishment specialist case management posts had been protected to ensure continuity wherever possible, it had proved impossible however to maintain regular and consistent personal officer attendance. RMT processes and paperwork appeared robust with procedures to involve prisoners appropriately, though it was not possible to observe an RMT during the inspection. The ERLO/LLO reported taking personal responsibility for meeting with prisoners both before and after the RMT to ensure that their views were considered and feedback fully understood. RMT leaflets were available in the halls but personal copies were provided to those whose case was pending. Comparatively low numbers of HMP YOI Grampian prisoner complaints related to progression issues. The RMT meets fortnightly and considers those cases specified in national guidance, but in addition HMP YOI Grampian also included cases which for a variety of reasons were proving complex or had intractable issues to resolve. A good tracker processes was in place for RMT cases.

At the time of inspection, only two OLRs and a small number of MAPPA cases were located in HMP YOI Grampian, and it was possible to manage these within existing resources despite staff shortages. The senior team were well connected to community MAPPA representatives and a comprehensive tracking process for MAPPA cases was evidenced by the responsible FLM.

National changes to Home Detention Curfew (HDC) had led to a dramatic fall in the numbers eligible to apply for consideration. Local processes followed national guidance. Prisoner appeals in respect of HDC decisions were managed through the ICC process.

High quality CIU facilities were available for both male and female populations but spaces were currently underused because insufficient prisoners met the national criteria. Very few women in particular met the criteria for progression to them. Some developing innovative practice in HMP YOI Grampian, allowing early access for a small number of prisoners to the CIUs prior to community access, and utilising advice from occupational therapy services to promote independent living skills showed promise.

HMIPS Standard 7

Transitions from Custody to Life in the Community

Quality Indicators

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

Rating: Generally Acceptable

Senior managers were actively involved in local Community Justice Partnerships and maintained links with a wide range of stakeholders and partner agencies across an extensive geographical area in sentence and release planning.

Clear arrangements, protocols and guidance were in place that facilitated and supported release planning for both short and long-term prisoners.

The strategic approach was laid out within the purposeful activity plan April 2018 to March 2019. This plan identified actions within five key areas that included building and maintaining partnerships, delivering high quality activities and maximising opportunities for prisoners engaging those in our care and continuous improvement.

The strategy committed the prison service to quarterly meetings to quality monitor partner activities and to identify gaps and duplication within partner agencies. Prison managers were meeting with strategic planning groups at community justice authority and local authority level. However, future planning was not communicated well enough with partner agencies to support further development. Some partner agencies were unaware of the strategy and were unsure what services would be supported when the existing funding streams ended. This uncertainty was impacting on the confidence of service planning as a number of partner agencies were due to come to an end of contract in the next 12 months.

Prisoners and their families were supported in building and maintaining positive relationships throughout their sentence. The family centre played a key part in supporting good relationships between FCOs, family centre staff and PBSW. A multi-agency approach within the family centre provided support across adult and child services. Family members talked positively of their contact with the centre and the impact that the support had on planning for release.

The Links Centre provided extensive systematic support to prepare prisoners for release. TSOs, housing and DWP staff actively encouraged prisoners to attend appointments and to engage in planning for future release.

Not all prisoners were able to access advice and support from the Links Centre, as staff were not always available to escort them to attend previously arranged appointments. These cancellations often took place at short notice. Some services were not available to prisoners, as services such as Shelter had been withdrawn.

Processes for integrated case management and support for prisoners were clear and transparent, with strong liaison with agencies and prisoners prior to case conferences and minutes of meetings were recorded and shared promptly. Prisoner involvement was good with prisoners receiving advice and support through the processes. The theme of supporting prisoners to either maintain or establish links to community agencies, which would support transitions and reintegration, was consistent throughout the process.

There were no advocacy services on offer, an advice service provided by the Law Society had recently ended and no alternative was identified. Support for non-English speaking prisoners was limited with prisoners not able to access translation services easily at the time of admission. As previously reported, input thereafter was restricted which impacted on how prisoners could access support to participate in positive activities and case discussions.

Recommendation: Future planning should be better communicated to partner agencies to support further development.
Recommendation: HMP YOI Grampian should ensure that prisoner's attend appointments in the link centre on time.
Recommendation: HMP YOI Grampian should reintroduce advocacy services to assist prisoners to exercise their rights.

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

Rating: Good Practice

The CMB meetings were embedded well and working well and delivered in accordance with standards. CBSW and PBSW regularly attended and provided assessments and reports to the ICM. Co-location of social work and psychology services in the Link Centre positively contributed to the formulation of pre-release plans.

Sometimes NHS were slow to respond to requests for involvement but responded to reminders. The Police presence at the CMB had lapsed in the last year; however, linkages were active through the positive lifestyles project co-ordinated by the community liaison officers. The good practice of holding multi-disciplinary pre-meet discussions within the women's hall immediately prior to the CMB meetings ensured that pre-release planning was consistent and thorough.

The ICM documentation was completed on time and was comprehensive in nature by almost all participants. Personal officers were less consistent in providing completed reports to the CMB. Pre-release minutes showed good multi-disciplinary consideration of risks and individual needs including treatment plans, complex health and medication management under compulsory treatment orders and individual and family contact arrangements.

Prisoners were actively encouraged and supported to participate meaningfully in case discussions. The ICM co-ordinator was proactive in seeking out the

involvement of prisoners in these discussions. The Keeping it Together initiative involving Families outside, Action for Children, Alcohol and Drugs Action and SHMU was a very good development. Launched in December 2018 the initiative uses a video to give a walk through for families of what is involved to visit someone in prison. The initiative also provided advice support and information to families of those involved in the criminal justice process and encourages active involvement at other key stages.

Personal officers were routinely invited to the CMB, however their attendance had dropped from previous high levels (98%) in 2017 to lower levels in this year's performance reports (62%). Lower levels of staffing had impacted on the time prison officers could spend with prisoners, and this had resulted in a lack of Personal Officer contact. There had been no recent training of Personal Officers, with knowledge of the role inconsistent amongst staff with some very well engaged and others not. This variation transferred to the Personal Officer function with some staff and prisoners having good contact, whilst other staff saw the Personal Officer function as a low priority. This caused concern for prisoners who worried that poor Personal Officer contact would impact on their parole board applications. There is a need for a defined personal officer scheme to improve the delivery of the personal officer function.

Good practice: Holding multi-disciplinary pre-meet discussions within the women's hall immediately prior to the CMB meetings ensured that pre-release planning was consistent and thorough.
Good practice: The Keeping it Together initiative was a very good development.

Recommendation: HMP YOI Grampian should ensure that those staff involved in personal officer roles have the appropriate training and time to carry out the role.
Recommendation: There is a need for a more defined personal officer scheme, with protected time, to improve the delivery of the personal officer function.

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

Rating: Satisfactory performance

Access to treatment programmes were no longer aligned to local targets as national lists and targets were now in use. Staff were told this was to mitigate legal challenge, however this had an impact upon the conduct of programmes, as often prisoners were not as well known to staff. Prisoners soon to be released were prioritised for inter-prison transfer. At times other prisons could not continue pre-release programmes and planning. Action taken to move remand prisoners to Perth prison had reduced the number of prison moves recently. Access to programmes by prisoners was governed by national prioritisation policies. The national waiting list was not resolving the progression issues and was disruptive.

Due to staffing shortages within the psychology unit, the number of planned programmes was reduced by local agreement. It was intended to increase the number of programmes when staffing shortages were resolved. Prison staff were also frequently prioritised to staff the residential halls and this reduced the number of programme assessments carried out. Prisoners were concerned that the delay in accessing programmes could delay progression timescales.

Programmes on offer included 1:1 pathways programmes (run in smaller groups for women), constructs and discovery programmes. A female offender's treatment programme which was run as a pilot for two prisoners on a one to one basis was successful.

The pilot has been put forward for Scottish national funding in order to mainstream the approach. There was no programme for sex offenders despite an increasing number within the prison population. A Dynamic Assessment of Situational Aggression (DASA) programme had been piloted to better identify medium and high risk of aggression. Regular weekly meetings were held to offer reflective practice to staff. This was a proactive development however the recent staff shortages in psychology had led this practice to peter out.

There were positive links between health, psychology and social work staff that supported community based support and effective communication with the local addiction and mental health teams in Aberdeen, Inverness and across the region.

The co-location of psychology and PBSW in the links centre was helpful to support joint work. The use of community integration plans was robust and the development of plans was enabled by the effective ICM system applying to both short and long-term prisoners. The RMT was effective in prioritising risk, and where necessary escalating risk of serious harm to MAPPA level 3. The use of risk scenarios had been developed to inform post programme reports and address variations in input into the integrated case management process. This was a positive development.

Recommendation: The SPS should review the national waiting list for programmes as it does not appear to be resolving the progression issues and was disruptive in HMP YOI Grampian.

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

Rating: Good performance

Early contact with prisoners was effective in planning support for release. Personal officers made contact with prisoners in the early stages, and assessment information was shared in community integration plans that were working well. However, prisoner support needs were not consistently met due to the inconsistency in personal officer contact.

A significant obstacle for prisoners was access to life skills and personal activity opportunities, which were dependent upon prison officers being available. Life skills

activities, peer mentoring and independence skills activities had been limited by lack of staff. Resource pressures had resulted in activities staff being used as a bank for other staffing priorities. Externally funded activities such as SHMU, Skills Scotland and DWP were more resilient as staffing was stable.

Construction skills certification scheme and CV writing skills had just started up again in support of successful employment. Other factors such as health and safety requirements had reduced opportunities to acquire qualifications such as the forklift training. However, TSOs were working closely with prisoners in the CIU to build continuity from work placements to employment. Using initiatives such as My Way to Employment and the Fair Start programme and planning networks of support around the prisoners release had shown success in developing more stable community settlement for the prisoner.

A housing officer was committed to the prison for two days a week, which made effective continuity for planning for prisoners' release. A positive development in Aberdeen City was the rapid rehousing project, which identified permanent housing available from the date of release. Early cases had shown positive outcomes and further permanent housing was to be made available as the pilot progresses.

Well established links to the Aberdeen Timmer Market drug clinic and community support services helped in securing positive outcomes for prisoners. Drug and alcohol support was linked well during sentence and post release. Community psychiatric nurses support was well planned, despite the challenges of city based and rural based services combining to provide support. NHS staffing shortages at times led to delays in providing mental health support.

Cross boundary arrangements for release were more complex due to the logistics of long distances for prisoners from the Western Isles and Shetland. Good links were established between TSOs and CBSW in these more remote authorities, and successful planning arrangements were heavily dependent upon the local knowledge and trust between agencies. Housing solutions varied in quality across the regions and impacted on how quickly support could be put in place.

Prisoners' families who visited the families centre could access food through a scheme with local supermarkets that redirected food to the family centre regularly. This additional support was very important for families visiting especially at weekends. Sustainable support for domestic skills and socialisation was provided for families by Community Food Initiative North East.

Prisoners were able to use foodbank parcels on release on weekends and holidays in particular. Another positive development were cooking skills sessions for prisoners using menus derived from typical low cost shopping or foodbank provisions prior to release.

Good practice: A housing officer was committed to the prison for two days a week that made effective continuity for planning for prisoners' release.
Good practice: A positive development in Aberdeen City was the rapid rehousing project that identified permanent housing available from the date of release.

Good practice: Cooking skills sessions for prisoners using menus derived from typical low cost shopping or foodbank provisions prior to release.

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

Rating: Good performance

There was very effective active throughcare support for short and long-term prisoners. HMP YOI Grampian have currently five out of six TSOs active who were providing support, which extended their individual caseloads from 12 to 16 cases in the community. The impact of this was less face-to-face time with prisoners on release. There was a commitment by management to address this shortfall in coming months.

The TSOs were highly effective in supporting transition from custody to the community. The TSOs routinely met prisoners on release at the gate and offered direct support in the first 12 hours of release to establish support quickly, by taking prisoners to appointments, ensuring support was established promptly. Joint working with agencies in the community such as the Salvation Army and the Timmer Market clinic offering support for addictions, resulted in early positive connections for prisoners.

The TSOs had positive and effective joint working relationships with CJSW based in Aberdeen Sheriff Court. Shared information on housing issues, addictions and how well prisoners were progressing on release was used in discussion with solicitors. Contact was made with prisoners at an early stage, often identified from the custody list when the teams knew them. This prompt intervention allowed key information from TSOs to be shared in the court at an early stage to allow a more informed decision by the judiciary.

TSOs by nature of their caseload had a significant geographic area to cover and were currently working without an office base in the community, as previous arrangements using accommodation at the Aberdeen jobcentre had ended. Universal credit requires access to IT to make a successful application and an established address from which to make a claim. However, TSOs were often frustrated that they did not have the necessary IT support, which made it difficult to help prisoners making applications for universal credit and to check application progress. TSOs need access to laptops and phones which would allow them to operate more effectively in the community while mobile working.

Good practice: The TSOs had positive and effective joint working relationships with community justice social workers based in the Aberdeen Sheriff Court.

Recommendation: The SPS should take the necessary steps to provide TSOs with the necessary IT to allow them to operate more effectively in the community while mobile working.

HMIPS Standard 8

Organisational Effectiveness

Quality Indicators

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

Rating: Poor

Development of an effective E&D Strategy had been significantly delayed by the ongoing staffing shortages, the sick absence of some key staff and the need to prioritise other essential operations. The planning was evident with a committee that had been established to develop an E&D action plan along co-production principles with prisoner input. The intention was for the committee to meet monthly as a group, and quarterly with the Governor, with prisoner representation on the committee in line with SPS guidance.

All operational staff undertook one day of E&D training as part of their induction training and HMP YOI Grampian recognised the need to build on that experience. Training for staff on E&D impact assessments was anticipated to be a key priority. Management and those tasked with developing an action plan recognised the value it could bring.

The need to focus on core functions essential to the smooth running of the prison and the challenges posed by long-term staffing shortages was understandable. Nevertheless, concerns were raised about E&D following the last HMIPS inspection and development of a remedial action plan remained a serious omission. Little progress has been made since the last inspection.

Development of an action plan must be given greater priority and management need to ensure those tasked with its development are given time and support to complete the exercise speedily. Training in E&D impact assessments should be prioritised so that more systematic E&D impact assessment work can be carried out across the prison and consideration given to the results.

Despite the lack of progress with development of an E&D action plan, inspectors saw commendable examples of practical support and appropriate adjustments being put in place, such as the excellent food storage box for prisoners observing Ramadan.

Inspectors also saw practical help with learning English being quickly provided to prisoners whose first language was not English, and menus being provided in their own language. However, it was clear that in the first few days following arrival at HMP YOI Grampian some prisoners with little to no English were largely reliant on simply copying what others prisoners did. Particular attention should therefore be given to foreign nationals and the adequacy of information in appropriate languages,

the use of translation services on admission and in the halls, and ensuring that all staff are aware of how to access these translation services.

Recommendation: Development of a full Equality and Diversity Action plan must now be prioritised and those tasked with its development given sufficient time and support to complete the exercise speedily.
Recommendation: Training in Equality and Diversity impact assessments should be prioritised and a systematic programme of assessments carried out across the prison.

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

Rating: Generally acceptable performance

Local PRL audits were carried out routinely and submitted to SPS HQ. The prison used an overarching action tracker (the "Grampian Tracker") to keep track of progress with implementing recommendations and action points raised by different scrutiny authorities.

The tracker was circulated to the SMT every month by the BIM. The prison acknowledged that there had been challenges in getting action completed. More focus was now being placed on reducing outstanding actions through the BIM highlighting them at the monthly performance review meeting. There was some evidence of this greater focus starting to yield results in recent months, with the BIM being proactive in following up outstanding points with individuals, and a general determination within SMT to do more when the staffing situation allows. However, this was an area where further progress would be helpful.

At the start of the inspection, inspectors were provided with an update on the action taken in response to the 2016 HMIPS inspection. Whilst this was helpful, and the tracker explained why particular action points had been closed down, it became clear during this inspection that several of the issues raised in 2016 were still issues in 2019. Although action had clearly been taken on many points, it had not always been sufficient to address the underlying concerns raised three years ago. It will be important therefore for HMP YOI Grampian to ensure that robust action is taken on this report if history is not to repeat itself again.

It was also noted different colour coding systems were in operation for monitoring progress with implementing action plans. It would aid clarity if the same RAG scoring system was applied consistently for monitoring all plans.

Recommendation: A single RAG scoring system should be applied consistently for the monitoring of all action plans.
Recommendation: When action points are assessed for closure, more attention should be given to whether the underlying issue raised by the scrutiny body had been fully addressed or whether further action was still required.

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

Rating: Satisfactory

There was no action plan specifically focussed on the HMIPS standards, but there were a variety of action plans aimed at improving performance and implementing different initiatives across the establishment.

The prison had not developed a comprehensive five year strategy document for HMP YOI Grampian itself, resting instead on national strategies developed by SPS HQ. However, the Governor's presentation at the start of the inspection gave an excellent overview of the different phases in the prison's development to date, the challenges facing the prison at present and the planned direction of travel during 2019-20. The Strategy and Programme Board met monthly and reviewed progress against various strategic initiatives set by SPS HQ and HMP YOI Grampian itself.

In April of each year the establishment created a Delivery Plan, which set out the prison's goals and objectives for the coming financial year. This was available on SharePoint and cascaded to all prison staff via the annual staff reporting and appraisal system (PPMS).

The Business Review group met monthly to review progress with implementing the Delivery Plan. A good range of performance data was made available to the group covering population trends, monthly comparisons on Home Detention Curfew (HDC), programme completions, hours of purposeful activity, vocational and employment related qualifications obtained, case conferences, assaults and other incidents, complaints etc. The group was well placed to monitor any fluctuations in key data and intervene or investigate further where necessary. Similarly, senior management attended daily operational update meetings that assessed the latest information and intelligence led data, and acted as the heartbeat for the daily running of the prison.

Supporting action plans were in place for the development of Banff Hall and the Admission and Assessment Allocation Unit in Ellon Hall. A separate action plan had been developed for the Year of the Young Person 2018 and for the introduction of the smoking ban, both of which were successfully implemented. Indeed the wide range of events successfully organised throughout the year in pursuit of these and other initiatives showed the prison's aptitude for focussed activity around specific themes. It is to the credit of the leadership team that such events were implemented successfully in 2018, despite the on-going staffing challenges previously discussed.

Some staff were satisfied with the visibility of the SMT but others would welcome greater visibility on the halls and around the prison in general.

The pressure stemming from staffing shortfalls clearly remained very significant and at the heart of nearly every challenge facing HMP YOI Grampian. SMT had shown commendable creativity and rigour in trying to overcome these issues. Some of their proposed solutions required endorsement from SPS HQ, HMIPS encourage the SPS

to urgently endorse these proposals or find alternative creative solutions to these recruitment issues before the toll on staff, and impact on prisoner regime intensifies further.

In the longer term, with capital investment, there are opportunities for HMP YOI Grampian to make greater use of new technology to improve the experience for prisoners and ease some of the administrative burdens on staff. The introduction of information kiosks on the halls in other prisons had been proven to make it easier for prisoners to access information, make menu choices and book health care appointments, whilst reducing paperwork for staff. The use of telemedicine, in-cell telephones and other technology, including Skype, provides opportunities to improve health care and make prisoner/family contact easier. The aspiration should be to eliminate the need for any paper based recording systems in all prisons.

Recommendation: SPS HQ to work creatively with HMP YOI Grampian to urgently identify and implement solutions to their recruitment challenges, as existing detached duty arrangements are not effective or sustainable in the longer term.
Recommendation: SPS HQ and HMP YOI Grampian should jointly explore the potential to make greater use of new technology to improve access to services and support contact with families as well as easing administrative burdens on staff.

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

Rating: Satisfactory

Staff's contribution to the prison's objectives and priorities were set out through PPMS, which were reviewed on a monthly basis. SMT acknowledged that it was inevitably hard to fully assure the effectiveness of the appraisal and review process for all staff, but those staff inspectors spoke to expressed clarity on the roles expected of them.

Personal Learning Plans helped inform development of the Staff Development Strategy, with the 2016-2019 strategy being published in June 2016. This Strategy recognised HMP YOI Grampian's reliance on detached duty staff and the need to develop sustainable resourcing strategies of their own, and effective succession planning in the longer term. The Strategy was well thought out, identified the need for an effective induction process, and structured development opportunities for D and E band staff. The introduction, where possible, of a structured 'soft landing' orientation for new recruits was a helpful initiative. However, HMIPS heard evidence from staff during the inspection that a soft landing was not always achieved, and that staff often felt they were being trained by those who were themselves relatively new and inexperienced.

FLMs were a vital layer in the management structure and it was good to see recognition of the importance of supporting this group of staff. More needs to be done, however, to support those acting up in such roles and prepare them for more

permanent progression in the longer term. It was also pleasing to see recognition by the HR team and SMT that the core skills of coaching, mentoring and valuing everyone's contribution remained the corner stone for development at every level of the organisation.

Training statistics were carefully monitored so that the organisation had a very clear picture of where they were meeting their training targets and where compliance was slipping. As indicated before, a key challenge in ensuring full compliance with mandatory training requirements remained securing the release of staff to act as instructors for Control and Restraint training, and the release of staff to attend training courses. HMP YOI Grampian's SMT were particularly keen to increase the number of staff trained to deal with stage 3 incidents. It did not help HMP YOI Grampian that they were not able to offer additional remuneration for taking on such roles.

Human Resources and SMT were fully committed to providing more comprehensive learning and development opportunities for staff, but that progress was limited by the staffing situation. Rotation of staff helps to offset these issues to some degree and work shadowing had been used when the situation allowed. However, it might assist HMP YOI Grampian if the SPS College was able to run some of its training courses at HMP YOI Grampian.

Recommendation: SPS should consider if some college courses could be delivered locally.

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

Rating: Satisfactory

Regular cross-functional meetings took place at SMT and FLM level, where cross-functional issues and performance could be discussed and reviewed. The establishment has organised 'street' events where staff could showcase the work of their teams, while some rotation of staff between teams and work shadowing also took place when opportunities allowed.

The pre-meeting before the CMB, and the CMB itself were excellent vehicles for sharing information and understanding respective roles, and were marked by high levels of communication and joint planning. Partner agencies felt they had a good understanding of roles of staff within the prison.

Some frustrations existed between staff on some halls and those organising the canteen, which might be eased with greater appreciation of the challenges faced by respective teams. The number of inexperienced staff and staff on detached duty created additional challenges in ensuring mutual understanding of roles across the prison. Taking into account these challenges there was much to commend.

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

Rating: Satisfactory

Appraisals took place at least annually and provided an opportunity for providing constructive feedback and ensuring individuals felt their contribution was recognised. Perhaps inevitably there were some indications of variable commitment within the prison to make best use of the appraisal process.

Award ceremonies were organised to recognise staff with decades of service and commendations from the Governor or SPS Chief Executive, although some planned events had been cancelled during 2018 due to the staffing situation and the need to prioritise core operational activities. Arguably, however, it is when staff are giving their best in difficult circumstances that a simple word of thanks from a line manager and appreciation of effort is most important. It would be helpful therefore, if a culture of valuing the contribution made by teams and individuals could be even more fully embedded across the establishment.

There was evidence that poor performance and disciplinary issues were being appropriately handled, and absence management issues were now being addressed more systematically since the arrival of the new human resources manager.

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

Rating: Satisfactory

It was clear that the establishment had fostered strong supportive relationships with a wide range of partner organisations and that the value of these relationships was recognised and valued by SMT and partner organisations. Strong links had been established with Robert Gordon University, Aberdeen City and Aberdeenshire Council housing departments, DWP and with third sector organisations like SHMU, as well as with Aberdeen FC and many others. Throughcare services appeared to be working particularly well with prisoners appreciating the support provided. The relationships with housing colleagues were considered to be working particularly well so that accessing housing on release was no longer the major barrier that it had been previously, and access to mental health services in the community was now a bigger challenge.

There was clear evidence of good communication and effective joint planning in the CMB, and willingness of partner organisations to get more involved in tailoring support packages.

The prison was represented on a variety of forums and multi-agency meetings with criminal justice partners such as Police Scotland and the Scottish Courts and

Tribunal Service. The constructive relationship with Police Scotland colleagues was particularly valuable for operational planning purposes.

The work done in the family visits centre with third sector partners was also highly commendable, providing one of the very best family visitor experiences HMIPS had seen. Similarly, the work done to organise careers fairs and bring local firms into the prison was perceived to have helped foster good relationships and improve external perceptions of the prison, as well as helping to inform prisoners about possible career opportunities on release.

The charity work done with a local school to provide playground equipment, produced by prisoners to the school's specification, was also commendable and will have done much to foster positive relationships with the local community.

There were inevitably concerns, however, about the longer term sustainability of some of these important initiatives, where third sector partners were dependent on securing continued funding from the Big Lottery and other sources. The contract of a third sector provider of mental health services was ending and it is important to ensure this does not impact adversely on prisoner access to these vital services. While there is a great deal to commend about HMP YOI Grampian's engagement with the wider criminal justice system and other partner organisations, it is here where greater strategic longer term planning might help address some of the inevitable funding uncertainties or prepare more effectively for future change.

Recommendation: HMP YOI Grampian should undertake more strategic planning around the type of services needed in future, the role of partner organisations in providing those services and how any funding gaps might be addressed.

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

Rating: Satisfactory

The prison had produced an excellent video for families explaining how the prison visit system worked, and this is something HMIPS recommend to other establishments.

The prison had also cooperated fully with an initiative to persuade local MSPs to visit the prison using public transport from Aberdeen to better understand the difficulties for those reliant on public transport. A free bus service had since been put in place and this had generated some positive local media interest.

The work with SHMU was also helpful in fostering relationships with local media.

In general, however, this has not been a priority for the prison.

Good practice example: HMIPS commend the development of an online video so families visiting the prison for the first time are aware of how to get there and what to expect during a visit.

HMIPS Standard 9

Health and Wellbeing

Quality Indicators

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

Rating: Poor Performance

All new arrivals to HMP YOI Grampian were assessed using a standardised assessment health screening tool. The majority of prisoners had their immediate health and wellbeing needs assessed as part of the admission process, including whether they were at risk of self-harm or suicide. Routine screening of prisoners opiate withdrawal status was not carried out.

A general information leaflet describing the range of services available within the prison was given to all new prisoners. The information was presented in an easy read format. However, it was found that although reception offered information booklets in other languages, some of the booklets did not contain the language indicated on the front page. (See recommendation in Standard 1). The private room used to carry out the initial health screening maintained the prisoner's dignity and confidentiality. The prisoners were fully involved in their health screening and asked if they had any literacy issues. When required the prisoners consent was sought.

Inspectors were concerned to see that prisoners who arrived late from the Islands were not always able to receive their health screening during the reception process and had to wait until the morning. This meant prisoners did not always receive essential prescribed medication or were assessed to determine their withdrawal status and whether they were fit to be in custody. Worryingly this also meant the prison was not complying with the TTM Strategy by not properly assessing the risk of self-harm or suicide for newly admitted prisoners. Inspectors formally raised this with the health centre manager and the prison during the inspection and asked for a written response of the actions taken to address this. HIS will monitor progress against these actions and follow up on this at future inspections.

When the inspectors observed the nursing handover, the range of information and discussion regarding patient care was limited and they did not discuss concerns regarding new patients. This was a concern.

Recommendation: The Partnership and SPS should work together to ensure that there is a robust process in place to ensure that those prisoners arriving late into the prison receive a formal health screening assessment.

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

Rating: Satisfactory Performance

All new admissions and transfers to HMP YOI Grampian were assessed by a GP 24 hours after admission. Inspectors were told there was a four-week waiting time for prisoners to be given a routine GP appointment.

Information on how to access healthcare services was available to prisoners in a variety of formats such as the prisoner TV. Patient information leaflets were available at reception but inspectors did not see any of these leaflets being given out to prisoners.

Current waiting times for appointments were not routinely displayed so that prisoners were aware of how long they could expect to wait. Inspectors were told that the healthcare team was in the process of developing a patient newsletter, which would contain details on waiting times as well as health promotion information.

Patients could access healthcare services by completing a self-referral form. The self-referral system was explained to prisoners as part of the admission process to prison. Self-referral forms and repeat medication forms were available in the prison wings. The self-referral forms contained pictures and images for prisoners for whom English was not their first language and for those who had difficulties in reading. Some of the forms were difficult to read or understand because they had been photocopied. The completed self-referral forms were stored in a locked box and collected by the healthcare team on a daily basis and then triaged to the relevant healthcare team. Waiting times for access to healthcare services were within recommended guidelines. At the time of the inspection, a new process was being introduced by the healthcare team whereby patients were given appointment cards with details of their first and follow up appointments. This was good practice.

During the last inspection, HIS highlighted issues with prisoners attending appointments in the health centre. Staff frequently had to wait between consultations because SPS staff were slow to bring prisoners to clinics. During this inspection, the team observed instances when patients' access to healthcare interventions continued to be an issue. Although the healthcare team had introduced a form that prisoners were asked to complete if they did not attend their appointment, the majority of completed forms did not have the reason for non-attendance recorded.

If a patient was identified as needing input from social care services healthcare, staff were required to submit a referral to the SPS who would action the request on their behalf.

It was clear to inspectors that the occupational therapist was a core member of the healthcare team and integral in supporting the assessment, planning and provision of health and care needs of individual prisoners. This was good practice. Patients requiring specialist services were referred onto specialist services via the NHS Grampian electronic referral system.

Recommendation: SPS and HMP YOI Grampian management should ensure that prisoners are taken to their appointments timeously.
Recommendation: The Partnership and SPS must work together to ensure that they are accurately collecting data on the number of missed appointments, reasons for them, and the impact it has on the delivery of healthcare.

Good practice: At the time of the inspection, a new process was being introduced by the healthcare team whereby patients were given appointment cards with details of their first and follow up appointments.

Good practice: It was clear to inspectors that the occupational therapist was a core member of the healthcare team and integral in supporting the assessment, planning and provision of health and care needs of individual prisoners.

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

Rating: Satisfactory Performance

Different health issues are highlighted in the health centre each month using the NHS Grampian public health campaign calendar. However, limited health promotion posters were seen by inspectors in the halls and, although staff could order health promotion leaflets to be printed in different languages, these were not readily available to prisoners.

NHS Grampian's 'healthpoint' was available in the prison library. This was a one-stop health information point offering prisoners free confidential information, advice and access to a range of health information such as oral health, nutrition, mental health and smoking cessation. As prison officers were required to remain with prisoners while they accessed the service, limited staffing levels meant prisoners were not always able to access the service. See Standard 6 for more information. Healthcare management told inspectors that the service would soon be staffed twice weekly.

Although there was an NHS Grampian health line available for patients, the prison's telephones did not accept the number. Inspectors raised this issue with the health centre manager for investigation.

As discussed in QI 9.2 the health centre manager was developing a monthly healthcare newsletter for prisoners due for roll out in February 2019. The newsletter will provide prisoners with information on a range of health issues, scheduled health promotion sessions and expected waiting times for clinics.

During the reception process patients were offered access to smoking cessation support and blood-borne virus (BBV) testing. The smoking cessation team attended the prison twice a week and patients could buy e-cigarettes when they entered the prison. If patients were unable to buy these they were offered free nicotine patches for a period of six weeks.

Although the health centre ran a number of clinics the frequency of these was dependent on the availability of trained staff. For example, the fortnightly general clinic for taking blood was dependent on the availability of staff trained in venepuncture, and the BBV clinic relied on the availability of a suitably trained bank nurse. As a result, the number of prisoners routinely tested for BBV was unacceptably low. This was a concern. At the time of the inspection, the Partnership had no plans in place to increase the number of staff trained in these procedures.

Recommendation: The partnership must ensure that sufficient trained and competent staff are available to undertake core duties in the health centre, including venepuncture and blood-borne virus testing.

Although there was limited information available on Naloxone and how to access Naloxone training around the prison, the healthcare team provided the inspection team with evidence that there was a good uptake of Naloxone training by prisoners. Following Naloxone training, Naloxone kits were placed with the prisoner's belongings. In addition, family members and friends were informed about and provided with Naloxone training in the family hub. This was good practice.

Recommendation: The Partnership must ensure that health promotion information displayed for prisoners around the prison includes information on how to access condoms, Naloxone training and the risks of taking drugs.

Good practice: Family members and friends were informed about and provided with Naloxone training in the family hub.

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

Rating: Satisfactory Performance

Staff had a good understanding of the health inequalities experienced by many of their patients. They understood the barriers that many patients faced when accessing healthcare in prison and adapted their approach in these circumstances. Most patients described having a positive relationship with healthcare.

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

Rating: Generally Acceptable Performance

We saw a wide range of treatments and interventions being offered by the mental health team. Patients referred to the clinical psychology service and to the psychiatrist were routinely seen within one week of being referred. Likewise, patients requiring inpatient care and treatment were admitted to hospital immediately.

Inspectors were unable to identify a clear process for assessing and triaging mental health referrals in a consistent manner, based on their clinical need and risk. Staff were seen to use a wide range approaches when triaging which made it difficult to clearly understand what they were basing their decisions on. This was concerning, particularly as the majority of the referrals continued to be referred onto the mental health nurses, despite the team not having a full complement of staff. In addition, patients were not informed of how long they should expect to wait to be seen for an assessment.

Furthermore, inspectors were unable to identify cross referral pathways between the mental health team and the addictions team, or evidence that formal protocols were in place to support joint working and information sharing.

For those patients with complex care needs, reviews were clearly agreed with the patient and the multi-disciplinary team. These were written down and shared with the patient.

Following assessment by the mental health team, the patients' immediate support and care were identified and arrangements put in place, which included self-help materials. As discussed in QI 9.2, follow up appointments were dependent on SPS staff being able to escort prisoners to their appointments. The mental health team were exploring ways to improve access to low-level psychotherapeutic interventions and strengthen their links with community mental health services.

There was a clear pathway described for assessment and transfer to inpatient care when required under the Mental Health (Scotland) Act 2015.

Although the healthcare team had well established arrangements for notifying the relevant community mental health services when a patient returned to the community, work to strengthen them was ongoing and supported by resources from the Partnership.

Recommendation: The Partnership should develop local protocols covering joint working and information sharing.
Recommendation: The Partnership should review the mental health referral process ensuring that there is transparency on how long patients will need to wait for assessments.

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

Rating: Unacceptable Performance

Patients with long-term conditions were identified during the reception process, and information about their condition was documented in the prisoners' electronic health record. Inspectors reviewed a number of clinical records and found that patients were not being reviewed and followed up in line with current best practice. Inspectors found that not all patients with physical healthcare needs had appropriate

care plans in place, and assessment documentation was not reliably completed. Inspectors asked for an assurance that:

- all patients in HMP YOI Grampian with physical healthcare needs had been identified and that appropriate care has been put in place, and
- effective measures had been put in place to prevent individuals from being missed

Inspectors will monitor and follow up the Partnership's progress over the coming months.

Inspectors found no evidence that patients were informed of their test results even when these were outside normal parameters. After reviewing a number of patients' health records it was clear that staff were not documenting the test results or following up the results with relevant medical staff. This was escalated to the health centre manager during the inspection.

Recommendation: The Partnership must ensure that patients with long-term physical healthcare needs are reliably identified, the appropriate care packages are put in place which are discussed and agreed with the patient and documented in the patient record.
Recommendation: The Partnership must ensure that patients who have test results outside accepted parameters are referred to an appropriate member of the healthcare team to ensure any corrective actions are taken. This information must be recorded in the patient record.

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

Rating: Satisfactory Performance

Those requiring support with drug and alcohol dependence were identified during their initial health screening and health assessment. However, the withdrawal status of prisoners was not routinely assessed at this time (see QI 9.1).

If a patient presented at reception already in receipt of a community prescription for opiate replacement therapy (ORT), there was a clear process for the patient to be recommenced on ORT medications during their stay in prison. Patients who were not receiving ORT therapy in the community but who requested this in the prison were assessed quickly so that ORT could be commenced promptly. This was good practice.

Patients referred to the substance misuse team were offered a comprehensive assessment to identify their support needs. The substance misuse team took a wider integrated approach to support patients and held a multi-disciplinary group weekly meeting to discuss patients care and progress. This group included a medical officer, psychologist, substance misuse team, SPS and social work. This was good practice.

Quarterly substance misuse strategy meetings took place and were led by the public health consultant who had a special interest in substance misuse. They also led the NHS Grampian drug related death monthly meetings. This was good practice.

There was a clear training plan in place to support members of the team and access to training was viewed by staff as being good. Training delivered by external agencies such as CREW, a harm reduction and outreach charity based in Scotland, was available to SPS as well as the healthcare team.
Substance misuse staff were trained in psychological interventions such as NHS Education for Scotland core behavioural training, cognitive behavioural training skills for relapse prevention and recovery management training, and motivational interviewing training. This enabled the nursing team to offer psychologically informed care to enhance patient motivation, develop patient skills, and maintain recovery. The clinical psychologist and substance misuse team lead had also undertaken training in motivational interviewing coaching. Plans were in place to offer monthly coaching sessions to the substance misuse nursing team to support the ongoing development of psychological skills for the delivery of psychological care.

As discussed in QI 9.5 there were no local protocols in place covering joint working and information sharing with the mental health team; cross referral pathways between the mental health team and addictions team were not clearly identified and several instances of assessments were being duplicated.

Inspectors were told that methadone was the first line treatment for those patients who required to be commenced on ORT. Patients could be commenced onto Buprenorphine but inspectors were told that the numbers were low and not comparable with methadone.

The prison had effective systems, processes and documentation to ensure patients were linked in with the appropriate community services on liberation. Inspectors were told that no issues had been raised by staff regarding arranging patients to receive ORT prescribing on liberation. A standardised discharge tool was used to share relevant information to the receiving services when the prisoner was released. A discharge pack was also given to the patient. This was good practice.

The substance misuse team had developed strong relationships with a range of third sector agencies, community groups and professionals. The Alcohol and Drugs Agency provided one-to-one session’s, group work and programmes to support prisoners prior to liberation.

Good practice: Patients who were not receiving ORT therapy in the community but who requested this in the prison were assessed quickly so that ORT could be commenced promptly
Good practice: The substance misuse team took a wider integrated approach to support patients and held a multi-disciplinary group weekly meeting to discuss patients care and progress. This group included a medical officer, psychologist, substance misuse team, SPS and social work
Good practice: Quarterly substance misuse strategy meetings took place and were led by the public health consultant who had a special interest in substance misuse. They also led the NHS Grampian drug related death monthly meetings
Good practice: Plans were in place to offer monthly coaching sessions to the substance misuse nursing team to support the ongoing development of psychological skills for the delivery of psychological care.
Good practice: A standardised discharge tool was used to share relevant information to the receiving services when the prisoner was released. A discharge pack was also given to the patient.

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

Rating: Unacceptable Performance

HMP YOI Grampian does not have a dedicated pharmacy team. Clinical pharmacy services were provided twice a week by a Lloyd's pharmacist and the NHS Grampian lead pharmacist, who attended the prison once a month.

Given the limitations of this arrangement, the prison had developed a strong working relationship with the Lloyd's pharmacist and staff, who provided an excellent service.

Although the nursing staff were responsible for ordering medicines and managing the day-to-day pharmacy service, they did not report having had any pharmacy experience.

During the inspection, the following concerns were noted:

- The in-stock supply of medications in the prison was limited and did not cover a basic range of healthcare needs.
- Inspectors were told that there was an excessive wastage of medications. There was no mechanism in place to accurately monitor and record wastage. A lack of medicine management meant that patients medication could be ordered multiple times adding to the wastage.
- The checking and monitoring of Kardex's was limited: some Kardex's were unclear with multiple lines scored out.
- There was little evidence of medicine optimisation or that prescriptions were streamlined and monitored. For example, some patients received medication in multiple ways such as weekly, then monthly and by supervision.
- The decisions on what to give in possession seemed to be heavily reliant on nationally produced guidelines. While this was a good basis for making

decisions these guidelines should be adapted to suit the establishment and current regime. By doing so, the number of supervised medications could be reduced thereby giving patients more responsibility for their medication as part of their rehabilitation.

- The healthcare team did not have a Home Office Controlled Drugs License in place. This was escalated as a significant concern and HIS asked the healthcare team, IJB lead and lead pharmacist within NHS Grampian for assurance that they would immediately start the process to secure this.

In order to give assurances that the appropriate actions had been taken to address this, HIS asked the Partnership to provide a written response detailing the actions that had been taken since the concerns were escalated. HIS will monitor the Partnership's progress with this and will follow up at a future inspection.
Issues were noted with the administration times of some medications. For example, some drugs prescribed as night time medications (including anti-depressants and anti-psychotics) were being administered as early as 15:00, to suit the regime within the prison. Inspectors were informed that this was at the request of SPS because of the challenges with staff shortages. Morning medication administrations could overrun meaning patients were not being given a 24 hour coverage of their medications. In addition the time of administration of medications was not routinely recorded, which could result in medications being given too close to the preceding dose. Once again, this issue was escalated as a significant concern and HIS asked the healthcare team, IJB lead and lead pharmacist within NHS Grampian for assurance that they would immediately review this process.

Furthermore, inspectors observed that although the competent witness read out the patients name and details, because of the layout of the room and the lack of a forward-facing table, the nurse administering the medications did not always look to check that the correct person was identified.

Multi-disciplinary medication/pharmacy meetings did not take place to discuss any pharmacy/medication management issues, and spot medication checks of in-possession medication were not carried out.

For new admissions to the prison, the emergency care summary, community pharmacy information and patients' GPs were all used to confirm prescriptions.

Cells had safes so that patients could safely store any in-possession medication. However, the mother and baby cell did not have an in-cell facility which was brought to the attention of the health centre manager.

Prisoners due to attend court received their prescribed medication beforehand.

Recommendation: The partnership must review how the Pharmacy service in HMP YOI Grampian is delivered to ensure that the service is managed and delivered safely and effectively.
Recommendation: The Partnership must ensure that medication is administered as prescribed to minimise the risk of harm to patients. This includes ensuring that doses are not taken too close together or outwith the time of day at which they are prescribed.

Recommendation: The Partnership must ensure that all staff involved in the administration of controlled medicines check the patient identity, drug, dose and amount to be administered to minimise any errors.

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

Rating: Satisfactory Performance

Prisoners were able to access routine and urgent dental treatment within the health centre. At the time of the inspection, the wait for a routine appointment was around six weeks, well within the Scottish Government guidelines of within 10 weeks. Out of hours dental services were available for dental emergencies. Prisoners did not have access to routine education or provision of oral hygiene information. Inspectors were informed by the service that this would be addressed in the near future.

Inspectors observed the dental equipment being cleaned and decontaminated on site in a separate room from the treatment room.

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

Rating: Satisfactory Performance

The prison had established good links with NHS Grampian's maternity services. In addition to receiving regular reviews by the midwives who attended the prison, patients also attended appointments at the maternity hospital. Maternity records were held on BadgerNet, NHS Grampian's maternity services electronic system. However, at the time of the inspection this could not be accessed from within the prison health centre. The health centre manager told us that they had submitted a request to NHS Grampian to have the system installed in the health centre.

The PBSW and CBSW teams had developed a good working relationship. Each women was allocated both a PBSW and a CBSW. As far as possible, the women were supported to maintain contact with their baby or young children during their stay in prison.

Pregnant women and women caring for children were located in the dedicated mother and baby cell and had access to a kitchen within the prison. HMP YOI Grampian had a dedicated mother and baby officer who was responsible for ensuring that the mother and baby had the appropriate equipment, support and follow up to meet their individual needs. Pregnant women, and those who had recently given birth, were offered a range of support and advice on healthcare, contraception, exercise and nutrition as part of their package of care. The women were fully supported to breastfeed, express milk or bottle-feed their babies. They had access to a range of equipment and dedicated rooms to maintain appropriate levels of privacy.

Multi-disciplinary meetings were held and organised by the maternity team. Although each pregnant women had a written care plan in place, it did not always reflect or record the wishes of the woman.

Recommendation: The Partnership must ensure that all care plan documentation for pregnant women focussed on outcomes and incorporates the woman's personal strengths and wishes.

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

Rating: Generally Acceptable Performance

At the time of inspection there were no prisoners who required palliative care or end of life care.

The healthcare team comprised of an occupational therapist who was able to quickly assess whether patients required aids or adaptations to their cell. This was good practice. Staff could access any specialist equipment easily, such as mattresses and beds and they were delivered in a timely manner.

Although healthcare staff could link into the NHS Grampian palliative care services for advice and support there was no formal policy or process in place. In addition, none of the prison officers had undergone training in palliative care or end of life care. HMP YOI Grampian informed inspectors that they were in the process of developing pathways to support patients with palliative and end of care needs.

Good practice: The healthcare team comprised of an occupational therapist who was able to quickly assess whether patients required aids or adaptations to their cell.

Recommendation: The Partnership must develop policy to manage patients who require palliative or end of life care.

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

Rating: Poor Performance

Overall, TTM was being applied throughout the service. However, as discussed under QI 9.1, the inspectors were concerned that prisoners admitted to prison late at night were not being assessed by a health care professional in line with the Strategy. This was a significant concern and was raised with both the Partnership and SPS.

Structured processes were place to discuss and review prisoners through the advanced care planning process, or within the multi-disciplinary mental health meeting. Individuals identified as being at risk of self-harm or suicide were placed onto TTM. An initial assessment of prisoners' mental health was carried out and if

necessary input by a psychiatrist is sought. Regular case conferences were held and inspectors saw evidence that individuals were involved in decisions about their ongoing care and treatment. Before attending the initial case conference, mental health staff reviewed the individuals current care plan and any recent input from healthcare services. Inspectors saw evidence that future dates for case conferences and review dates, a summary of what was discussed and any decisions made during the case conference were recorded within the health centre and on Vision.

Staff told inspectors that on return from court, prisoners were seen at reception by health staff.

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

Rating: Good Performance

Complaints, comments and feedback about healthcare services were managed in line with NHS Grampian's policy and the relevant data protection legislation and confidentiality protocols.

Prisoners could readily access complaint, comment and feedback forms within the prison halls but, like self-referral forms, these were only available in English and in written format.

Overall responsibility for managing and responding to complaints and leading investigations lay with the health centre manager. Inspectors saw evidence that complaints were recorded in line with best practice, were not recorded in the prisoner record to safeguard confidentiality, and that response times were well within the agreed timeframes.

The health centre manager had introduced a named nurse model meaning each prisoner was allocated a named nurse on admission to the prison. In the event of a prisoner making a complaint, the named nurse would discuss the complaint with the individual within five working days of the complaint being submitted, in order to seek early resolution. Although the named nurse model was a fairly new development, inspectors observed, and were told that it had not only improved response times, but had also led to a reduction in the number of complaints and an increase in early resolution. This was good practice. However, members of the clinical nursing team told inspectors that not everyone who was responsible for responding to patients' complaints and feedback had received complaints handling training.

Good practice: The health centre manager had introduced a named nurse model meaning each prisoner was allocated a named nurse on admission to the prison. In the event of a prisoner making a complaint, the named nurse would discuss the complaint with the individual within five working days of the complaint being submitted, in order to seek early resolution. Although the named nurse model was a fairly new development, inspectors observed, and were told that it had not only improved response times, but had also led to a reduction in the number of complaints and an increase in early resolution.

Recommendation: The Partnership must ensure that all staff managing complaints receive appropriate training to ensure that complaints are correctly managed.

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

Rating: Satisfactory Performance

This indicator was being met.

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

Systems and processes were in place to ensure healthcare staff made appropriate notifications in cases where there could be possible physical or psychological harm to prisoners. 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.

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

Rating: Generally Acceptable Performance

Overall, the standard of cleanliness within the health centre was good. Staff had a good understanding of standard infection control precautions, hand hygiene (SICP's), transmission-based precautions, procedures for cleaning up a blood spillage and the management of sharps injuries within the health centre. The majority of health care staff were observed to decontaminate their hands correctly and wear the appropriate personal protective equipment.

Inspectors were concerned to find that no hand hygiene audits had been undertaken since the follow up visit in June 2018 and that no staff had been trained onsite to undertake them. Inspectors were also disappointed to find that there had been no progress in revising the existing hand hygiene audit, but were assured that plans were underway to have this completed within the next six months.

During the follow up visit in June 2018, inspectors were told that the healthcare team planned to develop a bespoke infection prevention and control model to be implemented throughout the prisons. Inspectors were advised that no progress had been made since then, due to the competing demands of the infection prevention and control service.

Recommendation: The Partnership must ensure that hand hygiene audits are regularly undertaken by an appropriately trained member of staff, and that actions are taken to address any non-compliances noted.

Recommendation: The Partnership must ensure that the development and provision of infection prevention and control guidance and tools are prioritised within the prison to minimise risks to patients and staff.

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

Rating: Unacceptable Performance

The previous two inspections in 2015 and the follow up visit in June 2018 highlighted the many challenges faced by the healthcare team in maintaining the full complement of staff needed to effectively deliver services. It was clear to inspectors that this continued to be the case. It should be noted that inspectors are aware that the recruitment and retention of staff is not solely an issue for prison healthcare but a challenge for NHS Grampian in general.

Inspectors were concerned that the continued reliance on bank/agency staff to deliver essential services could lead to a dilution of the skill-mix of the permanent workforce. However, the family friendly flexible working approach offered to agency and bank staff permitted a greater capacity for split shifts, in response to more demanding times of service delivery.

Inspectors were told that recruitment to band 5 nursing posts continued to be a challenge and, despite repeated efforts, the service had still not been able to fill three band 5 vacancies, but had successfully recruited a learning disability nurse.

On reviewing the staffing rotas it became evident that the healthcare team were regularly working below agreed staffing levels and, although inspectors were told that the issue had been escalated to senior managers, this had not been recorded within either the Partnership operational risk register or the NHS Grampian corporate risk register. Furthermore, neither a contingency plan nor an escalation plan was in place to implement in the event of the staffing complement falling below agreed levels.

While observing staff carry out their duties, inspectors saw evidence of a lack of leadership at key points throughout the day, such as shift handovers. Band 5 staff nurses decided where best to place staff according to the staffing complement and anticipated needs of the service for that day. There had been vacancies for band 6 team leaders and, although these posts were now filled, senior managers acknowledged they would need a period of adjustment and development into their role. The health centre manager advised that both the team leads and the clinical nurse manager were expected to undertake leadership and management training.

The clinical psychologist provided clinical supervision to the mental health nurses and substance misuse nurses on a monthly basis. This was good practice. At the time of the inspection the primary care staff did not receive any clinical supervision. In addition, there was no process in place to ensure that all staff received a regular assessment of competencies to maintain patient and staff safety.

Following the appointment of the team leaders, individual line management supervision had been re-introduced but was still in the early stages of development. The health centre manager and clinical nurse manager held weekly meetings with the nursing team to review capacity and workforces issues.
Turas was the staff appraisal system introduced in 2018 across NHSScotland. All healthcare staff had received their appraisals from the clinical manager.

Evidence was provided to demonstrate that staff had undertaken appropriate role specific induction training, including TTM training. Staff described good access to training and educational courses on the electronic training platform learnPro.

Inspectors saw that new staff were provided with an induction workbook and were supported to work through these.

Good practice: The clinical psychologist provided clinical supervision to the mental health nurses and substance misuse nurses on a monthly basis

Recommendation: The Partnership must ensure that all staff are competent to undertake their roles, and that there is a regular assessment of staff competencies to maintain patient and staff safety.
Recommendation: The Partnership must ensure that clinical supervision is offered to all clinical staff and that these staff are encouraged to take up this supervision. This will ensure that staff are supported in their reflections of actions they have taken, and have the opportunity to discuss their decision-making, especially in more stressful or complicated situations.
Recommendation: The Partnership must ensure that training for healthcare managers within HMP YOI Grampian is prioritised. This will ensure healthcare managers are given the skills to effectively manage healthcare services in the prison, promote confidence and resilience in the management team, and provide assurance to the board and staff that healthcare management within the prison is robust.
Recommendation: The Partnership must assess and manage the risks associated with the use of a significant number of bank/agency staff whilst maintaining staff and patient safety.

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

Rating: Generally Acceptable Performance

It was evident that NHS board and Partnership had a commitment to delivering healthcare that supported a culture of continuous improvement, but for this to happen frontline staff needed to be properly supported and involved in discussions about what level of support was required and how best it could be implemented. Inspectors noted that the level of support provided to staff by NHS Grampians lead professional nurses varied across all healthcare specialities.

Staff told inspectors that during 2018, following a reorganisation of the healthcare leadership team, the health centre had been without a manager for several months.

This gap had resulted in a lack of direction and uncertainty within the healthcare team. However, since the appointment of the healthcare manager in September 2018 staff described an increased sense of stability and focus within the healthcare team.
Information about what was happening across the wider NHS board and Partnership was communicated to staff via the staff newsletter and displayed on the notice board within the health centre.

Staff reported feeling physically safe while working within the prison and were comfortable about using the Datix adverse event report system, to raise concerns or incidents and requesting feedback from any subsequent investigation.

A named nurse model was in the early stages of being developed across the prison. The healthcare team envisaged that the role would support the process of obtaining feedback from prisoners on the healthcare they received in the prison to inform the future development of services.

The previous inspection in 2018 highlighted that a high number of prisoners were not turning up for clinics and appointments. Despite the health centre manager and the head of operations meeting each month to discuss concerns within the prison this situation had not improved. Prisoners should be fully supported by staff to attend clinics and appointments. The prison should also introduce a system to effectively monitor and record the reasons for non-attendance.

Recommendation: The Partnership and SPS must work together to ensure that they are accurately collecting data on the number of missed appointments and the impact of this on delivery of healthcare.
Recommendation: HMP YOI Grampian management should ensure that they do everything possible to ensure that prisoners are taken to their appointments timeously.

Good practice: There was strong evidence of collaborative working with third sector organisations in relation to substance misuse services.

ANNEX F

ACRONYMS

BBV	Blood Born Virus
BICS	British Institute of Cleaning Science
BIM	Business Improvement Manager
CBSW	Community Based Social Work
CIU	Community Integration Unit
CMB	Case Management Board
CSRA	Cell Sharing Risk Assessment
DASA	Dynamic Assessment of Situational Aggression
DWP	Department of Work and Pension
E&D	Equality and Diversity
ERLO/LLO	Early Release and Lifer Liaison
FCO	Family Co-ordination Officer
FLM	First Line Manager
FNIC	First Night in Custody
GDPR	General Data Protection Regulation
GIRFEC	Getting it Right for Every Child
HDC	Home Detention Curfew
ICC	Independent Complaints Committee
ICM	Integrated Case Management
IPM	Independent Prison Monitor
MAPPA	Multi-Agency Public Protection Arrangements
MDT	Mandatory Drug Testing
MSP	Member of the Scottish Parliament
OLR	Order of Lifelong Restriction
ORT	Opiate Replacement Therapy
PBSW	Prison Based Social Work
PCF	Prisoner Complaint Form
PER	Personal Escort Record
PPMS	Personal Performance Management System
PPT	Personal Protection Training
PR2	Prisoner Record System – Version 2
PRL	Prisoner Resource Library
PTI	Physical Training Instructor
RAG	Red, Amber, Green
RMT	Risk Management Team
SCQF	Scottish Credit and Qualifications Framework
SHMU	Station House Media Unit
SMT	Senior Management Team
SOP	Standard Operating Procedure
SPSC	Scottish Prison Service College
SPSO	Scottish Public Services Ombusman
SRU	Separation and Reintegration Unit
SSM	Special Security Measures
SVQ	Scottish Vocational Qualification
TSO	Throughcare Support Officer
TTM	Talk to Me Strategy
UOF	Use of Force

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