

SUMMARY REPORT ON HMP PERTH

14-25 MAY 2018



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INTRODUCTION AND BACKGROUND

HM Chief Inspector of Prisons for Scotland (HMCIPS) assesses the treatment and care of prisoners across the Scottish Prison Service estate against a pre-defined set of standards. These Standards are set out in the document 'Standards for Inspecting and Monitoring Prisons in Scotland', published in May 2018 and can be found at <https://www.prisonssinspectoratescotland.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 Her Majesty's Inspectorate of Prisons for Scotland (HMIPS). This report and the separate 'Evidence Report' are set out to reflect the performance against these standards.







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' that sits alongside this report on our website.

KEY FACTS

Location

HMP Perth is located approximately one mile south of Perth City Centre on Edinburgh Road.

Role

HMP Perth holds adult short and long-term convicted male prisoners and those on remand from the courts of Angus, City of Dundee, Perth and Kinross and the northern part of Fife.

Brief history

Perth Prison was built between 1810 and 1812 by Napoleonic Prisoners of War. During that time it was used as a depot for some 7,000 prisoners from the War. In 1842, the building began service as a civilian prison and is Scotland's oldest occupied prison. 'A' and 'B' halls were refurbished and opened in 1997-98. In recent years 'C' hall was constructed, and was formally opened in 2008.

Accommodation

There are three accommodation blocks – 'A' hall, 'B' hall and 'C' hall – comprising both single and double cells. There is also a 14 cell Separation and Reintegration Unit (SRU).

Design capacity

The prison's agreed capacity was 663 and at the time of the inspection, 14 May 2018, there were 151 untried adult male prisoners, 470 sentenced adult male prisoners, 14 recall life sentence adult male prisoners and 28 convicted adult males awaiting sentence.

Date of last inspection

December 2014

Healthcare provider

NHS Tayside

Learning provider

Fife College



OVERVIEW BY HM CHIEF INSPECTOR OF PRISONS FOR SCOTLAND

Introduction

This inspection was undertaken and completed by my predecessor David Strang QPM. However, the report was compiled and published after his tenure ended.

HMP Perth is unique within the Scottish prison estate in the sense that parts of the establishment date back to the 19th century whilst others were rebuilt as little as ten years ago. Whilst the buildings were well maintained, the fabric of the older buildings reflected their age, and in some cases did not provide fit for purpose facilities. There were two areas where the age and design of the building raised concerns; the small cells in A and B hall that housed two prisoners in cramped conditions, a concern raised in 2014 when HMIPS last inspected the establishment, and the 'safer cells' in the same halls that were bare, stark and unwelcoming, especially when you consider they are for use by individuals who are in crisis.

The last inspection of HMP Perth was conducted in 2014; this inspection was carried out in May 2018. I am grateful to the guest inspectors from HIS, the Care Inspectorate, Education Scotland, the Scottish Human Rights Commission and other prisons in Scotland for their assistance with this inspection.

This report is the first one produced since the revision of the quality indicators and we have taken the opportunity to review the format of it. The report we previously produced has been split into two distinct sections. This report is the 'Summary Report' which is a narrative commentary highlighting the findings under each of the nine standards. A separate 'Evidence Report' has also been produced, which provides the supporting detailed findings under each of the 85 quality indicators, and includes a human rights based approach overview provided by our colleagues at SHRC which details their findings.

Inspection Findings

In relation to the nine Standards for Inspecting and Monitoring Prisons in Scotland used to inspect HMP Perth, four were assessed as satisfactory, four as generally acceptable and one as poor.

As a result of serious concerns, within the establishment, in relation to certain aspects of the Healthcare provision, we deemed it necessary and appropriate to escalate these concerns to local SPS management and the external management structures of NHS Tayside. We undertook these actions to seek assurances that immediate steps would be taken to address these concerns. The details of these concerns are highlighted in the introduction to Standard 9. However, for clarity I highlight the specific actions that were taken:

- NHS Tayside were asked to provide assurance that patients with physical healthcare needs in HMP Perth were being identified and appropriate care had been put in place.
- NHS Tayside and the SPS were asked to ensure that those prisoners who had returned from court with a change of circumstance were being reviewed by a member of the clinical team, as per the requirements of the Talk To Me Strategy.
- HIS inspectors returned to HMP Perth on 31 May 2018 for two days to assess progress made following the concerns raised during the inspection.

- NHS Tayside was then asked to provide an improvement action plan to address the issues highlighted one week following the return visit. Inspectors requested an update of this document one month following the return visit.
- Inspectors informed the partnership that they would be returning to the prison in six and 18 months to assess progress.

As a result of the return visit on 31 May and 1 June, and further discussions with senior managers that took place in the establishment on 8 June, we were reassured that the SPS and NHS Tayside were taking appropriate actions in response to the concerns raised.

As a result of this situation HMIPS, supported by colleagues from HIS, will return to HMP Perth before the end of 2018 and again in late 2019 to undertake further inspections of the healthcare provision.

Whilst it is concerning that it was necessary to take these unusual and unprecedented actions, it was reassuring to note that remedial actions were taken quickly and that our concerns were taken seriously.

It is important that these issues do not overshadow the wider findings of this inspection.

Inspectors for all disciplines commented on the impact that the morning medication round was having on the regime. Medications were taking so long to complete that the impact on the provision of education, programme activity, purposeful activities and other planned activities was profound. Almost 45% of the prisoners in custody were receiving supervised medications in the morning. The net effect of this was that prisoners were often not moving to work or activity spaces until almost 10:30. This situation resulted in the loss of hundreds of purposeful activity hours each day alongside the associated waste of staff and 'contracted in' resources. Our concerns in this regard were relayed to the Governor during the inspection and again at the meeting on 8 June. It was reassuring to note that NHS and HMP Perth's management team had been working on a resolution to this issue, and had made some headway in improving matters.

The work of the Through Care Support Officers (TSOs) was impressive and their dedication and professionalism was infectious. However, without other staff members developing relationships and trust with individuals, the work of the TSOs would be much more challenging. What was evident from the cases that they managed in the community was that all parts of the system need to co-ordinate their services more effectively to ensure that the support they offer is available when it is required.

In line with findings in recent inspections, staff and prisoners both reported to inspectors their concerns and anxieties in relation to the use by prisoners of illicit substances. We were particularly pleased to see the proactive approach taken by the Governor, who was clearly taking a visible lead on this issue and had instigated a number of processes to better understand the scope and scale of the issue, as well as informing and challenging those in his care on the subject of illicit drug use.

The recent introduction of 'Andy's Man Club' had been well received, and participation rates had been consistently high since its inception. The Club meets every Thursday afternoon in a confidential setting where the men can talk openly about health and wellbeing issues. The most impressive aspect was that the referral process was by word of mouth, and through this informal means of communication it had quickly established itself. We would encourage other establishments to look at this initiative to assess if it is something their population could benefit from.

In conclusion, despite the issues with medications and some of the healthcare provision,

HMP Perth was an establishment that did many things to a high standard. The case management process was delivered to a high standard, and to all sentenced prisoners including those that were serving short sentences. Relationships throughout the prison were positive and respectful and contributed the sense of safety and good order that was evident during the inspection. Finally the library provision within the establishment was excellent, delivered through a partnership arrangement with Culture Perth and Kinross.

Next Steps

This report identifies a number of areas of good performance that are worthy of sharing and which I hope will be taken up by other prisons in Scotland. It also highlights where improvements can be made. I look forward to seeing these improvements introduced through the prison's future plans.

As noted earlier, HIS will return to the establishment on two occasions over the next 18 months to continue to monitor progress against the improvement action plan to ensure these concerns have been appropriately addressed. HMIPS will continue to monitor progress in HMP Perth, especially in relation to the impact medication provision has upon the regime, through regular monitoring visits by the Independent Prison Monitors.

Wendy Sinclair-Gieben

HM Chief Inspector of Prisons for Scotland

12 September 2018

A HUMAN RIGHTS BASED APPROACH OVERVIEW OF HMP PERTH

The application and delivery of the Standards is crucial for ensuring that both the human dignity of the prisoner is upheld and that prisons are places of productive, positive and useful education, work and interaction, leading to better outcomes in reducing re-offending and keeping our communities safer.

Inspectors encountered examples of good practice, particularly in the SRU, where standards, procedures and staff practices allowed prisoners to be meaningfully involved in their day to day life. These included: case conference participation, access to external networks and both respectful and helpful staff/prisoner relationships. The family bonding visits that allowed prisoners to have a meal with their family was also a positive development in relation to participation and human rights.

There was no evidence of systematic involvement of prisoners in decisions that affected their lives. This was evident in the lack of awareness amongst prisoners of the opportunities for them to influence decision making. PIACs were sparse and the E&D strategy and plans were below normal standards of good practice. Induction of prisoners and accessibility of its content was inconsistent, with either too much or too little information provided to prisoners. Translation services were scarcely used when necessary and alternative formats were not widely used. It is important that SPS provide appropriate resources and training so that frontline staff are able to reflect the needs of different cultures and beliefs in the prison setting.

HMP Perth should take steps to enhance the participation of and information provided to prisoners. PIACs should be held on a regular basis to feed information from them into decision making processes within the prison, and to feedback to prisoners on the outcome of those processes. Another area for improvement relates to the provision of information in an accessible format so that it can be understood. Any barriers to participation should be identified, and those prisoners should be assisted to overcome them in order to participate. Prisoner representation at E&D meetings should also be pursued.

There appeared to be a framework of accountability in the prison to monitor how prisoners' rights were being affected, as well as remedies for when things go wrong. However, effective monitoring of human rights standards was not consistent. Accountability focused on the state as duty bearer and its responsibility to respect, protect and fulfil the rights of prisoners. Inspectors encountered a number of situations where proper accountability was lacking, particularly in relation to foreign nationals and prisoners with disabilities. Their particular issues did not appear to have been picked up by existing E&D processes, and the E&D strategy did not give specific or careful consideration to the needs of vulnerable groups.

Processes to ensure accountability require to be further developed at HMP Perth. PIACs and E&D meetings should be embedded in a systemic manner, to provide a channel of accountability between prisoners and the prison. This should include monitoring and evaluation of the manner in which those with additional needs are provided for.

The environment of the prison appeared to work well for the majority of prisoners, who reported positive relationships and a feeling of safety. However, inspectors were concerned that prisoners who required additional support to realise their rights were being missed, in particular foreign nationals with little to no English and disabled prisoners. There was a lack of robust systems to identify the needs of such prisoners and to check that those needs were met. HMP Perth must ensure that reasonable adjustments for prisoners with disabilities are resolved as quickly as possible and that prisoners are not left in a vulnerable position in the interim. The treatment of prisoners with particularly high needs in the SRU appeared to be person-centred, participatory and outcome focused.

Steps should be taken to improve the identification of language needs in the reception process, and that staff are encouraged to make more use of interpreting services. Staff should feel able and empowered to seek the support of such services when they deem it appropriate or necessary. Not using it where required had resulted in some prisoners receiving little information they were able to understand and, as a result, experiencing isolation. Inspectors were of the view that it would be ideal if the videoconferencing facilities could be used to enable contact with families outside the UK. Monthly calls to relatives' outwith the UK were not being as widely utilised as possible, despite eligible prisoners wishing to contact their families, due to a lack of understanding.

The issues identified with vulnerable groups did not appear to have been picked up by existing E&D processes; therefore a more proactive approach is required. These matters appeared to be largely dealt with by residential officers, addressing issues as they arose, which relied on prisoners raising issues themselves and the quality of the individual relationships. An E&D strategy, including staff training needs, should be developed and widely disseminated to ensure the involvement of both staff and prisoners in its implementation.

Prisoners should understand their rights, and be fully supported, so they are able to use their rights. Inspectors were concerned about the variability of information provided to prisoners on the daily life of the prison. Inspectors spoke to foreign prisoners who had not received any information about issues such as food, access to personal property, communications with their national embassy, cash and family visits, to wider issues such as access to programmes, work and exercise, despite being in the prison for several months. HMP Perth must take action to ensure all prisoners understand these processes and their entitlements, and that the information is available in a variety of formats.

The information provided at national induction was comprehensive and largely accessible. It could be improved by considering the volume of information provided in one sitting. Prisoners' spoken with commonly reported inductions of 20 minutes to one hour on admission to prison, and had in practice learned information from other prisoners, where they were able to do so. This particularly affected foreign nationals. HMP Perth needs to proactively identify prisoners' needs for alternative formats of communication.

HMP Perth offered an advocacy service which could assist those with additional needs to access support and protect their rights. Further efforts should be made to bring this to the attention of prisoners who may benefit from it.

It is equally important to empower staff in their duties. Awareness should be raised among staff of the mechanisms which are available to assist prisoners and the role they play in facilitating these, so that they feel able to have ready access to them. There were examples of staff going above and beyond to facilitate matters for prisoners; however, sometimes this was due to a gap in the system.

A human rights based approach requires the recognition of rights as legally enforceable entitlements, and is linked to national and international human rights law. It is important that all categories of prisoners enjoy the full range of human rights. Whilst the large majority in HMP Perth do, this was not the case for a minority of prisoners, as described. The report identifies areas where a more proactive approach is required, in particular to ensure that more marginalised prisoners do not fall through the gap. Reasonable adjustments for disabled prisoners are an important legal requirement that need to be improved.

Staff should be assisted through further training to understand their duties and responsibilities in relation to human rights. Greater effort should also be made to embed transparency and accountability in relation to human rights and equality. The realisation of human rights is facilitated in practice by both the provision of information and the need for proactive action to be taken to ensure prisoners are accessing their rights in practice.

SUMMARY OF INSPECTION FINDINGS



Standard 1 Lawful and transparent custody

Generally acceptable



Standard 2 Decency

Generally acceptable



Standard 3 Personal safety

Generally acceptable



Standard 4 Effective, courteous and humane exercise of authority

Satisfactory



Standard 5 Respect, autonomy and protection against mistreatment

Satisfactory



Standard 6 Purposeful activity

Satisfactory



Standard 7 Transitions from custody to life in the community

Satisfactory



Standard 8 Organisational effectiveness

Generally acceptable



Standard 9 Health and wellbeing

Poor

STANDARDS, COMMENTARY AND QUALITY INDICATORS

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: Generally acceptable performance

HMP Perth was similar to other local prisons in that the reception was a busy area. Inspectors found a reasonably relaxed atmosphere with respect shown by both staff and prisoners. Reception staff were familiar with a number of returning prisoners and their positive relationships were helpful, particularly in diffusing difficult or challenging situations professionally and without further escalation. Prisoners were asked questions to check their understanding of English and their ability to engage in the admission process. Those that could understand or read English were given general information about the admission process and the prison regime. This included how the telephone system worked, fire procedures and how to access the prison rules.

For those for whom English was not their first language, admission information sheets were available in 12 of the most common languages, however this folder did not cover all languages indicated on a poster within reception that assisted prisoners to identify their language. The information sheets had been developed by staff using Google translate, and although it had been developed with the best of intentions, inspectors were concerned that the information may not be accurate. Other means of communicating the necessary information to prisoners was the use of other prisoners to translate. Again staff could not be sure that accurate information was being relayed, and more concerning was that if used during the Talk To Me (TTM) Strategy, healthcare assessments or other official processes i.e. disciplinary hearings, personal information would be shared breaching the prisoners confidentiality. A number of foreign nationals were spoken to during the inspection that had very limited to no understanding of English and had not been offered access to translation services. Records showed that the use of these services was minimal. Prison management should ensure that those who have difficulty speaking or understanding English have access to official translation services.

STANDARD 1 - LAWFUL AND TRANSPARENT CUSTODY – CONTINUED

Prisoners returning from court were spoken to by reception staff to check their wellbeing, and the first part of the Reception Risk Assessment (RRA) was completed. In all cases observed, returning prisoner interviews were carried out at the reception desk in view of other prisoners, although out of hearing range. During the inspection, inspectors did not observe a nurse completing their part of the RRA with those returning with a sentence, which was a concern. The swiftness of the process and area where the interviews were carried out was concerning, as clues as to the assessment of those that may be at risk could potentially be missed if prisoners feel unable to talk openly in a communal area. Management should ensure that all Reception interviews are undertaken in one of the adjacent interview rooms.

All new admissions went through the full TTM process as part of their initial interview. These interviews were held in designated interview rooms. Inspectors observed a comprehensive assessment of an admission prisoner and the completion of the RRA process. Inspectors followed up with this prisoner the following day to check that the correct processes been followed after he left the reception area. The prisoner said he had been treated well, and he appreciated that officers had identified he was in crisis. He said he felt safe. HMP Perth reconfigured their regime some time ago to identify a First Night in Custody (FNIC) area, but due to an increase in numbers, particularly in remand and protection prisoners, this was not operating during the inspection. Reception staff worked hard to allocate prisoners to the appropriate area but this was not always possible. When this situation did occur, it was fully explained to the prisoner that they would be transferred to a more appropriate area as soon as possible.

Inspectors observed that the process for those being liberated to the community was carried out in a caring and professionally manner. One prisoner had been provided with a medication prescription and a medical certificate to allow him quicker access to benefits, which was good practice. Another prisoner was liberated from the Separation and Reintegration Unit (SRU), which was not HMP Perth's normal policy due to him being on a Rule 41. He was met by a TSO at the front of the prison and the help and support he received was observed by another inspector, which is reported in Standard 8.

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: Generally acceptable performance

The Victorian parts of the establishment consisting of two residential halls cannot truly be considered fit for purpose for two primary reasons. Firstly there were a number of double occupancy cells which were small and cramped. Secondly the poor facilities for prisoners that required to be located within what the SPS deem a safer cell.

The conditions within the majority of the double cells within A and B halls were extremely cramped and fell some way short of the SPS standard for the size of a cell containing two individuals. It is hard to imagine what it must be like to be locked up for 20 plus hours per day on remand, within A hall, in a double cell with someone you have no connection with or knowledge of prior to incarceration. The photographs contained within Annex D do not fully capture the small size and narrowness of these cells. However, two grown adults could not pass each other at the side of the bunk without turning sideways. The SPS should cease the use of these cells for double occupancy.

The safer cells within A and B halls were also of considerable concern, as they offered an extremely severe environment for those who are deemed as vulnerable. Additionally they do not offer the comparable physical environment afforded to someone in a similar predicament but located within C hall. The photographs within Annex E go some way to highlighting the contrast in conditions. The lack of access to in cell power within the safer cells within A and B halls was also concerning, as it prevents staff from building access to TV into the care plan of someone who may have indicated suicidal thoughts. This is important because in certain circumstances an individual may well benefit from having access to a TV as a means of coping with their presenting symptoms. The SPS should cease using the safer cells in A and B halls, save in exceptional circumstances, until such times as they can be brought more into line with the environment available within the safer cells in C hall.

In relation to the wider establishment it was clean and tidy, with most of the responsibility for this being as a result of the efforts of the sizeable team of prisoners that are employed to clean the various areas. However, it was concerning to note that the post within the Industrial Cleaning Party (ICP) dedicated to staff training had been removed. Local management must ensure that sufficient focus is placed upon training prisoners to an appropriate standard in order that hygiene and infection control risks are managed.

STANDARD 2 - DECENCY – CONTINUED

The Healthy Eating and Healthy Living Award is an excellent achievement. It is recognition of the efforts of the catering team within HMP Perth and one that they should be proud of achieving. Whilst there was clear evidence of prisoner consultation in relation to the food choices available, it was less evident that efforts were made to ensure that all interested groups were equally represented. When arranging food focus groups staff must ensure that the group is representative of all the cultural, faith and medical requirements.

HMP Perth operated a robust system in relation to the provision and availability of clothing and bedding, where every individual had access to clean, decent and appropriate items which could be laundered as and when required. The prison should however review the process of condemning and replacing prison issue clothing and bedding, in order to ensure that the funds available are as effectively spent as possible.

Whilst the vast majority of prisoners have access to appropriate facilities within their cells, there was one instance of grave concern. Inspectors met one prisoner who had a degenerative physical condition and his needs were not being met. The requirement to provide a decent and appropriate environment for him to live within had not been met. Due to his personal circumstances he required a chair with arms to sit on, yet it appeared that this requirement had not been met for several months, apparently due to a dispute about funding. Additionally he required a more appropriate bed and this again had not been forthcoming, indeed he was provided with an improved mattress which was too wide for the bedframe rendering the bed potentially dangerous. The duty of care to this man was clearly not being met. Local management must ensure that this man's needs are met, and that they put in place a system that ensures that no other individual experiences such a situation in the future.

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 performance

Staff, prisoners and those visiting the establishment all willingly stated that they felt safe in HMP Perth, with prisoners universally stating that this was as a result of good staff/prisoner relationships. However, a number of staff and prisoners stated that they had been more concerned about their safety in the last few months, as a result of the erratic and unpredictable behaviour of some prisoners, after they had consumed unknown illicit substances. Staffs primary concern was the impact these substances were having on the individuals themselves, whereas the prisoners' primary concern appeared to be in relation to the resulting heightened tensions within the halls. We were impressed by the fact that the establishment was approaching the issue of the recent changes in drug use in a systematic and analytical manner. It was clear that the Governor and the management team were aware of the challenges they were facing, and were actively looking to understand the impact this was having on the sense of safety and atmosphere within the establishment. Inspectors commend this approach and would encourage other establishments and SPS HQ to undertake similar actions and analysis.

The management of those individuals, who are low in mood or having difficulty dealing with their current situation, is vitally important within a prison setting. Whilst it was immediately evident that staff understood the importance of their role in making individuals feel supported and safe, there were a couple of areas of concern. As reported in Standard 1, staff did not feel empowered or know how to call upon support services to assist them in fully understanding the concerns or needs of those within their care. This was most evident in relation to translation services, where most staff did not know how to nor did they feel able to call upon these services when working with individuals whose had little to no English. Staff did use their initiative by accessing the likes of Google translate to assist with understanding; however, this is far from ideal. Staff in those situations should feel able to make contact directly with the appropriate service. In one situation an officer was using Google translate to assist their engagement with a prisoner to complete a form to gain access to money to phone his family abroad. Whilst it was evident that the officer was working diligently to assist the individual, it would have been much better, quicker and more effective if they had felt able and empowered to call upon the services of the contracted telephone interpreting service.

STANDARD 3 - PERSONAL SAFETY – CONTINUED

It was a concern that immediate action had to be taken by inspectors to ensure that prisoners were being properly assessed by healthcare staff when they returned from court having been sentenced. As reported in Standard 1, inspectors encountered a foreign national who had returned to the prison with a sentence, their English was all but non-existent and they were known to the mental health team. Yet they were not assessed by health care staff on their return, nor had the prison called upon the assistance of a translator to ensure that they understood their situation. This was a grave concern. However, the rapid response by NHS staff once this had been highlighted to them should mean that such a situation does not occur again in the future.

HMIPS were pleased to note that the SPS had introduced a revised approach to the management of bullying and intimidation, something that we have been seeking for some time. We would encourage the implementation of this revised approach as soon as possible to ensure that all staff are operating in a similar manner. We do however recognise that the actions of staff within HMP Perth were centred on ensuring the safety of the victim, which is commendable but does mean that the victim is likely to be the one that is inconvenienced, where HMIPS are clearly of the view that it is the perpetrator that should be dealt with.

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

Throughout the duration of the inspection, when considering this Standard, staff and prisoners consistently reported that relationships between them were generally positive. Overall, security policies and procedures in the prison were well managed, implemented and maintained, with staff, visitors and prisoners generally content that these were fair and consistent. One area for improvement, however, is the process for communicating with foreign nationals on matters of authority within the prison. The use of the translation services should be increased and become routine.

It was evident that when the exercise of lawful authority was required, prisoners accepted that this was carried out professionally. Staff made every attempt to diffuse potential conflict, employing interpersonal skills readily, and only resorting to use of force as an absolute last resort.

The integration and reintegration of prisoners into mainstream activities, whether from the SRU or a restricted regime, was attempted wherever possible, with staff placing a high priority on the individual needs of the prisoner. Of particular note, were the arrangements for transition to the community for one prisoner, who had been held in the SRU, and the role of the TSO and ICM Officers; who demonstrated a genuine concern that prisoners were reintegrated back into the community, with every chance of success.

Given the challenging mix of prisoners in the population as a whole, staff did their best to manage this by affording all prisoners' access to as wide and diverse a regime as possible.

Whilst it was the case that over the preceding 12 months, there were a high number of prisoner placed on report, the process for punishing prisoners in disciplinary hearings was found to be robust and fair. In general, prisoners were confident in using the appeals procedure. Adjudications were carried out in accordance with the prison rules and decisions generally upheld if an appeal was lodged.

The exercise of security procedures for prisoners who required a more robust level of supervision, were carried out in a measured fashion, with the decisions made being appropriately recorded. Prisoners were kept well informed on why such decisions had been made about them and were given the opportunity to make representation to case reviews.

**STANDARD 4 - EFFECTIVE, COURTEOUS AND HUMANE EXERCISE OF AUTHORITY –
CONTINUED**

Cell searching and strip searching was conducted to a high standard, with staff showing respect for the dignity of the individual at all times. Care was taken to ensure that prisoners understood the process and what was being asked of them, and as with use of force, prisoners were generally content that searches were carried out professionally and with the minimum of fuss.

Management of prisoner property was found to be fair, decent and carried out with a high degree of accountability. This is particularly commendable in the light of the recent challenges the prison has faced in relation to the increased prevalence of attempts to introduce psychoactive substances in all Scottish prisons. Of note was the introduction of a new process to prevent the introduction of such substances in clothing handed in for prisoners and how prisoners' expectations were managed. This process has now been accepted by prisoners, and is indicative of the good relationships which exist with prison staff.

As with other establishments, prisoners were regularly escorted out of the prison, primarily for medical appointment or funerals. In all circumstances, a robust, yet humane approach was adopted, with all such escorts being undertaken with the decency and respect required. This involved working closely with partner agencies to ensure the safety of the public and dignity of the prisoner at all times.

Drug tests on prisoners were carried out in an appropriate manner, with results recorded to a high standard. The annual round of prevalence testing was particularly useful for the prison, as a measure of the extent to which prisoners had access to and were using illicit drugs.

While the management of prisoners during mass route movement was challenging for the prison, the supervision in areas where purposeful activity was taking place was robust and fair, especially in prisoner visits. Staff were very supportive in prisoner visits, especially those which involved the prisoners' children.

Searching of staff and visitors attending the prison is thorough, robust and well managed. It was carried out with the dual goals of maintaining the integrity of the prison environment, while respecting the dignity of the individual coming into the prison.

It is a testament to the professionalism of the staff at HMP Perth, that when administering and carrying out sometimes challenging duties, they achieve this in such a way that those subject to the process recognise the need for it and comment positively on the manner of its execution.

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: Satisfactory performance

Relationships and communications between staff and prisoners were in general very positive. Staff exercised their authority appropriately, and throughout the inspection a healthy respect was demonstrated in general by both. In particular, difficult Rule 41 case conferences were managed appropriately, with compassion and understanding and a clear emphasis on helping the individual. TTM was managed fairly with prisoner involved in decision making, and overall positive interactions were evidenced throughout the inspection.

Prisoner information appeared to be managed in an acceptable way. Staff understood the passing on of critical information to both prisoners and families was a clear factor in ensuring the stableness of the prison. Throughout the inspection this was demonstrated positively, with staff ensuring privacy and compassion. This was clearly evidenced by residential staff who were caring for an individual who had mobility issues. Staff worked hard to help this individual to gain access to the support that he required, demonstrating a commitment to those with protected characteristics and their duty of care.

Prisoners' right to confidentiality was generally being adhered to. However, where two regimes, mainstream and protection, were managed on the same landing access to staff is restricted, and some prisoners reported they do not believe they had access to the same opportunities to speak confidentially with staff, as others enjoy within the establishment.

The prison regime was orderly, however the impact of time to deliver morning medications have upon the route movement, is a clear concern to both staff and prisoner. The weekday regime timetable alludes to the route moving in C hall between 08:45 and 09:00. The route was still moving at 10:15 during each day of the inspection due to the time taken to dispense medication. This in turn resulted in a significant impact on the ability to provide a worthwhile regime for all.

An additional factor that affects the regime is the impact that staff breaks have upon staff availability within the halls between 10:45 and 12:00. This situation results in the residential areas to be locked up during this period, as almost have the shift are on a break.

**STANDARD 5 – RESPECT, AUTONOMY AND PROTECTION AGAINST MISTREATMENT –
CONTINUED**

Prisoners did not appear not to be meaningfully consulted on regime changes. Evidence of prisoner meaningful engagement through the PIAC process was all but non-existent, with most prisoners stating they were unaware of formal meetings within the residential setting. There was also a lack of E&D events, with the most recent taking place on 13 and 14 June 2017. There were minimal E&D meetings taking place with no prisoner representation. The most recent meeting took place on the 12 Feb 2018, and prior to that it was 29 May 2017. These meetings should be held at least quarterly.

The prison appeared calm. Staff/prisoner relationships were positive, especially where staff recognised individuals who were known to them and of their presenting issues. There had been issues with some prisoners taking New Psychoactive Substances, this is an ongoing issue and the prison has taken steps to wash all clothing coming into the prison, to ensure that this is not a route for the introduction of illicit substances.

Prisoners could access complaint forms freely and it was clear the process was being managed in line with policy. Prisoners were clearly involved in the decision making process within the area of progression and ICM. The ICM team were proactive in engaging with prisoners to encourage family members to attend case conferences. Staff in this area said they felt reinvigorated after working for many years in residential areas, and that it was a positive step to move to a different area of the prison. Their enthusiasm rubbed off on all those working/visiting the area and it is to be complimented.

Visitors from statutory bodies appeared to be happy with the processes and access to the prison, however did have some frustration in relation to gaining access to their clients at times, especially first thing in the morning. Staff working in the visit area were engaging, polite, well-mannered and sensitive to all visitors, whilst ensuring the security needs of the prison were adhered to at all times.

Reception processes for those with little to no English require to be updated, and all staff working in the area should be aware of their obligations to ensure an admission has clear knowledge of the prison and its regime, with access to interpreter services where required. This was not the case currently and processes should be updated with clear emphasis on both staff responsibilities and obligations.

The IPM notice boards and request boxes were visible in all areas, however there were no Freephone notices next to the phones advertising the service. The helpline works when dialled, but is used sparingly with most requests coming from the request boxes. It was reported that sometimes NHS requests have been placed in them which was alarming as they are not emptied every day. Many prisoners reported they were unaware of the IPM team, particularly within untried and short-term areas. The IPM spoken to reported unfettered access to prisoners where required and a good working relationship with prison staff, however it was noted that the team was currently understaffed but a recruitment round is imminent.

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 work parties and the learning centre, prisoner/staff relationships were positive and respectful, and this created an appropriate and safe environment for working and learning. There was a suitable and sufficient range of good quality employment activities available to prisoners. However, only a few of these activities included opportunities for prisoners to undertake relevant 'industry recognised' vocational qualifications. There was limited strategic overview in linking vocational and employability skills to the local labour market needs that would align the prisoner and the training provision to future employment opportunities upon release.

The majority of prisoners were able to participate in an appropriate work party which took account of their needs and ability. However, the allocation of employment was not sufficiently systematic and transparent, and as a consequence the smooth running of the work party sometimes took precedent over the benefits to prisoners learning new skills which might enhance employment following release.

Prisoners were provided with an appropriate and sufficient range of good quality educational opportunities. There was a wide range of subjects available, providing well for basic educational needs for both convicted and untried prisoners. However, prisoner attendance at most classes was disappointingly low.

All prisoners were able to access good quality indoor and outdoor sport and fitness facilities. The team of Physical Education Instructors (PEIs) had good positive relationships with prisoners, and this contributed strongly to the sports and leisure centre having a relaxed atmosphere, which encouraged prisoner participation in health and wellbeing activities. Strong and effective working with external partners had resulted in sector-leading initiatives, such as the "Fit for Life" programme, being delivered regularly within the centre.

Prisoners had weekly access to a well-stocked library which had a wide range of useful resources. Attention was also paid to specific cultural and linguistic needs. The provision was managed through a good partnership arrangement with Culture Perth and Kinross, the local authority provider. The librarian and learning centre staff worked together well and jointly planned activities to encourage prisoner reading around national initiatives.

STANDARD 6 – PURPOSEFUL ACTIVITY – CONTINUED

Many prisoners participated in a good range of cultural and recreational activities and events which made a positive contribution to prison life. Effective partnership working between prison staff and a range of national and local organisations resulted in various activities and events in which prisoners participated. Formal and informal peer-tutor support worked well in work parties and the learning centre. A prisoner self-help group – “Andy’s Man Club” was particularly successful at engaging individuals to discuss personal issues.

Prisoners had a number of opportunities over the course of the week to access visits with family members, and sessions lasted one hour and fifteen minutes. Visits were freely accessible for the whole prison and there were opportunities for families travelling longer distances to have extended visits.

Children and family visits took place Monday to Friday between 16.30 and 17.30. A hot meal was provided by the prison and families spoken with said that they enjoyed having dinner as a family. This was a helpful opportunity to enhance family connections. There was also a family fun club that took place in the Education Centre every Friday from 13.45 to 16.00, giving families the opportunity to participate in a variety of courses that ran for fifty weeks of the year. The courses sampled included cooking, budgeting, and healthy eating.

The visit room was spacious and bright and the waiting area had ample seating to ensure that visitors felt comfortable. Notice boards were current and informative. Searching processes were completed in a professional and courteous manner and staff carried out their duties with dignity and respect.

The prison visitors support and advice centre, attached to the prison, provided a warm and welcoming atmosphere. CrossReach worked with various organisations that supported a strategy that families could utilise. The centre had been open approximately 12 years and received roughly 500 visitors each month.

Accumulated visits, inter-prison visits and cross-border transfer applications were available in each residential area. They were managed effectively in line with SPS policy, and staff were knowledgeable of the processes. The Family Contact Officer (FCO) team of five staff were well utilised throughout the establishment providing helpful support to residential areas.

Prisoners who were placed on closed visit restrictions were done so in accordance with prison rules.

There was a family strategy in place along with a prisoner’s visits group, however this had just been reinvigorated and refreshed as the meetings had not been taking place regularly in recent times.

At time of the inspection most prisoners were given the opportunity to gain access to exercise and religious services.

STANDARD 6 – PURPOSEFUL ACTIVITY – CONTINUED

There were a range of treatment opportunities available to prisoners within HMP Perth, provided by a combination of SPS, NHS and third sector staff. Included both group and one-to-one work. The prison offered the following offending behaviour programmes: Controlling Anger and Regulating Emotions (CARE) and Constructs and Pathways. Carrying out these treatment needs was a team of six dedicated prison officers, one senior psychologist and two trainees.

There were processes in place that afforded each prisoner the opportunity to have his case discussed, reviewed and amended if required. HMP Perth adhered to these standards and delivered the required processes: Integrated Case Management (ICM) conferences, Generic Programme Assessment's (GPA). There were 33 GPAs outstanding at time of inspection (followed by the Programme Case Management Board) and Risk Management Team Meetings, all of which had relevant minutes that were shared appropriately.

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: Satisfactory performance**

Senior managers demonstrated a good understanding of the national priorities, were actively involved in local Community Justice Partnerships, and appreciated the often complex landscape of engaging a wide range of stakeholders and partner agencies from a wide geographical area, in sentence and release planning. There was a commitment to supporting prisoners to either maintain or establish links to community agencies which would support transitions and reintegration. Clear arrangements, protocols and guidance were in place which facilitated and supported release planning for both short- and long-term prisoners.

The programmes on offer were designed to meet the needs of the majority of the prison population. All Short term prisoners (STPs) were automatically enrolled in the Short Term Intervention Programme (STIP). Following completion of an essential first module, prisoners could choose to access a range of additional modules to best meet their identified needs. Independent review of the strengths based programme found it supported self-discovery, enhanced a sense of positivity about the future and promoted a positive group experience. Long Term Prisoners (LTPs) had access to the Pathways, Constructs and Discovery programmes. Prisoners requiring the Self-Change Programme, and those convicted of sexual offences that were eligible to undertake the Moving Forward Making Changes (MFMC) programme, join the national waiting list and transfer to another prison when a space becomes available.

Although a high percentage of the prisoner population had convictions for domestic abuse, no specific programme was available nationally to explore gender based violence. SPS management should review this situation and if necessary develop and roll out an appropriate intervention.

Upon release the majority of men return to the Perth and Kinross, Dundee, Angus and Fife areas. Relationships between prison staff and agencies representing these areas, as well as national partners were positive. The long-established Link Centre acts as the main hub, with a wide range of agencies working collaboratively with prisoners to formulate plans to support community reintegration. A comprehensive case management process was in place, with related guidance to assist staff in understanding the prisoner's journey from admission through to liberation. To indicate the importance of release planning the process was 'opt out', with prisoners expected to provide reasons for not making use of the services and supports available during their sentence.

STANDARD 7 – TRANSITIONS FROM CUSTODY TO LIFE IN THE COMMUNITY – CONTINUED

For LTPs and men convicted of sexual offences, the ICM process operated in accordance with national guidance. The process was managed and delivered by experienced and proactive staff that made concerted efforts to engage prisoners and their families in sentence and pre-release planning. Good communication and ease of information sharing between SPS staff, Prison and Community Based Social Workers, MAPPA co-ordinators and Police Scotland Offender Management Unit teams supported collaborative risk assessment and Community Integration Planning. LTPs understood the process and whilst some chose not to participate, others were keen to be included and valued the ongoing connections with their community based social workers (CBSWs).

The post release support offered by the TSOs was highly valued by prisoners, prison staff and partner agencies. A skilled team of experienced officers made effective use of their training, knowledge and links to community resources to assist service users overcome often significant barriers to reintegration. The likelihood of a successful transition was enhanced when referrals were made early, thereby allowing the prisoner time to form a relationship with the TSOs, ensure release plans met their needs and to enable relevant appointments to be arranged with community resources. It was therefore important for all prison staff to be fully aware and make use of the STP ICM guidance.

Initiatives such as the provision of prescriptions and 12 week medical certificates to eligible prisoners upon release enhanced transitions from custody to life in the community, by removing barriers to accessing medication and claiming benefits. As well as supporting the development of employability skills, a full time Department of Work and Pensions member of staff acted as an important source of advice and guidance for staff and prisoners on understanding and accessing Universal Credit. Housing was a key issue affecting successful transitions to the community and there were good links to hostel accommodation and local authority homeless teams across Tayside and Fife. Local teachers also visited the prison as part of their continued professional development in order to raise awareness and gain an appreciation of how children may experience visiting a parent in custody, which is a nice example of community engagement.

A core attribute across this Standard was the commitment and enthusiasm of motivated staff to support individuals in preparing for release. This was characterised by staff proactively gaining the prisoners consent to share information and doing so proportionately. This removed barriers to engagement, allowed timely access to support and helped to reduce issues such as accumulated rent arrears and eviction. This was a strength.

The main area for improvement related to supervised dispensing of medication, which was time intensive and increasingly impacted upon the movement of prisoners, making it difficult to deliver services and programmes as planned. This caused frustration and embarrassment for staff as it meant the time offered by partner agencies was not utilised efficiently as they were often kept waiting. Various staff teams had developed their own 'work arounds' which involved collecting prisoners from the halls. Whilst this was a useful short-term measure it was unlikely to prove sustainable in the longer term.

Finally it was encouraging to note that a small group of care experienced prisoners had been assisted to engage with the Who Cares? Scotland 1000 voices initiative, thereby enabling them to influence the national review of the care system. This was an important activity given the number of care experienced young people represented within the Scottish prison system.

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: Generally acceptable performance

In many areas of life in HMP Perth, consultation and participation of prisoners to assist decision making was severely limited. A number of forums which would have been expected to take place regularly, such as PIACs, E&D meetings and Common Good fund consultations, were absent or very infrequent.

Support for minority groups, such as foreign national prisoners with a poor grasp of English and prisoners on protection, was ad hoc and intermittent. Similarly, several prisoners in need of long-term healthcare treatment were not receiving the care which was required. A greater level of attention to the needs of prisoners who are vulnerable, marginalised or have protected characteristics would enhance the treatment of all the prisoners in HMP Perth. There is an urgent need to develop an E&D strategy and action plan for the prison.

In general, staff were well motivated and committed to providing a professional service. There was a comprehensive plan in place for training staff and a robust auditing process for ensuring this was implemented. Processes were in place to identify and acknowledge where staff performance was worthy of recognition. Two members of staff had received national Butler Trust Awards in March 2018.

There were many good examples of positive links with agencies and organisations in the community, who provided support for people both before and after liberation. In particular, the TSOs had developed excellent working relationships with services such as housing providers and the Department of Work and Pensions, to the benefit of men preparing for returning to the community.

Some uncertainty amongst staff was evident in relation to the SPS Prison Officer Professionalisation Programme (POPP), which is due to be progressed throughout 2018.

A requirement was identified for both SPS staff and NHS staff in HMP Perth to work together more closely, on resolving some of the persistent challenges which face the provision of health and social care support to the many prisoners/patients with complex, and often complicated health and social care needs.

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

The time taken to administer medications to patients in the halls had a significantly negative impact on all aspects of the prison and healthcare regime. This included delaying prisoners going to work or education activities and disruption to the running of clinics in the Health Centre. The process was onerous and time-consuming for staff, taking up to three hours each morning.

The healthcare team described having many challenges in maintaining a consistent and stable workforce. To support and deliver healthcare services in the prison, Perth and Kinross Health Social Care Partnership had developed a workforce plan, which had led to the recruitment of a clinical lead GP and specialist clinical pharmacist. Additional posts had also been created to support the delivery of services, such as a full pharmacy team with a seven day model and the appointment of a forensic psychologist. Phase two of the plan was for the nursing teams to move to a seven day service, and inspectors were told that the immediate impact of this had improved the service to patients. However, we clearly heard from the nursing teams that this had resulted in staff vacancies and an increased daily workload for staff on-duty. It had also reduced the time available for the nursing team to provide specialist intervention and support relevant to their patients. The healthcare team was not providing a full range of clinics, treatments and intervention to their patients that we would expect to see. This was an area for improvement. The Partnership told inspectors that the seven day model would need time to embed before the impact could fully be assessed and that the turnover of staff has improved since the initial investment to support the seven day service.

Since the last inspection, the Partnership had also significantly invested in the improvement and development of pharmacy services in HMP Perth. The pharmacy team was well organised, with a clear focus on providing a comprehensive and community equivalent service to their patients.

The administration of medication processes in the halls were safe and complied with professional and national guidance. However this was not the case in the SRU. Inspectors informed senior staff about their concerns and changes were immediately made to staff practices.

On reviewing medication adverse events inspectors were concerned that in a number of cases the impact and overall risk rating for some of these events were not correct. This was an area for improvement.

STANDARD 9 – HEALTH AND WELLBEING – CONTINUED

We found a number of concerning instances where patient confidentiality was breached including using a patient's cellmate to translate, patients in most areas needed to request self-referral forms for health services and mental health services from SPS officers, and patients not having access to envelopes for their completed self-referral forms in the SRU. In addition patient safety huddles were held on the stairwell in the Health Centre where a large white board was located. Patients were identifiable and confidential information was documented on this board. Numerous staff members use the stairwell in the Health Centre who should not have access to this type of confidential patient information. These events are significant breaches of patient confidentiality. Staff spoken with did not like the patient safety huddles on the stairs and found them to be of limited effect.

Apart from Blood Borne Virus (BBV) clinics there were no long-term conditions clinics available in the prison. The process for identifying patients with long-term conditions was not robust, and relied on conditions being identified 'opportunistically' at other appointments. Inspectors saw a small number of patients with significant long-term conditions who had not received the appropriate treatment for their needs. Issues included not being able to access appropriate equipment that would benefit the patient, health and safety risks of current equipment, the primary care nursing team not being aware of a patient's admission. This is an area for improvement.

All Scottish prisons are to be smoke-free by 30 November 2018. In HMP Perth smoking cessation services did not appear to be effective. Only two out of 138 patients registered with the smoking cessation service in 2017 were smoke-free at 12 weeks, which was a concern. Plans were in place to provide a more robust and effective service with funding for further resources and support from the public health department.

Staff demonstrated a good understanding of the health inequalities faced by their patients. Inspectors saw evidence that patients were being encouraged to be responsible for their own care, which was good practice. However they saw two patients with significant physical challenges who were not empowered to be independent due to a lack of healthcare input in regard to their physical needs. This is an area for improvement.

Inspectors had concerns regarding the process for clinical records management within the prison. They found that the clinical teams used hard-copy records to record some patient's care and treatments plans. The records would be scanned onto Docman (an electronic document management, workflow and transfer software for primary, secondary and social healthcare organisations) once the care episode was completed. This meant that healthcare records were not chronological or complete and that the hard-copy records may not be available if needed by other clinicians wanting to confirm care. Further to this Inspectors found inconsistencies in record keeping: some treatment tools were not readily available and there was not always a consistent and timely approach to sharing key information with other health colleagues across the prison. This was an area for improvement.

STANDARD 9 – HEALTH AND WELLBEING – CONTINUED

Although waiting times were generally acceptable, patients had a four week wait for a GP appointment and the mental health team. GP's in HMP Perth continued to see all new admissions and transfers 24 hours after admission. The Partnership were considering other options of care for admissions and transfers, such as developing an advanced nurse practitioner post, which would mean that not all patients would be required to see a GP on admission or transfer. This would support a more targeted approach to GP resources allowing services to be used more efficiently.

During the staff discussions, staff highlighted some concerns including the strain on prison staff due to an increase in the numbers of prisoners being under the influence of substances. Inspectors were told that it was not uncommon for multiple prisoners to be suspected by healthcare and prison staff as being under the influence of an unknown substance.

Inspectors found the provision of Naloxone on liberation to be poor. Information about the benefits of Naloxone did not appear to be promoted as common practice. During the period of 2017/2018 only 21 Naloxone kits were issued. This is an area for improvement.

Patients could access treatment for BBV quickly and healthcare staff were highly skilled at offering support and interventions. This is an area of good practice.

The mental health team did not have a standardised and validated assessment tool or a risk assessment tool in place. On discussion with the team lead and senior managers it was recognised that this was a weakness and the team was taking steps to address this. The mental health team had a clearly identified clinical lead for the team and the team consisted of a range of professionals from health, including a consultant psychiatrist, a forensic psychologist and the clinical nursing team. Timetabled weekly meetings were scheduled to discuss allocation of referrals, current assessments and reviews. Liaison and joint working with substance misuse services, and primary care in cases with co-morbidities was limited. There was little opportunity to discuss, review or co-manage co-morbidity patients. The mental health team nurses demonstrated significant clinical knowledge, enthusiasm and compassion; however they are not trained to offer evidence-based psychological interventions. This is an area for improvement. At the time of the inspection, the team were unable to deliver a full range of treatments or therapies appropriate to the prison population. A training plan had been developed to up-skill the mental health nurses to deliver low level psychological therapies however, again due to the competing demands of the service it was proving difficult for staff to access this training.

Inspectors were also concerned that prisoners returning from court with a change of circumstance were not being reviewed by a member of the clinical team, as required in the TTM strategy. This is a concern which was immediately escalated to the Partnership and the Governor.

The current waiting time for newly admitted prisoners to be assessed by a substance misuse nurse was a minimum of five to six weeks, and they would only be referred once they had had an assessment with a case worker. The patient would then be asked to maintain a drug diary for a further two weeks and provide opiate positive urine tests before they commenced methadone. This is not reflective of what would happen in the community and seemed to add to the already long delay in starting treatment. This is an area for improvement.

STANDARD 9 – HEALTH AND WELLBEING – CONTINUED

A Patient Safety Collaborative group has been established to work in collaboration with SPS to resolve common issues including a reduction in medication adverse events, drug-related deaths and emergency code red and code blue calls. Although the Inspectors saw evidence where the collaborative had been successful in improving patient care, the problems associated with morning medication administration had not been resolved. Medicines administration was identified as a risk on the prison risk register. The Inspectors noted that the process for medicines administration had been identified as a risk on the prison risk register. Inspectors were told that following discussions with the healthcare team and SPS a decision was taken to focus on the weekly supply of prisoners' medications as this was seen as the greatest joint priority. This had worked well. However, the issue and impact to the whole prison, of time taken to administer supervised medications each morning had not been resolved.

Although inspectors found areas of strength that had a positive impact on workforce planning and organisation, they were concerned that some processes and pathways were not being followed. Inspectors were concerned that the clinical nursing team were unable to receive appropriate training, and at times, supervision. Inspectors also found that they were not always working to their banding, which impacted on the delivery of safe, effective and person-centred care.

HMIPS and HIS inspectors took the following actions in response to the concerns raised during the inspection of HMP Perth:

- Asked the Partnership to provide assurance that patients with physical healthcare needs in HMP Perth were being identified and appropriate care had been put in place.
- Asked the Partnership and SPS to ensure that those prisoners who had returned from court with a change of circumstance were being reviewed by a member of the clinical team, as per the TTM Strategy.
- HIS inspectors then returned to HMP Perth on 31 May 2018 for two days to assess progress made following our concerns raised during our original inspection.
- The Partnership was asked to provide an improvement action plan to address the issues highlighted one week following the return visit. Inspectors requested an update of this document one month following the revisit.
- Inspectors informed the partnership that they would be returning to the prison in six and 18 months to assess progress.

As a result of the return visit and discussions with senior managers, Inspectors are reassured that the Partnership is taking appropriate actions in response to findings. HIS will continue to monitor progress against the improvement action plan to ensure these concerns have been appropriately addressed.

ANNEX A

HMP PERTH

Prison population profile as at 14 May 2018

Status	Number of prisoners	%
Untried Male Adults	151	23
Untried Female Adults	0	0
Untried Male Young Offenders	0	0
Untried Female Young Offenders	0	0
Sentenced Male Adults	470	71
Sentenced Female Adults	0	0
Sentenced Male Young Offenders	0	0
Sentence Female Young Offenders	0	0
Recalled Life Prisoners	14	2
Convicted Prisoners Awaiting Sentencing	28	4
Prisoners Awaiting Deportation	0	0
Under 16s	0	0
Civil Prisoners	0	0
Home Detention Curfew (HDC)	35	5
Sentence		
Untried/Remand	179	27
0 – 1 month	4	1
1 – 2 months	2	0
2 – 3 months	1	0
3 – 4 months	11	2
4 – 5 months	6	1
5 – 6 months	17	3
6 months to less than 12 months	55	8
12 months to less than 2 years	95	14
2 years to less than 4 years	137	21
4 years to less than 10 years	99	15
10 years and over (not life)	12	2
Life	41	6
Order for Lifelong Restriction (OLR)	4	1
Age		
Minimum age:	21	n/a
Under 21 years	0	0
21 years to 29 years	197	30
30 years to 39 years	273	42
40 years to 49 years	115	18
50 years to 59 years	52	8
60 years to 69 years	18	3
70 years plus	3	0
Maximum age:	82	n/a
Total number of prisoners	663	

ANNEX B

INSPECTION TEAM

David Strang, HMIPS

Jim Farish, HMIPS

Calum McCarthy, HMIPS

Dr John Bowditch, Education Scotland

Dr John Laird, Education Scotland

Pamela Swan, Serco

Scott Cringles, SPS

William Sweeney, SPS

Jane Kelly, Care Inspectorate

Catherine Haley, Healthcare Improvement Scotland

Jacqueline Jowett, Healthcare Improvement Scotland

John Campbell, Healthcare Improvement Scotland

Leona Gilhooley, Healthcare Improvement Scotland

Laura Wilson, Healthcare Improvement Scotland

Elaine Racionzer, Healthcare Improvement Scotland

Diego Quiroz, Scottish Human Rights Commission

Cathy Asante, Scottish Human Rights Commission

ANNEX C**ACRONYMS**

CARE	Controlling Anger Regulating Emotions
CBSW	Community Based Social Work
CIP	Community Integration Plan
CSRA	Cell Sharing Risk Assessment
C&R	Control and Restraint
E&D	Equality and Diversity
ECR	Electronic Control Room
FCO	Family Contact Officer
FLM	First Line Manager
FNIC	First Night in Custody
GPA	Generic Programme Assessment
HDC	Home Detention Curfew
ICC	Internal Complaints Committee
ICM	Integrated Case Management
ICP	Industrial Cleaning Party
IPM	Independent Prison Monitor
LTP	Long-term Prisoner
MAPPA	Multi-Agency Public Protection Arrangements
MFMC	Moving Forward Making Changes
OLR	Order for Lifelong Restriction
PBSW	Prison-Based Social Worker
PEI	Physical Education Instructor
PIAC	Prisoner Information Action Committee
PR2	Prisoner Record System – version 2
PSP	Public Social Partnership
PTI	Physical Training Instructor
RMT	Risk Management Team
RRA	Reception Risk Assessment
RRMC	Refusal to Return to Mainstream
SOP	Standard Operating Procedure
SQA	Scottish Qualifications Authority
SRU	Separation and Reintegration Unit
STIP	Short-term Intervention Programme
STP	Short-term Prisoner
TSO	Throughcare Support Officer
TTM	Talk to Me

ANNEX D

Double Occupancy Cells and A and B hall



ANNEX E

Safer Cell in A and B hall



Safer Cell in C hall





HM Inspectorate of Prisons for Scotland is a member of the UK's National Preventive Mechanism, a group of organisations which independently monitor all places of detention to meet the requirements of international human rights law.

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