

HM Chief Inspector of Prisons for Scotland Annual Report 2014-2015



Cover:

Greenock, Kilmarnock, Shotts, Perth, Glenochil, Separation and Reintegration Units

HM Chief Inspector of Prisons for Scotland

Annual Report

2014-2015



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1. OVERVIEW



David Strang
HM Chief Inspector of Prisons for Scotland

Introduction

“How good do we want our prisons to be?”

This is not as strange a question as it might at first appear. Some hold the view that prisons are “too good”, not punishing enough; that serving a sentence in prison is too easy. Prisons are not sufficiently unattractive an experience to act as a deterrent, particularly evidenced by offenders who frequently return to prison.

Others argue that imprisonment is intrinsically damaging and harmful in its effect. The punishment of a sentence is the deprivation of liberty and the loss of choice. They advocate that prisons should do as much good as they possibly can.

The question highlights the tension that exists between the notions of *punishment* and *care*. Critics of the use of imprisonment in Scotland are divided in their opinion.

A sentence of imprisonment is, of course, imposed by the court as a punishment, as a consequence of the crime which has been committed. Within the criminal justice system, prison is considered a deterrent; people would not choose to be imprisoned. Yet in the interests of wider society we also want prison to do some good for those who are sentenced, to prepare them for a positive life after release from prison.

On the other hand if prison is too “good”, would we want to send more people to prison, particularly for services which may not be so readily available for

them in the community, such as addictions support, mental health treatment or assistance with education, training and housing?

As HM Chief Inspector of Prisons for Scotland, I see too many people in prison who would not find themselves there if the appropriate support were available for them in the community. Evidence shows that some people would be much less likely to have committed the crime for which they have been sentenced if the appropriate interventions such as addictions support or mental health treatment were available to them in the community. They have somehow slipped through the net. Scotland would be a healthier, safer and stronger nation if we chose to send fewer people to prison and had more effective, alternative ways to respond to offending behaviour. As the 2008 report, ‘Scotland’s Choice’, argued, we need to invest in tackling the underlying factors which lead to offending and imprisonment.

I am, however, encouraged that the seemingly inexorable rise in Scotland’s prison population of the last two decades has been halted and is showing signs of a reversal. Reasons for this are complex and contested but hopefully this change is not a temporary one. The daily average prison population has reduced from its record high of 8178 in 2011-12 to 7731 in 2014-15, the lowest daily average population since 2007-8. I am particularly encouraged that there are fewer young men in HMYOI Polmont – its population is less than half the level of seven years ago. This bodes well for the future of Scotland’s prison population.

HM Inspectorate of Prisons for Scotland

The purpose of HM Inspectorate of Prisons for Scotland (HMIPS) is to contribute to the improvement of prisons in Scotland. As HM Chief Inspector, my duties are to inspect the conditions in prison and the treatment of prisoners. By inspecting prisons and publishing reports of our findings, we provide an important safeguard against mistreatment and a reassurance to the public. The work of the Inspectorate contributes to public confidence in the criminal justice system.

As well as reporting on the conditions in prison and the treatment of prisoners, I take a particular interest in how well prisoners are prepared for their return to the community following their release from prison. Effective rehabilitation is an important aspect of a prison sentence. Research shows that where this is achieved successfully, the outcome is a reduction in levels of reoffending and consequently fewer victims of crime.

National Preventive Mechanism

The United Kingdom is a signatory to the United Nations Optional Protocol to the Convention Against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). HMIPS is one of 20 bodies which comprise the National Preventive Mechanism (NPM), which has a duty regularly to monitor the treatment of detainees and the conditions in which they are held. Inspecting prisons has an important preventive function as well as seeking to improve positive outcomes for prisoners. As HMCIPS, I am one of five members of the NPM Steering Group, which has responsibility for facilitating coordination and decision making between biannual business meetings of the NPM. In 2014 we established a Scottish Sub Group of the NPM to support the work of the six member organisations in Scotland. The Sub Group met twice during the year to progress the work of the NPM in Scotland and to improve communication with the Scottish Government.

Inspections

During 2014-15, the Inspectorate conducted three full inspections – HMP Greenock, HMP Perth and HMP Glenochil – and two follow-up inspections – HMP Kilmarnock and HMP Shotts. Details of these inspections and the findings are included in Chapter

2 of this report. Our inspection reports highlight areas of good practice, which I hope will be taken up by other prisons in Scotland. They also identify areas where improvement is recommended.

In early 2015, we conducted the initial stages of a thematic inspection of the use of Separation and Reintegration Units in Scottish prisons. In particular we are examining the impact on people of being held for long periods in segregation or isolation. We will report our findings later in 2015.



Separation and Reintegration Unit Cell in HMP Shotts

We have continued to be supported in our work by inspectors with specialist expertise from other inspection and scrutiny bodies: Education Scotland, Healthcare Improvement Scotland, the Care Inspectorate and, from this year, the Scottish Human Rights Commission. This has enhanced the quality and breadth of our inspections. I am grateful to all who have assisted us in this way.

Standards

A major undertaking over the last two years has been the complete revision of the previous standards for inspection of prisons, published in 2006. We published the new standards in March 2015. They reflect changes which have been made to both legislation and practice. International Human Rights obligations create the cornerstone on which the standards are founded. These standards were drawn up through a process of extensive consultation and are referenced against relevant law and guidance. There are ten standards, each of which describes the treatment and conditions a prison is expected to achieve. They are underpinned by a series of quality indicators which describe the evidence used to evaluate to what extent the standard has been met.

The emphasis of the new standards is on the outcomes for prisoners. I am very grateful to Roger Houchin for his invaluable contribution to the development of the new standards.

In relation to each standard and quality indicator, inspectors record their evaluation in two forms: a colour-coded assessment marker and a written record of their findings. My hope is that our reports will provide greater clarity about the findings from inspections. The reports will not contain specific recommendations, but will clearly identify areas where there needs to be greater focus for improvement. We will also continue to highlight areas of good practice.

Follow-up processes

Another significant change from previous years is that we are introducing a new follow-up process to inspection. At regular intervals we will more rigorously monitor the action plans produced by prisons in response to the full inspection report (rather than only once, 18 or 24 months after report publication). HMP Glenochil was the first prison to be inspected using the new standards.

Independent Prison Monitoring

In January 2015, the Scottish Parliament legislated to replace the existing Prison Visiting Committees with a new system of Independent Prison Monitoring¹. This brings the responsibility for the oversight and coordination of independent prison monitoring under the auspices of HMCIPS.

Four new members of staff will join HMIPS as Prison Monitor Coordinators to support the new Independent Prison Monitors. Monitors will be recruited from local communities and will regularly visit prisons to monitor the conditions in prison and the treatment of prisoners. They will be able to provide support to prisoners who request additional assistance. The new system is operational from 31 August 2015. Details can be found on the HMIPS website www.prisoninspectorscotland.gov.uk

Policy development

Throughout the year HMIPS have contributed to policy development in a number of areas through participation in workshops, consultation events,

¹ The Public Services Reform (Inspection and Monitoring of Prisons) (Scotland) Order 2015

presenting at conferences and in evidence to the Justice Committee. With the Care Inspectorate and HM Inspectorate of Constabulary for Scotland, we were members of the team reviewing the operation of Multi Agency Public Protection Arrangements (MAPPA) in Scotland.

Prisons in Scotland 2014-15

Throughout 2014-15 there have been a number of significant changes and decisions which have had an impact on prisons in Scotland. The implementation of the Scottish Prison Service's Organisational Review, which was published in 2013, continues to drive substantial activity and change.

HMP & YOI Grampian became operational in March 2014. The number of prisoners held there continues to increase towards its full capacity, following a worrying incident of disorder soon after its opening. We will conduct a full inspection of HMP & YOI Grampian later this year.

Women in custody

The plans for the custodial estate for women offenders continues to change and develop. Following the decision of the Cabinet Secretary for Justice not to proceed with the building of HMP & YOI Inverclyde at Greenock as a replacement for HMP & YOI Cornton Vale, there has been extensive consultation on future plans for women in the criminal justice system. This provides an opportunity for a creative and imaginative response to the Angiolini Commission on Women Offenders. As a result of the decision to retain HMP & YOI Cornton Vale for a longer period of time, HMIPS will conduct a full inspection in autumn 2015.



Women in custody HMP Edinburgh

Young people

I continue to be impressed with the progress of the strategy for young people in custody. The further development of the learning environment at HMYOI Polmont is producing positive outcomes for the young men there. The two purposeful activities areas have been refurbished, creating an environment and facilities conducive to learning. The reduction in the number of young offenders in custody provides opportunities for working with the young men in positive and constructive ways. The introduction of a double decker bus as a family help hub is a creative solution for supporting the families who come to visit at Polmont. Maintaining family links is important for all prisoners, but is particularly so for young men at Polmont.



Young offenders in the Radio Station HMYOI Polmont

Throughcare

Another area where I have seen improvement and progress is in the preparation of prisoners for release at the end of their sentence. There is a growing awareness of the important contribution that prison staff can make in the rehabilitation of offenders. The greater emphasis on purposeful activity reinforces the potential for more positive outcomes for prisoners on their release from custody. The new Community Integration Units in HMP Greenock and HMP & YOI Grampian have the potential to assist to prepare prisoners for their transition back to the community. I look forward to seeing the positive benefits from these initiatives.



Bricklaying course HMYOI Polmont

Additionally, the introduction of Throughcare Support Officers (TSO) demonstrates the commitment of the Scottish Prison Service to working with offenders both in preparation for their release, and more specifically in the community after their release. There is still scope for a more consistent approach to the training and deployment of TSOs across Scotland, once best practice has been identified.

Challenges

There remain, of course, a number of challenges facing those charged with improving the conditions in prison and the treatment of prisoners.

Older prisoners

The profile of people detained in Scotland's prisons is changing. There is a noticeable increase in the number of older prisoners, which brings with it a higher level of healthcare needs. Increasing vulnerability in older prisoners, combined with restricted mobility and the need for greater levels of social care, present challenges for the provision of health and social care. There are a number of creative local arrangements to provide appropriate social care and assistance. Such arrangements can be expensive, particularly when combined with requirements to alter prison cells to allow accessibility and medical equipment. The need for end of life care, too, is increasing. In due course, the need for a national response to the rising needs of older prisoners – who are also patients – will become more pressing. I intend to conduct a thematic inspection of this area in 2016.



Cell designed for wheelchair access HMP Shotts

New psychoactive substances

Another challenge facing prisons in Scotland relates more often to younger prisoners: the use of new psychoactive substances, or so-called legal highs. It is a particular difficulty for prisons to establish the prevalence of such substances and to assess their availability. There are at present no means of testing for these substances. Their use has a number of unwelcome consequences – most immediately the unpredictable and potentially violent behaviour of those who consume them and the challenges prison staff face in responding. Associated with them is the potential for increased levels of debt, bullying and the consequential violence as a result. Any level of violence and assault is of concern; HMIPS will continue to monitor closely the levels of bullying and assault.

Inspection Findings

A summary of this year's inspection reports is included in Chapter 2 of this report. In this overview, I would like to highlight some of the more significant findings, beginning with the positive areas of good practice we identified.

Relationships

I have continued to be impressed with the quality of relationships in most prisons in Scotland. I have observed many positive interactions between staff and prisoners. Many prisoners report that they are well treated and know how they can obtain assistance if they have a problem. There are some good examples of close working between different functions within prisons – such as operational, health care, social work and education. I have also seen increasing engagement by prison staff with partners in the community, such as Community Planning

Partnerships, and Alcohol and Drug Partnerships, as well as through Public Social Partnerships and the work of Throughcare Support Officers.

I have been pleased to see the involvement of prisoners in peer support opportunities, such as peer mentors, listeners and substance misuse champions. There have been some impressive examples of volunteering activities to raise funds for local charities.

Families

Another area where we found positive evidence of progress is in the involvement of families in prison life. The work of Family Contact Officers and the development of family strategies help to maintain positive links between prisoners and their families. More constructive engagement is encouraged through parenting visits and play and homework sessions with children. The use of video conferencing facilities also helps to maintain family contact. The work of chaplaincies, too, is valuable in supporting prisoners and their families.



Visits with Children's play area HMP Edinburgh

Health care

Health care always plays a major part of an inspection programme. There have been some excellent examples of support for vulnerable prisoners, particularly in need of mental health care or drug and alcohol support. Prisoners' transition to the community has been improved in cases where there were good systems for passing information to the GP practices in the community. The Physical Training staff in a number of prisons have developed particular programmes to support the health of older and less physically able prisoners.

Arts

I have seen a number of impressive initiatives to encourage music, arts and drama in prison – often activities that were not part of the lifestyle of prisoners before they came into custody. The STIR magazine continues to produce high quality editions, publishing the creative writing and artwork of prisoners. Scotland's prisoners have been positively represented in the receipt of Koestler Arts in Prison Awards.



Art class HMP Shotts

Technology

Where it is working well, video links to court and other appointments are successful in reducing the need for unnecessary journeys, particularly in remoter locations. There is scope for increasing the use of video linking.

Concerns

I would like to highlight some areas of concern which were identified through our inspections this year.

Estate

The welcome building of new, modern prisons highlights the inadequacy of the older prisons in the estate, built not in the last century but in the 19th century. These physical conditions present an additional challenge for staff to provide appropriate care. For example we still see too many prisoners sharing cells that are simply not suitable for two people. Older cells have restricted space, limited natural light and are at times adversely affected by dampness problems.

Cell sharing

Where there is cell sharing, the importance of conducting a robust risk assessment cannot be overstated. We have found too many examples of where such an assessment has not been adequate, resulting in information about a prisoner's vulnerability and risk which has accompanied them into prison not being passed on to the relevant staff in the prison.



Dormitory HMP Inverness

Purposeful activity

Whilst there has been considerable progress in developing a strategy for purposeful activity, there is still a disappointing level of purposeful activity in practice in some prisons. We found that there were too few places for work, education and training opportunities for the size of the population. This was compounded by a failure to ensure that such places were used to the maximum effect. This represents a disappointing level of wasted opportunity within the prison. This lack of purposeful activity also reinforces low levels of activity for the individual prisoner, making it more difficult for them to be active on release.



Purposeful activity HMP Inverness

Equal access

It is understandable that the prison regime or timetable is designed with the majority of prisoners in mind, but we were concerned to find that the regime for some prisoners was very restricted. This was particularly so for prisoners who were on protection for a variety of reasons. The inspection process assesses the conditions and treatment for all prisoners, taking a particular interest in minority and potentially excluded groups.

Progression

Similarly, we had some concerns about the arrangements for the progression of prisoners towards preparation for release at the end of longer sentences. There is an unacceptable backlog of prisoners held in high security conditions waiting for particular programmes which would enable them to progress to more open conditions.

Personal Officers

We found some excellent examples of the work of Personal Officers, but still consider that there remains a need for consistency in the training and operation of Officers who perform this important function in prisons.

Health care

Finally, our healthcare inspectors identified that the arrangements for the dispensing of medication are not always satisfactory. This can be either because of the physical restrictions on the fabric and layout of the buildings or because of the operational arrangements in place. Inadequate arrangements run the risk of errors in dispensing, breaching patient confidentiality and creating the potential for bullying and pressurising more vulnerable prisoners for their medication. Dispensing medication is an important daily aspect of prison life; too often we observed that healthcare and operational prison processes were not adequately coordinated.



Healthcare staff HMYOI Polmont

The Year Ahead 2015-16

For HMIPS, 2015-16 will be the first full year of inspecting prisons using the new standards and the revised follow-up processes. I hope that this will improve the clarity of our reporting and the effectiveness of our follow-up monitoring of progress.

In addition to our programme of full inspections, we will also conclude and publish our thematic inspection of the use of Separation and Reintegration Units and will commence a thematic inspection of the treatment of prisoners with high care needs.



Separation and Reintegration Unit exercise yard HMP Low Moss

The introduction of Independent Prison Monitoring at the end of August 2015 brings a new responsibility to HMIPS. The functions of monitoring and inspecting are distinct but complementary. I anticipate that there will be benefits for both functions in having closer communication and coordination, and ultimately greater benefit for prisoners.

The Business Plan for 2015-16 is included in Chapter 4 of this report.

Conclusion

I am encouraged that the prison population in Scotland is at a seven-year low. There is, of course, greater scope for the criminal justice system to reduce levels of offending even more. Prisons have an important role to play in contributing to this reduction, particularly through working effectively with prisoners to encourage desistance and a successful return to the community.

I am grateful to the staff of the Inspectorate for their support throughout this year.

David Strang
HM Chief Inspector of Prisons for Scotland
August 2015

2. SUMMARY OF INSPECTIONS UNDERTAKEN

Establishments

HMP Greenock

Full Inspection 19-27 May 2014

Summary

Safety

Health screening on admission to HMP Greenock is good, with for example prisoners identifying a problem of excessive alcohol intake being referred to a specialist alcohol liaison nurse employed within the prison.

Urine samples for the purposes of drug screening require to be properly supervised.

Access to a medical assessment by a doctor on Saturdays for prisoners admitted directly from court is a concern.

Plans are in place to deal with emergency situations, however call-out lists were found not to be up to date and there requires to be sufficient First Aid cover available and deployed during patrol and Night Duty periods. An appropriate gender balance to deal with emergency situations involving female prisoners should be in place to ensure that it can be suitably managed.

Use of force is low, however, paperwork was not always fully completed nor were planned removals video recorded.

HMP Greenock has drafted its own Anti-Violence Policy which at the time of inspection was issued to managers for comment prior to implementation. Records indicate that the majority of assaults were carried out by short-term prisoners.

The searching arrangements for female and National Top-End prisoners should be reviewed.

Decency, Humanity and Respect for Legal Rights

Relationships between staff and prisoners are positive across the whole prison.

Prisoners were positive regarding the escorted leave scheme as part of the National Top-End testing process.

Prisoner accommodation varies in time of build from the early 1900s to the 1990s with the majority of cells now being single occupancy, with bunk beds having been removed from single occupancy cells within Ailsa Hall.

There is dampness in a number of cells within Ailsa Hall. The bed frames within Darroch Hall are higher than elsewhere within HMP Greenock making it difficult for some female prisoners to use.

All prisoners in HMP Greenock have access to a toilet and wash-hand basin on a 24-hour basis, and while there are in cell toilets in both Ailsa and Darroch Halls appropriate screening is not always in place and in some cases does not provide a suitable degree of privacy.

Food is of a high standard which is prepared in a dated kitchen that requires refurbishment. Practices in place for washing cutlery and crockery should be reviewed.

Opportunities for Self-improvement and Access to Services and Activities

Induction is delivered on a rolling basis – whilst meeting SPS guidelines on timescales this does mean that some prisoners have to wait three weeks before receiving the programme which is less than ideal for those in prison for the first time.

A functioning Personal Officer scheme is in place. However, not all Officers are aware of the range of available programmes.

HMP Greenock has adopted a unique way of implementing the Integrated Case Management (ICM) process with the responsibility delegated to Residential Officers, the potential benefits of this approach are undermined by persistent failures in meeting expected timescales for aspects of the process. The process however, is supported by effectively communicated risk assessments.

Access to purposeful activity is currently being reviewed with an increase to current capacity expected – HMIPS will monitor progress.

Programme delivery targets do not appear to reflect the prisoner population held at Greenock.

While prisoners can access a range of healthcare services via self-referral forms these are not always used in Alisa Hall, as such confidentiality cannot be assured at all times.

In response to perceived need of long-term prisoners, healthcare staff have established drop-in general clinics in Chrisswell House, with plans to further extend this provision. There is a good range of nurse-led specific health clinics in place.

Accessing Dentistry appears at times to be problematic and does not reflect provision within the community.

There is a lack of an overall strategy within NHS Greater Glasgow and Clyde to guide the provision of addictions services within HMP Greenock.

HMP Greenock should ensure that documentation and guidance for use in emergency situations is up-to-date.

HMP Greenock should ensure that there is an appropriate gender balance allotted to every shift in order to manage emergency situations involving female prisoners.

HMP Greenock should ensure that sufficient First Aid cover is available and appropriately deployed during patrol and Night Duty periods.

HMP Greenock should ensure that all planned removals are recorded.

HMP Greenock should ensure that all Control and Restraint removal documentation is fully completed.

HMP Greenock should review their searching arrangements for female and National Top-End prisoners.

HMP Greenock should review their response to the effects of dampness in areas of the prison.

HMP Greenock should ensure all prisoners in Ailsa Hall are issued with the combination for their in-cell safes.

HMP Greenock should provide prisoners with an appropriate light source to enable them to see and move around safely in their cells during the hours of darkness.

HMP Greenock should ensure that beds fitted in Darroch Hall can be used safely by all prisoners.

HMP Greenock should remove all storage items out with the original cell design and provide prisoners with sufficient, appropriate storage facilities.

HMP Greenock should ensure all prisoners in Chrisswell House are provided with a lockable storage facility.

HMP Greenock should ensure that all prisoners have access to clean towels at such intervals that ensure they can maintain standards of personal cleanliness.

Recommendations

For the Establishment

HMP Greenock should ensure that prisoners are supervised when providing a urine sample for the purposes of drug screening.

HMP Greenock should ensure that all injuries noted during the admission process are recorded and the prisoner asked to explain how the injuries occurred.

HMP Greenock should ensure Prisoner Escort Record forms are passed to relevant function within the prison.

HMP Greenock should ensure that basic information about what will happen to them and the routines of the prison is given to prisoners on admission in a language they can understand.

HMP Greenock should ensure that prisoners in Chrisswell House are not subjected to any form of abuse from other prisoners.

HMP Greenock should ensure that all prisoners can access a shower on a daily basis.

HMP Greenock should ensure that all in-cell lavatories are enclosed so as to ensure privacy.

HMP Greenock should ensure that all showers operate effectively at the proper temperature and pressure.

HMP Greenock should ensure that all prisoners are provided with food which they can eat during the gap between the last meal served on Saturday and the first meal served on Sunday.

HMP Greenock should ensure written information regarding prisoners' legal rights and other relevant information is issued to prisoners on admission or transfer to HMP Greenock.

HMP Greenock should explore the low number of complaints made and the reasons behind this.

HMP Greenock should ensure that expected timescales for all the components of the Integrated Case Management process are met timeously so that it does not undermine potential outcomes.

HMP Greenock should ensure that prisoners' work and training opportunities are not unduly impacted on by staff absences.

HMP Greenock should ensure that they undertake an analysis of aggregated programme needs so that their programme delivery accurately reflects their populations' aggregated risk/needs profile.

HMP Greenock should ensure that they regularly review their populations' programme lists from the Prison Records System to provide assurance that prisoners resident at HM Greenock have equitable access to group work programmes.

HMP Greenock should ensure that Personal Officers are aware of the range of available programmes to make sure that referrals for Generic Programmes Assessments are made to Programme Facilitators for those individuals who may benefit from group work interventions.

HMP Greenock should ensure that the prisoners' library provides a wider range of textbooks and DVDs.

HMP Greenock should ensure that prisoners have increased access to the library.

HMP Greenock should ensure that all adverse development recommendations are processed at a fully attended multidisciplinary Risk Management Team meeting.

For the NHS

NHS Greater Glasgow and Clyde should ensure that all prisoners are medically assessed by a doctor within 24 hours of having been admitted from court.

NHS Greater Glasgow and Clyde should ensure that prisoners have access to routine dental appointments to ensure dental services are provided to the same standard as in the community.

NHS Greater Glasgow and Clyde should ensure that confidential information is appropriately managed.

NHS Greater Glasgow and Clyde should ensure that they develop an addictions strategy to guide the provision of addictions services within the prison.

Good Practice

An alcohol liaison nurse is employed within the healthcare team.

When prisoners are transferred out of HMP Greenock a transfer letter and the prisoners' medical records and prescriptions accompany them.

Catering staff provide a salad for those within Darroch Hall who are at Physical Training during the serving of the evening meal.

A local protocol has been developed with Healthcare staff to manage prisoners who an Officer believes may be under the influence of illicit substances.

Arrangements in place to transfer prisoners, if appropriate, for evaluation to a mental health setting.

NHS Greater Glasgow and Clyde have appointed a learning disability liaison nurse who works across all three SPS establishments in the health board area.

In the event of a prisoner being unexpectedly liberated from court there are processes in place to ensure that their community prescriber is aware of their current prescription for replacement therapy.

The Home Detention Curfew (HDC) scheme administrator sends an information pack from the organisation "Families Outside" to family members of potential HDC candidates.

HMP Kilmarnock

Follow-up Inspection 14-19 July 2014

Summary

The follow-up inspection of HMP Kilmarnock was carried out 33 months after the full inspection, which had taken place in October 2011. The purpose of this follow-up inspection in July 2014 was to assess the actions which had been taken to address the recommendations and to report on the progress made.

It is clear from our inspection that good progress has been made in the areas identified in the full inspection report. We assess that seven of the recommendations have been achieved and two partially achieved (with one no longer applicable). Of the Action Points, 25 have been achieved, five partially achieved and seven not achieved (with three no longer applicable). All 16 of the Areas of Good Practice are still in place. We have identified an additional six Areas of Good Practice and made 11 further recommendations.

A new Director of HMP Kilmarnock had been appointed in the three months before the follow-up inspection, following the retirement of his predecessor. It is still early days, but he has brought a fresh perspective to the leadership of the prison. In general, we observed good relationships between staff and prisoners. Most prisoners reported to us that they felt safe in HMP Kilmarnock.

A number of the recommendations from the full inspection related to healthcare issues. There is now a well-motivated and dedicated staff group providing healthcare of a good standard. The management of prisoners deemed to be at risk of self-harm is now delivered through the application of the ACT 2 Care strategy. The areas of the Health Centre formerly used for inpatient care have been decommissioned, but there remains a need to improve the medical facilities. The distribution of medication in the residential Wings should be reviewed, particularly at the weekends. There is scope to improve the communication and mutual understanding between HMP Kilmarnock and NHS Ayrshire and Arran to facilitate joint working in the prison.

Another area identified for improvement in the full inspection report related to education and purposeful activity. There are improvements in the delivery of education and vocational training, in terms of both quantity and quality of qualifications. The joint approach to planning has resulted in increased attendance in formal classes, as well as engagement in the residential Wings. Progress has been satisfactory against all the relevant recommendations. Improvements could still be made in reducing the number of prisoners who are deemed medically unfit for work.

Two initiatives in particular are worthy of highlighting. The “Email a prisoner” service allows prisoners to receive directly onto their kiosk an email to which they can respond. This encourages constructive links to be maintained with family members, particularly children. Secondly, HMP Kilmarnock has a secure payments facility which allows money to be paid electronically into a prisoner’s account, through an external processing company. This reduces the need for cash handling within the prison.

Overall, there were examples of good engagement with families, through family days and support from third sector organisations. The Family Contact Officers are active in their supporting of prisoners and their families.

Recommendations

For the Establishment

HMP Kilmarnock should undertake further analysis of the number of prisoners identified as being at risk to provide assurance of safe practice.

HMP Kilmarnock should consider delivering the report writing protocol to relevant staff and monitor its impact on the quality of reports produced thereafter.

HMP Kilmarnock should work to further reduce the time prisoners on admission spend in Reception.

HMP Kilmarnock should ensure that all prisoners have access to one hour in the open air every day.

HMP Kilmarnock should ensure that the process for supervising prisoners as outside exercise is safe at all times.

HMP Kilmarnock should review the processes associated with the high numbers of prisoners deemed medically unfit for work.

HMP Kilmarnock should ensure that there are opportunities for prisoners on protection to undertake vocational qualifications within production workshops.

HMP Kilmarnock (and NHS Ayrshire and Arran) should ensure that a Multi-disciplinary Mental Health Team meeting, chaired by a senior operational manager, meets every two weeks.

HMP Kilmarnock should ensure that visit entitlements between prisoners and their children are not related to the level attained in the Incentives and Earned Privileges Scheme.

For SPS

The SPS (and NHS) should engage in further debate in relation to the level and quality of dental treatment afforded to untried prisoners.

For NHS

NHS Ayrshire and Arran should ensure that all treatment rooms are fit for purpose and comply with all relevant standards and legislation.

(HMP Kilmarnock and) NHS Ayrshire and Arran should ensure that a Multi-disciplinary Mental Health Team meeting, chaired by a senior operational manager, meets every two weeks.

(The SPS and) NHS should engage in further debate in relation to the level and quality of dental treatment afforded to untried prisoners.

Good Practice

Literacy and numeracy outreach sessions delivered in the residential Wings are being successful in encouraging and supporting hard-to-reach prisoners to take the first steps towards developing these skills.

ACT 2 Care documentation reviewed and audited by senior management.

Use of standardised Pre-release Medical Referral Form by NHS Ayrshire and Arran.

Staff responsible for industries, learning and skills and PT make effective use of Offender Outcomes Group Meetings to plan and communicate activities and contribute to prison-wide initiatives, departmental and joint projects.

Health Champions organise a wide range of events to stimulate interest and participation in sports activities and includes coordinating promotion of health and wellbeing.

In addition to the core sessions, as part of the alcohol awareness and substance misuse courses, two reviews take place following completion at three monthly intervals and a further pre-release review is provided to enhance the impact of participation.

HMP Shotts

Follow-up Inspection

29 September-3 October 2014

Summary

HMP Shotts was subject to a full inspection by HM Inspectorate of Prisons for Scotland in March 2013. The resulting report contained 51 recommendations and identified eight Areas of Good Practice. The purpose of this follow-up inspection in September/October 2014 was to assess the actions which had been taken to address the recommendations and to report on the progress made.

In response to the full inspection report, HMP Shotts has achieved good progress in addressing over half of the recommendations. We assess that 31 of the recommendations have been achieved, seven partially achieved and 12 not achieved. All eight Areas of Good Practice have been maintained. We have identified an additional Area of Good Practice and made a further six recommendations.

Overall, we found HMP Shotts to be safe and secure. Prisoners reported that they felt safe, and we saw evidence of good relationships between staff and prisoners. Improvements had been made to the admission processes and safety procedures throughout the prison. The involvement of families is encouraged through the offer of Family Induction Sessions and the introduction of Family Awareness Days. While the provision of father and child visits is available, there are insufficient spaces for the level of demand and we recommend that this is reviewed.

We also noted improvements in the provision of education and learning opportunities. In particular, arrangements have been put in place to promote learning activities for prisoners and to involve them in the planning and evaluation of educational activities. Prisoners have the opportunity to be involved with the creative writing workshop which edits and produces the 'STIR' magazine, a creative arts publication for prisoners in the seven Scottish prisons which are supported by New College Lanarkshire. The magazine provides a focus for learning in prisons, develops prisoners' skills for release and supports rehabilitation.

An area of concern identified in the full inspection related to the provision of work available to prisoners through the Scottish Prison Service national contracts. This has not been addressed. There is still a lack of meaningful and productive work available for prisoners, which represents a lost opportunity for constructive activity for long-term prisoners. We were, however, impressed by the work done in the prison in support of local charities.

Two other recommendations for SPS from the full inspection related to the National Integration Centre and to the provision of training for Personal Officers. It is disappointing to note that SPS has not yet implemented these recommendations. The NIC has an important role to play in the induction and reintegration of long-term prisoners. We found dedicated and committed staff, who were keen to improve the impact of the NIC, but who were hampered by a lack of clarity of purpose and limited resources. We have again recommended that SPS review the purpose and role of the NIC. In relation to the provision of training for the role of Personal Officer, this is an outstanding recommendation from more than one previous inspection reports. We are aware that SPS is in the process of developing its people strategy for staff, which is intended to address this need for Personal Officer training.

The provision of health care is always an important aspect of prison life. We were pleased to see that the majority of recommendations in relation to health care have been achieved. In particular, there have been improvements in the referral processes and significant improvements in the provision of dental services, achieving a high level of consistency. In addition, we were impressed with the levels of health promotion throughout the prison. The HMP Shotts Health Improvement Group have developed and progressed a Health Improvement Strategy and have made good progress in delivering positive outcomes in its first year. Additionally, the provision of physiotherapy in the prison has improved, resulting in significantly reduced waiting lists. There remains an outstanding need to review the healthcare triage process for prisoners following referral requests.

HMP Shotts is a unique establishment with its high level of long-term and life sentence prisoners. In recent years, there has been a considerable turnover of staff at senior management level, which brings additional challenges. HMP Shotts has maintained all the Areas of Good Practice identified in the full inspection report and has made progress in addressing the recommendations.

For the Establishment

HMP Shotts should ensure that a member of staff trained in First Aid at Work is on duty at all times.

HMP Shotts should again consider and review the arrangements in place for family visits ensuring equitable access for families with children of all ages.

For the Scottish Prison Service

The Scottish Prison Service should ensure that the SPS Anti-Bullying Strategy is used within its establishments.

The Scottish Prison Service should review the purpose and role of the National Integration Centre.

The Scottish Prison Service should develop a Personal Officer training package.

The Scottish Prison Service should review the level of national contracts allocated to prisons in Scotland.

Good Practice

'STIR' magazine.

HMP Perth

Full Inspection 1-12 December 2014

Summary

Safety

Appropriate health and addiction assessments are undertaken on admission. However, the initial checks conducted are not comprehensive and support work is not always followed through.

Healthcare provision is not well advertised throughout the prison. Clinical dispensing rooms in the Houseblocks were in poor condition.

Staff trained in First Aid are not always on duty and not all staff covering patrol duties at the weekend are sufficiently well briefed.

Effective use is made of family involvement at reviews concerning vulnerable prisoners.

The prison is reasonably effective at dealing with violence but information sharing relating to this needs to be improved in order to provide a more integrated approach. Useful work has been initiated with prisoners to address violence against women.

Staff breaks during the middle of the day have an adverse impact on the prisoners' regime and improvements are required in the way cover for staff sickness is managed.

Relationships between staff and prisoners are positive and the approach towards security is proportionate.

Decency, Humanity and Respect for Legal Rights

Prisoners can wear some of their own clothing and the quality of kit issued is good. Prisoners spoken with were content with the laundry arrangements.

There is a well-run Visitors Centre and Inspectors were particularly impressed by the special visits for children. Valued work is also carried out by the Family Contact Officers. A number of prisoners spoken with however complained that visits at the weekend were too short and that it was not always easy to organise visits, as getting through to the booking line proved difficult.

Opportunities for Self-improvement and Access to Services and Activities

The personal officer scheme does not operate consistently and some prisoners have little understanding of how it works.

There is a good range of work parties which are over-subscribed but not all places are filled and more needs to be done to optimise attendance which is just over 70%.

Prisoners have good access to education and there is an emphasis on promoting opportunities to prisoners with the greatest need. The Learning Centre is closed on Friday afternoons which is not an efficient use of resources.

Offending behaviour programmes are delivered near to target, but in the absence of an overall needs analysis it is not clear if the needs of the population are being accurately met.

Weekly peer support has been introduced for prisoners with substance misuse problems. This is a positive initiative. Promising work is also being carried out by the Scottish Recovery Consortium for those recovering from alcohol and substance misuse problems.

The arrangements to ensure that prisoners who require Methadone on release are inconsistent and need to be improved.

Prisoners receive wide-ranging and effective pre-release support from specialist staff.

The arrangements for Multi-Agency Public Protection Arrangements (MAPPA) are good.

Recommendations

For the Establishment

HMP Perth should ensure dispensing rooms in all halls are cleaned to a consistently high standard.

HMP Perth (and NHS Tayside) should ensure dispensing rooms in all halls are fit for purpose.

HMP Perth should ensure that all officers undertaking patrol duties are issued with information relevant to their role.

HMP Perth should ensure that a member of staff trained in First Aid at Work is on duty at all times.

HMP Perth should ensure that the appropriate fire action notices are displayed within all cells.

HMP Perth should review the purpose and use of its Violence Reduction Strategy and ensure both staff and prisoners are aware of and know how to apply the process.

HMP Perth should review how the local Tactical Tasking Group formally links in with the prison's Violence Reduction Strategy.

HMP Perth should take appropriate action to ensure that all completed Prisoner Supervision System review forms are signed by the prisoner.

HMP Perth should ensure the population within 'B' Hall does not exceed the design capacity of 130.

HMP Perth should ensure prisoners have access to suitable jackets for use in inclement weather during periods of exercise.

HMP Perth should ensure that food trolleys are plugged in to the socket provided within the pantry area as soon as they arrive in the hall and that food is only moved to the servery just prior to serving.

HMP Perth should review the system for washing prisoners' cutlery.

HMP Perth should further develop its Children's Visits Scheme and review the session times available.

HMP Perth should review the duration of weekend visiting times.

HMP Perth should ensure that the role of the Personal Officer and who has responsibility for sentence planning is clearly defined.

HMP Perth should ensure opportunities for prisoners to attend the satellite gymnasiums are maximised.

HMP Perth should ensure that opportunities for prisoners to engage in purposeful activity are maximised.

HMP Perth should ensure that the prisoners' Wage Earnings Policy is clearly displayed in all work party areas within the prison

HMP Perth should ensure that offending behaviour interventions meet the needs of the prisoner population held within the prison.

HMP Perth should ensure that untried prisoners have access to the library services.

HMP Perth should ensure that adequate numbers of managers are trained to sign off risk assessments and liberations.

HMP Perth should ensure that appropriate prisoners are provided with information regarding progression.

For the Scottish Prison Service

The SPS should ensure that appropriate numbers of spaces are made available to those prisoners who require protection from others.

(SPS and) NHS should ensure healthcare records transfer at the same time as the prisoner.

For NHS Tayside

NHS Tayside should ensure that all prisoners, on admission are assessed and that baseline observations are carried out and properly recorded.

NHS Tayside should ensure that all prisoners returning to the prison from hospital are assessed by healthcare staff.

NHS Tayside should ensure that appropriate information is displayed within the prison in relation to access to and the service provided by health care.

HMP Perth and NHS Tayside should ensure dispensing rooms in all halls are fit for purpose.

NHS Tayside should ensure that healthcare referral forms are freely available within the residential halls.

NHS Tayside should ensure all prisoner medical referral form boxes are clearly and consistency labelled within each residential hall.

NHS Tayside and HMP Perth should ensure arrangements for the dispensing of medication does not impact disproportionality on the regime.

NHS Tayside should ensure that the pharmacy room is fit for purpose and there is an appropriate system of work in place.

NHS Tayside should ensure that controlled drugs are stored appropriately and staff are aware of their responsibilities in respect of these.

NHS Tayside in conjunction with HMP Perth should review the process for reporting absent for work through ill health.

NHS Tayside should ensure that the Health Centre is used efficiently.

(SPS and) NHS should ensure healthcare records transfer at the same time as the prisoner.

NHS Tayside should ensure that appropriate clinical information is relayed timeously to the prison-based health team with regard to any NHS health care delivered outwith the establishment.

NHS Tayside should ensure that it complies the Records Management: NHS Code of Practice 2012.

NHS Tayside should ensure that there is adequate provision of clinical psychology services.

NHS Tayside should ensure that where appropriate prisoners are referred and prescribed Methadone on release.

NHS Tayside should ensure that prisoners' community-based GPs are notified of their liberation, relevant health information and details of prescribed medication are provided as appropriate.

NHS Tayside should ensure that procedures used in relation to prisoners who do not conform to prescribed substitute medication arrangements are formally documented.

For Fife College

Fife College should ensure that the qualifications offered to prisoners allow for progression to more advanced, employability-related awards.

Good Practice

Database used to record the details of removals and the fact that digital memory cards detailing removals are retained in individual numbered, sealed bags in the Security Unit.

HMP Perth member of staff seconded to Barnado's Scotland (the lead partners for Thrive Public Social Partnership) who works both within the prison and in the community linking families with activities in their own community as well as practical support and advice.

Family Contact Officers (FCOs) speaking with every prisoner upon admission and during induction session to explain the role of the FCO and to answer any queries or concerns they may have in relation to maintaining contact with family members whilst in prison.

There is an opportunity for prisoners who are drug-free to attend an enhanced Physical Education session prior to going to work. Prisoners spoken with felt this was worthwhile and gained benefit from attending the session.

At the time of the inspection, HMP Perth was conducting a pilot of the use of substance misuse champions (including some ex-offenders) within the context of offending behaviour interventions. This is an innovative project and has encouraged links between local community substance misuse agencies and the prison, to allow offenders greater access to services.

A Recovery café has been implemented and runs each Friday.

NHS Tayside quality improvement focus on delivery of health care.

HMP Perth Pre Release Life Skills programme.

HMP Glenochil

Full Inspection 16-27 March 2015

The inspection of HMP Glenochil was the first to be conducted by HMIPS using the new Standards for Inspecting and Monitoring Prisons in Scotland, which were published in March 2015. These are available to download from our website www.prisoninspectorscotland.gov.uk. The result should be a clearer statement of the standard of the conditions in prison and the treatment of prisoners within HMP Glenochil. The report highlights areas of good practice and assesses each of the areas of prison life described in the ten standards, with their supporting quality indicators. These will identify areas which require attention and action for improvement.

HMP Glenochil has modern accommodation facilities, which have been built in the last five years. The prison receives adult male prisoners from other establishments in Scotland, rather than directly from court. The prison population has two distinct elements consisting of mainstream adult prisoners and those convicted of a sexual offence. For safety and security reasons, these two populations have to be kept separate, which presents a number of challenges and complexities for the operation of the prison. During the inspection it was clear that there was a level of speculation and uncertainty concerning the future constitution of the population at HMP Glenochil, with an expectation that that it may move to being exclusively for prisoners convicted of sexual offences. An early decision on the future population would be helpful for planning for the prison's future.

HMP Glenochil holds a significant number of prisoners subject to Orders for Lifelong Restriction. An area of good practice which we identified during the inspection related to the use of dedicated officers for managing such cases. Similarly, prisoners subject to Multi Agency Public Protection Arrangements were managed well by case managers. However, there is a significant waiting list for programme assessment and delivery, particularly for sex offenders, with resulting delays in progression to more open conditions.

The population at HMP Glenochil contains an increasing number of older men with disabilities and mobility restrictions. This will become a growing challenge for the Scottish Prison Service as it adjusts to an ageing prison population. The demanding needs for health and social care will require a new approach to provide these services. Local arrangements are in place to support prisoners in need of such care.

Inspection Findings

In relation to the 10 standards used to assess the outcomes for prisoners, five were assessed as *satisfactory*, four as *generally acceptable* and one as *unacceptable*.

The area of greatest concern relates to the risk assessment which is conducted before a decision is made to locate two prisoners in the same cell. It is vital that all the risk factors and vulnerabilities of a prisoner are assessed before any such decision is made. Inspectors found that this was not always the case, with key information not being passed to the relevant member of staff.

Overall, relationships between staff and prisoners were observed to be respectful and constructive. Staff balanced the need to maintain safety and security with respecting prisoners' rights. In particular, the assessment of the prison's approach to equality, dignity and respect was satisfactory.

The provision of health care was considered to be generally acceptable. We acknowledge the particular challenges which are present with an older prison population. A satisfactory range of health clinics and support services is available for prisoners, with care plans being developed where necessary. For infection control purposes, the standard of cleanliness and hygiene within the health centre is poor.

For most prisoners, maintaining contact with family is an important aspect of preparation for returning to the community. At HMP Glenochil, the arrangements for visits from family members and friends are good, in a spacious and well laid-out visits room. The gymnasium offers a good range of activities for prisoners of all ages. However, the availability of work and education opportunities is limited, with insufficient places for the size of the population.

In preparation for return to the community, satisfactory steps are in place to support this transition. Community Integration Plans work well for prisoners who are subject to statutory controls, but the process for non-statutory prisoners requires improvement.

The final standard which relates to organisational effectiveness was assessed as being generally acceptable. Improvements could be made to communications within the prison and to processes for staff recognition and reward.

Separation and Reintegration Units

Thematic Inspection February 2015

As noted in my overview we conducted the initial stages of a thematic inspection of the use of Separation and Reintegration Units in Scottish prisons in early 2015. In particular we are examining the impact on people of being held for long periods in segregation or isolation. We will report our findings later in 2015.

3. REVIEW OF THE PRISON INSPECTORATE'S YEAR 2014-15

Inspections

Inspections for the year were completed as follows.

Full Inspections

HMP Greenock	19-27 May 2014
HMP Perth	1-12 December 2014
HMP Glenochil	16-27 March 2015

Follow-up Inspections

HMP Kilmarnock	14-19 July 2014
HMP Shotts	29 September-3 October 2014

Thematic Inspection

Separation and Reintegration Units	Commenced February 2015
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Submission to the Scottish Parliament

The 2013-2014 Annual Report was laid before the Scottish Parliament June 2014.

HMIPS Staff – as at March 2015

David Strang, Chief Inspector

Caroline Johnston, Deputy Chief Inspector

Tony Martin, Inspector

Alan Forman, Business Manager

Dorothy Halliday, Executive Assistant

Additional assistance provided by Roger Houchin (standards) and Natalie Beal (independent prison monitoring)

Specialist and Associate/ Guest Inspectors

HMP Greenock

Dr John Bowditch, Education Inspector, Education Scotland

Peter Connelly, Education Inspector, Education Scotland

Gareth Marr, Healthcare Inspector, Healthcare Improvement Scotland

Ray Jones, Care Inspector

Gillian Walker, Guest Inspector

Naveel Saleemi, Guest Inspector

HMP Kilmarnock

Karen Corbett, Education Inspector, Education Scotland

David Thomson, Healthcare Inspector, Healthcare Improvement Scotland

Dawn Ashworth, Guest Inspector

HMP Shotts

Ralph Henderson, Guest Inspector

Dr John Bowditch, Education Inspector, Education Scotland

Ian Beach, Education Inspector, Education Scotland

David Thomson, Healthcare Inspector, Healthcare Improvement Scotland

Karen Malloch, Healthcare Inspector, Healthcare Improvement Scotland

HMP Perth

Clare Wilson, Care Inspectorate

Dr John Bowditch, Education Inspector, Education Scotland

Andrew Brawley, Education Inspector, Education Scotland

Jim Dowd, Guest Inspector

Angela Holmes, Guest Inspector

Karen Malloch, Healthcare Inspector, Healthcare Improvement Scotland

David Thomson, Healthcare Inspector, Healthcare Improvement Scotland

HMP Glenochil

Joan Lafferty, Care Inspectorate

Dr John Bowditch, Education Inspector, Education Scotland

Ian Beach, Education Inspector, Education Scotland

Stephan McAlpine, Guest Inspector

Brian McKirdy, Guest Inspector

William Sweeney, Guest Inspector

Pauline Macfarlane, Guest Inspector

Karen Malloch, Healthcare Inspector, Healthcare Improvement Scotland

Karina Hutchinson, Healthcare Inspector, Healthcare Improvement Scotland

Bruce Adamson, Scottish Human Rights Commission

Finance

The Inspectorate's costs for the year were as follows:

Staff costs*	£365,760
Subsistence and Motor Mileage	£4,414
Printing and Binding	£26,703
Travel and Accommodation	£8,773
Hospitality	£126
Conference Fees	£2,849
Other running costs	£10,045
Total	£418,670

* No employees earned in excess of £150,000. Staff costs also includes an early departure figure.

Freedom of Information

A total of four requests were received – all were responded to within the required timescale.

Communications

Recent reports can be found on our website
www.prisoninspectoratescotland.gov.uk.

Email: **alan.forman@gov.scot**

4. BUSINESS PLAN 2015-16

Purpose

The purpose of HM Inspectorate of Prisons for Scotland is to inspect the conditions in prisons and the treatment of prisoners, and to report publicly our findings. The Public Services Reform (Inspection and Monitoring of Prisons) (Scotland) Order 2015 comes into force on 31 August 2015 and from this date HM Chief Inspector of Prisons for Scotland assumes overall responsibility for the monitoring of prisons, which will be carried out on a day-to-day basis by independent prison monitors.

We inspect (and will monitor from 31 August 2015) against a set of published standards launched in March 2015, which can be found at www.prisoninspectoratescotland.gov.uk.

Values

Independence

The inspectorate is independent of both the Scottish Prison Service and the Scottish Government. This allows us to report our findings with integrity and impartiality.







Evidence-based

The information that we gather allows us to obtain a full picture of the prison. This enables us to ensure that our assessments are fair, balanced and accurate.

Standards

From the launch of the new standards in March 2015 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 on which the marking is based and a statement of the outcomes HMIPS wishes to see as a consequence.

Respect for human rights

The experience of those in prison lies at the heart of our inspection process.

Inspections

Our programme of regular inspections is informed by an assessment of risk and requirement. We will continue to conduct inspections but will no longer undertake follow-up inspections, instead our inspectors will visit prisons on a regular basis to check on developments.

Planned inspections for 2015-16 include HMP Dumfries, HMP Addiewell, HMP & YOI Cornton Vale, HMP & YOI Grampian and HMP Open Estate. We will conclude the thematic inspection of Separation and Reintegration Units and will commence a thematic inspection looking at prisoners with high care needs.

This programme is subject to amendment in response to developing need.

We will also conduct unannounced inspections as required.

Our inspection teams comprise HMIPS staff, those seconded from the Scottish Prison Service and HMIP (England and Wales) and subject experts from other organisations including inspectors from the Care Inspectorate, Education Scotland, Healthcare Improvement Scotland as well as staff from the Scottish Human Rights Commission.

Independent Prison Monitoring

Following a national recruitment campaign four new permanent members of staff will join the HMIPS to oversee monitoring. Independent Prison Monitors are currently being recruited via various methods including the Volunteer Scotland website. Induction, training and awareness sessions will be held for these volunteers. A new IT database is being developed to support the work of monitors. Their work and findings will form part of the HMIPS Annual Report for next year.

National Preventive Mechanism

HMIPS is one of 20 organisations that comprise the UK National Preventive Mechanism (NPM). All our 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). HMIPS is a member of the NPM Steering Group. During 2014-15 a Scottish NPM subgroup was established, comprising the six member organisations in Scotland. The most recent NPM Annual Report published in December 2014 is available at:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/392988/national-preventive-mechanism-annual-report-2013-14.pdf

Further Information

For further information about the HMIPS Business Plans for 2015-16 please contact:

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