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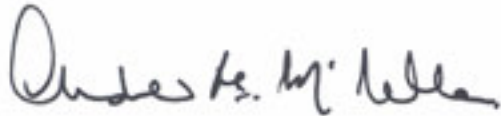
Report on HMP Greenock

**FULL INSPECTION
6-13 MAY 2009**

The Scottish Ministers

In accordance with my terms of reference as Chief Inspector of Prisons for Scotland, I forward a report of a full inspection carried out at HMP Greenock between 6-13 May 2009.

Three recommendations and a number of other points for action are made.

A handwritten signature in black ink, appearing to read "Andrew R C McLellan". The signature is written in a cursive, slightly slanted style.

ANDREW R C McLELLAN
HM Chief Inspector of Prisons

June 2009

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1. PREAMBLE

1.1 Greenock Prison keeps changing. Only a few months before this inspection I produced a report on the “experiment” of holding only convicted young men in Darroch Hall. That report found the experiment a resounding success: *the prisoners feel safe, relationships are first-class, food is very good and prisoners spend a useful day out of cell at work or in education.* By the time of this inspection, however, that success had been brought to an end and another use for Darroch Hall has been established. It now holds convicted women. Is there any clearer illustration of the difficult choices confronting the Scottish Prison Service as a result of overcrowding throughout the estate? Because they have to find more and more space for more and more prisoners, they are forced to bring to an end one of the bright lights of Scottish prisons.

1.2 In Greenock prison itself, however, prisoner numbers are not as high as they have been. This is, at least in part, because remand prisoners from Paisley are now held in Barlinnie. All overcrowding in Greenock is contained in one hall, Ailsa Hall. It is clear from this report (and from previous ones) that even a relatively small reduction in prisoner numbers in Ailsa Hall brings with it a significant improvement for prisoners and staff alike. The hall is quieter, more prisoners spend more time out of cell, staff are able to spend time with individual prisoners.

1.3 This is a good report. Many aspects of the prison have been commended in previous reports, and continue to be good. Prisoners are quick to identify the good relationships which exist between staff and prisoners; and all the evidence of this inspection confirms that they are right. Statistics show that the prison is safe, although the SPS anti-bullying strategy is not used. The food, which is eaten in dining rooms rather than in cells by nearly all prisoners, is good and is recognised as good by prisoners.

1.4 There is more that continues to be impressive. One part of the prison, Chrisswell House, holds long-term prisoners beginning their preparation for release. There are opportunities for some of them to take part in work placements in the community: these are very well organised and form a very useful part of training prisoners for life at the end of sentence. The Learning Centre provides a high standard of education. Laundry arrangements

throughout the prison work well, the canteen is of high quality, and addiction services are well developed.

1.5 One development in particular deserves comment. The First Night Centre has been established as a separate unit in Ailsa Hall. Arriving in prison can be very frightening: careful thought has been given to the needs of such prisoners. The report shows that the First Night Centre has “a clear focus on care and safety”. The benefits of these First Night Centres are clear wherever they are in use.

1.6 Although there is much to commend in Greenock Prison, there are also serious concerns. It is very disappointing that the living conditions criticised in previous reports are no better. Reflecting the comments made in the inspection report of 2005: the toilet arrangements in Ailsa Hall and Darroch Hall are not good. The toilets in the cells have a small screen which offers little privacy from other prisoners if the cells are being shared, and no privacy from staff looking into the cell or entering it. In a few cells the toilet is completely unscreened. There is no sharing in such cells: but there should not be an unscreened toilet in a room where a prisoner sleeps, and may eat and may be locked up for long periods of time during the day. The decoration in Ailsa Hall is poor.

1.7 As has been said, until recently the experience of young men under 21 years of age in Greenock was exceptionally good. Now it is exceptionally bad. The change of use of Darroch Hall means that these young men now live in Ailsa Hall, where their access to any kind of useful day is extremely limited. Indeed it is almost impossible for any prisoner to have access to a really useful day in Ailsa Hall because of the conflicting needs and demands of different groups of prisoners who cannot mix freely. Somehow Ailsa Hall is expected to make arrangements for at least six groups: adult lifers, adult long-termers, adult short-termers, convicted young offenders, young remands and adult remands. It is not surprising, but it is not acceptable, that prisoners on protection have access to almost nothing which could be described as a useful day. Prisoners in segregation live in poor conditions with a poor regime.

1.8 It was repeatedly said during inspection that the change of use of Darroch Hall from young men to women had happened very quickly. There are some good early signs mentioned in the report for the future of women in Greenock: but surely it does not take

months of preparation to find clothing suitable for women? It is unacceptable that women should be required to wear clothing bought for young men. Inspectors were assured that underwear provided for men and women alike when required was new underwear: but none could be found when inspectors asked to see it.

1.9 Report after report has suggested that sex offenders receive the least good preparation for release. There are a small number of sex offenders in Chrisswell House, and the preparation for release of these prisoners is poor. A particular frustration for all categories of prisoner in Chrisswell House is to do with escort arrangements. It does seem odd that those who take part in unsupervised work projects in the community must be handcuffed to be taken to hospital.

1.10 The report describes the conditions and treatment of prisoners under escort to certain courts. The conditions in which prisoners are held at Oban Sheriff Court are dreadful.

2. CONDITIONS

Outcome

Prisoners are held in conditions that provide the basic necessities of life and health, including adequate air, light, water, exercise in the fresh air, food, bedding and clothing.

2.1 Living conditions in Ailsa and Darroch Halls are not good: cells are cold and feel damp, and toilets in cells are only partially enclosed or not enclosed at all. Living conditions in Chrisswell House are good. The food and the arrangements for washing clothes are good. Prisoners receive good access to exercise in the open air if they want it.

Population

2.2 Greenock prison is a 'local' or 'community facing' prison. It serves courts in the West of Scotland by holding male prisoners and young offenders on remand, and short-term convicted prisoners. It also provides a national facility for selected prisoners serving long sentences to prepare for release. A hall for female prisoners was opened in March 2009.

2.3 The prison has a design capacity of 255. On the 17th of April it held 249 prisoners. This figure comprised 52 untried adult males, 21 untried young offenders, 129 convicted adult males, 16 convicted male young offenders, five recalled life prisoners and 26 convicted females.

Accommodation Areas

2.4 Greenock has three residential halls and a small segregation unit.

Ailsa Hall

2.5 Ailsa Hall provides accommodation for adult prisoners serving life, long-term and short term sentences and adults on remand. It also houses young offenders and young people on remand. The hall also holds prisoners on protection, including sex offenders.

2.6 Ailsa Hall is always overcrowded and has the largest throughput of prisoners in the prison. The standard of accommodation is poor. There are 113 double and 17 single cells.

2.7 The hall is divided into four floors, with the bottom floor sub divided to create a section for prisoners on admission. There is one disabled cell and two anti-ligature cells. The anti-ligature cells do not contain SPS approved furniture, or enclosed toilets. This bottom floor also contains a two and a three bed observation area and a classroom for groupwork sessions. A nurse dispensary/triage clinical area is well maintained but underused.

2.8 The hall is clean but in need of decoration. Cells, particularly those on the ground floor including the observation areas, feel cold and damp, and there is a musty smell in some of them. The standard of bedding, mattresses and pillows on the ground and first floor is poor: some are stained or torn, curtains are rags (some held up with cutlery) and some foam mattresses have chunks missing. Prisoners do not have access to a lockable cabinet in their cells.

2.9 Double cells have bunk beds with a partially screened toilet area. The toilet areas in the single cells are not screened. In a small number of cells (seven), there are no ladders to allow easy access to top bunks.

2.10 There are five telephones in the hall and two in the recreation area. All meals, with the exception of those for prisoners on protection, are eaten in the dining hall. Prisoners on protection should have the opportunity to dine out of cell. Pool tables are available for recreation. Protection prisoners do not get access to this area.

2.11 Exercise in the open air is available daily for those who want it. No wet weather clothing is available.

Darroch Hall

2.12 Darroch Hall has held female prisoners since March 2009. There are 54 single and double cells on two floors, including one disabled cell (which was being used as a store cupboard). A safer cell is being created. All cells have toilets. Double cells have waist height partial screening, but there is no screening in single cells. Cells at the back of the hall

on both floors felt damp and cold, and had a musty smell. Bedding, mattresses and curtains are satisfactory. Pillows should be replaced.

2.13 The hall is bright and clean. Shower areas on both floors are clean and functional. There is a small central seating area on the ground floor where prisoners have access to a wall mounted television. There are two telephones, although instructions were missing or torn. All meals are eaten in the cafeteria next to the hall.

2.14 A pool table and table football are available during recreation. Prisoners expressed frustration that there is “no cell association” during recreation.

2.15 Exercise in the open air is available daily, but no wet weather clothing is available.

Chrisswell House

2.16 Chrisswell House provides a national “top end” facility for prisoners serving four years or over who are preparing for transfer to the Open Estate. At the time of inspection it also held a small number of short-term prisoners in an attempt to ease the pressures of overcrowding in Ailsa Hall.

2.17 There are 64 single cells, on two floors. Due to a lack of light, the bottom floor is much gloomier than the first floor. Prisoners have a key to their own cell door but grille gates separate the hall into two sections at night. Cells do not have toilets. Toilet and shower areas are situated in each section and can be accessed at any time. These are clean and functional. Each section has a telephone. Mattresses and bedding are satisfactory. Some pillows should be replaced. Each section has access to a central seated area: furniture in these areas is showing signs of wear and tear. Cells are clean and tidy and well looked after.

2.18 Meals are served in the cafeteria adjacent to Darroch Hall. A microwave oven is also provided and prisoners can access cereal and bread outwith organised meal times. Fruit which was previously readily available is no longer provided.

2.19 There are two Astroturf football pitches at the front of Chrisswell House which are used by all prisoners, but can also be accessed by long-term prisoners in the evening.

Segregation Unit

2.20 The segregation unit is an annex of Ailsa Hall. There are four cells, one of which is out of use because there is no in-cell toilet. An ablutions area has a toilet, shower, urinal and wash hand basin. The communal areas are clean. Three of the cells have a stainless steel unenclosed toilet and two have a wash hand basin. Prisoners eat their food in their cells. Toilets should be enclosed and prisoners should have access to hand washing facilities, especially after using the toilet.

2.21 Each cell has a bed secured to a raised concrete plinth. There is no electric power in the cells. A small enclosed exercise yard is available for time in the fresh air. During the inspection the yard was strewn with litter. A regular cleaning programme for the yard should be implemented.

2.22 On the first day of inspection there was one prisoner held. The regime is extremely basic, offering time in the fresh air, a shower, meals and family contact via telephone and visits. Access to PT is available if requested but there was no evidence that a prisoner is made aware of all the regime opportunities.

Catering

2.23 The fabric of the kitchen is now relatively old, although it is clean and many of the appliances are new. No qualifications are available to the prisoners working there.

2.24 The menu works on a three weekly cycle and there are three choices at each meal. A healthy option is always available and medical and religious diets are met. A food focus group is in place. Management regularly visit the kitchen and taste the food.

2.25 The timing of meals Monday to Friday is appropriate, although the evening meal at weekends is served between 16.00 hrs and 17.00 hrs depending on hall. This means that there is a large gap between this meal and breakfast/brunch the following day. Consideration should be given to issuing a snack pack on Friday and Saturday evenings.

2.26 The quality of the food is excellent. This is also enhanced by the fact that prisoners from Chrisswell and Darroch eat in a cafeteria (at separate times) which is linked to the kitchen. The food has only a very short journey, in heated trolleys, to the dining hall in Ailsa. Dining in Greenock is a very pleasant experience.

Canteen

2.27 The arrangements for prisoners' canteen is "bag and tag". The stock room has a good range of items and prices are fair. No items of stock checked were outwith the "Best Before" date.

2.28 All prisoners have good access to the canteen. Orders are passed to prisoners on the same day that the requests are made.

2.29 Prisoners also have the opportunity to buy a selected range of items through sundry purchases. These include greetings cards, fruit and cultural items.

2.30 Overall, the canteen is busy and purposeful and offers an excellent service to prisoners.

Clothing and Laundry

2.31 The laundry employs eight female prisoners. No qualifications were being offered at the time of inspection. The facility itself is showing signs of wear and tear although new tumble driers have recently been installed.

2.32 Prisoners in Chrisswell and Darroch can have their clothes washed every day if they wish. Prisoners in Ailsa have access once a week. Clothes are received in the laundry in the morning and are returned to the prisoner later that day. The laundry provides a good service to prisoners.

2.33 Prison issue underwear is new, although none could be found during the inspection. Prison issue kit is clean and of a good standard. There is no prison issue kit specifically for female prisoners, many of whom were wearing the clothes previously supplied to the young male offenders in Darroch Hall.

3. SAFETY

Outcome

Appropriate steps are taken to ensure that individual prisoners are protected from harm by themselves and others.

3.1 The prison actively tries to ensure the safety of prisoners: both from self-harm and harm from other prisoners. The prison is safe and although the SPS anti-bullying strategy is not used, bullying does not appear to be a problem.

Escapes, Absconds and Physical Security

3.2 There have been no escapes since the last full inspection. No prisoners have absconded in the past two years. The prison is protected by a perimeter wall with an inner fence offering further protection to the residential areas.

3.3 CCTV cameras cover the perimeter and a range of internal locations including the halls.

Violence

3.4 Prisoners regularly reported feeling safe. In 2007-08 there were 29 minor prisoner-on-prisoner assaults and two minor prisoner-on-staff assaults. In the same period there were three serious prisoner-on-prisoner assaults. In 2008-09 there were 38 minor prisoner-on-prisoner assaults, two minor prisoner-on-staff assaults and two serious prisoner-on-prisoner assaults. The increase in minor prisoner-on-prisoner assaults in 2008-09 coincided with a slight decrease in the average daily population.

3.5 There is no on-site police liaison officer but the security analyst is in regular contact with police in Paisley and Greenock to share information which allows prison management to take preventive action.

3.6 There is a robust process of post incident review designed to reduce the opportunity for a repeat incident.

3.7 Planned control and restraint removals are not videoed but all prisoners subject to the procedure are examined immediately by a nurse.

Supervision Levels

3.8 The system of allocating and reviewing supervision levels is managed by a Residential Unit Manager.

3.9 The process for the initial level starts in reception. Reviews are initiated monthly via the computerised prisoner records system. The review board consists of an officer and a first line manager from the hall where the prisoner lives. Prisoners do not make representation prior to the review board, nor do they attend the review. They receive information on the outcome and sign to confirm this. Consideration should be given to allowing prisoners to make representation to their supervision review.

3.10 Female prisoners have their initial supervision level set at Cornton Vale and are reviewed every six months. Short-term prisoners in Ailsa Hall are also reviewed every six months. Long-term prisoners in Chrisswell House, all of whom are low supervision, have annual reviews.

3.11 Examination of paperwork and the computerised prisoner record system confirms that reviews occur within timescales.

Escort Handover Procedures

3.12 Due to the location of some courts Greenock prison has procedures in place to unlock prisoners early to accommodate their transfer to court. Some prisoners are uplifted before 07.00hrs and have a journey of more than two hours.

3.13 Prisoners who are due to leave the prison early for court are given cereal and a roll before lock up on the previous night. Milk is not available to accompany this. Medication is not given to prisoners prior to going to court.

3.14 Most of the vehicles inspected were clean. All vehicles transporting females had hygiene packs available. Most vehicles did not have water available: including those serving the distant courts. All vehicles should carry water.

3.15 Prisoners travelling a long distance to courts at Oban and Campbelltown are not allowed reading material. The policy of not allowing personal items on vehicles, especially for long journeys, should be reviewed.

3.16 The information contained in the Personal Escort Report is good. All prisoners also reported being treated well by escort staff. No prisoner had heard a safety message prior to the commencement of a journey. This message itself gives very little detail and merely says staff will assist in the event of an accident. The content of the safety message should be reviewed, and presented in a manner which prisoners can hear and understand.

3.17 Prisoners on special escorted leave are not hand-cuffed outside the prison. When these prisoners or prisoners on unsupervised community placements are escorted to hospital appointments or funerals they are routinely handcuffed. The restraining of prisoners on escort should be commensurate with the risk posed.

Reception

3.18 The reception is a purpose built area. There are four cubicles, two of which are used as storage areas. The other two are used only if there is a prisoner in the area who needs to be separated from the other prisoners for safety reasons. They are very rarely used and prisoners would only be held there for a very short period of time.

3.19 The reception has two communal holding rooms, one for prisoners who have just arrived and the other for when they have been searched and are waiting for their healthcare interview. There is also a room where interviews can take place in private.

3.20 The health centre is adjacent to the reception so the healthcare assessment is conducted in the health centre. This is an area of **good practice**.

3.21 There is a toilet and a shower in reception and all new male admissions are given a shower before moving to the residential area. Prisoners' property is stored in a secure room. The staff office has secure cabinets for valuable property and a safe for holding cash overnight. Senior managers conduct regular property checks on a rota basis. This is an area of **good practice**.

3.22 The reception area is clean and fresh.

Admission Procedures

3.23 When prisoners are first admitted and identified they are placed in the admission waiting area. They are offered a cup of tea in reception and a hot meal in the hall. Enough food is left in the hall dining area to meet the needs of all new admissions.

3.24 All admissions are given a strip search, which is carried out appropriately and allows for the maintenance of dignity. All prisoners are then given a shower and taken into an interview room where personal details are entered on to the computer. The cell sharing and suicide risk assessments take place in private. Property and cash are opened and checked in the presence of the prisoner. All prisoners are allowed to retain their own clothing. Inspectors were told that prisoners could, if they wish, have new underwear and socks. They had to request this and none were available during the inspection. Each new prisoner is given a small amount of money for their telephone account. There is a prisoner telephone available in the reception but it does not have a privacy hood.

3.25 Female prisoners are admitted from Cornton Vale and the prison can control admission times. This allows staff to clear the reception of male prisoners. When females have been identified and personal belongings checked they are immediately taken to the hall where the reception process is completed. The healthcare interview is undertaken in the health centre.

3.26 The admission procedures are an area of **good practice**.

First Night Centre

3.27 All new male admissions from court are located in the First Night Centre (FNC) in Ailsa Hall. The area is separated from the rest of the hall by grille gates. There are fourteen cells which include a two and a three bed unit which are used specifically to support vulnerable individuals and are designed for easy supervision from the staff office.

3.28 Prisoners receive first night information. A lot of information is given at this time and may lead to information overload. The amount of information provided on the first night should be reviewed.

3.29 Listeners are deployed in the FNC and meet formally and informally with new prisoners. During the night patrol staff conduct extra checks on all prisoners in the FNC. All prisoners are given an admission kit which meets their needs. A full set of bedding is also provided. The rooms are cleaned by a work party the following day, when the cells are vacated.

3.30 Any new prisoner who is a smoker and has no tobacco is given a small supply of smoking material until he can access the canteen. Prisoners see the doctor and are listed for the National Induction Programme prior to moving to a more permanent location the following day.

3.31 The First Night Centre in Ailsa Hall is an area of **good practice** with a clear focus on care and safety.

3.32 New female prisoners in Darroch Hall are not located in a dedicated area but nonetheless there is a clear focus on support and assistance to allow them to settle into their new regime.

Induction

3.33 All new male prisoners are located in the FNC in Ailsa Hall. First night information is provided to all admissions. Within 72 hours all male admissions are given the national

induction programme. If any prisoner returns to the establishment within six months of liberation attendance at the full induction is optional.

3.34 Female prisoners get first night and a local induction in Darroch Hall. The national induction programme is provided at Cornton Vale.

Suicide Risk Management

3.35 There were two deaths in custody in 2007-08. An average of fifteen new cases are opened each month. Staff are regularly trained in the process to ensure their core competency is maintained.

3.36 The paperwork indicates a strong focus on person centred care plans. Most high risk prisoners are managed in the two or three bed units. This is an area of **good practice**.

3.37 The local Suicide Risk Management Group (SRMG) now meets every two months. It had seemed to lose its way early in 2008 with no meeting for seven months. Minutes show a broad range of attendees, including Samaritans and Listeners. There is no evidence from the individual case paperwork or SRMG minutes that the chaplains regularly support prisoners on ACT2care on a one-to-one basis.

3.38 Families rarely attend case conferences. Notices informing families of the importance of sharing any concerns they have about individuals are available in the visit area.

3.39 There are two safer cells in Ailsa Hall, but these do not meet the current SPS Standards. The cells are rarely used.

3.40 There is no safer cell in Darroch Hall. Inspectors were informed that finance has now been made available to convert a cell in Darroch to SPS safer cell standard. Until that conversion is made, if a safer cell is required the prisoner is transferred back to Cornton Vale.

3.41 Case conferences always meet the minimum requirement for attendance and a mental health nurse is in regular attendance.

3.42 A Listener scheme operates in the prison. At the time of inspection there were three Listeners. They reported that they were well supported by Samaritans and staff to carry out their role. There are no Listeners available for female prisoners.

3.43 A strong link exists between the work of the Multi-Disciplinary Mental Health Team and the support available for prisoners vulnerable to self harm or suicidal behaviour. There is a positive and caring culture in Greenock.

Risk Management

3.44 There is a commitment to the assessment and management of risk in relation to prisoners in transition to open or community placement conditions. The Risk Management Group (RMG) meets monthly, and is chaired by the Deputy Governor. The meetings are attended by the Interventions Manager, the Parole Co-ordinator; hall and unit managers; and social work and psychology staff. Minutes and pro-formas support the process. Input to the meetings comes from Community Access Risk Assessments (CARAs) completed by a range of staff and partners in the prison. Prisoners can attend the meetings and have their views recorded; minutes are copied to the prisoners. The outcome of the meetings is a recommendation and action plan about whether or not to transfer to the Open Estate, or a top-end.

3.45 It is difficult to distinguish the operation and content of the RMG process from the ICM process.

Night Duty

3.46 There are comprehensive night shift instructions available for all posts although some of the material such as suicide risk management is outdated. Information on the current suicide risk management policy should be in the folder.

3.47 The first line manager is first aid trained. The majority of staff are permanent on night shift and the remainder carry out night duty in a rotational basis. This gives a good balance of experience and knowledge during the night.

3.48 One of the residential areas does not have an onsite patrol during the night. The safety procedures and checks are comprehensive and adequate to ensure the safety of all.

4. RESPECT

Outcomes

Prisoners are treated with respect by prison staff.

4.1 Relationships between staff and prisoners are very good.

Prisoners are treated with respect for their dignity while being escorted to and from prison, in prison and while under escort in any location.

4.2 Prisoners are well treated by escort staff. The conditions in Dumbarton Sheriff Court are very good. The conditions in Greenock Sheriff Court are good. The conditions in Oban Sheriff Court are dreadful.

Relationships

4.3 Relationships between staff and prisoners are good. First name terms are generally used with the exception of Ailsa Hall, where officers were regularly heard to shout out the prisoner's surname.

Oban Sheriff Court

4.4 On the day of inspection three prisoners from Greenock were in attendance. Their journey started at approximately 06.30hrs and they arrived at the court at 09.10hrs. The escort vehicle was parked in an unsecured small yard between the court and police station buildings.

4.5 Following a lengthy and uncomfortable journey the prisoners were required to wait in the escort vehicle as there are no holding cells in the court and the police do not allow use of the cells in the police station despite them being designated "Legalised Cells"¹. In addition to

¹ Legalised Police Cells are cells in Police Stations which are not near to prisons. These cells have been "legalised" and prisoners (as opposed to those taken into custody by the police) can be detained in these cells for a period of up to 30 days.

the three prisoners from Greenock the escort staff had to take on to the vehicle two custodies, one male and one female, from the police cells. Four males and one female were being held in a six cell vehicle.

4.6 When prisoners require the toilet they have to be escorted into the police station. The toilet is located in a small holding cell. There is a door on the cell but no door on the toilet, which is used for both male and female prisoners. Prisoners can only be escorted to the toilet when there are enough staff available and they are not on duty in the court. On the day of inspection the toilet had not been cleaned and a sanitary towel was lying on the toilet floor. This is unacceptable.

4.7 If a legal representative wishes to speak to a prisoner this might happen in a small room in the police station, or in the jury room in the court. However, it will often happen in the vehicle, depending on demand and staff availability. When the interview happens in the vehicle, staff and other prisoners are able to hear a conversation which should take place in private.

4.8 It is not unusual for a prisoner to leave Greenock Prison at 06.30hrs and still be in the vehicle at the court at 15.00hrs. There is no way of controlling the temperature and meals have to be eaten in the small cubicle in the vehicle. **It is recommended that the conditions for holding prisoners at Oban Sheriff Court are improved immediately.**

Dumbarton Sheriff Court

4.9 There are six cells in Dumbarton Sheriff Court which allow for the separation of different groups of prisoners. Toilets are outwith the cells and are clean. There are adequate facilities for legal interviews. The area was clean and prisoners reported being well cared for by escort staff.

Greenock Sheriff Court

4.10 The seven holding cells allow for effective prisoner separation. There was some graffiti in the cells but the area was generally clean. A male and a female toilet are located in

the area. The toilets have no hand drying facilities. There are four interview rooms for legal visits.

Equality and Diversity

4.11 At the time of the inspection there were eight Black and Ethnic Minority (BEM) prisoners being held in the prison. Two of these were unable to speak English. On reception to the prison the telephone interpreting service is used to assist in the completion of the admission procedures and risk assessments.

4.12 A Unit Manager or Equality and Diversity Officer will meet with the prisoner within 24 hours. Advice is given on what will be made available to meet specific religious, cultural and dietary needs. A range of information regarding the individual is recorded and reviewed on a monthly basis. The monitoring form records whether or not a Consular Official has been requested

4.13 Prison management are proactive in quickly moving on prisoners whose sentences expire but who have an IS91 warrant which allows them to be detained pending the completion of detention procedures. At the time of inspection no prisoners were held on IS91 warrants².

4.14 Interpreters are used regularly to assist with case conferences. Staff also have access to a website which will interpret day-to-day phrases to allow basic routines to continue and needs to be met.

4.15 The national induction programme is available in eight main languages but this is only useful if the individual is able to read. Consideration should be given to making audio or video induction interpretation available. Prison management liaises with the library at Barlinnie Prison to borrow books and magazines in foreign languages.

4.16 At the time of the inspection six prisoners were registered as disabled. None had a disability which seriously impeded their mobility. There is disabled access cell in each hall.

² An IS91 warrant is able to detain an individual pending the completion of deportation procedures.

The cell in Ailsa has a built in shower, the other two have disabled access showers in adjacent ablutions areas.

4.17 There is a loop system in the reception and visits areas to assist the hearing impaired. Impact assessments have been carried out on a range of prison policies. Chrisswell House has a peer support system to assist disabled prisoners evacuate in an emergency.

4.18 There is an appropriate focus on Equality and Diversity issues and procedures within the prison.

Searching

4.19 All prisoners are given a rub-down search by an officer of the same gender prior to moving locations. New prisoners admitted to reception are subject to a strip search. Strip searches are carried out randomly following a visit and target searches are intelligence led.

4.20 All searches observed were conducted thoroughly, and with good communication between staff and prisoners. Strip searches are conducted in a manner which maintains dignity.

5. CONTACT

Outcome

Good contact with family and friends is maintained.

5.1 The visits room is spacious and bright and has a good café and children's play area. Prisoners can receive more than their visits entitlement. All visitors spoken to said that staff were extremely helpful and friendly. Information for visitors is readily available; there are sufficient telephones available to prisoners; and prisoners can send as many letters as they can afford.

Family Contact

5.2 Arrangements for maintaining family contact are good. All prisoners receive their visits entitlement and effort is made to provide more than this if possible. Visitors book the visits, and although there are sometimes delays in answering the telephone the system appears to work well and is popular with visitors.

5.3 Efforts have been made to introduce family awareness/induction sessions but take up has been low. The 'Storybook Dads' initiative was also suspended at the time of inspection. Staff were looking at the possibility of introducing father-child bonding visits. Information for visitors is readily available, and a comments box is on display in the waiting area.

5.4 There are six Family Contact Development Officers (FCDO) in post. These tasks are carried out in conjunction with other duties. The FCDOs have an office but it is now rarely used.

5.5 All visitors spoken to said that staff were extremely helpful and friendly, and that they would have no hesitation in asking staff for advice or help. On the day of inspection inspectors observed a family difficulty being handled in a very sensitive manner.

The Visits Room

5.6 The visits room is bright and spacious. The tables are spaced to allow a certain amount of privacy and supervision by staff is not obtrusive. There is a large play area for children, which is staffed every Friday, Saturday and Sunday. A very good café is open during visit sessions. This sells a range of hot and cold food and drinks.

Information

5.7 Information for visitors is readily available in the waiting area. Family Contact Development Officers are on hand to offer advice if required. Visitors said that they would also approach gate staff if they needed any advice.

Communications

5.8 There are sufficient telephones in the residential areas. Prisoners can send as many letters as they can afford.

Searching

5.9 Visitors walk through a portal on their way to the visits room. If the machine detects a potential metallic object the visitor is then electronically searched with a wand. If this indicates a positive result the visitor is given an outer body search.

6. ENTITLEMENTS

Outcome

Prisoners' entitlements are accorded them in all circumstances without their facing difficulty.

6.1 Complaint forms are readily available in the halls and disciplinary procedures are fair and open. The regime in the segregation unit is poor, although the unit is rarely used.

Legal Entitlements

6.2 Prison Rules are readily available in the halls. However there are no legal text books. Prisoners should have access to legal text books, and a copy of the Prison Rules should be available in the Library.

6.3 Prisoners voiced frustration that telephone numbers were only updated on the Pre Arranged Number system once a month. They felt that this caused friction due to a lack of contact with Solicitors and family members.

6.4 Privileged mail is handled appropriately.

Management of Disciplinary Procedures

6.5 Disciplinary hearings are held in offices in Ailsa and Darroch Halls. Adjudications ensure that there is an appropriate balance between formality and prisoners being given ample opportunity to reply to charges and state their case. All senior managers adjudicate at hearings on a rota basis.

6.6 Paperwork is issued within timescales. There is a very effective monitoring process which shows 7% of cases are found not guilty. The monitoring also shows some gaps in the completion of the hearing paperwork and guides managers to where improvements are required. Awards are generally appropriate to the offence.

Religious Observance

6.7 The chaplaincy team comprises three part-time chaplains. Together they provide 36 hours of input to the prison each week.

6.8 Services are held at different times on Sundays and Mondays to cater for all of the prisoners held in the prison. The chaplains have experienced difficulty in getting Chrisswell and Ailsa prisoners to attend services, although they often ask the chaplains for advice. The number of female prisoners attending services is relatively high. The Prison Fellowship holds a service every Wednesday and Friday evening.

6.9 The chaplains try to visit all admissions to the prison although finding space to talk to them in private is difficult and often has to be done in the prisoner's cell.

6.10 The team is a member of the Multidisciplinary Mental Health Team. They also organise other events such as 'Alpha' and 'Christianity Explored'.

6.11 Overall, the chaplaincy team feel well supported by management, but could do more to integrate into the life of the prison.

Visiting Committee

6.12 The Visiting Committee feels supported and listened to by senior management. The Committee feels that the prison is consistently required to change regimes and it appeared to them that staff were 'victims of their own success' at changing rapidly over the last years in dealing with adults, young offenders and women, and were not able to get time to stabilise a regime. These rapid changes are also extremely unsettling for prisoners.

6.13 The Committee feels that the prison is safe, that the catering is very good, and that sex offenders in Chrisswell House have poor access to testing in the community. The turnover of healthcare staff, and levels of overcrowding and the complexity of the regime in Ailsa Hall are of concern.

Prisoner Complaints Procedure

6.14 Complaint forms are easily accessed in all residential areas. Although there was evidence on PR2 that the complaints process progressed in a timely manner it was difficult to ascertain the type of response given to prisoners (with the exception of healthcare complaints) as no photocopies are kept whilst the complaint is ongoing or on completion.

6.15 Internal Complaint Committee meetings occur at regular intervals. Recorded outcomes of these meetings could not be located in files.

Management of Segregation

6.16 There are no staff dedicated to the segregation unit. Staff from Ailsa Hall monitor the prisoners in the unit in addition to their normal hall duties. The segregation cell call system is linked back to Ailsa Hall. The regime is extremely basic.

6.17 Records indicate that all prisoners in segregation are held under appropriate authority. The records also indicate that prisoners are only held there for a short period of time. If a prisoner requires to be held out of normal circulation for an extended period he will be relocated to Ailsa Hall or transferred to another establishment.

7. ACTIVITIES

Outcome

Prisoners take part in activities that educate, develop skills and personal qualities and prepare them for life outside prison.

7.1 Learning, Skills and Employability provision is good, and educational programmes are effectively promoted. However, prisoners in Ailsa Hall have limited access to activities.

Context

7.2 Motherwell College holds the contract to deliver education within the prison and educational activities are managed by the learning centre manager. All new prisoners, including female prisoners and those on remand, have access to a good range of education programmes which covers basic skills in literacy, IT and numeracy as well as programmes in art and crafts and radio production. Staff deliver programmes within the learning centre and in one of the halls. Staff also work well with outside agencies to deliver a literacy programme for offenders and a physical education programme for learners with additional support needs from the local community.

Access to Learning, Skills and Employability

7.3 Educational programmes are effectively promoted through the offender induction programme or follow-up visits to the residential wings by learning centre staff. Programmes in education and vocational training are also promoted on notice boards throughout the prison. Participation in vocational programmes relies on prisoners applying for programmes after reading the promotional literature.

7.4 Prisoners attending vocational programmes in painting and decorating and work parties in construction are not released to attend education classes in the learning centre. However, a staff member from the learning centre delivers a contextualised unit focusing on literacy and numeracy in the painting and decorating workshop one afternoon each week.

Evening classes in IT, art and crafts, offered on two evenings per week, have recently been discontinued.

7.5 There is a narrow range of certificated programmes within the vocational training area. Prisoners undertake units from the Scottish Progression Award (SPA) in Painting and Decorating and the SPA in Cosmetology (the study and application of beauty treatments) but cannot gain the full awards as the prison is not approved to deliver all of the units in the programmes. Work party activities in the kitchen and the joinery production workshop do not offer certificated programmes. The laundry has approval to offer the SVQ level II in Laundry services programme, and although plans are in place to offer it in the future, this is not offered at the present time.

7.6 Chrisswell House prisoners have the opportunity to participate in a limited number of community placements. The prison is planning to expand the range and type of placements available in the near future.

Assessment of Need

7.7 Staff use nationally recognised tools to assess the needs of prisoners. In addition, staff from the learning centre are involved in the induction programme for all new prisoners and supplement this, for those wishing to participate in programmes, with a learning centre assessment which fully evaluates learners educational needs. Staff are able to organise learning for participants around appropriate programmes and levels.

7.8 Staff from vocational training interview all applicants and try to match them with appropriate work and training based upon their interests and prior experience.

Delivery of Learning

7.9 Staff in the learning centre take account of prisoner learning requirements and support them well on their programmes. Staff are able to work with participants in small groups or on a one-to-one basis which helps to facilitate learning, particularly for those with a poor experience of education in the past. Individual learning plans are used to track learner achievements.

7.10 Staff in vocational training demonstrate practical activities to prisoners and are on hand to explain and expand on questions during these activities. Prisoners work well in teams and in many cases act as mentors to other learners.

7.11 Approximately 60% of prisoners engage in physical activity and the gym is in use for around 70 to 80% of the week. However, there is no opportunity for prisoners to be released from vocational work parties to attend the gym.

Prisoners' Learning Experiences

7.12 There has been a significant reduction in the number of prisoner learning hours delivered by the education unit from the previous year. However, prisoners are satisfied with their learning experiences. They feel supported by staff and have progressed well since starting their programmes. They engage well in their classes and almost all enjoy their programmes.

7.13 Prisoners on work placements are satisfied with the type of work they are engaged in and feel it prepares them well for transfer to open conditions and eventual release.

Achievement

7.14 There are high levels of attainment in vocational courses. In almost all cases, prisoners attain their individual units of study. However, they are unable to achieve full certification of their programme because the full complement of units for successful completion is not delivered.

7.15 There are high rates of success in IT classes. However, there are low rates of attainment in literacy and numeracy programmes due to poor attendance rates. One third of absences from classes is due to prisoner attendance in other prison activities.

7.16 There are no opportunities for certification of skills development or coaching certificates in the gym.

Ethos and Values

7.17 Relationships between staff and prisoners are very positive and contribute to an effective learning environment.

7.18 However, apart from one example in painting and decorating programmes, communication between staff delivering education and vocational programmes is often ineffective. There is little sharing of information on prisoners literacy and numeracy requirements and therefore little coordination of activities to help develop basic skills.

7.19 In community placements, staff from the host organisations are very pleased with the prisoners they receive. In PE, protection and non-protection prisoners work together on a programme for learners from the community with additional support needs.

Staffing and Resources

7.20 Scottish Prison Service staff delivering vocational training are experienced and well-qualified. Staff in the learning centre have relevant skills and expertise and are appropriately qualified. All hold the TQFE qualification. However, during times of staff illness, staffing resources are stretched. On more than a few occasions, staff illness or redeployment has resulted in classes being cancelled and prisoners being unable to access their classes until the staff member returned.

7.21 Accommodation in the learning centre is restricted but adequate and fit for purpose. Of particular note is the provision of sound recording equipment for the production of a weekly radio broadcast for prisoners, produced in the learning centre. In the vocational training areas accommodation is of a good standard and is equipped with modern and appropriate machinery and equipment. This helps to provide a learning environment which effectively simulates a realistic working environment.

7.22 The gymnasium is well equipped to meet prisoner needs but at times there are not a sufficient number of PTIs to meet the levels of prisoner demands. A large activities hall is complemented by a fitness suite, outdoor football pitches and appropriate changing and showering facilities. A very comprehensive programme of PE activities is offered to all

prisoners although uptake by female prisoners is low at six registered prisoners from a population of 35. Of particular note are the *Fit Together* programme, in which five long-term prisoners work each week with young people from the community who have a range of additional support needs; and the PE programme to promote mental health, with five prisoners, of whom four are protection prisoners taking part each week.

Quality Assurance

7.23 Staff in the learning centre use questionnaires to help evaluate their programmes. Staff meet quarterly and produce an annual portfolio review and self evaluation report. However, although the report provides a review of the activities in the previous year, it does not establish the range of actions required, utilise appropriate SMART targets or allocate responsibilities.

7.24 Staff in vocational training deploy internal verification procedures to evaluate provision but do not utilise self-evaluation procedures to prepare action plans for improvement. In the gym, staff use a prisoner survey to evaluate provision and there is no evaluation of library provision by staff or prisoners.

7.25 There is no strategy for improving learning and teaching or coordination between SPS staff and learning centre staff. As a result, communication between staff is restricted and there is a lack of a collaboration to develop prisoners basic skills levels.

Library

7.26 The library is inconveniently situated in the Links Centre with the consequence that there are no opportunities for prisoners to visit the facility for the purposes of relaxation or browsing of stock. The library stock is contained within two locked areas and prisoners have access to it only through catalogues located in each accommodation floor. There are plans for a small satellite library in Darroch Hall to meet the requirements of female prisoners. At the time of inspection, 100 prisoners were registered with the library and there were approximately 80 books out on loan. Provision of English for Speakers of other Languages (ESOL) materials is by arrangement with HMP Barlinnie and there is liaison with Greenock Library for the provision of talking books, although it is not clear how prisoners access these

services. The Shannon Trust programme of peer tutoring with appropriate support materials is proving effective with prisoners who wish to learn to read, although numbers on this programme are small.

Other Out of Cell Activities

7.27 Prisoners in Ailsa have rotational access to recreation facilities. Prisoners on protection are only allowed out of their cells for time in the fresh air, to collect food and to attend visits. The out of cell regime for female prisoners was still being developed.

7.28 Chrisswell House prisoners control their own cell lock-up time. They can spend significant periods of time outwith the hall, in the enclosed compound when the prison is unlocked.

7.29 The Prison Fellowship visits the prison on a regular basis, offering meetings for the various groups of prisoner.

Conclusion

7.30 Staff from the learning centre are involved in the induction programme for all new prisoners and supplement this, for those wishing to participate in programmes, with a learning centre assessment which fully evaluates learners educational needs. The majority of prisoners have access to education from their work parties, with the exception of the VT construction party and community placements. Evening classes in the learning centre have recently been discontinued and this restricts prisoner access to education programmes at times which suit their requirements. In addition, there is almost no coordination of activities in the vocational training workshops with relevant courses in education.

8. HEALTHCARE

Outcome

Healthcare is provided to the same standard as in the community outside prison, available in response to need, with a full range of preventive services, promoting continuity with health services outside prison.

8.1 The health centre is not fit for purpose, but care delivery itself is satisfactory. A proactive clinical mental health service is being delivered and there are good links with Act2Care. Prisoners do not receive their daily medications, including methadone, prior to going to court.

Physical Environment

8.2 The health centre is not fit for purpose. It comprises two offices; a pharmacy area; a medical notes cupboard; a dental room; a doctor's room with a consultation room attached (which is also used for nurse triaging and storing medical records); and a prisoner waiting area. It is very cramped, and a lack of appropriate facilities has meant that some visiting specialists have to see prisoners in the hall (when a room is available) or the agents visits area. Nurse led clinics have also been cancelled due to lack of an available space.

8.3 Although the health centre is clean and tidy, there are problems in terms of noise, interruptions to consultations, privacy, confidentiality and infection control. Conversations should not be heard in the consultation rooms. Medical records should not be stored in the consultation room. The dentist room should not be used for other clinical interventions.

8.4 Satellite clinical areas have recently been developed in Ailsa Hall and Darroch Hall. These are clean and have recently been decorated. At the time of inspection the nurses were using these areas for the dispensing of medication only. Nurse triage was being undertaken in the health centre.

8.5 Although there is a lot of health promotion literature available, it needs to be refreshed as a number of posters were torn or had been written on.

8.6 All emergency equipment is stored in the health centre. No temperature control monitoring is undertaken of the drugs fridge.

8.7 **It is recommended that the health centre is made fit for purpose.**

Primary Healthcare

8.8 The primary care team comprises 6.3 whole time equivalent primary care nurses; two addictions nurses; a mental health nurse; an administrator; a clinical nurse manager; and a part-time doctor. There is no pharmacy assistant.

8.9 Primary care nurses work 12 hour shifts, with mental health and addictions nurses working an eight hour shift pattern. Weekday shifts are 07.45hrs to 21.15 hrs. Weekends are 08.30hrs to 18.30hrs. Medical clinics are provided every day with the exception of Sundays.

8.10 The team is not at full complement and has been significantly depleted over the last few months, with overtime and agency nurse support regularly required. Delivering a consistent service in these circumstances is very difficult.

8.11 Since the last inspection nursing staff have been trained to deliver nurse led interventions. If time permits these are delivered on an ad hoc or one-to-one basis. Waiting lists for nurse led services are not maintained as referral forms are given directly to nursing staff.

8.12 Prisoners with chronic disease conditions are seen only if they present with ill health or if they self refer. Prisoners are able to keep diabetic equipment in their cells. This is an area of **good practice**. However safe storage, operating and disposal practices for this equipment should be developed and monitored.

8.13 Female prisoners have specific healthcare needs and should be made aware that they can see a female doctor in the prison if they ask for this.

Secondary Healthcare

8.14 A dentist attends the prison three sessions each month. The dental suite has recently been upgraded and facilities developed to improve dental decontamination. The current waiting time for non-urgent pre-planned dental work is 10 weeks, although urgent cases have access to immediate pain relief from the doctor. Due to the lack of space the dental surgery is also used for other clinical interventions. In terms of infection control this should stop.

8.15 An optician and chiropodist visit the establishment when enough prisoners need to be seen. A visiting pharmacist attends the prison one morning each week. She is supported in this role by prison nursing staff who complete the administrative work. This administrative work could be undertaken by a pharmacy administrator which would free the nurses to work with prisoners.

8.16 A blood borne virus service is now being delivered monthly within the establishment with specialist nurse input from Inverclyde and Paisley Hospital. This is an improvement on the level of care previously delivered.

Mental Health Services

8.17 A Consultant Psychiatrist attends the prison for one session each week. This is flexible to meet the needs of the prison. The mental health nurse works Monday to Friday. The nurse assesses individual prisoners and makes referrals to the Multidisciplinary Mental Health Team and psychiatrist.

8.18 The Multidisciplinary Mental Health Team, chaired by the Deputy Governor, meets weekly to discuss individual cases. Minutes are available and circulated widely. This team is well represented by all disciplines and the level of joint working is good.

8.19 Prisoners with mental health problems can attend a supported session with PTI's.

Referral Process

8.20 A range of self referral forms are readily available in all halls. Nurse triage and doctors appointments are given priority: prisoners are seen within 72 hours. However, there is no formal process for recording referrals, and prisoners are not given set appointments or any feedback on waiting times. The referral system should be more robust.

Management of Medicines

8.21 Medication is stored in line with current legislation. Prisoners are encouraged to keep medication in their own possession where appropriate. However, none of the cells have individual locking cabinets for safe storage. Medication administration times have changed recently to support the separation of controlled drugs and this appears to be working well in terms of clinical administration. Evening medication at weekends is dispensed from 16.00hrs. Supervised medication at weekends is provided by the pharmacist.

8.22 Nurse administration of controlled drugs is always undertaken by two qualified nurses. Officer support for this process is very good.

8.23 Just before the inspection a decision was taken to stop giving medication to prisoners before going to court. Methadone is also no longer administered before going to court or on the day of liberation. **It is recommended that the decision to stop giving prisoners going to court their medication should be reviewed.**

Addictions

8.24 Admission statistics for January 2009 show that 83% of prisoners tested positive for illegal substances on admission to the establishment. On liberation this was 33%.

8.25 Substance misuse testing is undertaken by officers. Female healthcare staff support this process for female prisoners. Testing for compliance for those on a methadone script is undertaken monthly.

8.26 The Enhanced Addictions Casework Team comprises a team leader, two case workers and a part-time administrator. Facilities for the team are satisfactory and the team is very flexible about where they will see individual prisoners. The team is well integrated within the prison and has established close links with the healthcare team, particularly in relation to smoking cessation delivery and individual addictions care planning. Weekly management and practitioner meetings ensure that individual needs of prisoners are shared and prioritised between the two teams. The team provides a session in the induction programme; delivers one-to-one substance misuse support; and provides group work sessions.

8.27 Fifty five prisoners in the establishment are on a methadone prescription, of whom nine are on reducing doses.

8.28 The Interventions Manager oversees the implementation of the addictions policy within the establishment. Monthly minutes evidence discussion on local issues and national developments. Representatives of the team attend the Glasgow Drug Related Death Group and local Throughcare Addictions Strategy Meeting. However no one from the senior management team attends the Greater Glasgow and Clyde Alcohol and Drug Action Team.

9. REINTEGRATION

Outcome

Appropriate steps are taken to ensure that prisoners are reintegrated safely into the community and where possible into a situation less likely to lead to further crime.

9.1 There are very good links with community organisations, and the community work placements for prisoners in Chrisswell are excellent. However, the preparation for the release of sex offenders is poor, although risk is monitored well.

Integrated Case Management

9.2 Integrated Case Management operates in Greenock at Standard and Enhanced procedures. Standard procedures allow for prisoners serving four years or less to have their needs assessed and a Community Integration Plan developed. The enhanced procedures allow for all prisoners serving sentences over four years and all sex offenders serving six months or more to participate in multi-disciplinary meetings to review risk and needs and develop strategies to reduce the risk of re-offending and risk of harm on release.

9.3 There is an average of eight enhanced case conferences each month. An effective personal officer scheme operates within Chrisswell House. In other areas hall officers undertake the role of personal officers. The majority of case conferences are chaired by a personal officer. A social worker chairs the conferences for sex offenders. The case conferences met the minimum attendance requirement of prisoner, ICM co-ordinator, and community and prison based social workers. Prisoners are given the opportunity to have their family present but few take up the option.

9.4 A very good set of desk instructions for the operation of the system ensures that there is a smooth transfer of duties if there is a change of staff. All ICM information regarding prisoners should be held on PR2 but at Greenock some information is held on separate electronic files. This information could not be accessed if a prisoner is transferred to another establishment. All ICM information should be held only on PR2.

9.5 Risk assessments using ‘Stable and Acute 2007’ (S&A07) are undertaken by both prison officers and social workers. Thirteen S&A07 assessments were undertaken in the four months before the inspection.

Interventions to Address Offending Behaviour

9.6 Programmes to address offending behaviour are delivered in a classroom in the Links Centre or in Ailsa Hall. Staffing comprises five officers who carry out a range of tasks including the Core Screen, inputting to the ICM process and delivering programmes. This process works well. They also carry out a range of other duties as well as running the Links Centre.

9.7 The team delivers one accredited programme, ‘Constructs’, and two approved activities, ‘Drugs Action for Change’ and ‘Alcohol Awareness’. Training has not yet been undertaken to deliver programmes for female offenders. No “top up” programmes are available for prisoners serving long sentences.

9.8 There are no community placements for sex offenders. This affects a small number of prisoners, and other measures such as response to special escorted leave are used to assess progress but there can still be delays in progression because community placements are unavailable. There are also no programmes for sex offenders to address their offending behaviour.

Partner Organisations

9.9 A wide range of partner organisations come into and are involved in the prison, with many using the Links Centre. These include local authority housing staff; health and social work service staff; Jobcentre Plus; Motherwell College; Phoenix Futures; Throughcare Addiction Services (TAS); Alcoholics Anonymous; Action for Children (Moving On); Routes out of Prison (RooP); Inverclyde Moving On Project; Dumbarton Alternatives; Financial Fitness; Caledonia Youth; Scottish Soldiers, Sailors, Airmen and Families Association (SSAFA); and the Shannon Trust. This presence is accompanied by a good range of information leaflets both in the Links Centre and throughout the prison.

Preparation for Release

9.10 Long-term prisoners in Chrisswell House are expected to have completed identified offending behaviour needs before being transferred there. There are no top up programmes, only some top up support for addictions. Community placements are available for Chrisswell prisoners. At the time of inspection there were twelve prisoners working outwith the prison. These placements continue to offer excellent preparation for release.

9.11 The only opportunity for vocational qualifications are in the bricklayers and painters. A very good money and debt management programme is offered prior to liberation and an impressive range of partner organisations offer support to prisoners preparing for release.

9.12 Six weeks prior to liberation the Community Integration Plan is reviewed. A pre-release checklist is used to ensure that all potential needs are identified. Although there is no specific pre-release programme there is a structured approach to reviewing and addressing pre-release needs.

10. GOOD PRACTICE

10.1 The health centre is adjacent to the reception so initial healthcare assessments are conducted in the health centre (paragraph 3.20).

10.2 The arrangements for storing and checking prisoners' property in reception (paragraph 3.21).

10.3 The admission procedures (paragraph 3.26).

10.4 The First Night Centre in Ailsa Hall (paragraph 3.31).

10.5 Most high risk of suicide prisoners are managed in the two or three bed units in Ailsa Hall (paragraph 3.36).

10.6 Prisoners are able to keep diabetic equipment in their cells (paragraph 8.12).

11. RECOMMENDATIONS

11.1 The conditions for holding prisoners at Oban Sheriff Court should be improved immediately (paragraph 4.8).

11.2 The health centre should be made fit for purpose (paragraph 8.7).

11.3 The decision to stop giving prisoners going to court their medication should be reviewed (paragraph 8.23).

12. ACTION POINTS

- 12.1 The anti-ligature cells in Ailsa Hall should contain SPS approved furniture(paragraph 2.7).
- 12.2 All toilets in cells should be enclosed (paragraphs 2.7, 2.9, 2.12, 2.20).
- 12.3 Ailsa Hall should be redecorated (paragraph 2.8).
- 12.4 Bedding, mattresses, pillows and curtains in some cells in Ailsa Hall should be replaced (paragraph 2.8).
- 12.5 Ladders should be installed to allow access to all top bunks (paragraph 2.9).
- 12.6 Prisoners on protection should have the opportunity to dine out of cell (paragraph 2.10).
- 12.7 Wet weather clothing should be available (paragraphs 2.11, 2.15).
- 12.8 Pillows in Darroch Hall should be replaced (paragraph 2.12).
- 12.9 Instructions for the telephones in Darroch Hall should be available (paragraph 2.13).
- 12.10 Some pillows in Chrisswell House should be replaced (paragraph 2.17).
- 12.11 Prisoners in the segregation unit should have access to hand washing facilities, especially after using the toilet (paragraph 2.20).
- 12.12 A regular cleaning programme for the segregation unit exercise yard should be implemented (paragraph 2.21).
- 12.13 Consideration should be given to issuing a snack pack on Friday and Saturday evenings (paragraph 2.25).

- 12.14 Female prisoners should be issued with appropriate prison clothing (paragraph 2.33).
- 12.15 Consideration should be given to allowing prisoners to make representation to their supervision level review (paragraph 3.9).
- 12.16 Milk should be provided with the cereal issued the evening before a prisoner is due to go to court (paragraph 3.13).
- 12.17 All escort vehicles should carry water (paragraph 3.14).
- 12.18 The policy of not allowing personal items on escort vehicles, especially for long journeys, should be reviewed (paragraph 3.15).
- 12.19 The content of the safety message on escort vehicles should be reviewed, and presented in a manner which prisoners can hear and understand (paragraph 3.16).
- 12.20 The restraining of prisoners on escort should be commensurate with the risk posed (paragraph 3.17).
- 12.21 The large amount of information given on the first night in the prison should be reviewed (paragraph 3.28).
- 12.22 The Chaplains should regularly support prisoners on ACT2Care (paragraph 3.37).
- 12.23 The safer cells in Ailsa Hall should meet current SPS standards (paragraph 3.39).
- 12.24 Listeners should be available for female prisoners (paragraph 3.42).
- 12.25 Information on the current suicide risk management policy should be in the night duty folder (paragraph 3.46).
- 12.26 The toilets at Greenock Sheriff Court should have hand drying facilities (paragraph 4.10).

12.27 Consideration should be given to making audio or video induction interpretation available (paragraph 4.15).

12.28 Prisoners should have access to legal text books, and a copy of the Prison Rules should be available in the library (paragraph 6.2).

12.29 The chaplains should do more to integrate into the life of the prison (paragraph 6.11).

12.30 Records should be kept at all stages of the prisoner complaints procedure (paragraph 6.14).

12.31 Prisoners should be able to attain full certification of their vocational courses (paragraph 7.14).

12.32 There should be more sharing of information between staff delivering education programmes and staff delivering vocational programmes (paragraph 7.18).

12.33 A strategy on improving learning and teaching should be developed between SPS staff and learning centre staff (paragraph 7.25).

12.34 Safe storage, operating and disposal practices for diabetic equipment which is kept in cells should be developed and monitored (paragraph 8.12).

12.35 Female prisoners should be made aware that they can see a female doctor in the prison if they ask for this (paragraph 8.13).

12.36 The lengthy waiting time to see a dentist should be addressed (paragraph 8.14).

12.37 The dental surgery should not be used for other clinical interventions (paragraph 8.14).

12.38 The administrative work in the pharmacy should be undertaken by a pharmacy administrator rather than by prison nursing staff (paragraph 8.15).

12.39 The referral system to see the doctor should be more robust (paragraph 8.20).

12.40 Cells should have individual locking cabinets for the safe storage of their medication (paragraph 8.21).

12.41 A member of the senior management team should attend the Greater Glasgow and Clyde Alcohol and Drug Action Team meetings (paragraph 8.28).

12.42 All Integrated Case Management information should be held only on PR2 (paragraph 9.4).

12.43 There should be more preparation for release for sex offenders (paragraph 9.8).

Sources of Evidence

Written material and statistics received from the prison prior to Inspection

Prison's self-assessment

Governor's briefing

SPS Prisoner Survey

Prison Records

Prison background material

Discussions with prisoners

Discussions with prisoners' families

Focus groups with prisoners

Interviews with prisoners

Interviews with prison staff

Focus groups with staff

Observations

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