

## **Mental Welfare Commission for Scotland**

# Report on announced visit to:

Addiewell Prison, 9 Station Road, West Calder EH55 8QF

Date of visit: 24 July 2019

### Where we visited

HMP Addiewell is operated by a private company, Sodexo Justice Services, and contracted to the Scottish Prison Service. It serves the courts in Lanarkshire and West Lothian holding prisoners remanded in custody as well as convicted adult male prisoners. The capacity is for 700. At the time of the visit there were 798.

We have not visited this prison recently and on this visit we wanted to find out about the current mental health services being offered to prisoners. We also wanted to speak to prisoners receiving mental health support in prison and to hear their views on their mental health care in the prison.

#### Who we met with

We met with three prisoners who were known to the mental health team and had requested an interview. We reviewed their notes plus the notes of two other prisoners who had mental ill health. We met with senior charge nurse, health care manager; other nursing staff and the prison director and deputy director.

#### **Commission visitors**

Susan Tait, Nursing Officer

Dr Claire Lamza, Nursing Officer

## What people told us and what we found

### Care, treatment, support and participation

There is a multi-professional team to provide health care including psychiatry, psychology, registered mental health nurses, primary care and dentist. There is also a monitoring clinic run weekly for patients who are prescribed anti-psychotic medication. Prisoners we talked to were on the whole positive about their input from the mental health team, in particular the support they have from nursing staff, one prisoner was unhappy with his medication review.

Prisoners are able to self-refer to the mental health team via the electronic system kiosk which is available to both the prison staff and prisoners. This would seem to have had the effect of prisoners feeling more able to self-refer for mental health issues as it was confidential, although there are barriers to this for people who have communication difficulties. Referrals result in a triage which is then able to prioritise on a needs led basis.

We reviewed the mental health care plans which are all electronic. On the whole they were person centred and descriptive of the nursing interventions. However they differed from nurse to nurse in format and in quality. All care, interventions and daily progress were recorded on VISON. The system only has a journal tab, which means that all patient information, some of which goes back years, automatically comes up when reviewing staff input for the individual. All entries are in chronological order which does give an overview but it is difficult to retrieve specific information. This could raise a risk of missing important information.

However, the detail on the day to day notes were personalised and comprehensive. It was clear to see what interventions were being provided – whether it was mental health assessment, drug addiction therapies and/or low intensity psychological therapies. Nursing notes were in a helpful SBAR (Situation, Background, Action and Recommendation) format which provided information on nursing input.

Participation in care planning was evident in most care plans where a prisoners had signed and agreed to the care plan this was uploaded.

#### **Recommendation 1**

Health Managers should carry out regular audits of care plans to ensure consistency of recording and that they contain all nursing interventions relevant to the delivery of care.

We were told that due to the lack of prison officers to escort the prisoners to the health care centre that often mental health care needs were not met, although nursing staff try to address this by delivering care and treatment on the prison wings whenever possible. This was also commented on in the recent Her Majesty's Inspectorate of Prisons Inspection Report, which was published in January 2019.

Sodexo are contracted to provide forty hours out of cell activities, which we were told had a negative impact on attendance for treatment as this may be prioritised over a mental health appointment however we were assured by the prison director that health care would be prioritised despite other contractual agreements.

#### **Recommendation 2**

Health managers should address any missed with the prison director.

#### **Activity and occupation**

Addiewell prison is described as a 'learning prison' giving prisoners opportunities and this was evident when looking at notes.

### The physical environment

We did not go to any of the halls in the prison, but did visit the 'separation and care unit' which provides higher levels of observation for prisoners who may at risk of suicide or self-harm. Most prisoners who are placed there for this reason are on the 'Talk to Me' programme which ensures risk assessment and management is formalised. At the time of the visit a serious incident had occurred, therefore we were unable to review this thoroughly at the time of this visit.

## **Summary of Recommendations**

#### **Recommendation 1:**

Health Managers should carry out regular audits of care plans to ensure consistency of recording and that they contain all nursing interventions relevant to the delivery of care.

#### **Recommendation 2:**

Health Managers should record the missed appointments due to lack of prison officers to ensure that they can highlight this to the prison director.

# **Service response to recommendations**

The Commission requires a response to these recommendations within three months of the date of this report.

A copy of this report will be sent for information to HM Inspectorate of Prisons.

ALISON THOMSON
Executive Director (Work/ Nursing)

### **About the Mental Welfare Commission and our local visits**

The Commission's key role is to protect and promote the human rights of people with mental illness, learning disabilities, dementia and related conditions.

The Commission visits people in a variety of settings.

The MWC is part of the UK National Preventive Mechanism, which ensures the UK fulfils its obligations under UN treaties to monitor places where people are detained, prevent ill-treatment, and ensure detention is consistent with international standards

#### When we visit:

- We find out whether individual care, treatment and support is in line with the law and good practice.
- We challenge service providers to deliver best practice in mental health, dementia and learning disability care.
- We follow up on individual cases where we have concerns, and we may investigate further.
- We provide information, advice and guidance to people we meet with.

Where we visit a group of people in a hospital, care home or prison service; we call this a local visit. The visit can be announced or unannounced.

In addition to meeting with people who use the service we speak to staff and visitors.

Before we visit, we look at information that is publicly available about the service from a variety of sources including Care Inspectorate reports, Healthcare Improvement Scotland inspection reports and Her Majesty's Inspectorate of Prisons Inspection reports.

We also look at information we have received from other sources, including telephone calls to the Commission, reports of incidents to the Commission, information from callers to our telephone advice line and other sources.

Our local visits are not inspections: our report details our findings from the day we visited. Although there are often particular things we want to talk about and look at when we visit, our main source of information on the visit day is from the people who use the service, their carers, staff, our review of the care records and our impressions about the physical environment.

When we make recommendations, we expect a response to them within three months (unless we feel the recommendations require an earlier response).

We may choose to return to the service on an announced or unannounced basis. How often we do this will depend on our findings, the response to any recommendations from the visit and other information we receive after the visit.

Further information and frequently asked questions about our local visits can be found on our website.

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