SPS COVID-19 Route Map

A practical guide to moving forward

Date: June 2020

Unlocking Potential - Transforming Lives.

Contents

1.0   Introduction

Very soon after the beginning of the UK COVID-19 lockdown on 24 March, all prisons experienced a significant and rapid increase in the numbers of staff absent from work. This peaked on 1 April when 1050 staff of all grades were unavailable for work through sickness, self-isolation, shielding or special leave. Consequently, prisons were compelled to move quickly to what has been termed a 'core day'. Essentially, this is a truncated regime – completely unconnected with the defunct Prison Officer Professionalisation Programme (POPP) designation of core hours – which delivers key prisoner services and legislatively essential outputs underpinned by new legislation in the Coronavirus (Scotland) Act 2020

These regimes evolved in prisons organically with the National Coronavirus Response Group (NCRG) focussed on providing key policy platforms to enable continued field operations. In parallel with this shift to a different regime mirrored across 7 days, establishments/ Directorates also had to quickly adjust their staffing by:

- identifying key workers who were required onsite
- giving those who were not required onsite but who could work, the means to do so via remote computer/phone access
- supporting those who were unable to work
- changing the pre-agreed staff deployment systems at speed, to enable delivery of the new day.

As part of the Scottish Prison Service Trade Union Side (TUS), all constituent unions were supportive of the need to make changes, and quickly, in truly exceptional circumstances. In some cases, specific agreements were struck where this was critical to maintaining business continuity; for example, Prison Officers' Association (Scotland) (POA(S)) accepting amendments to the 6 week notice period required under Staff Attending Systems Working Arrangements Code of Practice Revision #4 (SAS). As regimes settled and NCRG processed evolving Government thinking and public health advice, prisons became more stable.

On 24 March 2020, the Cabinet Secretary for Justice was advised by Her Majesty's Inspector of Prisons (HMIP) that their team were suspending visits to prisons in light of external social mobility restrictions and public health threat posed by the pandemic. There was ongoing dialogue during the development of the SPS Pandemic Plan and a few weeks later, on 1 May, the Chief Inspector published a Liaison Visits Framework for Prisons and Court Custody Units. The intention is to monitor prisons using a range of temporary standards ensuring that even though a series of protective measures are in place, SPS continue to focus on best practice and delivering services which though altered, still have a firm focus on human rights.

These liaison visits began in Edinburgh on 1 May 2020, and feedback is offered to both the Governors-in-Charge (GIC) and Headquarters (HQ). SPS also deliver a weekly digest report to Her Majesty's Inspectorate of Prisons (HMIP) outlining key developments in population management, prison stability and staff absence amongst other features.

2.0   Core Principles

In managing the journey back to a (new) normal, there are 10 core principles which have driven the development of this plan and which will be relevant throughout its interpretation and execution across the estate:

- Harnessing user voice to help inform movement between phases
- Full engagement with trades union partners
- Consideration of the risk to people of transmission/rate of spread of coronavirus
- Application of physical distancing and how this impacts on general operations
- Evolving regimes gradually in parallel with the capacity to deploy necessary resources
- Partner engagement and support in evolving services collaboratively

- Continued focus on maintaining standards of welfare, wellbeing and human rights
- Recover as a service but adjust by site
- SPS will be responsive to the cycle of lifting and re-imposing restrictions if necessary
- Assessing the impact of change on operational stability

From the outset, SPS have taken guidance from Health Protection Scotland (HPS). This has and will continue to be a core component of our COVID-19 response and to helping shape our practical policy changes; it is essential that SPS always place the highest value on the core Scottish Government public health message that all persons should avoid contact with someone who is displaying symptoms of coronavirus (which may include high temperature, a new and continuous cough and a loss or change in taste or smell) and where they are in the same place as other people, maintaining a space of two metres between themselves and any other person, then to wear appropriate Personal Protective Equipment (PPE) if this is not possible. In addition, the simplest and most effective barrier remains frequent handwashing. In this way, we minimise opportunities for transmission of the virus and enable our prisons to evolve safely.

3.0 Phase 1 - Current Position

This plan has a series of shortcuts or 'hyperlinks' to other parts of the Routemap and to other important reference documents which themselves are liable to continual review and update. To that end, it is preferable that this document is read electronically since that will afford the reader easy access to the full suite of information available. If read in hard copy, most of the linked documents can be found in the Operations Directorate COVID-19 Hub SharePoint Page, Operational Guidance tab.

In practical terms, SPS moved quickly to deliver its core services in what was later termed the 'lockdown' period of the pandemic. The UK government and health authorities set down an initial range of advice, backed up by public briefings. These have continued and

over time, the Scottish Government has developed a strategy which retains a strong link with UK Government guidance but which also sets down a forward review of managing COVID-19 in Scotland, this resulted in the Scottish Government's Routemap through and out of the crisis' published on 28 May.

By the time this document was published, SPS had taken a number of important operational and policy decisions in relation to prisoner management, visits, interface with other parts of Justice and delivery of a prison regime which was compliant with new Rules; it also managed to contain a number of infection outbreaks across several sites and despite the best efforts of our collective care – tragically a small number of people have lost their lives[1]. The impact on those families who lost someone is recognised and sympathised by everyone who lives and works within the SPS. We are continuing to balance the health risks against the mental health/social contact risks and potentially longer term mental health implications.

General management of prisoners also had to actively consider the human rights of those in our care; even in the exceptional and restrictive conditions necessitated to avoid viral spread. This included consideration of moving messages to families when isolated, developing a range of meaningful alternative family contact arrangements like mobile telephony and virtual visits, providing in-cell support activities and re-crafting liberation arrangements since travel and support services were 'down' across the country

It took time, but in a few short weeks, prison regimes stabilised and staff attendance patterns for critical onsite workers were adjusted. Other staff who were offsite but who could still make a valuable contribution were enabled to do so.

This document presents a Routemap for the whole SPS to move forward; however, both private prisons are likely to have nuanced responses at local level and these will be agreed with the Operations Directorate Contract Management team.

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[1] The full and formal process to determine all factors surrounding deaths in custody since the start this pandemic have not yet been ascertained
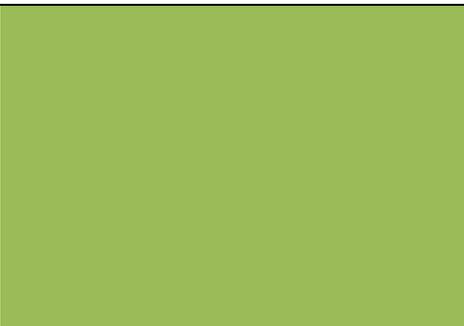
4.0   Phase 1 to Phase 4 - Key Transitions Matrix

Core Principles - Physical Distancing - TUS Engagement - Resource Deployment – Risk and other Assessments

Click to navigate	Phase 1 to Phase 2	Phase 2 to Phase 3	Phase 4
General Operations	Operational Guidance Cell Sharing Risk Assessment (CSRA) Criteria Visit's to Prisons by Families and Friends HSE Engagement & Local Health & Safety Activity Review Appropriate PPE Usage Review Home Working Visit Room Risk Assessment with Local Health Protection Team Virtual Inter-Prison Visits Review Mental Health Support	Operational Guidance Cell Sharing Risk Assessment (CSRA) Criteria Visit's to Prisons by Families and Friends HSE Engagement & Local Health & Safety Activity Review Appropriate PPE Usage Recreation Review Cell Association review Outside Exercise Review	

Direct Prisoner Services

Virtual & Supported Learning

Enhanced Annual Learning Planning

Programme Resource Allocation and Activity

Soft Start for Identified Critical Prison Based Industries

Resumption of Prisoner Monitoring and Assurance Group (PMAG)

Corporate & Site Status Approval for Phase Transitions

Prisoner Transfers

Enhanced Annual Learning Plan

Soft Start for Non-All Critical Prison Based Industries

Social Dining

Managing Ongoing Resumption of Court Business

Management of Establishment Parole Board Activity

Population Management

Transfers, Placements & Home Leave

Prison Based Gymnasia & Satellites

Key Support Services	Mobile Phone Roll-Out Support Working Better Across Justice - IT Capabilities Functional Capacity to Deliver Key Support Services Prisoner Progression & Risk Management Team (RMT) Resumption Common Good Fund (CGF) Impact Estates Development and Maintenance	Administration Functions Restored or Up-scaled VT Activities Re-Open Peer Support Estates Development and Maintenance	

Healthcare	Primary Care Services Mental Health and Addictions Service Allied Health Services	Recovery Services	

Resources:
- **Human**
- **Technical**
- **Financial**
- **Legal**

HR Delivery	Amended Rules For Visits
Shielding & General COVID-19 Absence Update	Shielding & General COVID-19 Absence Update
Partners' Status	SPS Staff Training Recovery Planning
Media Communications – Social Media Content Review	Risk Management Team (RMT), Generic Programmes Assessment (GPA) & Risk Management Planning
	Amended Prison Rules Review
	Homeworking Review
	Media Communications – Social Media Content Review

5.0   Phase 1 to Phase 2

5.1.1   General Operations

5.1.1.1 - Operational Guidance

Each transition requires review of a series of practical steps to be taken inside prison establishments. These will be discussed with Governor's in calls with the Director of Operations at least weekly. Please refer to the latest version of Operational Guidance for currency: COVID-19 Phase 1 to Phase 2 Communication and Operational Policy Guidance Compendium. This document includes, but is not exclusively limited to information relating to the Phase 1 to Phase 2 Key Transitions. This will give an 'in-phase' policy steer of key issues such as:

- Management of exercise (time, numbers and group sizes)
- Recreation (time, numbers and group sizes)
- Prisoner communications including phones, visits and virtual visits
- Community access and movement across prisons
- Staff response protocols
- Programme and risk assessment activity
- In prison work and education
- Chaplaincy
- Third sector liaison
- Staff training and operational preparedness

This will require each prison to consider the practical detail of how this impacts on individual sites and will be closely connected to having the staff available for deployment, the ability to manage a population group which is being increased as courts start to process more accused persons and the capability of everyone in prison to adhere to physical distancing measures - SPS Physical Distancing Policy.

Governors will also have to consider – as part of their planning – the implications and impact of phased change on both staff and prisoner groups. There are still heightened concerns around safety both in the prison and in the community; and it is also necessary to reflect on how this might make some groups more vulnerable as a consequence.

5.1.1.2 – Cell Sharing Risk Assessment (CSRA) Criteria

Please refer to the latest version of the CSRA document for currency – this variant has been altered to reflect latest SPS Physical Distancing Policy. The ability to share cellular accommodation in normal conditions, and consequentially to operate a consistently evolving regime will remain under review in light of these parameters.

5.1.1.3 – Visits to Prisons by Families and Friends

All visits were stopped effective from 24 March 2020, and in transitioning to Phase 2, standard prison visits (both open and closed) remain temporarily suspended. There are very few agents or other professional visits in Phase 2. However, virtual visits for all prisoners are enabled on a rolling basis across all sites from 16 June 2020 and provision for direct staff supervision needs to be made to facilitate then maintain this service. Details of the policy change are contained in the COVID-19 Phase 1 to Phase 2 Communication and

[Operational Policy Guidance Compendium](). SPS has also commenced a consultation exercise with families through a third sector partner and will continue to solicit direct feedback on the best way to 're-start' from both prisoners and staff.

5.1.1.4 - HSE Engagement & Local Health & Safety Activity

SPS will develop a dual approach to maintaining a solid platform upon which to evolving its regimes safely. Firstly, and co-ordinated through Operations Directorate, it will invite commentary on a 'best practice' basis from the Health and Safety Executive (HSE) to ensure that the organisation has heightened awareness of currently important issues. Secondly, sites will continue to utilise their dedicated local Health & Safety co-ordination resource to develop and review relevant risk assessments/Safe Systems of Work (SSoW) and they will be supported by a national resource based in HQ.

For the duration of Phases 2 and 3, there will be a requirement to be vigilant to policy changes and debates coming from the Scottish Government, NHS and Health Protection Scotland which might affect the national – and so the SPS - 'journey' out of COVID-19. To that end, there will be a requirement to upscale the ability of local Health and Safety Co-ordinators to provide a rolling programme of review and advice to the local leadership team and in so doing, to provide assurance to the NCRG that all sites are operating in the safest possible way. This necessitates a process of continual review and refresh of functional assessments as a high priority. Local Health and Safety (H&S) meeting schedules should be adjusted to reflect this enhanced need and where necessary, existing resource diverted temporarily to support the administration of enhanced activities. The progress of the SPS and individual prisons will be largely dependent upon senior leaders having compliance assurance and to be innovative in ensuring that processes are adjusted to ensure regime enhancement, but in a way which is sustainable and safe for everyone. This is the main underpinning principle in developing our responses to environmental change.

Collaboration and engagement with trade union partners will remain a high priority at both local and national levels.

5.1.1.5 - Review Appropriate PPE Usage

SPS sites will adhere to latest guidance on PPE usage contained within the [SPS Physical Distancing Policy](#) and [COVID-19 Phase 1 to Phase 2 Communication and Operational Policy Guidance Compendium](#). This will require to be shared with any non-SPS personnel and partner agencies who attend any SPS site. Usage of PPE will be reflected in any review of Standard Operating Procedures (SOP)/ SSOW. The national SPS policy position allows for individuals to conduct their own risk assessment relevant to their personal circumstances and this will continue into phase 2. SPS sites will monitor PPE stock and usage centrally to maintain SSOW requirements.

5.1.1.6 - Review Home Working

The SPS wish to explore more responsive and flexible working patterns for both operational and non-operational staff. It is committed to the SMART working project; and this work has been consequentially advanced by COVID-19 restrictions. As these restrictions alter into phase 2, the use of home working capacity will be reviewed in light of [SPS Physical Distancing Policy](#) application balanced against the specific business needs of the site or department. The outcomes of the SMART survey will inform the shape of future policy direction and as we advance through phases 2 and 3, the use of timetabled/blended work patterns will need to be considered for appropriate roles and details of this will be advised to all staff. The evolving [SPS Physical Distancing Policy](#) will influence how subsequent phases are addressed.

5.1.1.7 - Visit Room Risk Assessment with Local Health Protection Team

The restoration of visits capacity across SPS estate requires the visit area/environment to reflect [SPS Physical Distancing Policy](#) with appropriate SSOW(s) for any consideration of vending equipment usage, children's play areas or communal usage front of house

facilities including toilets, pram storage and security screening processes. Though standard 'physical' visits with family and friends will not be restored in phase 2, the assessment should be conducted in anticipation of re-start with full participation and knowledge of local Health & Safety Co-Ordinator's, staff and trade union H & S representatives. An exception to this might be visits outside at Castle Huntly and this will be assessed by the Governor. Prison establishments should also engage with their local NHS authority/health protection team to help collaborative, effective, safe planning. More extensive consultation can be considered by those prisons which are supported by a visitor centre; support staff and family members will have a view on what they would like to see considered and will be able to express ay concerns they might have. This will inform local planning.

5.1.1.8 - Virtual Inter-Prison Visits

All visits were stopped effective from 23 March 2020 and in transitioning to Phase 2, standard prison visits (both open and closed) remain temporarily suspended. There are very few agents or other professional visits in Phase 2. However, virtual visits for all prisoners are enabled across all sites from 16 June 2020 and provision for direct staff supervision needs to be made to both facilitate and maintain this. Consideration should be given to enabling virtual inter-prison visits (IPV) subject to routine IPV approval. Details of the policy changes are contained in the [COVID-19 Phase 1 to Phase 2 Communication and Operational Policy Guidance Compendium,](#) and this will be updated with any movement on inter-prison virtual visits. There is planned consultation with families on the evaluation and impact of virtual visits and mobile telephony.

5.1.1.9 - Review Mental Health Support For Prisoners

The impact of COVID-19 restrictions highlights the need for continual monitoring and review of those subject to the conditions and altered ways of living and working in our estate. Moving between phase 1 and 2 requires people to begin to make a degree of self-informed choices previously reduced by the lockdown conditions. SPS recognise the importance of social contact generally and

for those suffering from mental health difficulties, this can be especially difficult. Individuals may already be in treatment or have presented themselves to health professionals for assistance, but they might also be suffering unexpectedly through Covid related isolation and encountering difficulties brought on by disruption to routine and/or less opportunities for regime participation. As such, prisons will continue to review and seek to minimise the isolation experience through supporting appropriate and practical interventions which promotes good mental health and wellbeing. Practically, this will mean increasing the level and frequency of personal interaction permitted as well as extending the distraction techniques beyond in-cell activities. These interactions will be informed by subject matter experts from within SPS, National Health Service (NHS) and partner agencies.

5.1.2   Direct Prisoner Services

5.1.2.1 - Virtual & Supported Learning

SPS will work in partnership with Fife College to begin the process of re-establishing an appropriate learning environment which blends both traditional classroom teaching methods with new innovative IT based solutions balancing both the needs of those in our care with the SPS Physical Distancing Policy. This project looks to establish blended learning within a custodial environment; this will use the digital resources of both Fife College and SPS in order to offer a wider range of effective services which are not wholly dependent upon classroom delivery. During phase 2, FE managers will be embedded with establishment LCRG to ensure the centre driven strategy addresses local requirements and resource capacity.

5.1.2.2 – Enhanced Annual Learning Planning

Based on the agreed FE Strategy with Fife College and employing the blended learning environment described at 5.1.2.1 (above), the annual learning plans will be reviewed in phase 2 to ensure continued fitness for purpose. The resultant product will require to meet the contractual obligations and expectations of the existing provider/client relationship with the demands of localised needs based assessments. Work is underway with Fife College, HQ (SSE and OD) and local Heads of Offender Outcomes

5.1.2.3 – Programme Resource Allocation and Activity

The SPS Programme Strategy Group (PSG) has approved the re-establishment of those key programmes which were underway on 23 March 2020, but later suspended. This is to allow participants the opportunity to complete their specific needs based work and continue to evidence their journey towards risk/harm reduction. In phase 2, planning will be undertaken for a graduated resumption of programme delivery and programmes re-started where possible. In addition to this, the re-purposing of programme resource will be considered as part of a wider review of programme delivery and compliance with SPS Physical Distancing Policy. A revised delivery plan will be developed for each programme to financial year end and prisons advised.

This revised delivery of programme products will be impacted both by the outcomes from recent court proceedings and policy changes resulting from unrecoverable programme delivery time lost during lockdown period. Whilst attempting to minimise this loss, this position potentially impacts those in our care who seek programme evidence as part of their rehabilitative journey to the Parole Board. The ability to continue to evidence rehabilitative progress to the Parole Board and other key partners will form a key consideration of the revised approach.

5.1.2.4 – Soft Start for Identified Critical Prison Based Industries

The suspension of work based activities across SPS sites meant that key commercial contracts were immediately impacted as was work being undertaken for internal SPS benefit. The restoration of these contracts in phase 2 will be based on commercial and operational prioritisation, and HQ will liaise with prisons in establishing a mutual understanding of corporate need. In executing any agreed but small scale re-start during this phase, the ability of workshops to operate safely and effectively will be based on SPS Physical Distancing Policy in conjunction with extant health and safety advice. There may be a requirement to redefine and re-allocate national contractual obligations across estate capacity. Longer term, this also presents an opportunity for the SPS to reset the purpose and direction of the rehabilitative journey by making better and more imaginative use of the resource capacity at our disposal.

5.1.2.5 – Resumption of Prisoner Monitoring and Assurance Group (PMAG)

The management of our most complex cohort requires close professional collaboration and in practical terms, the transfer of individuals between establishments; the management of this risk in Phase 1 meant that the routine operation of PMAG was suspended during the lockdown period. The resumption of PMAG in phase 2 will require the restoration of inter-prison transfers on a limited, risk assessed basis to facilitate the risk loading; particularly across national Separation and Reintegration Units (SRU) capacity. Additionally, PMAG will require the capability to operate remotely given the draw on estate wide Senior Management Team (SMT) input. See 5.1.2.7 (below).

5.1.2.6 - Corporate & Site Status Approval for Phase Transitions

The challenge to recovery planning is the ability of the SPS to return to enhanced operational mode internally at a safe, evidence led, consistent pace and in keeping with the demands of our external commitments as a Justice partner. Responding to external demands as the Justice system recalibrates requires SPS to have in place suitable governance and control measures enabling the key elements of Custody, Order, Care and Opportunity (COCO) to be delivered through phases consistent with Health Protection Scotland guidance and resource availability. A traffic light system of 'go/no-go' will determine corporate preparedness to progress through phase transition. The collective phase transition plan must also be capable of retrenching should Scottish Government (SG) cycle back down a phase due to a virus peak/second wave; and should take account of an individual prison site's inability to transition for example, due to an outbreak.

5.1.2.7 - Prisoner Transfers

The suspension of transfers between establishments was a necessary element of reducing the potential spread of the virus within the custodial setting. Movements in/out of establishments were limited to minimal court movements with a drive towards Video Court (VC) usage where at all possible. This included suspension of the home leave scheme and community access in both Open Estate (OE) and National Top End (NTE). The transfer of people between sites is a vital element of SPS' population management technique. As the Justice system restores key operations particularly around court processes, the SPS will require to prioritise what and how the return to transactional business is managed in a safe, controlled manner. The resultant criteria shift in phases 2 and 3 will need to be based on current policy guidance overlaid by latest Health Protection advice with estate capacity and resource availability acting as system foundations. Resumption of movement will be on a 'soft start' basis with details set out in circular and contained in COVID-19 Phase 1 to Phase 2 Communication and Operational Policy Guidance Compendium.

5.1.3   Key Support Services

5.1.3.1 - Mobile Phone Roll-Out Support

The imposition of COVID-19 restrictions impacted routine visits and family contact, the SPS established the family helpline to assist and advise families on maintaining contact and providing support on how to continue to manage routine transactions with establishments. SPS approved the introduction of mobile telephony for all who live within the prison estate with the roll-out commencing week beginning 15 June 2020 beginning with HMP&YOI Cornton Vale and HMP&YOI Polmont in the first instance. It is then the intention to work through a project plan that will see mobile phones being rolled out across two establishments per week, with implementation across all sites (excepting HMP Kilmarnock) by the end of July 2020. HMP Kilmarnock will be implementing a hard wired in-cell solution which will be rolled out by residential area and is scheduled to be completed by August 2020.

5.1.3.2 – Working Better Across Justice - IT Capabilities

Like many organisations across the UK, the lockdown period has forced SPS and partners to think differently about how to maintain business continuity through having staff work in new ways using IT capabilities which hitherto have been used on a limited basis. The, the advantages of utilising the SMART working facilities has been a major contributing factor in the SPS being able to operate with minimal impact on business delivery. Moving forward, the organisation's capability to manage, operate and enhance elements of our business remotely will be a growing and continuing challenge as we and our partners adjust to a new reality. The provision of remote services and facilities to Scottish Courts and Tribunals Services (SCTS), the Parole Board (PB) and Criminal Justice Social Work (CJSW) has highlighted the challenges of maintaining a secure network whilst being pragmatically responsive to the initial impact of lockdown. There has to be a whole systems approach to the restoration of the Scottish Justice System and our approach must remain as agile as it has become in the last few months; the experience of lockdown across Justice has demonstrated what can be achieved

in collaboration. To avoid losing momentum, building a resilient digital services platform will be a priority and in phase 2, planning will accelerate. In the short term, SPS will develop reliable remote communication capability through the use of common platforms. As we move through the phases, SPS Digital Services will work with Directorates to ensure that SPS can access/develop these tools which allow working across the common IT collaboration platforms partners are using. This capability will ensure that SPS will continue to build on the gains and innovative outcomes discovered by operating and conducting business in new ways.

5.1.3.3 – Functional Capacity to Deliver Key Support Services

As regimes develop during phase 2, all establishments will require to ensure that they have a renewed capability to provide logistical support for prison operations. Expanding regimes will require a re-focus on the Operations group functioning to ensure that any staff who were diverted to support lockdown activities in other functions are re-allocated to their usual activities; this includes internal escorting of prisoners, visitors, contractors, and servicing a more active Front of House (FoH) area. Prisoner Reception areas will once again be processing larger numbers as courts re-start and the Justice system deals with the backlog legacy of lockdown. The theme of trade union engagement runs through all activities in phases 2 through 4, and the rebalancing of staff – with attendant reviews of deployment options – will be an important activity for establishments.

5.1.3.4 - Prisoner Progression & Risk Management Team (RMT) Resumption

The suspension of transfers between establishments in Phase 1 and related progression processes was a necessary element of reducing the potential spread of the virus within the custodial setting. The current position across SPS means that a number of key staff and partners who contribute to the RMT are working differently. RMTs are currently only taking place for Risk cases (Order of Lifelong Restrictions (OLRs) and Adverse Circumstances Report (ACRs)). A return to the full suite of progression products will be progressed in Phase 2 at an evidence led, operationally controlled pace commensurate with SPS Physical Distancing Policy and

establishment/partners resource capacity. The advent of remotely hosted RMTs will be a key feature of how we deliver this area of work regardless of phases 2 and 3.

5.1.3.5 – Common Good Fund (CGF) Impact

The introduction of mobile telephony will potentially see an increase in the throughput of canteen products as calls become more relaxed in feel. The consequence of such a shift would be to increase the value attributable to the Common Good Fund (CGF). Canteen sales contribute a significant income stream to this fund used to support the prison population in a number of ways across the estate. Any impact on the income stream of the CGF will need to be considered in terms of how this traditional source of support is affected and its continued ability to support prisoners in different ways.

5.1.3.6 – Estates Development and Maintenance

Estates and Technical Services (ETS) have developed a plan that is aligned with the SG Routemap and which re-activates a number of suspended maintenance activities and capital works, in addition to progressing new maintenance and construction projects that are due to commence this financial year. The plan follows the *Construction Re-Start Model* that was agreed between the Scottish Government and Construction Scotland (CS), the organisation chosen to represent the construction industry during the coronavirus pandemic. The plan will be further developed to include the wider Estates activities including other priority planned preventative maintenance activities.

Both private prisons have different, but no less thorough, maintenance and renewal programmes that will be going through a similar process of re-activation

On 11 June, SG announced that Scotland's construction and maintenance industry can progress the second phase of the six phase CS re-start model and consequently SPS can re-commence suspended construction and maintenance projects on a 'soft-start' basis i.e. a gradual re-introduction of activity where physical distancing can be maintained. Following reviews of projects and work activities, the ETS teams are now working on re-commencing the suspended projects that align with phase 2 of the re-start model and planning for future phases. ETS have also commenced the re-introduction of planned maintenance tasks which had also been postponed over the lockdown period although this will be a gradual process as more contractor capability increases. This is, however, also subject to on-going risk assessment, appropriate control measures being in place and operational support.

5.1.4   Healthcare

5.1.4.1 – Primary Care Services

The delivery of healthcare services in prisons is determined by the Prison Healthcare Directions (Scotland) 2011 which set out the legal responsibilities of NHS Health Boards. While many of the allied health services were suspended during the early stages of the COVID-19 pandemic, all Health Boards continued to deliver basic primary care services which included healthcare assessments for all admissions to custody and the administration of medications including Opiate Substitution Therapy (OST).

All NHS Health Boards have introduced virtual healthcare appointments using Attend Anywhere and telehealth. This has allowed GP appointments and some outpatient appointments to continue during the pandemic. There have also been instances where virtual appointments are being utilised to carry out Reception healthcare assessments and Talk to Me reception risk assessments. The use of virtual technology has many positive aspects including greater confidentiality as there is no requirement for escorting staff to be in attendance. In phase 2, it is intended to continue to use virtual technology for appointments and healthcare assessments, and so there

will be a need to evolve NHS and joint protocols to ensure consistency of approach and ability to measure the effectiveness of this change. It will be important to incorporate the views of patients as part of this evolution.

In Phase 2 of the Scottish Government Routemap, remobilisation plans will be implemented by Health Boards and Integrated Joint Boards to increase the provision for the backlog of demand, urgent referrals and the triage of routine services. This phase will see the reintroduction of some chronic disease management, which could include pain and diabetic services. This restoration of service I communities will be mirrored within the custodial environment in phases 2 through 4.

5.1.4.2 – Mental Health and Addictions Service

During the pandemic lockdown phase, all non-essential one to one appointments were cancelled. Individuals in custody were still able to refer to mental health and addictions services however, these would be triaged and only urgent cases were dealt with in most prisons. Some Health Boards reported very little disruption to the delivery of mental health and addictions services and they continued to support individuals during the pandemic. There have been reports of significant issues with workforce attendance within some NHS Health Boards. Depending on the reasons for the non-attendance (shielding, childcare) this may have a long term impact on the capacity of Health Boards to deliver some services.

During the pandemic many Health Boards have introduced self-help guidance for those in custody with mental health issues. There have also been distraction therapies, relaxation, mindfulness, wellbeing videos and podcasts provided to those in custody and especially to those in isolation. Gym staff have also been providing in cell and exercise yard routines for those who wish to keep physically fit but which has a positive residual impact on mental health.

Uniquely, there is a recognition that the anxieties of living through a pandemic, loss of visits, reduced time out of cell and restricted regime will all have an impact on people in custody's mental health and wellbeing. Throughout the phases of the Routemap, regimes must allow for greater meaningful interactions between staff and those in custody, and between people in custody. An extended period in isolation for those who are clinically extremely vulnerable will have a long term impact on their mental health and wellbeing. In planning for all Phases of this plan, efforts must be made both at local 'tactical' and national 'strategic' levels to ensure they are regularly assessed and reviewed by an NHS healthcare professional and that care pathways are supported by SPS colleagues.

Many NHS Health Boards, supported by SPS, have introduced the administration of Buvidal and Nyxoid. Buvidal is an injectable opiate replacement therapy which can be administered monthly. There are several benefits to the introduction of Buvidal which include:

- Reduction in administration time allowing for positive realignment of staffing resources for both NHS and SPS.
- Reduction in the risk of bullying for Methadone and oral Suboxone which is a protective factor
- Reduced risk of division of opiate substitution therapy due to value as a currency
- Reduced risk of opiate overdose both in custody and on release from custody.

There is currently a proposal from Health Improvement Scotland for evaluating the use of Buvidal in prisons. This evaluation will inform the long-term use of Buvidal in custody whilst presenting another opportunity to reset the purpose and direction of the rehabilitative journey potentially through enhanced addiction services straddling both custody and community.

5.1.4.3 - Allied Health Services

The following healthcare services are currently suspended in line with national guidance:

- Dentistry

- Ophthalmology

- Podiatry

- Occupational Health

- Physiotherapy

There is now increased emergency eye care and dental services available within the community and Health Boards are working towards re-introducing these services in prisons as part of the transition to phase 2. Dental practices are now making preparations to open, and in phase 2 there will be increased availability of urgent dental services. Practices are expected to begin seeing registered patients for more routine care in phase 3. In phase 2 the range of allied healthcare professional services including optometry and ophthalmology services can be expanded, with all community optometry reopening with social distancing safeguards expected in phase 3.

5.1.5   Resources

5.1.5.1 – HR Delivery

Recruitment and Selection

Recruitment and selection for prison officers and estates engineers has continued throughout the pandemic as there is an ongoing critical need to fill these roles. However, the process was modified and interviews carried out via a Virtual Interview Platform (VIP) which has proven to be successful. Other recruitment activity was paused and that will resume in Phases 2 and 3. The VIP will be rolled out to establishment HR teams to commence general recruitment as we move through the SG restriction phases. This will be

supported with guidance documents and on-line training to be issued at the end of June. Workforce Planning Group (WPG) continues to meet utilising video conferencing.

HR Establishment Delivery

HR teams have been provided with IT equipment to enable remote access and are in the main working from home. This is likely to continue for the foreseeable future. Focus of HR delivery has been on the management of absence associated with COVID-19, particularly provision of management information to Governors, Executive Management Group (EMG) and SG, and welfare support to absent colleagues. A COVID-19 plan for supporting staff returning to work (Pandemic Response – Supporting Staff Return to Work), aligned to the Scottish Government Route Map has been developed and has been circulated to key stakeholders for comment. It is anticipated this plan will be issued, via a GMA, week beginning 22 June.

Homeworking

HR has developed Temporary Homeworking Guidance and Homeworking Self-Assessment Checklist to support the increased numbers of predominantly non-operational staff working at home. The guidance is currently with stakeholders for comment. A framework of homeworking principles has been provided to the EMG aimed at ensuring greater consistency of homeworking assessment in line with SG guidance. Once signed off, it is intended this will be published in Phase 2. The Smart Working Project Board has issued a homeworking questionnaire and a revised Homeworking Policy and associate guidance will be developed following evaluation of the feedback from users.

<u>HR Policy Application</u>

COVID-19 restrictions have impacted on a number of core HR activities which will be restarted as we move through the phases of the Route Map. Recognising that physical distancing and remote working will be the norm for the foreseeable future, adjustments to our methods of working are being developed and discussed with TUS partners. Specifically, this is in reference to discipline and grievance matters, but also impacts on all management meetings previously held with staff in an office setting. The expansion of the Virtual Interview Platform is being progressed via Procurement to enable virtual meetings to be held with individual without SPIN access.

5.1.5.2 - Shielding & General COVID-19 Absence Update

SPS has developed a plan which details our approach to supporting staff back to work following COVID-19 related special leave. The plan does not provide set dates for a return, but rather the conditions which are required to facilitate a safe return to work. Furthermore, it should be emphasised that SPS will continue to support staff to stay well, protect their families and to work remotely, where reasonable and practicable. During phases 1 and 2, remote working will remain the default position for those who can. Staff carrying out non-essential, non-office, indoor activities can return. Those staff who have received a letter from the NHS to shield should not attend the workplace but other staff can return if the criteria in the Pandemic Response – Supporting Staff Return to Work (Draft) have been met. This will require a Safe System of Work and if necessary, Occupational Health advice. Non-essential office based staff will continue to remain at home.

5.1.5.3 – Partners' Status

SPS has maintained working relations with all key partners across Health, Education and Learning, Parole, Criminal Justice Social Work, Department of Work and Pensions (DWP), SCTS, Police Scotland and third sector partners. In almost all instances collaborative

working has enabled the critical business to be delivered in innovative ways which allows for a more flexible approach to service delivery. The key challenge moving forward will be two-fold. Firstly, bringing the Justice system back to recovery operating levels requires a whole system approach allowing partners efforts to keep pace with the collective system capacity. Creating a working, shared vision of workload volume and delivery timescales is crucial to organisational stability across the sector. Secondly, the positive gains made from new ways of working with partners must be embedded in new practice, a system-wide drive towards returning to old ways of working needs to be resisted. Our contribution to the Justice Recovery Planning debate requires to reflect these twin challenges as we equally reflect internally on how best to proceed with post COVID-19 realities.

5.1.5.4 – Media Communications – Social Media Content Review

SPS has adopted a very proactive approach to communicating both with those in custody and the wider community. It was identified at an early stage that good information flow was an essential element to the successful management of the outbreak. Consequently, there has been a wide range of regular communication with those in custody which has been shared via social media with family and friends. We have also used these channels to promote awareness of video visits and the availability of electronic payments into PPC. Working with partners we have promoted greater awareness of our key messaging among key audiences.

It would be our intention to build on this experience in the development of communication planning for the Route Map out of the current restrictions. It is recognised that an effective and timely communication of the various elements of this process will be essential to the success of the plan. The key challenges in phase two are likely to be ones of internal communications and we will need to further develop the mechanisms we have in place for communication with those in our care. The phasing and the timing of relaxation of restrictions may not parallel those in the community and we will have to be able to clearly articulate this. The different pace of "normalisation" may well be particularly challenging and may increase the requirement for speed to market with some of the communication products both in phase two and three this will have resource implications which require further consideration.

6.0   Phase 2 to Phase 3

6.1.1 General Operations

6.1.1.1 - Operational Guidance

Please refer to the latest version of Operational Guidance for currency: [COVID-19 Phase 2 to Phase 3 Communication and Operational Policy Guidance Compendium.](#) See section 5.1.1.1

6.1.1.2 - Cell Sharing Risk Assessment (CSRA) Criteria

Please refer to the latest version of [CSRA document](#) for currency – this variant has been altered to reflect latest [SPS Physical Distancing Policy](#). The ability to share cellular accommodation in normal conditions, and consequentially to operate a consistently evolving regime will remain under review in light of these parameters. See section 5.1.1.2

6.1.1.3 - Visits to Prisons by Families and Friends

All visits were stopped effective from 23 March 2020 and in transitioning to Phase 3, standard prison visits – both open and closed - will resume. The practical functioning of such visits will be subject to any physical distancing measures applicable at the time of transition. Agents or other professional visits will resume on basis of partner engagement/return to site based working.

Virtual visits for all prisoners was enabled across all sites from 16 June 2020 and in phase 3, such visits will be co-facilitated as a service. All establishments must make logistical provision for this and strike appropriate agreements with local partners. Details of the policy change are contained in the COVID-19 Phase 2 to Phase 3 Communication and Operational Policy Guidance Compendium.

6.1.1.4 - HSE Engagement & Local Health & Safety Activity

SPS will have developed a dual approach to maintaining a new relationship with HSE and in managing enhanced H & S activity across all sites. Establishment H & S control and assurance processes will have evolved and the system of assurance will be better informing development of local policy to optimise safety of staff and prisoners. In moving to phase 3, OD will review the support necessary to support establishment based. Collaboration and engagement with trade union partners will remain a high priority at both local and national levels.

6.1.1.5 - Review Appropriate PPE Usage

SPS sites will be adhering to latest guidance on PPE usage contained within the SPS Physical Distancing Policy and COVID-19 Phase 2 to Phase 3 Communication and Operational Policy Guidance Compendium. See section 5.1.1.5

6.1.1.6 - Recreation Review

The suspension of recreation was a necessary element of reducing the potential spread of the virus within the custodial setting. All recreation in association was stopped effective from 23 March 2020 and in transitioning to Phase 3, people can begin to meet in extended groups subject to physical distancing and hygiene safeguards. Details of the policy change are contained in the COVID-19 Phase 2 to Phase 3 Communication and Operational Policy Guidance Compendium.

6.1.1.7 - Cell Association Review

The suspension of cell association was a necessary element of reducing the potential spread of the virus within the custodial setting. All in-cell association was stopped effective from 23 March 2020, and in transitioning to Phase 3, people can begin to associate in wider groups subject to physical distancing and hygiene safeguards. Details of the policy change are contained in the COVID-19 Phase 2 to Phase 3 Communication and Operational Policy Guidance Compendium.

6.1.1.8 - Outside Exercise Review

The suspension of outside exercise in large groups was a necessary element of reducing the potential spread of the virus within the custodial setting. All outside exercise in large groups was stopped effective from 23 March 2020 and in transitioning to Phase 3, exercise in extended groups is permissible subject to physical distancing and hygiene safeguards. Details of the policy change are contained in the COVID-19 Phase 2 to Phase 3 Communication and Operational Policy Guidance Compendium.

6.1.2   Direct Prisoner Services

6.1.2.1 - Enhanced Annual Learning Plan

Based on the agreed FE Strategy with Fife College and employing the blended learning environment described at 5.1.2.1 each establishment will have a learning plan agreed for extending service delivery as resource and capacity dictates. The resultant plans and service schedule will require to meet the contractual obligations and expectations of existing provider/client relationship with the

demands of localised needs based assessments. Class based delivery will be subject to SPS Physical Distancing Policy and other IT initiatives may still be in the course of development

6.1.2.2 - Soft Start for Non-All Critical Prison Based Industries

The suspension of work based activities across SPS sites meant key commercial contracts were immediately impacted. The restoration of industrial workshop activity to service commercial contracts and critical SPS internal products was based on commercial and operational prioritisation. Transitioning to Phase 3 enables the remainder of industrial/training facilities to resume operation subject to resource capacity. The ability of workshops to operate will be based on SPS Physical Distancing Policy in conjunction with Health & Safety advice. In migrating to this phase, establishments will liaise with OD to agree changes to the number of prisoners in workshops and by extension, the overall work offer.

6.1.2.3 - Social Dining

The suspension of social dining was a necessary element of reducing the potential spread of the virus within the custodial setting. All social dining in large groups was stopped effective 23 March 2020 and in transitioning to Phase 3, social dining will once again be permissible subject to the SPS Physical Distancing Policy and hygiene safeguards. Details of the policy change are contained in the COVID-19 Phase 2 to Phase 3 Communication and Operational Policy Guidance Compendium.

6.1.2.4 – Managing Ongoing Resumption of Court Business

The resumption of courts started scaling up from 15 June 2020; and whilst the task of considering the detail of how the court system backlog will be addressed is one for other agencies, SPS will be materially affected. As the Justice System recalibrates, SPS may

encounter particular challenges as court volumes increase against our resource capability. This dynamic will continue to expand as the week's progress and will form part of daily operational briefings. Moving into phase 3, OD will enhance monitoring activity, working with partner agencies and establishments to ensure that there is alignment across Justice and that there is a practical capability to absorb increasing numbers of committals. Details of the policy change are contained in the COVID-19 Phase 2 to Phase 3 Communication and Operational Policy Guidance Compendium.

6.1.2.5 – Management of Establishment Parole Board Activity

The suspension of on-site Parole Hearings was a necessary element of reducing the potential spread of the virus within the custodial setting. The continuation of virtual hearings has been a real success story in terms of business continuity throughout the lockdown period.

The virtual hearings format remained through phases 1 and 2 with consideration of a return to on-site hearings being examined for phase 3. This will be a gradual restoration in a developing area and form part of regular operational briefings. Future plans will need to reflect how we set new expectations and new routes to evidence progression all being subject to the SPS Physical Distancing Policy and hygiene safeguards.

6.1.2.6 - Population Management

OD already manages a significant amount of data in relation to the prisoner population of the SPS. Moving into phase 3, the directorate will evaluate whether there needs to be any enhancements to this system as the ability of the Justice system to recover, and the knowledge of any emerging challenges becomes apparent. Longer term, SSE will work with all directorates to create a framework for data management to ensure any data entering the public domain is assured.

6.1.2.7 - Transfers, Placements & Home Leave

The suspension of transfers between establishments, community access and home leave processes was a necessary element of reducing the potential spread of the virus within the custodial setting. SPS HQ are working with establishment based teams to establish the priority caseload and resource requirements to inform corporate recovery planning decisions. In migration to phase 3, a return to routine prisoner transfers, placements, exceptional escorted day absences (EEDA) and the home leave scheme will form part of regular operational briefings. All such movements will be re-instated at a controlled pace commensurate with SPS Physical Distancing Policy and establishment/Justice partners resource capacity. For the time being remotely hosted RMTs will remain a feature through Phase 3.

6.1.2.8 – Prison Based Gymnasia & Satellites

The suspension of main and satellite gymnasia was a necessary element of reducing the potential spread of the virus within the custodial setting. All usage was stopped effective from 23 March 2020 and in transitioning to Phase 3, the use of main and satellite gyms is permissible subject to SPS Physical Distancing Policy and practical hygiene safeguards. OD will arrange for a series of national risk assessments to be undertaken leaving local co-ordinators to ensure that such assessments are crafted to reflect local geographies. Details of the policy change are contained in the COVID-19 Phase 2 to Phase 3 Communication and Operational Policy Guidance Compendium.

6.1.3   Key Support Services

6.1.3.1 - Administration Functions Restored or Up-scaled

Scottish Government's Route Map for phase 3 sees indoor offices re-open with protective measures in place. For prison establishments, there will be a need - in the SPS Route Map - to review the future role to be played by administrative support staff across all functions; there will need to be a reconciliation between the evolving capability of staff to work remotely and effectively in 'normal' mode, and the desirability – for a range of reasons not least of which is staff interaction – to work in the traditional office environment. This will be an opportunity to consider new ways of delivering the critical work provided by administration staff, and there will be a parallel requirement to work very closely with staff and relevant trade unions.

6.1.3.2 - VT Activities Re-Open

The suspension of VT activities was a necessary element of reducing the potential spread of the virus within the custodial setting. All activity was stopped effective from 23 March 2020 and in transitioning to Phase 3 the restoration of VT activity is permissible once the phase 2 essential contract prioritised workshops have been sufficiently restored. In this phase, any remaining industries facilities can resume operation subject to resource capacity. The ability of workshops to operate will be based on [SPS Physical Distancing Policy](#) in conjunction with Health & Safety advice.

6.1.3.3 - Peer Support

The suspension of Peer Support for example in the form of the Listeners Scheme was a necessary element of reducing the potential spread of the virus within the custodial setting. All usage was stopped effective from 23 March 2020 and in transitioning to phase 3, the use of Peer Support will be permissible subject to physical distancing and hygiene safeguards. The Samaritans National Helpline has been added to the PAN list for the roll-out of mobile telephony in establishments and there will be further prisoner population communications in the coming period. Prison establishments will have a range of partners with whom they can re-engage.

6.1.3.4 – Estates Development and Maintenance

Estates and Technical Services (ETS) will have further developed their Estates and project recovery plans, aligned with the SG Route Map and CS Re-Start Model. This will include maintenance and construction activities which are important to the functioning of the public sector prisons and, where possible, addressing any back-log of maintenance that has arisen as a result of the lockdown. This plan will have been augmented to include other Estates activities including progress of priority planned building system upgrades or replacements.

Moving into this plan's phase 3, re-started projects will be gaining momentum and other larger scale development planning and build projects such as the new Women's Estate will accelerate.

6.1.4   Healthcare

6.1.4.1 - Recovery Services

Please refer to section 5.1.4.2 – Mental Health and Addictions Service. Phase 3 will see an expansion of screening services and adult flu vaccinations. By Phase 4, the full range of health and social care services would be provided with greater use of technology to provide improved services including those in custody.

6.1.5   Resources

6.1.5.1 - Amended Rules for Visits

See section 5.1.5.2

6.1.5.2 - Shielding & General COVID-19 Absence Update

SPS will continue to follow the operational recovery guidance to support staff back to work from special leave. SPS will reconsider the circumstances of any absent staff, who are not shielding, who were unable to return in phase 2 to explore whether a return is now possible. During phase 3, non-essential office based staff can return to work with physical distancing – but remote working will remain the default position for those who can.

6.1.5.3 – SPS Staff Training Recovery Planning

From the start of the pandemic in March, other than critical training for new staff (operational and non-operational) training was suspended. All routine local training facilitation will continue to be suspended until 31st August 2020. Competence periods for all products have been extended for a total of 6 months meaning no staff will fall out of competence in this period.

SPS College will continue working with relevant directorates to effectively prioritise and sequence the restart of training and this will be communicated to Governors and local training teams in phase 3. As well as considering their criticality to safe, legal and compliant running of our prisons, training products will be considered in three groups:

- *eLearning.* Beyond use of IT space no physical distancing requirements and therefore the key consideration is staff capacity.
- *Classroom courses with no practical elements.* These can be delivered while maintaining physical distancing but training capacity will be reduced due to physical space i.e. no of training delegates in a room. Virtual (webinar) approaches are being explored to address some of these elements.
- Classroom courses with practical 'hands-on' elements including PPT, C and R and First Aid – each product will be subject to a risk assessment and SSOW developed to support delivery. SSOW have been developed for PPT and C and R but local delivery is not in place at this stage. Again training capacity will be reduced due to classroom space*.*

6.1.5.4 – Risk Management Team (RMT), Generic Programmes Assessment (GPA) & Risk Management Planning

The suspension of risk related progression products and processes was a necessary element of reducing the potential spread of the virus within the custodial setting. A return to the full suite of progression products in phase 3 will be at an evidence led, operationally

controlled pace commensurate with [SPS Physical Distancing Policy](#) and establishment/partners resource capacity. Dialogue is continuing with partners on recovery planning during Phase 3

6.1.5.5 - Amended Prison Rules Review

In adapting the range of prisoner services to cope with the lockdown measures imposed on 23 March 2020, new Prison Rules were laid before Parliament on 7 April 2020 and further amendments set down on 15 June. In moving to phase 3, there will be a requirement to check that the underpinning authority required to evolve prison operations is still applicable. Legal Services will lead this review and report back to the Chief Executive

6.1.5.6 - Homeworking review

HR has developed Temporary Homeworking Guidance and Homeworking Self-Assessment Checklist to support the increased numbers of predominantly non operation staff working at home. Smart Working Project Board members have been consulted but wider circulation including to TUS is yet to take place. A framework of homeworking principles has been provided to the EMG aimed at ensuring greater consistency of homeworking assessment in line with SG guidance. This document has not been signed off. The Smart Working Project Board has issued a homeworking questionnaire and a revised Homeworking Policy and associate guidance will be developed following evaluation of the feedback from users.

6.1.5.7 – Media Communications – Social Media Content Review

As considered at 5.1.5.5, the different phases of the recovery create different communication challenges. The development of SPS' social media footprint and its enhanced use of technologies to deliver key messages in prisons will be of great value in this phase of the recovery process. Whilst SPS will have to continue in effective public and media communication, above all there is a need to

maintain the confidence and support of those in our care. As there are opportunities to engage with the prison population, we have to be able to take those opportunities and evidence "you said we did ". Progressing work on the user voice will be of great value in phase 3 as will proactive involvement with partners and the third sector particularly those groups who have close connections with the families of those in our care (e.g. Families Outside Visitor Centres etc.).

7.0   Phase 4

It is likely that phase 3 of the SPS Route Map might last for some time given that the Government's own Route Map for movement to phase 4 pre-supposes that a necessary condition for transition will be that the virus is no longer a threat to the public. One example of a metric for this in the Government plan is that *'…an effective vaccine has been developed and used on a sufficient scale in Scotland …'*. On this basis and at time of writing, there are a number of variables which have to be considered before effective organisational planning can take place so an update of this plan this will be a feature on entry to phase 3

8.0   Preparing The Ground

SPS is now beginning to plan for business recovery and renewal, taking into account the longer term implications of COVID-19 for the Service. A key aspect of this is to ensure that the SPS actively contributes to, and builds upon the positive Justice wide system improvements which have evolved in response to the pandemic. In seeking to prepare for the mid-longer term future, SPS will undertake a broad impact assessment against each of the four phases of the national Route Map. Taken together, this impact assessment work along with the business continuity work already completed, will support the development of a 'Shape of Service' for approval by SPS' senior leadership. This will set the tone for moving from pandemic response to renewal planning in a way which places the health and wellbeing of those in our care, staff and communities at the heart of everything we do.

Though this SPS Route Map is – like the Government's plan – somewhat fluid, it is anticipated that a single 'renewal plan' will likely commence once the current pandemic plan comes to an end. In the meantime, SPS will create the structure necessary to drive such an initiative.

9.0   Conclusion

No country or organisation has, in living memory, had their economies, businesses and people disrupted so significantly, deeply and so quickly. This has made the achievements of SPS all the more significant over the last 3 months; not only has it adapted to the obvious health risks to both staff and prisoners but it has also done so in parallel with colleagues across Justice.

It has also maintained operational stability across the estate and in providing mobile telephony and virtual visits across the estate, it has managed complex projects at speed and enhanced service in doing so.

The aim of this document is to provide a sense of direction as SPS, other Justice partners, contractors and suppliers continue to adjust. The Government is clear that every phase will include:

• regular hand washing;
• appropriate cough and sneeze etiquette;
• being acutely aware of the symptoms of the virus;
• engaging with the Test and Protect system as citizens (and staff); and
• isolating if you have the virus or someone you have been in contact with has had it.

However, this plan also provides a starting point for a re-shaped and renewed SPS to move forward. Whilst there is still some uncertainty in the management of COVID-19 and so having to take a step backwards if the virus is starting to spread more rapidly

again might be necessary, nonetheless there is a clear upward trajectory and the intention is to manage the risks; but also to embrace the opportunities. Each phase of this plan will be aligned to the Government's own Route Map and be subject to review; this will allow the organisation quickly and proactively.

The safety of all who live and work within SPS remains the highest priority and the efforts of all will be dedicated to keep supporting that.

Operations Directorate

June 2020