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LINDA POLLOCK
Chief Executive

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Alyn Smith MSP
Convenor
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Dear Mr Smith

CRIMINAL JUSTICE COMMITTEE REQUEST FOR SCOTTISH PRISON SERVICE INFORMATION

Thank you for your letter dated 26 June 2026, and your questions following evidence given to committee by Sara Snell, His Majesty's Chief Inspector for Prisons in Scotland.

I am delighted to have taken up the role as Chief Executive, following from person-centred leadership of Teresa Medhurst. As is well documented, the Scottish Prison Service, those in our care, and our staff are under significant pressure. Our population is at a record high and the challenges we face due to serious and organised crime, mental health, and the threat posed by illicit substances are unprecedented.

I welcome the committee's commitment to working constructively with us in Session 7 and do of course happily reciprocate that sentiment. Amid all the challenges faced, I also see real opportunities to continuously improve how we support the wellbeing and rehabilitation of those in our care, the work of our staff, and the safety of the communities we serve. I look forward to welcoming the committee to HMP Low Moss on 19 August alongside the Chief Inspector and her team; and for Committee members to see first-hand the challenges for those living and working in prisons in Scotland.

You have raised specific questions following the evidence session from the Chief Inspector which I address below, and would be happy to provide more information where helpful.

HMIPS recommendations and governance

HMIPS have recently introduced Desired Outcomes in place of recommendations. These are included in each report, and it is then for SPS to set out how those outcomes will be achieved.

This work is tracked through Action Plans, which are provided to HMIPS at three and 12-month intervals. Some of those actions are for establishments to lead on, while others are the responsibility of colleagues working across headquarters, therefore the completion of Action Plans is a collaborative effort. Each Action Plan clearly states the action required, the person responsible for delivering it, and the progress achieved, so it can be carefully monitored.

SPS is currently reviewing our engagement with, and governance of HMIPS' Desired Outcomes working closely with HMIPS on actions taken forward in response to inspections. We want to ensure that examples of good practice are already recorded and made available to senior leaders, Governors and Deputy Governors across our establishments. A key priority for us is ensuring the presentation of this information tis in a manner that is as accessible as possible and supports our culture of continuous learning and improvement, and which in turn supports better outcomes for those in our care.

Use of data

HMIPS's findings are only a small part of how SPS seeks to use data to continuously improve our practices.

SPS' Research and Evaluation team provides strategic oversight of all research activity across the organisation, including both internally conducted studies and externally commissioned activities. Its role is to ensure that research is robust and aligned with organisational priorities, and activities often focus on assessing the effectiveness and impact of programmes, services, activities, and initiatives on people in our care.

This work involves generating evidence to understand how interventions impact on the experiences of individuals within custody, including their wellbeing, engagement, and progression. The team also examines the extent to which programmes and initiatives contribute to better outcomes for people in our care, helping to inform policy, practice, and service development across the organisation.

In early 2026, the Research and Evaluation team established a renewed strategic focus on strengthening SPS' evidence base and evaluative capability. This includes building organisational capacity, developing methodologies and processes, and putting in place the foundations necessary to support more consistent and robust assessment of outcomes and impact.

Through this work, the function aims to enhance understanding of the effectiveness of improvement activities across SPS, providing greater insight into how initiatives, programmes, and service changes contribute to better experiences and outcomes

for people in our care. Over time, this will support a more evidence-informed approach to improvement.
SPS data is largely gathered though a central database with a number of supplementary systems in use around the organisation to support processes such as Home Detention Curfew, incident reporting, compassionate release, Psychology programmes, and so on.

Daily data on the population, including those held on remand, is manually compiled and circulated by operational colleagues. Internal system limitations have prevented automation of processes around providing near real-time data, although work is underway for a data strategy for the organisation.

In early 2026, SPS commissioned external expertise to assess our approach to data strategy. The findings of this report are now under consideration by the SPS. In terms of data accessibility, we are committed to being open and transparent as an organisation, publishing a quarterly summary of data on our website, details of which can be found here. The publication schedule for this data has been affected in recent years by the need to respond to emergency initiatives, such as Emergency Early Release, but the intention is to resume regular publication.

The same data, to some extent, is collected on those on remand as those serving a sentence (excluding items such as sentence length, or programme attendance, which are not relevant for this cohort). Analysis is carried out by the central Data and Analysis team when requested to support policy development relating to this group.

SPS' Key Performance Indicators (KPIs) cover a range of operational measures such as levels of violence, purposeful activity hours, deaths in custody, escapes and absconds, and measures of overcrowding. These are made available to the Executive Management Team through a dashboard updated monthly, along with formal reporting – accompanied by other data – quarterly in the SPS Improvement Framework report. Our annual KPI data, including trend information where available, is published in our Annual Report & Accounts. Our 2025/26 report is due to be published shortly. Our current Corporate Plan runs until March 2028. The development of the new Corporate Plan presents the opportunity to review and renew our KPIs.

Organisational risks are identified through several information sources, including intelligence, operational data, horizon scanning, assurance mechanisms, and external scrutiny. This collectively provides us with a sound evidence base for identifying risks at the corporate level. In addition, processes are in place to understand the changing population pressures and its impact through weekly information returns from establishments. Much of the wider data required to assess performance and risk is collected, but internal sharing of data is restricted by existing systems and infrastructure as well as limited analytical resource.

Health and wellbeing of those in our care

The death of an individual in our care has a profound impact on all those who loved, supported, or lived alongside that person. We are committed to learning and improving from each sad loss to deliver lasting and meaningful change for all those in custody, and to further support our staff to support them.

The information collated about people who die in our care includes their name, prisoner number, most recent establishment, date of admission, legal status at the time of death, and the date and time of the incident during which they were found deceased or requiring emergency medical intervention.

In addition to this, the records are linked to demographic and operational information held within the SPS prisoner records system. This includes date of birth, gender, self-reported ethnicity & nationality, any periods of additional support (such as through Talk to Me, our suicide prevention policy), and other information retained for prisoner management purposes.

The data is used to support dashboard development and analytical reporting for the SPS Deaths in Custody Oversight Group, longer term projects like ligature toolkit development, and work which contributes to SG Justice Analytical Services reporting. A fortnightly report is also produced for the SPS Executive Management Group (EMG) which ensures oversight at the most senior level of the organisation.

The death in custody dataset is linked with data on suicide prevention, healthcare specified accommodation, and periods during which an individual received support while under the influence of a substances.

A Death in Prison Learning Action & Review (DIPLAR), with an independent Chair, is undertaken following every death in custody to ensure we take learning and seek ways to improve policies and practices.

The DIPLAR process provides a more detailed, individual perspective on a death in custody. NHS data, relating to a person’s healthcare and treatment, contributes to this process by providing additional information on their medical care and circumstances. Following each DIPLAR meeting, a report including a Learning and Action Plan is completed and subsequently reviewed at a national level by members of the SPS Health Policy Team to identify key learning points.

Some demographic groups are disproportionately represented among deaths in custody. For example, while people over the age of 65 accounted for approximately 2.6 per cent of our population between 2014/15 and 2024/25, they represented 20 per cent of all deaths between 2015 and 2024.

People on remand also account for around 26 per cent of our population, but 46 per cent of all suicides. People in their first 72 hours are also at a higher risk, accounting for 11 per cent of suicides. For this reason, we have put additional support in place for young people in their first 72 hours in custody.

The data we collate is used to inform policy and operational practice, such as the review and overhaul of our suicide prevention strategy as we seek to provide the best possible support to people in some of the most vulnerable moments.
I hope this information responds to the queries following the session with the Chief Inspector, and I look forward to working with you and the Committee.

Yours sincerely

LINDA POLLOCK
CHIEF EXECUTIVE