Dear Neil,


I am very grateful for the work undertaken by the Committee in preparing this report. The report is timely, coming over 5 years after the transfer of responsibility for the provision of healthcare in prisons from the Scottish Prison Service (SPS) to the NHS. Although the overall prison population has stabilised and reduced marginally in recent years, the health and social care needs of people in our prisons are increasing, with a growing population of older prisoners.

I acknowledge the dedication and commitment of staff in delivering health and care services within prisons. The Committee heard examples of good work already being progressed, including throughcare, support for substance misuse and mental health, but your report also highlights further opportunities for addressing health inequalities within the prison environment. Those health inequalities can be particularly acute and reflect the challenges partners face in providing the quality of care we aspire to.

I note and welcome the broad range of recommendations made by the Committee. As I said in my evidence to the Health and Sport Committee, the Scottish Government is dedicated to increasing the consistency of care across Scotland’s prisons. Underpinning the recommendations in the Committee’s report, including at paragraphs 37 and 134, is the need for improved governance and strategic leadership in both the long-term planning and delivery of healthcare in prisons. I am determined, therefore, that the Scottish Government’s response to the challenges you highlight should be both strategic and effective.

Both the Cabinet Secretary for Health and the Cabinet Secretary for Justice have identified the potential benefits of closer collaboration between health and justice on a range of issues, including improved trauma-informed services for the victims of serious crimes and early intervention for people with mental health and low-level distress who are in contact with the justice system.

To assist this, we are establishing a Health and Justice Collaboration Improvement Board, co-chaired by the Director-General, Health and Social Care and Chief Executive of NHS Scotland, Paul Gray, and the Director General, Education, Communities and Justice Paul Johnston. This will
bring together senior leaders from across Health and Justice to improve outcomes for people and communities, support ambitions to reduce health inequalities and risk of offending, improve performance and achieve greater value for money across the whole system, improve collaborative working and prioritise prevention. The Board will report to the Cabinet Secretary for Justice and the Cabinet Secretary for Health and Sport. We are currently setting up this work, and expect the Board to meet for the first time in September. An immediate priority for the Board will be to review and ensure progress on the specific recommendations identified in the Committee’s report.

I recognise that the Committee will expect detailed responses to its report’s individual recommendations. Please be assured that we will provide these as the work of the new Board progresses.

Best wishes,

AILEEN CAMPBELL