Older prisoners should be held in establishments that meet their basic needs, receive the same level of basic health and social care as non-prisoners, and receive adequate support on release.

Key issues

People aged 50 and over are the fastest growing age group in the prison population and yet no national strategy for their care and management exists. At the end of December 2015 there were 12,335 prisoners aged over 50 in England and Wales, including 4,308 over 60\(^1\), and overall one in seven prisoners is now aged 50+, compared to one in 14 in 2002.\(^2\) Studies have found that 37% of prisoners aged over 50 have a disability (21% of all disabled prisoners)\(^3\) and it has been estimated that dementia affects approximately 5% of prisoners over the age of 55.\(^4\)

A 2013 Inquiry by the Justice Select Committee found that in too many cases older prisoners were being held in establishments that could not meet their basic needs, were not being provided with essential social care, and were being released back into the community without adequate support. The Committee recommended that there should be a national strategy for older prisoners\(^5\). The Government did not accept this recommendation\(^6\), although the National Offender Management Service (NOMS) has now developed instructions for prisons and prison staff on supporting prisoners with care and support needs and on safeguarding\(^7\). The Care Act 2014 has also clarified that a prison's Local Authority is responsible for assessment of need and provision of social services, if a prisoner meets eligibility criteria.

\(^1\) Ministry of Justice, *Offender Management Statistics*, Prison population 2015, Table 1.3
\(^3\) Table 3, HM Chief Inspector of Prisons (2009) *Disabled Prisoners*, London; The Stationery Office
\(^6\) Government response to the Justice Committee’s Fifth Report of Session 2013–14: Older Prisoners
Good practice does exist\(^8\) and is promoted by bodies such as the RECOOP, Clinks and the Older People in Prison Forum, but needs to be universal. Local voluntary sector partnerships can improve coordination between prisons and health and care services, for example Age UK Norwich has worked with HMP Norwich.

**Policy Proposals**

- A national strategy for older prisoners should be developed.
- Older prisoners should receive the same level of basic social and health care support as non-prisoners, including primary and dental care, and to promote general wellbeing.
- Although it has been clarified that the legal duty for providing health care lies with NHS England and with local authorities for social care, these organisations should work with NOMS to ensure that services are provided in an effective and coordinated way, and are adequately funded.
- Prisons must ensure that they meet their Public Sector Equality Duty under the Equality Act 2010, for example by ensuring that accommodation is suitable for prisoners with mobility or other support needs and by providing age specific regimes for prisoners.
- NOMS should ensure that prison staff receive training in how to care for older people.
- As part of the Government’s rehabilitation programmes, guidance should be developed and disseminated to Resettlement Teams outlining best practice and responsibilities in resettling older prisoners including pensions advice, housing, and accessing healthcare.
- Voluntary sector agencies have a key role to play in improving the lives of older prisoners both inside and outside prison. More opportunities and resources should be given to the third sector to provide these and other services to older prisoners.
- Older prisoners’ forums should be established in all prisons with an older population.
- NOMS should ensure that prison and health care staff deliver high quality end of life care to prisoners. Being in prison should not negate the right to a dignified death, both for the individual and their families.

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