

The effectiveness of the Older prisoner Health and Social Care Assessment and Plan (OHSCAP): a randomised controlled trial

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Plain English summary

OHSCAP: a randomised controlled trial

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Plain English summary

Older prisoners (aged ≥ 50 years) are the fastest growing subgroup in English prisons, and have complex health and social care needs.

In a previous study, prisoners and prison and health-care staff worked together to create an assessment and care planning tool designed to identify what help older prisoners needed to cope better with prison. The resulting Older prisoner Health and Social Care Assessment and Plan (OHSCAP), designed to be managed by either prison officers or health-care staff in collaboration with the individual prisoner, included help with ongoing health-care issues and everyday activities that might be affected by age, for example being able to move about the prison easily, use bathrooms and showers, and access suitable activities. In a small trial, the plan was found to be more successful than standard prison practices in identifying and dealing with older prisoners' needs.

Described in this report is a full-scale randomised controlled trial of the OHSCAP, which was completed across 10 English prisons. In total, 404 prisoners received either the OHSCAP or treatment as usual. We measured how well prisoners' needs were identified and whether or not those needs had reduced after 3 months. We also examined 150 OHSCAP documents to judge how required processes were followed. A total of 14 prisoners and 11 staff were interviewed about the process and whether or not they had found it useful. The costs of delivering the OHSCAP were calculated.

The OHSCAP did not make any difference to how well older prisoners' needs were met. Only 59.3% of identified needs became care plan items to be addressed. We found that most processes had not been carried out as planned, and everyone who was interviewed thought that prisons were currently struggling to offer individual care services such as these to address prisoners' needs. The intervention did not cost more than usual care.

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