



Resettlement and care
for older ex-offenders
and prisoners

GOOD PRACTICE GUIDE

approved premises



about **RECOOP**

RECOOP promotes the care, resettlement and rehabilitation of older prisoners, offenders and ex-offenders, especially those over the age of 50, in particular but not exclusively through the provision of support services, advocacy, financial advice, mentoring on issues such as employment and training, and advice on housing and health, enabling them to take control of their lives and remain free from offending, and preventing them from becoming socially excluded.

We provide Consultancy, Training & Direct Support Services for prisons and offer our expertise and experience of having worked with over 60+ prisons, to explore innovative and low, or zero cost, solutions to the challenges posed by this growing prison group.

If you would like to know more about our services, please contact us at **info@recoop.org.uk**

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foreword



The number of older people within the criminal justice system is steadily rising and has done so for the past 20 years. Older offenders currently make up **15%** of the prison population with 12,700 offenders aged 50+ in prison in England and Wales (MOJ 2016). As a result of Transforming Rehabilitation, there is a disproportionate number of older offenders now being managed by the National Probation Service, which means that the over 50s caseload for individual Offender Managers may also have increased considerably.

There is evidence that their physical health age can be ten years greater than their contemporaries in the community (Wahidin & Cain, 2006) and Approved Premises are now receiving more referrals than ever for older people.

It is especially difficult for an older offender being released into an Approved Premises, particularly if they are moving to a new area as they are less resourceful, adaptable and more vulnerable than their younger counterparts.

some examples of the unique challenges they face are:

- older offenders with mobility issues are leaving prison without wheelchairs or walking frames as they belong to the prison. This means that they are arriving in towns and cities without an ability to walk.
- some, leaving prison in winter months, have no warm clothing or coats.
- elderly and vulnerable offenders are leaving prison to new communities without anyone to contact (severed ties with families) and have no support at all which exacerbates the feelings of loneliness and isolation.
- pensions or benefits may not be set up and a lack of Social Fund provision could result in an acute level of crisis.
- after long periods of incarceration older people are leaving without the ability to use a cash machine / self-serve aisle in a shop / computer / mobile phone and do not recognise the new technological world around them. This causes anxiety and fear.
- confidence and self-esteem are generally low for older offenders coupled with dealing with the stigma associated with their offence.

RECOOP has been proud to manage a project, funded centrally by NOMS which was designed to “*Assess the need and ability of Prisons and Approved Premises to adapt their regimes to meet the needs of older offenders*”. The project, which ran for one year, ended in June 2016.

During the project we worked with two Approved Premises:

- Wenger House, Stoke • St Joseph’s, Salford

It became apparent during the life of the project, that there was already a great deal of good work being carried out with older residents at these Approved Premises. Despite the significant and ongoing change within the National Probation Service and the economic challenges faced, there was a definite commitment to improve the provision of services and support to older residents.

We have taken our research and project development achievements, coupled with some best practice already in existence, and consolidated the following information into a ‘Good Practice Guide’ to act as a support reference for continued use beyond the life of the project.

We hope that the Guide provides a valuable insight into how to adapt practices to make them age-appropriate and suitable for an increasing older population residing within Approved Premises. Crucially it also provides some resources and support to help others establish long-term, sustainable improvements to current practices.

In addition, and as part of our legacy, we have created many resources offering practical support which can be downloaded by registering as a member at www.recoop.org.uk. These include:

- | | |
|--|--|
| <ul style="list-style-type: none"> • health related posters for display purposes • additional Good Practice Guides in relation to: <ul style="list-style-type: none"> • accessing local services • resettlement planning • living in temporary accommodation • living on a budget | <ul style="list-style-type: none"> • session plans: <ul style="list-style-type: none"> • how to use chip-n-pin • doing the laundry • get fit, get walking • healthy eating • reminiscence • relaxation • benefits of volunteering |
|--|--|
-

RECOOP will of course continue to provide support and expertise to those working with older offenders. Our specialist commercial consultancy and training services can be accessed through our website. Please use the ‘contact us’ tab to register your interest and one of our consultants will be in touch to discuss your needs.

Finally, a very big thank you from the team at **RECOOP** to staff and managers at both of the Approved Premises involved in this project. Their willingness in working with us to bring about some of the important changes has resulted in the development of the ‘Good Practice Guide’ which will allow other Approved Premises to go on and make positive changes that will impact on the lives of older offenders.

1 older resident consultation



The most important thing to me is feeling good in myself, being independent and not to be a burden on others.

RESIDENT



The research has been very positive. The fact that older residents are being asked for their opinions is an important step, as they are not often asked.

MANAGER, WENGER HOUSE



Depending on the proportion of older offenders at your Approved Premises, it can be difficult to fully understand their needs and meaningfully consider what provisions could be made to improve outcomes, or where age-appropriate support should be delivered. Older offenders are generally less likely to raise issues; therefore their needs are often overlooked or missed altogether.

The transition from prison to Approved Premises can be difficult and challenging, particularly for an older person. Purposeful activity, education, work and/or retirement opportunities may be limited or restricted and are sometimes unsuitable due to individual needs and licence conditions.

In order to best understand and analyse cohort needs, **RECOOP**, at designated project sites, conducted consultation exercises which incorporated research by utilising bespoke questionnaires. This was undertaken to ascertain existing and future opportunities for older resident consultation and to understand needs in respect of health, purposeful and physical activity and resettlement planning.

Responses informed **RECOOP** that the older the resident is, the more likely they are to have one or more health and often long-term conditions, whilst those at the younger end of the age range were generally in good health. Fitness and nutrition were identified as important to all those who took part. However, all equally felt that they could do more to achieve better generic health for themselves. Many also expressed that they were lacking in essential vitamins due to their time spent in prison.

Residents who were at the older end of the spectrum felt that they did enough exercise which was most commonly reported as walking and it was felt that this best met their needs and abilities. Those at the younger end expressed that they would welcome greater opportunities for regular, physical and strenuous exercise including team sports such as football. Interest was evidenced by all residents in gym-style activities, yoga, days out, walking groups, fishing, gardening and all highlighted the additional benefits of these activities as being therapeutic and offering social opportunities.

activities residents had an interest in include



walking groups



gym style activities



fishing



1

The outcomes, following consultation with residents at St. Joseph's included:

- enhanced positive relationships between staff and residents, greater enthusiasm and increased morale
- increase in the range, promotion and delivery of physical and purposeful activities on offer
- new community partnerships
- increased consultation in weekly resident meetings and 1-2-1s



**morale
increased
through
working
together**

Good practice at St. Joseph's evidences that positive outcomes can be both achieved and sustained by working proactively together with all internal and external stakeholders.

Developing older resident consultation processes provides residents with the opportunity to voice concerns. This results in increased self-confidence and self-esteem. As one resident described during the consultation:



This is the first time in years...I don't know how many years...that anybody has asked me for my opinions and cares about what I think and how I feel and what I want.



1 older resident consultation

other positive outcomes included:

- increased pro-social engagement
- reduced conflict
- promotion of good citizenship
- sense of self/place/community
- opportunities to influence good practice, policy and procedures

As a result of consultation in prison, prisoner-led Day Centre and Forum models have been co-designed and co-delivered and have proved to be extremely successful. Prisoner Orderlies promote and involve everyone in designing activity and have even written session plans which are relevant to older people. This could easily be adapted within an Approved Premises environment, with residents taking responsibility for design and delivery. (See 'Service User involvement and co-production Guide', published by Clinks and available to download from the Members area of the **RECOOP** website).

Direct benefits of effective consultation for Approved Premises management and staff include: age-friendly purposeful and pro-social regimes that can be continuously developed based on service-user input, written policies, procedures and strategies that are well-informed and effective and increase staff confidence to support older people.

how to consult with older residents

top tip

Download our age-specific questionnaires for Approved Premises. These are available to members to download from our website www.recoop.org.uk

- **consultation exercises** using the questionnaires downloaded from **RECOOP's** website which will give older residents a platform to voice their views.
- **gap & needs analysis** The questionnaires will highlight any gaps in provision and identify specific areas where residents feel their needs are overlooked.
- **participation** As there may be fewer suitable activities for older residents, consultation of this nature gives them a chance to put forward ideas rather than staff simply guessing what it is they may want and being disappointed or disillusioned when take-up is low.
- **quick wins** Not everything that has been implemented across the project sites has been costly. We recommend, as far as is practical, resident-led activity to provide opportunities for older residents to develop skills that can be used when moving on and free-up valuable and costly staff time. An example of this could be the set-up of an Older Residents' Forum which would be managed and owned by residents. Forums will not only draw attention to important issues, but could also assist commissioners and policy makers to consult residents through a representative body.



2 accommodating older people

Approved Premises are now receiving more referrals than ever for people who are elderly and often frail; disabled (including less able); need mobility, independent living and/or health and social care support; have multiple health issues (including mental health conditions) and use sensory aids. This increase in demand, which is likely to mirror the continued growth of the older offender population within the Criminal Justice system, puts Approved Premises under pressure to maximise capacity to accommodate older residents.

Providing the right physical environment can reduce the risk of falls, trips, injuries and hospital visits, ensure Equality Act and Disability Discrimination Act compliance, prevent older people spending longer in custody than necessary and improve staff and resident confidence.

Work carried out by **RECOOP**, as part of the NOMS Research Project, found that at one Approved Premises:

- the ground floor of the building was fully accessible for people with mobility/ health issues and had 5 bedrooms, although only one was currently designated as suitable for disabled people.
 - referral procedures did not appear to offer prospective residents the opportunity to input what their health and social care needs were, which made it difficult for staff to make decisions regarding suitability.
 - links had been established with the Local Authority but not well utilised to access support for older people, resulting in raised staff concerns about their responsibility to make reasonable adjustments.
 - ground floor rooms were occupied by fit, healthy residents who were capable of accessing rooms on upper floors.
-

At the other Approved Premises it was found that 2 ground floor rooms were dedicated for residents with health and/or mobility issues. Signage was in need of improvement and, although they were happy with central referral processes, the demand for accommodation which met the needs of older people far outstripped the availability within the region.

Issues were highlighted at both of the project sites around intergenerational relationships amongst residents, with older people often feeling intimidated by their younger counterparts and, typically, noise and music had potential to cause conflict. There is increasing evidence of demand for Approved Premises accommodation for older people and development of dedicated units for over 50s would enable the National Probation Service to create environments where it would be easier to target resources and meet the needs of older offenders with a holistic approach.

noise & music



**potential to
cause conflict**



how to accommodate older people



2

top tip

Conduct a Disability Care & Support Assessment (available on the Member's area of the [RECOOP](#) website) and regularly review during keyworking sessions to ensure that needs are being met.

- conduct an assessment of the facilities with an older or disabled person present as they will be in a good position to point out any areas of concern, such as poor lighting, signage or trip hazards.
- conduct an audit of ground floor availability and prioritise ground floor rooms for older residents to reduce bed-blocking and increase options to find suitable accommodation.
- build strong links with Local Authorities and third sector specialist support agencies to maximise support available for older people with health and social care issues (Care Act 2014). For example, a resident may not require a room with a pull-cord alert system if a pendant or wrist watch alarm could be supplied by the Local Authority as a recommendation from their health and social care assessment.
- request health and social care information at the point of referral and allow input from the Local Authority, Offender Manager and prospective resident and family (if applicable) as to what reasonable adjustments they feel are required ([see section 4 - age-friendly referral process](#)).
- provide training for staff on what their roles and responsibilities are and how to access and deliver best support. See the 'How we can Help' page on our website.
- explore potential for developing over 50s Approved Premises within regions.

It is important to work alongside the resident and respond to individual need. Some older residents may feel more confident on the ground floor without presenting any obvious health conditions, whilst others may want to access rooms on higher floors even though they are elderly.

3 age-friendly induction

“

We are now making sure we are taking into account the needs of older residents and will continue to do so, working in a way that is both cost-effective and gets results.

RESIDENTIAL SERVICE OFFICER, ST JOSEPH'S

”

Alongside people serving long sentences and effectively growing older whilst in prison, there is an increase in older people being imprisoned for historical offences. Whilst some arriving at Approved Premises will have frequently accessed temporary accommodation, for many this will be a new experience.

Older people often have specific communication needs, particularly those with sight, hearing and cognitive impairment. Age-friendly induction processes need to be sensitive to and accommodating of meeting these additional needs.

Ineffective communication during induction may result in older people not fully understanding what is expected of them during their Approved Premises stay which can lead to feelings of anxiety, vulnerability and even resulting in recall to prison.

There is a danger that important health information could be missed at induction leading to treatment not being accessed and missed opportunities for Local Authority support under Care Act (2014) duties.

To comply with the Equality Act (2010), Approved Premises need to ensure that access to outcomes is equal for all and this starts with the induction process.

clear
communication



is key
during induction



As part of the NOMS Research Project, **RECOOP** observed induction processes at one Approved Premises and found that:

- though induction processes were concise and thorough, there was a lot of information for an older person to absorb in one go.
- there were no formal procedures to check on journey time, measure fatigue and ensure that the resident had had a drink and eaten that day.
- there was no assessment in place for additional health needs or concerns.
- easy-read Care Act (2014) information was not displayed.
- information was not provided on accessible local activities/services for older people.
- staff had not received training on the differing needs of older people.



how to improve age-friendly induction



top tip

Effective communication and working at a pace that suits an older person can reduce stress and anxiety, whilst increasing their understanding of rules, responsibilities and how to access support.

- avoid assumptions and check that a new arrival has eaten, had a drink and taken medication.
- offer the new resident an opportunity to rest before starting the induction interview.
- ask about communication needs.
- a simple check can be helpful and a guide is given overleaf.
- conduct a brief Disability Care and Support Assessment ([see page 15](#) and also available to download from the **RECOOP** website).
- discuss health and social care needs and refer for Local Authority assessment if necessary and the resident agrees.
- include social worker contact details on relevant paperwork and obtain a copy of their Care Plan (if applicable).
- look for signs of waning concentration and offer a break if necessary.
- display Care Act (2014) information posters/leaflets (available from the **RECOOP** website).
- follow the developed session plan “Living in Approved Premises” as a tool to aid induction ([see page 17](#)).
- provide information on local services and activities for older people.
- meet the resident the following day to re-visit important information and check that it has been understood and retained.
- offer personalised important information in large print and audio formats if required.
- provide training for staff on the needs of older people and effective communication ([see section 11 - staff training](#))
- consult older residents when reviewing induction processes to get their feedback on their experience of the induction process, to ensure that their needs are being met.

Checking for health and social care support needs is important as they may not have been previously identified and this can prevent any needs from deteriorating or unnecessary harms occurring.

guide for older residents - induction

As older people often experience health issues associated with the normal ageing process and age is a protected characteristic, it's a good idea to build-in additional checks at significant points such as Induction.

The following Guide is not exhaustive but designed to assist successful induction:

Has the resident had a long or difficult journey that may have an impact on their ability to understand and participate in the induction?

It may be necessary to delay the induction meeting to allow the resident to rest. It is important to inform the resident that this is the reason for the induction delay otherwise they may feel anxious.

Has the resident eaten or had a drink recently?

Many older people take medication which requires them to eat regularly. People often skip breakfast on release from prison so the resident may not yet have had the opportunity to eat or drink, which can leave them feeling confused, anxious and weak. It may be necessary to provide light refreshment before starting the induction.

Does the resident have any health issues or a disability that may require additional support?

As an older person within the Criminal Justice System, it's likely that the resident will have an illness or disability. Often, conditions are well-managed within prison and their significance upon release can be overlooked and subsequently not recorded in the referral process. For example, a person with Diabetes taking regular medication and eating regular meals whilst in prison. There is potential for this regime to be interrupted upon release, resulting in health decline, so it's important for staff to be aware and offer support where necessary. If there are concerns regarding ill-health or disability, please complete a Disability Care and Support Assessment and refer to Local Authority for a Care Assessment.

Would an induction follow-up appointment be a good idea?

Older people often do not absorb or retain information as readily as their younger counterparts. Importantly, older people will often not tell you that they have not understood what has been explained to them. Induction processes are often crammed full of important information, so good practice would be to provide all important information in written format and allow the older resident to read through at their leisure and digest. A follow-up appointment can then be offered the following day to quickly run through it again and provide an opportunity to answer any questions that may arise.

How will the older resident be filling their time?

Many prisons do not offer support with retirement planning as part of the resettlement process. Older people are less likely to be spending time looking for work and as a result, filling their day can become a challenge. If an older resident is in danger of becoming socially isolated, it can have a significant impact on their health. It is a good idea to discuss this at induction and explain that keywork sessions will be available to offer support with accessing local services and support. It is a good idea to put together a local area information pack for older people which they can take away and have a look through. Include information on local advice services such as Age UK and activities for older people..

How confident does the older resident seem?

Even though the older resident may have served a relatively short time in prison, this can have a huge impact on their ability to re-adjust to living in an Approved Premises. Research suggests that older people can lose confidence in their ability to live independently after as little as 6 weeks in hospital and the impact of prison regimes is far greater. The time spent on induction can provide an opportunity to gauge whether an older person may need additional support from staff to begin with, such as accompanying them to their first doctor's appointment.

Example Disability Care and Support Assessment

Name _____ Date of birth _____ Date _____

It is important for the benefit of your **Health and Wellbeing** that **you** continue to live as independently as possible in performing your **day-to-day activities** and that you do not rely too much on the help of others. In order that we may assess any areas that you may need help, would you please complete the details below? **(Verification may be required from your Doctor or Social Worker)**

1. How does your disability affect you on a daily basis? (continue on a separate sheet if necessary)

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2. Do you use any mobility and disability aids? (add others as applicable, please note whether these are your personal property or belong to the Approved Premises)

	Y/N	OWN	AP		Y/N	OWN	AP
Wheelchair				TV Screen Amplifier			
Walking Stick				Earphones			
Walking Frame				Large Print Books			
Walking Frame Caddy				Toilet Raiser			
Crutches				Grab Rails			
Pressure Cushion							

Example Disability Care and Support Assessment

3. Are there any small disability aids that you normally use (such as hearing aids)?
(continue on a separate sheet if necessary)

4. Would you be prepared to have these brought in at both your cost and risk under the following terms and conditions?

Terms and Conditions It would be your responsibility to look after and pay maintenance and repair costs to any equipment/appliance approved to be brought into the Approved Premises. Any equipment approved to be brought in would be subject to management approval, security searches and any damage caused due to legitimate search damage will be no liability of National Offender Management Service.

Yes/No
(Delete as applicable)

I agree to the terms and conditions noted above
Signature

5. Can you - unaided?

	Yes	No	If no, what assistance do you think you need?
Wash and dress yourself			
Attend Dr's appointments and collect medication			
Use the showers (bathe)			
Collect your meals			
Clean your room			
Read and write			
Access local services (shops, library etc)			
Attend appointments and remember things			
Climb Stairs			

Please make note of areas that you consider that you may need extra help
(continue on a separate sheet if necessary)

I am providing this information willingly and without pressure, bias or prejudice, this information may be shared with others in the establishment who are involved in maintaining my health, safety and wellbeing. The content of this document has no legal binding and is to be used **for internal assessment use only.**

Name _____ Signature _____ Date _____

Witness _____ Signature _____ Date _____
Staff Member

Action Required - to be completed by staff member immediately on receipt of information

Immediate welfare concerns should be passed directly to AP manager or duty manager.

Are there concerns about the resident's welfare? Yes/ No (if no concerns please agree a future date for review) What are the concerns? *(i.e. cannot climb stairs easily).*

How do the concerns need to be addressed? *(i.e. staff assistance up/down stairs until ground floor room can be allocated, assessment to be requested from Social Services)*

Agree a timescale in which action must be taken to support the resident and who will complete the action; *(i.e. all staff to be immediately made aware of mobility issues, keyworker will organise room change and contact Social Services within 24 hours)*

Copy of this report sent to supervising OM _____ Date _____

Date of next review _____

Notes _____

session plan

3

Activity/ Session Title

Objective

Living in Approved Premises

- To provide information to help offenders prepare themselves for living in Approved Premises.
- To help offenders gain the most from their stay and access support from staff.
- To stimulate discussion and debate.

Preparation Work Required

Print copies of:

- 'Approved Premises Rules and Guidance for Residents' for each attendee
- Approved Premises/Hostel Fact Sheet.

Both of these resources are available from the Members' section of the **RECOOP** website.

Resources Required

- Copies of Approved Premises Rules and Guidance for Residents
- Copies of Approved Premises/Hostel Fact Sheet.

Session Plan

- Explain that many people leaving prison are expected to live at a Probation run Approved Premises when they are first released as part of their licence agreement. Those affected by this will be notified by their Offender Manager. (Introduction to topic 5-10 mins. Set boundaries)
- Explore the groups' initial thoughts and feelings around this and ask what the group already understands about Approved Premises - expect negative comments. (Large group activity - feedback comments to a flip chart or white board 10 - 15 mins)
- Ask the group whether they feel that Probation Hostels are better or worse than other homeless accommodation/ hostels. (Draw a pros and cons sheet on flip chart and pose the question to the group. 5 - 10 mins)

session plan

Session Plan

- Hand out copies of Hostel Rules and go through them. Explore each rule and invite discussion around why rules are necessary, who they protect and whether they are actually 'fair enough'. (This can be done in pairs or threes - looking at each point and then feeding back thoughts to the group. Any pros and cons can be added to the flip chart if not already discussed. 10 - 20 mins)
- Reinforce that the Rules keep everyone safe and are actually quite straightforward (Tutor to the group 2 mins)
- Ask the group how the Rules differ from prison rules - expect negative comments. (Open question - feedback to flip chart 5 mins)
- Ask the group to compare being in prison to living in an Approved Premises in the community - AP's offer a lot more freedom and a safe and secure stepping stone to allow people to adjust to community living.
- Discuss how long people stay at AP's - as short a time as possible, as Probation will ALWAYS get people moved on as soon as possible and usually have excellent links with local housing providers (Tutor to group 2 mins).
- Discuss how safe AP's are; they have 24 hour trained staff, CCTV and no drugs or alcohol on site. (Tutor to group 2 mins)
- Hand out Fact Sheet and discuss (work individually - then as a large group 5-10 mins)
- Complete the session by reminding people that AP's are safe, secure environments with staff that are trained to help ex-offenders. (Summing up by tutor 2 mins)

Expected Outcome

At the end of the session participants will have a better understanding of Approved Premises and should feel more confident about going to stay in one.

Participants will have been provided with Approved Premises Rules & Guidance for Residents and an Approved Premises/Hostel Fact sheet.

Review

Enter here any comments on the success of the session, improvements for next time.



4 age-friendly referral process

Our research has highlighted that good communication at the point of referral is essential for Approved Premises to feel confident that they can provide the right support for an older person. As referrals are usually instigated by an Offender Manager who may not be in close contact with the applicant, there is a danger that important information about health and social care needs may be overlooked.

incomplete or inaccurate referrals may result in:

- misunderstanding of older people's needs
 - unsuitable referrals due to inaccessible physical aspects of the Approved Premises.
 - delays in accessing health and social care support at the Approved Premises (Care Act 2014)
 - older people spending longer in prison than is necessary
 - lack of staff confidence to support older people
 - older residents experiencing anxiety about their health and social care needs not being met
-

Due to the structured regime within prisons, there have been cases where older people have 'hidden' issues, such as incontinence, by seeking unofficial support from a cell mate. Some have even managed to 'hide' significant hearing or communication issues due to the familiarity they have within the prison environment. These issues can pose significant risks when the prisoner is released, particularly when the older person has limited hearing or vision putting them at risk of harm.



how to create an age-friendly referral process



top tip

Conduct an audit of ground floor availability and prioritise ground floor rooms for older people.

It can be difficult for a person without health and/or mobility issues to fully appreciate the needs of people who have. The following actions are key to improving understanding:

- request additional information from the prison on receipt of a referral for an older person (50+) if necessary.
- allow input from the proposed resident.
- if health needs are present, ask whether a Local Authority Care Plan is in place and request a copy. The prisoner will need agree to this.
- in order to accept new referrals, review current capacity. More able-bodied people may be able to move to upstairs rooms to increase ground floor capacity for those with health and mobility issues.
- inform the referrer as soon as possible if need cannot be met in order to prevent delays and allow for an alternative placement to be sourced.

If a Local Authority Care Plan is not in place, and it is not possible for the Approved Premises Manager to visit the prisoner, the Prison Offender Manager should complete a brief health and social care needs questionnaire with the prisoner. It is important for the prisoner to be part of this process in order for them to have the opportunity to raise any needs, issues or concerns that they have, rather than relying on the perception of prison staff.

Examples of questions that should be asked are:

- do you consider yourself to be disabled?
- do you have any current health issues?
- do you normally see a psychiatrist or psychiatric nurse?
- can you see clearly?
- can you hear clearly?
- do you have any difficulty with speaking?
- do you have problems remembering things?
- can you read/write?
- can you climb steps/stairs?
- can you use the toilet unaided?
- can you get in and out of bed unaided?
- can you get in and out of a bath or shower unaided?
- can you get dressed unaided?
- can you get in and out of a chair unaided?
- have you had any falls recently?
- what, if any, are your main concerns for release?

If there is any doubt about health and social care needs (and the prisoner agrees) an assessment should be requested from the Local Authority in the area in which the Approved Premises is situated.

5 personal emergency evacuation plan (PEEP)

PEEPs are in place to ensure the health, safety and wellbeing of residents who are disabled or less able in the event of an emergency evacuation.

They include all relevant information in respect of eligible residents' safe evacuation needs and must be shared with all staff within Approved Premises. As Approved Premises are increasingly accommodating ageing residents and those with broad disabilities, mobility issues and long-term health conditions, PEEP's are critical to ensure the health, safety and security of all residents and safe working practices for both residents and staff. The physical environments must be both maintained and improved to best meet needs and comply with statutory duties and responsibilities.

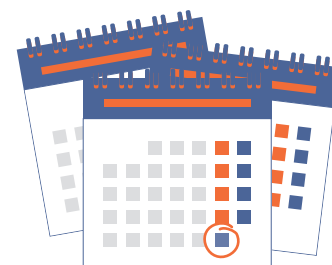
PEEP requirements were evidenced as actively in place at **RECOOP** project sites and evidence was seen of updates and regular reviews subject to individual needs and circumstances at St. Joseph's. Regular reviews were practiced according to need and, where no changes to resident circumstances had occurred, they were reviewed in line with length of stay.

St. Joseph's staff could quickly identify by name and location residents who had plans in place, demonstrating their commitment to safe practices. PEEP's information was available to all staff and was easily accessible in the event of an emergency.

Plans were fully explained to residents and checks took place to ensure that they fully understood their plans. During the project, residents were asked whether they could demonstrate their evacuation routes and whilst one resident chose not to, the other residents each demonstrated their different exit points and assembly point with ease.

To successfully manage PEEP processes, if someone is resident for longer than a 3 month period, **RECOOP** recommends that Approved Premises staff conduct a further review to ensure that individual need is still being met, taking into account any changes in circumstances. Regular audits will enable Approved Premises to ensure that they have the capability to safely evacuate all residents should an emergency situation arise.

PEEPs should be reviewed every



3 months



5

how to review PEEP



top tip

Display clear signage on room doors indicating that the resident has a PEEP plan.

- assign a lead responsible member of staff who has had appropriate training and who will be accountable for the management of all PEEPs with responsibility for conducting regular audits.
- all staff to be aware of residents' PEEPs and read and implement notifications and updates.
- PEEP should be referenced in your Older Resident Policy Document and in line with complimentary policies, procedures and provisions such as First Aid, Fire and Health & Safety.
- residents should be involved and given the opportunity to input as much as possible into their own plan.
- PEEP documentation should be made available in the first language of the resident and accommodate any visual impairment.
- approved premises should assist with aids and source adaptations to accommodate personal need.
- PEEPs should include all relevant information in respect of the residents' needs and should be shared with all staff in locations that residents either access or are likely to access.
- ensure that residents with PEEP needs are safely accommodated in a flat and / or low room and nearest to emergency exit points.
- staff and residents should practice evacuation to reduce the risk of anxiety and harm should a real situation occur and, as a minimum, in line with fire drills.

6 day centre provision



I'm alright during the day as I've got things to do and to occupy myself but in the evenings and weekends there's not a lot to do or to give me structure and other things to think about.

AP RESIDENT



The number of older people within the criminal justice system is steadily rising and has done so for the past 20 years. Following Transforming Rehabilitation, there is a disproportionate number of older offenders now being managed by the National Probation Service, which means that the over 50s caseload for individual Offender Managers may also have increased considerably.

As a result there is a need to provide age-appropriate, purposeful activities for older residents.

Nearly one in eight offenders are now over the age of 50 yrs with little specific age-related interventions and support offered for their differing needs.

Many prisons have funded organisations such as **RECOOP** to deliver Day Centres within their establishments (Manchester, Dartmoor, Channings Wood, Exeter, Guys Marsh, Erlestoke, Leyhill, The Verne and Eastwood Park). However, it would appear this has not yet been replicated in Approved Premises.

This Research Project has consulted with Approved Premises' staff and residents in order to better understand the demand for Day Centre provision. Our research at one project site highlighted that demand was currently low, simply because older residents had mandatory appointments to attend during office hours.

nearly
1 in 8



offenders
are over 50

however, as one Approved Premises resident advised:



I'd like it if there were more activities on offer and that will help me when I move out of here and get my own place. I'll need more things to do then and as I don't want to be lonely when I'm not used to being on my own or having other people around.



As an example of good practice, we operate Support Cafés for older offenders living in the community in Plymouth and Bournemouth. These Cafés are accessible to residents of Approved Premises and any older offender who has been sentenced to a Community Order through the Courts. They combine elements of health and wellbeing with additional group and 1-2-1 work, offering information and signposting support based on the specific needs identified following initial meetings. The aim of the **RECOOP** Support Cafés is to offer regular, dedicated and focussed support that will complement health, care, community interactions and resettlement initiatives and will provide outcomes that can be measured against key pathways.

services may include:

- personal planning support
- physical and mental health awareness
- independent living skills development
- wellbeing toolkit to reduce reoffending
- reducing social isolation
- socially inclusive events
- signposting
- mentoring support introduction
- referrals to other agencies
- registering with doctors and dentists
- obtaining photo ID
- building social capital through increased community links
- building volunteering, education and employment links through Jobcentre Plus and other voluntary agencies

testimonials from Probation staff in Devon:

“

*I am pleased at how well he has seized the opportunity to engage with **RECOOP**. He was quite socially isolated previously and his confidence was low, which had a bearing on risk as he tended to lapse into a low mood and fantasy to try to make himself feel better. I have been impressed with how enthusiastic he has been about the **RECOOP** sessions. He has spoken with pride of the tasks he has accomplished and it has opened new doors to activities and resources he had not previously considered.*

PROBATION OFFICER

”

“

*I cannot believe what a change he has had in his attitude and engagement in all aspects of his support. When he first arrived, he was very difficult to engage, tended to isolate, was low in mood and occasionally hostile. He was on 3 signings a day and he was considered high risk. Due to his age, physical disabilities and offences, his opportunities in the community were very limited. Since attending **RECOOP**, he has become more engaged with staff, his attitude is altogether more positive, he is more active and he has had his risk level reduced from high to medium.*

HOSTEL MANAGER

”

Following resident consultation at one of the project sites, all of the respondents said they were keen to increase their engagement in purposeful activity. **RECOOP** explored the potential of developing and piloting an in-house Day Centre with staff and residents. It was felt during the time of the research that it would be best to do this, with the support of **RECOOP**, when they had an increase in older residents. At the time of the project, the older resident proportion was approximately 1:6 and some of those residents were due to move on.



how to set up a successful older offender day centre



top tip



Commission **RECOOP**, or another specialist voluntary sector provider, to lead and support a Day Centre and other age related provision.

- visit local Day Centre facilities to increase awareness of need and to enable staff to gain confidence to support older people.
- adopt an older persons champion for this purpose who would be responsible for all aspects of age related diversity and inclusion.
- create a role for a resident offender to co-ordinate the Day Centre activity.
- scope provision for Day Centres in the evenings or at weekends to accommodate those who have appointments during the day.
- plan and schedule guest speakers that would be of interest and benefit to residents.
- maximise all available internal and external areas for activities and ensure that all are accessible and suitable for older people.
- pilot provision and if successful, replicate at other Approved Premises with good practice being shared. Alternatively create a Day Centre which is accessible to residents from more than one Approved Premises.
- management and staff to include and record this as purposeful activity for 50+ residents and in line with sentence plans and keyworking activities.

case study - a snapshot of community support in action

This case study focuses on the specific experience of the individual client from the point of referral to the **RECOOP** Community Support Café to moving on from the service.

background

offence: SO (Sexual Offence)

length of sentence: 8 years 6 months including licence - Extended licence 6 years 3 months

was RECOOP support offered in your prison? Yes - Exeter, Channings Wood

did you access RECOOP support in prison? Exeter - Well-being groups and speakers, on remand and at point of sentence; Channings Wood - over 50's group

what preparation for release did you have? **RECOOP** gave me ideas as to what was going on outside. I was going to be released to a hostel which I had heard bad things about. I felt reassured to know that **RECOOP** was on the outside and would help me cope.

licence conditions: Exclusion zones

risk level: High now medium

community support

who referred you to RECOOP community support? My key worker from the Approved Premises.

personal plan

- reduce risk
- stay crime free
- regain confidence in the community
- sort out debt problems

group work delivered

- socially inclusive activity
- cooking
- health & well-being group
- tai chi

what organisations have you built relationships with?

- Age UK
- CAB
- solvency department
- Circles of Support

what was your experience of the RECOOP support given?

I can sum it up in one word... excellent. Couldn't have achieved what I have and got back on my feet without **RECOOP**'s help.

what challenges did you face when engaging with the RECOOP support?

- I came out of prison feeling wary, apprehensive, worried about living in a hostel, licence conditions going around in my head, looking over my shoulder, did anyone know me, I felt vulnerable, thought there was a possibility I would be attacked
- licence restriction to certain areas in the town.

community support (CONTINUED)

Is there anything else we have helped you with?

- increased mobility - **RECOOP** motivated me to investigate the reason why my mobility account was cancelled. I was able to accept the decision because of being able to understand it.
- now PPO (Prolific Priority Offender) and Probation are satisfied that I have passed TSOP (Transitional Sex Offender Programme) I may have permission to buy a car. **RECOOP** worker supported me going through this process.
- debt problems. I owed 13k. I showed **RECOOP** worker the debt demand letter which worried me. **RECOOP** worker helped tremendously. She advised CAB then followed up with weekly 1-2-1 sessions to plan a step by step action to address this. This kept me focused on the job in hand.
- I was subsequently granted a Debt Relief Order (DRO) which stands for 12 months. After 12 months my debts will be cleared.
- the social outings made a big difference. It brought the social me back after years. I had become an arrogant loner, I did things my way or no way.
- prison was a 'smack in the gob'. I had to do what I was told, not what I wanted. It brought me back to earth. TSP (Thinking Skills Programme) was also good, opened my eyes wide to empathy. I think now before I act, where as I didn't before. I now weigh up the alternatives.

what are your personal achievements?

- over the weeks, I started getting confidence, fears were reduced and confidence raised. Meeting others and discussing problems, 1-2-1 and planning a step by step action plan, recognising successes, learning cooking, especially cooking for others meant I cared more and made me determined to improve. There was definitely a sense of pride when people you have cooked a meal for say 'Oh that was nice' makes you want to do better next time.
- with permission from probation, I had experience of going into prohibited areas because I had **RECOOP** to escort me. Probation was given 1-2-1 report notes weekly. This gave my probation officer the feedback and confidence in my ability to act responsibly. I have recently had my local restrictions lifted.

what feature of the support café model provided the most benefits?

- 1-2-1's • weekly follow-ups, kept me focused • social inclusion outings
- cooking • working together on a task with others in the kitchen

COMMENT FROM A PROFESSIONAL



*In my opinion he has made considerable progress since his release on licence. Clearly the opportunity to work with **RECOOP** has helped his resettlement in the community and helped him develop a pro-social support network. This has been particularly valuable as he was new to the area.*

PROBATION OFFICER





7 developing access to education for older prisoners

The national criminal justice education picture informs us that in relation to prisoners/offenders:

- a quarter have experience of the care system and almost half have been permanently excluded from school
- almost a third have a learning difficulty/disability
- approximately half do not have any educational qualifications
- more than a fifth need educational support with basic literacy and numeracy
- the majority possess English and Maths at entry level 1-3 (primary school level) rather than Level 1 and 2 combined (GCSE level)

(Coates Review May 2016 - Unlocking Potential: a review of Education in Prison)

At one of the project sites, St. Joseph's, education provision on offer included:

- personal & social development
 - Maths and English assessment
 - 'all about me' Questionnaire
 - learning styles / VAK Questionnaire (Visual Auditory Kinesthetic)
 - individual learning plan
 - functional skills in Maths, English & ICT
 - making informed choices
 - pre-tenancy qualification
 - positive you
-

All courses were offered during the induction process and residents engaged with NOVUS within their first or second week, unless they were unwell or had reasonable grounds. Older residents received an Individual Learning Plan and often attended educational courses to improve their life and functional skills, including opportunities to undertake additional courses and Offender Behaviour Programmes.

During the research, other activities of interest to older residents included IT, cookery and horticulture initiatives. Information was communicated to all residents who were strongly encouraged to attend, engage and achieve.

An additional strength came from the staff support workers who were both proactive and engaging in supporting older residents in complimentary purposeful and therapeutic activities, including gardening, bike rides, independent living skills, walks, days out to places of interest and activities as suggested by the residents.

**almost
50%
of offenders**



**have no
educational
qualifications**



As part of vocational activity, Approved Premises should consider additional age-specific activities for older people who are nearing or at retirement age, such as:

- retirement planning • financial planning
- independent living skills • current affairs

Social isolation poses a serious risk for older people and especially for those who are not expecting, or who are not expected to, find employment upon resettlement. If older people feel that courses or sessions on offer are not relevant to them, they may be reluctant or unwilling to engage.

“

I am well educated but because of my offences I won't get another job in my area of practice again, perhaps not even any job where somebody has to employ me. I need help in setting myself up in my own business, self-employment, but there weren't any courses available to me in prison. No business courses are on offer here and my conditions can make it difficult for me to go to a college or night class. I can't do anything.

RESIDENT

”

On this occasion the resident was put in touch with the education provider who helped explore the options available to him, one of which was distance learning which had not been considered.

Be mindful some older offenders will have no knowledge of modern technologies and paying methods. This can cause huge anxiety and have disastrous consequences. A significant number of ex-offenders re-offend in order to go back into prison because they have been unable to use cash machines or self-service terminals in supermarkets to pay for food.

When the simplest of tasks can't be completed the anxiety and frustration can lead to desperation and deliberate breaches to return to prison can occur. Supported visits and befriending services cannot be underestimated in this area.

Education is not just academic; it should also include basic living skills, particularly for offenders who have served longer sentences.



how to develop access to education for older prisoners



top tip

Approved Premises and education providers should open up discussions and think more laterally in terms of the training and development for older residents.

- approved premises need to actively promote educational opportunities for older people as there is a danger they will easily perceive that education is aimed at people of working age.
- providers should take steps to ensure that courses and sessions on offer are accessible and of interest for older people. Consultation with older residents can be invaluable for this purpose (see [section 1 - older resident consultation](#)).
- the education provider should endeavour to ensure a whole system approach to achieve educational continuity.
- older residents should be encouraged to design and deliver a peer led model. This has potential to increase the engagement of older residents.
- enhanced support should be made available to older residents who have additional age-related needs including physical and mental health, sensory, learning ability and language that can impact on achieving their full potential and to enable greater confidence for resettlement and reintegration.
- equality and diversity best practice must be at the fore to achieve full inclusion and fair access for all.



8 purposeful activity



*We are ever evolving so we would have learned about older people and their needs, but it would have taken us longer. We will keep moving forward and learn more from **RECOOP** and continue to put this (Purposeful Activity) into practice.*

RESIDENTIAL SERVICE OFFICER, ST JOSEPH'S



All residents in Approved Premises must have a unique programme of purposeful activity designed jointly by the offender, Offender Manager and Approved Premises staff. Purposeful activity is in place to reduce reoffending and to support rehabilitation with successful community resettlement and reintegration. Activities should be of purpose, meaning and value and any new opportunities for implementation should be considered as they arise, in line with key themes of independent living skills, health and wellbeing, learning, skills and work opportunities.

Provision of purposeful activities vary across the Approved Premises Estate and there are often insufficient activities for older or retired residents. However, during the NOMS Research Project, consultation and feedback evidenced a number of positive outcomes at St. Joseph's. Outcomes included residents' understanding why purposeful activity was important and they appreciated that staff worked hard to identify and develop new opportunities that also supported generic life skills and promoted wellbeing and good citizenship.

Our research at St. Joseph's highlighted that all older residents felt that they were meaningfully occupied for the majority of the time. However, they felt that they would benefit from increased external activities such as gardening, days out and lighter exercise. Our research also evidenced that older residents were more likely to want to spend time in the company of their peers rather than with younger, usually more active and 'noisy', fellow residents.

residents would benefit from increased external activities, such as



gardening,
days out and
lighter exercise

At St. Joseph's **RECOOP** consulted and worked with staff to review current purposeful activities and to scope new opportunities. Internally and externally delivered activities were impressive and included:

- diverse educational opportunities
- Achieve Bike Project / Margaret Carey Foundation
- Salford Foundation activities and programmes for vocational, personal, social and academic development
- physical activities including walking groups, bike rides and bespoke fitness programmes

- greener on the outside of prison (GOOP) activities for residents to participate in included gardening, growing and cooking activities that improve and develop skills to increase employability, whilst fostering family and social links that promote inclusion. St. Joseph's has achieved the establishment of the garden/grounds site which includes raised beds, three greenhouses, a mini orchard and several areas for bedding plants. It has also secured additional funding to commission a horticulturist to further develop the site.
- the development of a new horticultural project with a local community interest company
- charity events
- social days out to places of interest
- legal advice briefings and sessions
- reducing re-offending pathway support
- guest speakers as requested by residents and Approved Premises staff



how to promote purposeful activity



top tip

Build links with external providers, such as [RECOOP](#) or local community organisations.

- appoint a staff member as an older resident champion who can develop relationships with residents, local providers, as well as support older residents to access services (see [section 9 - older resident champion](#)).
- research relevant information with older residents in order to identify opportunities and maximise positive and meaningful outcomes.
- explore age-specific purposeful activities with Approved Premises providers, which will enable all stakeholders to meet their targets.
- include residents and devolve organisational tasks to promote ownership and reduce reliance on staff.

Whilst it is recognised that some Approved Premises have lower staffing levels which can make it challenging to provide extra, age-specific activities, reasonable adjustments must be made where required to best care for and support residents with fair and equal access to purposeful activity.

9 older resident champion

It is clear that the increase in numbers of older people within the criminal justice system is part of a trend resulting from changes in attitudes within society, coupled with an ageing population. However, to date, very few additional resources have been made available to meet the needs of this particular group of offender, either within or outside of prisons. There are no national policies about the care and treatment of older offenders once they are released, or the general treatment of all older offenders living in the community.

This group tends to be undemanding, taking a view that they should 'get on with it' and not 'make a fuss' which exacerbates the problem. Issues, sometimes serious in nature, related to their health and well-being, often go unrecognised and untreated. As a result, this group often do not access the services to which they are entitled and which could make significant improvements to their quality of life, increase their chances of fully reintegrating into society and reduce the risk of them re-offending.

Our template job description ([see page 37](#)) aims to help the National Probation Service meet this growing demand and fill the support gaps with a designated role and focus. Please consider an 'Older Champion' lead within your geographical region who would ultimately become an expert on the specific needs of older offenders. Alternatively, you could appoint a single point of contact within your own Approved Premises.

The template job description will allow you to think about your organisational approach and help increase the skill, expertise and consistency of good practice within your Approved Premises. Collation of monitoring data for this marginalised group will help identify trends and might well be useful as evidence for funding and service diversification.

feedback from Probation Offender Manager's Champion training courses in Oxfordshire and Surrey



All very useful information, extremely well delivered. I was shocked at being made aware of how little we do know!



Subject matter related very well and informative with fun thrown in. I found it thought-provoking and interesting, something to take forward.



RECOOP can offer consultancy support and 'Older Champion' training to help Approved Premises implement such a role.

Please email info@recoop.org.uk for further information.

Older Offender Champion Job Description

Post Older Offender Champion

Reports to Line Manager

Location & Setting Community Based

Overall Purpose To champion the needs of older offenders who are engaging with the organisation by raising staff awareness, forging links with local voluntary sector groups and organisations and to develop services for older offenders on Community Sentence or on Licence to reside in Approved Premises.

Works With *Primarily:* Criminal justice agencies (NPS, CRCs), Voluntary Sector Partners, Social Services, Housing Providers, volunteers & older service users.

Key Responsibilities

- to develop a strategy to assess staff awareness and service user need.
- to draw up and deliver a Project Plan including objectives and measurement tools.
- to ensure that service provision complies with Equalities Act and DDA.
- work together with other Older Persons Champions to develop ideas for new initiatives and identify gaps in service.
- to develop the organisational capacity to meet the needs of older offenders.
- provide advice and information to colleagues and partners in relation to their older person caseload and provide reports on the work as required.
- organise and facilitate meetings with agencies to encourage partnership working in terms of service delivery packages.
- build an Age Specific list of local contacts to add to a Service Directory.
- compile an Intranet page dedicated to Older Offenders sharing good practice, new developments and local support services.
- maintain a working knowledge of policy, legislation and regulation relating to government strategies.
- provide excellent customer care and service delivery standards.

Signed _____ Date _____

Name _____

10 older resident policy

The number of older people within the criminal justice system is steadily rising and has done for the past 20 years. Approved Premises will be receiving more referrals for older people and will be responding to the needs of those with multiple health and long term medical conditions, mobility issues and/ or general frailty associated with the ageing process.

Whilst it is acknowledged that there is no national policy in existence, delivery still needs to be responsive to need and an Older Resident Policy can help shape service delivery.

Age is a protected characteristic within the Equality Act and this brings a duty to strive for equal outcomes for all. There should also be a commitment to making reasonable adjustments for people with health and social care needs under the Disability Discrimination Act.

With this in mind, to ensure that Approved Premises are meeting need, it is a good idea to develop a formal policy for older residents, as implementing such a policy is an excellent way of identifying both good practice and any gaps which need attention (please see example on [page 39](#)).

At neither of the Approved Premises **RECOOP** worked with as part of this Research Project, was there an Older Resident Policy in place.

how to implement an older resident policy

top tip

Engage in regular resident and stakeholder consultation to ensure that policies, procedures and working practices are meeting the need.



- bring together all the different areas associated with effectively meeting the needs of older residents. It can appear a daunting task, so it is useful to start by implementing a policy as a 'live' document. This can be an effective way of working systematically through all relevant areas and tracking progress. When the changes are effected they can then form part of the Older Resident Policy.
- a simple approach is to appoint a staff member as an 'older resident champion' who can lead on developing the policy (see [section 9 - older resident champion](#))
- it is important to review the policy regularly (usually annually).
- useful ways of informing an Older Resident Policy can be to evaluate all areas of this Good Practice Guide.

Example Older Resident Policy

Name of project _____

Lead staff member _____

Date _____

To be reviewed _____

Background Information

Include information about the building, facilities, staffing, and geographical area. Average number of older residents/ proportion of older residents, typical health needs etc.

Older Resident Consultation

Include key messages from service user consultation and how these have informed the policy.

Physical Environment/ Disabled Access

Include protocols that have been developed for assessing need and accessing support i.e. links with Local Authority and Care Act processes.

Purposeful Activity

Include information on age-specific activity being undertaken including education, access to local services, voluntary work etc.

Staff Training

Detail training available for staff on working with older people, number of staff who have attended and training expectations.

Referral Processes

Include details of age-specific processes such as additional health information required for older applicants and acceptance criteria.

Evacuation Processes

Provide information on personal emergency evacuation plans and procedures. Include any future developmental work which is still in progress such as linking in with other Approved Premises to create area resources for older people, or accessing support from other services such as **RECOOP** or Age UK.

11 staff training

“

The session raised awareness of issues facing our clients when being released from prison.

PROBATION OFFICER

”

“

We treat everyone the same, no matter what age they are.

”

“

The younger ones need more support as they tend to be chaotic.

”

These are quotes from interviews with some Approved Premises staff during this research project and may sound reasonable, but are they?

Anyone working within the Criminal Justice arena, or providing services for offenders, will benefit from training in relation to working with older people. They often have unique needs and differing priorities to their younger counterparts. Due to sight, hearing and cognitive decline it is important for staff to be aware of the need for effective approaches to communication.

factors that effect older offenders include:

- loneliness / social isolation, which can lead to depression and anxiety
- poor communication skills
- institutionalisation and inability to adjust to independence
- non-engagement due to feeling that services are not relevant
- loss of confidence
- stigma associated with offence
- feelings of hopelessness for the future
- not wanting to be a burden
- barriers to engagement due to poor health, frailty and mobility issues.

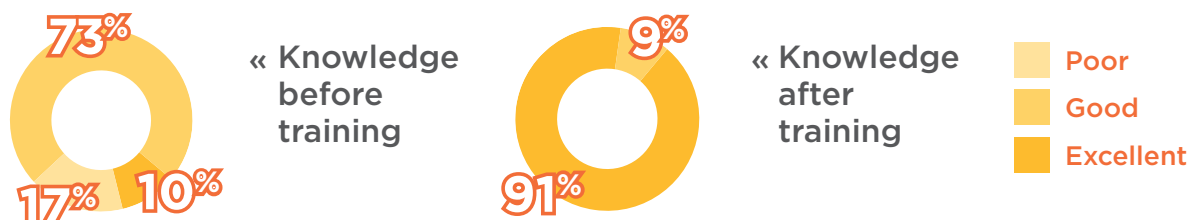
As part of this project work, a staff training session was delivered at an Approved Premises, concluding in an action plan being drawn up which created an Older Resident Champion Role. The responsibilities of this role are to promote positive ageing, build stronger links with the community and develop retirement planning support. (see section 9 - older resident champion).



RECOOP has delivered **23** Awareness Raising Sessions to a total of **306** staff from prisons, probation and the third sector who work with older offenders. Of the 306, **72** were Probation staff and **69** session attendees completed and returned feedback forms.

11

The self-reported subject knowledge of **prison staff** before and after training:



Training feedback from **prison staff**

Good Excellent

How well the trainer »
facilitated engagement

3%

97%

Quality of »
the training

7%

93%

All **69** respondents said that the session would assist them in their role in the future and many cited that they have benefitted from learning about the unique issues older offenders face and how to access the resources available.



how to develop staff training

top tip



Raising awareness of older offenders' needs will increase staff motivation and confidence to provide the right support and improve communication skills.

RECOOP can tailor a bespoke 'older resident' training package for you around the requirements of your Approved Premises, to equip both practitioners and partner organisations with additional skills and an improved understanding of the needs of the older offender group.

Training themes available:

Working with older offenders in the community

- supporting physical, mental health and well-being.
- understanding the differing needs and behaviours of this offender group.
- volunteering and supporting older offenders in the community.
- the ageing process and additional challenges faced by older offenders.
- re-adjusting to community life after prison.
- age-specific signposting and building community links.

Working with older prisoners

- understanding the differing needs and behaviours of this prisoner group.
- supporting physical, mental health and well-being.
- the aging process and additional challenges for older prisoners.
- providing age-specific support services.
- preparing for resettlement back in the community.



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recoop.org.uk