# Dementia and Cognitive Impairment in the Prison Population of England and Wales: Identifying Individual Need and Developing a skilled, Multi-Agency Workforce to Deliver Targeted and Responsive Services

https://neurodegenerationresearch.eu/survey/dementia-and-cognitive-impairment-in-the-prison-population-of-england-and-wales-identifying-individual-need-and-developing-a-skilled-multi-agency-workforce-to-deliver-targeted-and-responsive-service/

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United Kingdom

## Title of project or programme

Dementia and Cognitive Impairment in the Prison Population of England and Wales: Identifying Individual Need and Developing a skilled, Multi-Agency Workforce to Deliver Targeted and Responsive Services

## Source of funding information

NIHR

Total sum awarded (Euro)

€ 882,725

Start date of award

01/07/2016

Total duration of award in years

3.0

The project/programme is most relevant to:

#### Alzheimer's disease & other dementias

#### Keywords

#### **Research Abstract**

Research question: What pathways of care, service provision and staff training packages should be provided to appropriately support older prisoners, aged 50+, with cognitive impairment, including dementia, in England and Wales? Aim: Enhance care pathways for older prisoners with cognitive impairment by understanding individual and service needs and designing a responsive staff training package. Objectives: In England and Wales: 1) Estimate prevalence of cognitive impairment amongst the older prisoner population; 2) Validate the Six Item Cognitive Impairment Test (6CIT) [1] for prisoners 50+; 3) Identify service needs and appropriate care pathways for older prisoners with cognitive impairment throughout custody and on discharge to the community; 4) Establish prison and healthcare staff training needs for identifying, assessing and supporting cognitively impaired older prisoners; 5) Develop an appropriate training support pack. Part 1: Stage 1: 860 older prisoners will be screened for cognitive impairment/dementia using the 6CIT [1] and Montreal Cognitive Assessment (MoCA) [2]. Stage 2: Participants testing positive on the MoCA will be interviewed using the Addenbrookes' Cognitive Evaluation (ACE3) [3] and standardised assessments to establish risk of violence; activities of daily living needs; mental health needs; brain injury; and social networks. Stage 3: We will estimate current and future prevalence of dementia/cognitive impairment in the prison population to inform the planning and costing of services. Part 2: A questionnaire distributed to healthcare managers of all adult prisons in England and Wales (n = 107) will ascertain current service provision for prisoners with cognitive impairment and identify staff training needs. Part 3: Case studies will be used to explore the support needs of older prisoners with mild, moderate and severe cognitive impairment. Approximately 10 individual prisoner case studies will be identified and ethnographic observations of these cases will be conducted. Semi-structured interviews will take place with a range of staff members, other prisoners, family members/carers, as well as those experiencing cognitive impairment. Part 4: Data from Part 1 will be categorised into a range of representative case types and case vignettes presented to a panel of experts in order to design pathways of care for prisoners with different degrees of cognitive impairment severity. The costs of these packages of care will be estimated and aggregated in relation to prevalence data. The panel will also be asked to contribute to the development of a training pack for the identification of cognitive impairment for staff working in prison, undertaking critical review of consecutive drafts. Analysis: We will estimate the prevalence of cognitive impairment by calculating percentages and 95% Confidence Intervals (CIs) using the MoCA [2] as a 'gold standard' measure. Qualitative data will be analysed using framework method. Outcomes: The research will validate a screening tool for cognitive impairment for routine use in prisons; identify service needs and the required pathways of care; and develop a staff training package. Benefits and impact: Older prisoners with cognitive impairment/dementia will have their needs detected earlier and more accurately and appropriate services will be in place to support them. This will reduce costs as efficient preventative services develop.

### Lay Summary Further information available at:

**Types:** Investments > €500k

#### **Member States:**

# United Kingdom

**Diseases:** Alzheimer's disease & other dementias

**Years:** 2016

Database Categories: N/A

**Database Tags:** N/A