



Programme in Prisons

The GSF Centre team has, for over fifteen years, trained generalist frontline staff to care better for all people in the final years of life, enabling them to live well until they die.

Many thousands of doctors, nurses and carers have received training, affecting the care of several million people over the years to ensure they are more likely to live well and die well in the place and the manner of their choosing.

Training is nationally recognised, with accreditation programmes, enabling transformational cultural to a 'gold standard' care for people nearing the end of life, with any life limiting condition (including frailty, multi-morbidities, dementia and other non cancer conditions) and in any setting (home, care home, hospital, prison).



Scott Ralph and HMP Norwich team, GSF Conference Sept 2016

Prison Reform Trust and Restore Support Network 2016

"GSF has helped us do everything that little bit better. We are certainly better at identifying people approaching the end of life because we now look more closely and have a mental checklist. It's also helped us be better planned and more organised – things really flow now. It's really helped the team feel justifiably confident in the care they are providing. Having their work acknowledged means they can boast about it too"

Scott Ralph Lead Nurse HMP Norwich 2016

People aged 60 and over are the fastest growing age group in the prison population. Between 2002 and 2014 there was an increase of 146% in the number of prisoners held in this age group.

Ever-lengthening sentences mean people in prison are growing old and frail with high rates of unmet social care and support needs.

NHSE Strategic Direction for Health Services in the Justice system (2016-20)

cites a shift towards person—centred care health care in prisons that provides the right treatment and support.

GSF Programme for Prison Health Care.

HMP Norwich Health Care Service is the first prison to achieve accreditation using the Gold Standards Framework.

L-Wing, a 15-bed unit for older people with extra care and palliative care needs, led by Lead Nurse Scott Ralph was successful in achieving a Quality Hallmark.

The team were presented with GSF Quality Hallmark Award at the September 2016 GSF Conference in London, by Claire Henry MBE, CEO of National Council for Palliative Care.

To be accredited and receive this award, HMP Norwich Health Care Service achieved quality standards ranging from leadership and support, to dignity and respect through a process of assessors visiting the prison to witness the care being delivered by the staff on L-Wing.



What is the framework?

The Gold Standards Framework has 3 steps: Identify, Assess, Plan well.

With systems in place to identify those in the last year of life then careful monitoring and planning can follow. Those identified can discuss their physical, mental and spiritual wishes in Advance Care Planning, leading to living well and dying well.

It means that the right care is delivered at the right time, by generalist practitioners in health and social care (not just specialists in palliative care). End of life care becomes everyone's business.

Outcomes are -

- Improving confidence of staff
- Organisational system change; improved team work and collaboration with GPs and other services
- Patient centred care; proactive, coordinated care
- Caring for all people in their last year of life regardless of setting.

"For us, the fact that we are the first prison to do it makes us proud because it demonstrates that even in the harshest of environments you can provide a good death and that is a credit to the nursing team".

Scott Ralph (RGN) L-Wing (Older Persons Unit) Lead Nurse

"Yes, it's a prison environment but we do what we can to fulfil prisoners' wishes while of course remembering the restriction within which we work"

HMP Norwich

The GSF training for prisons require that 2 nominated leads from a prison will:

- Attend interactive workshops
- Share examples of good practice with others
- Take part in evaluation
- Lead and be responsible for implementation of the programme in the setting: cascading from the workshops to other staff on the setting.



Impact is evaluated through quantitative and qualitative assessments.

1. Key outcome ratios showing impact of change before and after GSF against key metrics.

2. Comparative audits – patient level (online After Death Analysis - ADA), staff confidence, organisational questionnaire, patient/carer views.

3. Portfolios for accreditation – evidence of best practice.

4. Visit/interview for quality assessment.

On the GSF website there are reports of the evidence base published in journals.

Further proof of the quality of care comes from the prisoners. Almost all refuse the offer of compassionate release, which could see them sent home or elsewhere to die. They know the care here is second to none and they regard it as their home.

Scott Ralph, Lead Nurse for Virgin Care at HM Prison Norwich Healthcare team