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Aging in the Criminal Justice System: Implications for Policy

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Increasing # older adults changes health landscape of correctional systems

- **Highest rates typical chronic health conditions**
- **Also high rates additional unique health conditions**
 - Cognitive Impairment or Dementia
 - Disability
 - Typical (eating, bathing, mobility)
 - Unique (getting onto floors for alarms, climbing on/off bed)
 - More likely to have serious life-limiting illness
- **Corrections increasingly a critical delivery site for long term care and palliative care**
- **Need to examine health and non-health criminal justice policies to assess their impact on the health of this growing population**

4 Examples of critical healthcare policies for seriously ill / older adults

Critical Policies	Examples of Action Items
1. Screen for & address cognitive impairment (CI) and dementia	<ul style="list-style-type: none"> • Train professionals across CJ spectrum to screen CI/ dementia (police, judges, attorneys, jail/prison clinicians, probation/parole) • Incorporate screening results into court proceeding, healthcare delivery, parole/probation/release planning
2. Define and address disability	<ul style="list-style-type: none"> • Define tasks necessary for independence by housing unit • Match physical tasks to prisoner abilities when assign housing • Institute screening schedule for development of new disability
3. Develop plans for Long Term Care	<ul style="list-style-type: none"> • Plan for continuum of care across spectrum of disability • Create criteria for classification in different care levels
4. Create national medical release guidelines based in scientific evidence	<ul style="list-style-type: none"> • Uniform guidelines based in scientific evidence • Address barriers prevent medically-eligible obtaining release • Enhance palliative care for those not released

Examine/modify non-health policies with unanticipated health consequences

- **Sentencing decisions:**

Three strikes and Life without possibility of parole → higher concentration of older and sicker prisoners

- **Facility policies**

Lock-down and solitary confinement → may increase disability and deconditioning of older prisoners

- **State-wide reorganization efforts**

California Realignment → potential result in higher concentration of older/ sicker persons in jails which have fewer healthcare resources

- **Given greater number of older and seriously ill prisoners, health professionals should help with criminal justice policy making to anticipate potential health consequences**



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