

Southampton Local Delivery Unit Health Trainer Report

**Quarter 3
Oct – Dec 2013**

Executive Summary

This report covers developments within the Probation Health Trainer service for the period October 2013 through to December 13. This is the third quarter of the new reporting year. During this review period extensive work has gone into developing the database. Within the report you will note there are still areas for improvement and a resource has been identified to continue with this development work.

Year to date we have achieved 192 referrals of the target of 300 referrals (64% of our yearly target).

As previously reported the team consists of one full-time and one part-time (0.6) member of staff. However the .6 member of staff has had a significant amount of sickness absence linked to her pregnancy during this quarter. As of the 27/11/13 she has been consistently off sick and is now classed as "long term sickness". This means during this quarter the team has been staffed with only one Health Trainer.

Recently I was involved in the recruitment of two part-time members of staff 0.6 and 0.5. A candidate was appointed for the 0.6 post and she is due to start employment at the beginning of February. Her post will focus on the accommodation and benefit needs of clients to help reduce the demand on the other health trainers. Unfortunately the 0.5 post was not filled. This post was to work the opposite hours of the current 0.6 member of staff but this now needs to be reconsidered due to her ongoing sickness.

The foods skills/poverty project which has been commissioned Health Champions Training (Ltd) has unfortunately made little progress during this quarter due to difficulties with finding a suitable venue. An Indicative costing has been provided regarding a Health Trainer attending the project.

Probation Health Trainers are now invited to the Community Health Trainer fortnightly team meetings. They are also able to access training, although at a cost.

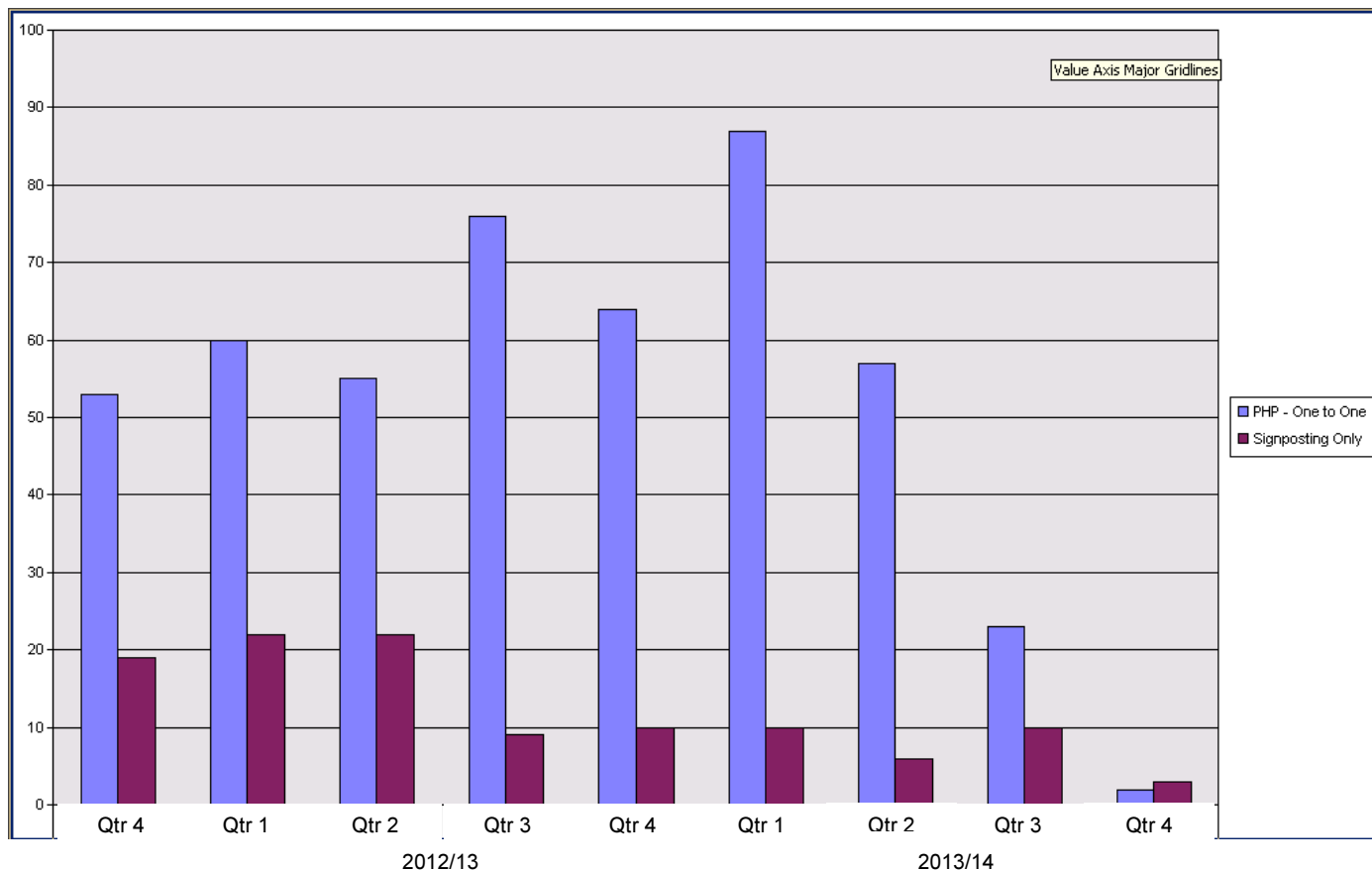
In respect of ensuring the correct referrals are being made to the health trainers, a re-launch of the service to the Town Quay Probation Office is planned for February. With a health trainer specifically appointed to take referrals relating to accommodation and benefits will mean the other health trainers can focus on more meaningful one-to-one sessions with clients.

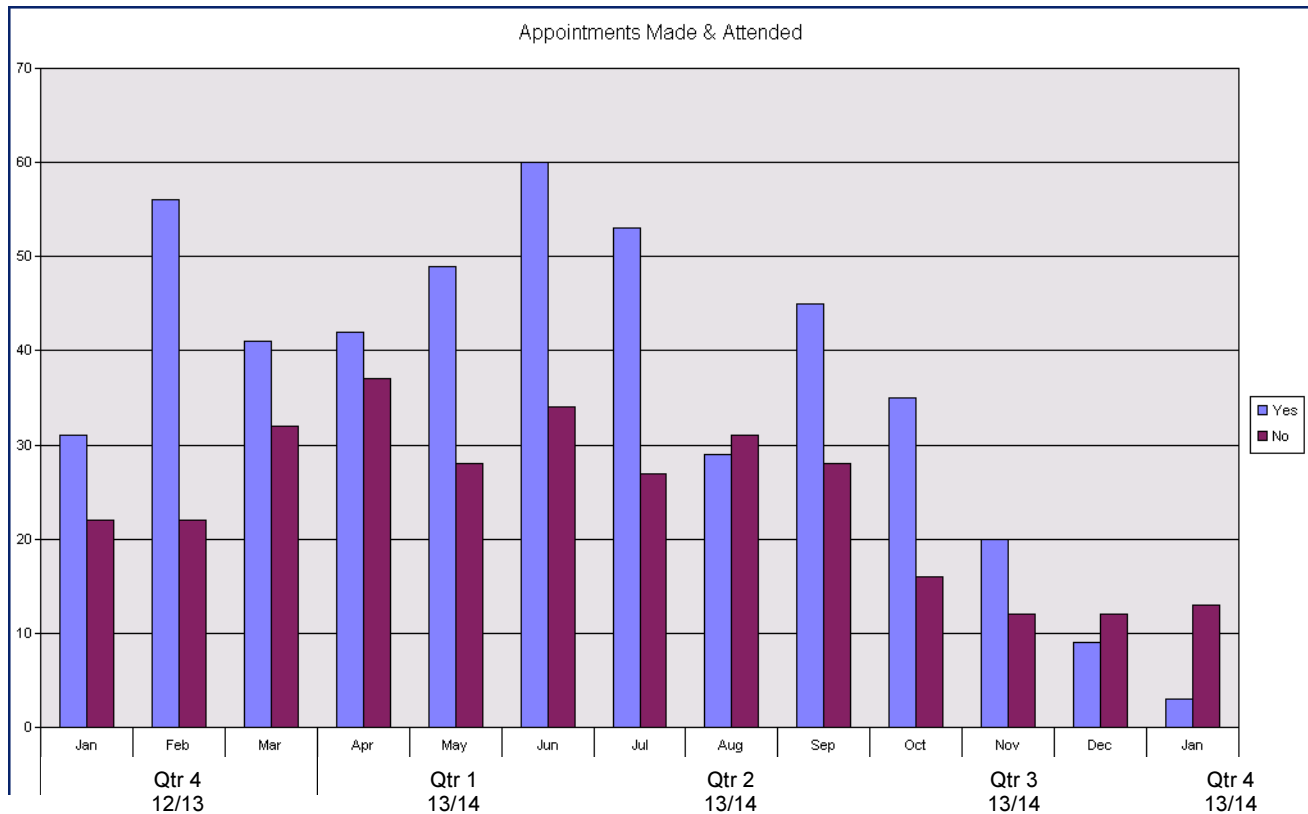
Amanda Pontin
Senior Probation Officer

Performance

During the period of the report there were 33 new referrals. Of the 33 referrals this quarter, 23 of those were one-to-one appointments and 10 were signposting. The signposting referrals have remained consistent within the last 4 quarters.

This is a significant reduction from previous quarters. The reason for this reduction is due to the team consisting of only one Health Trainer and having to filter the referrals and work with those deemed to have the most need. Where it was possible to signpost this has been done and would explain the increase in such referrals in this quarter.



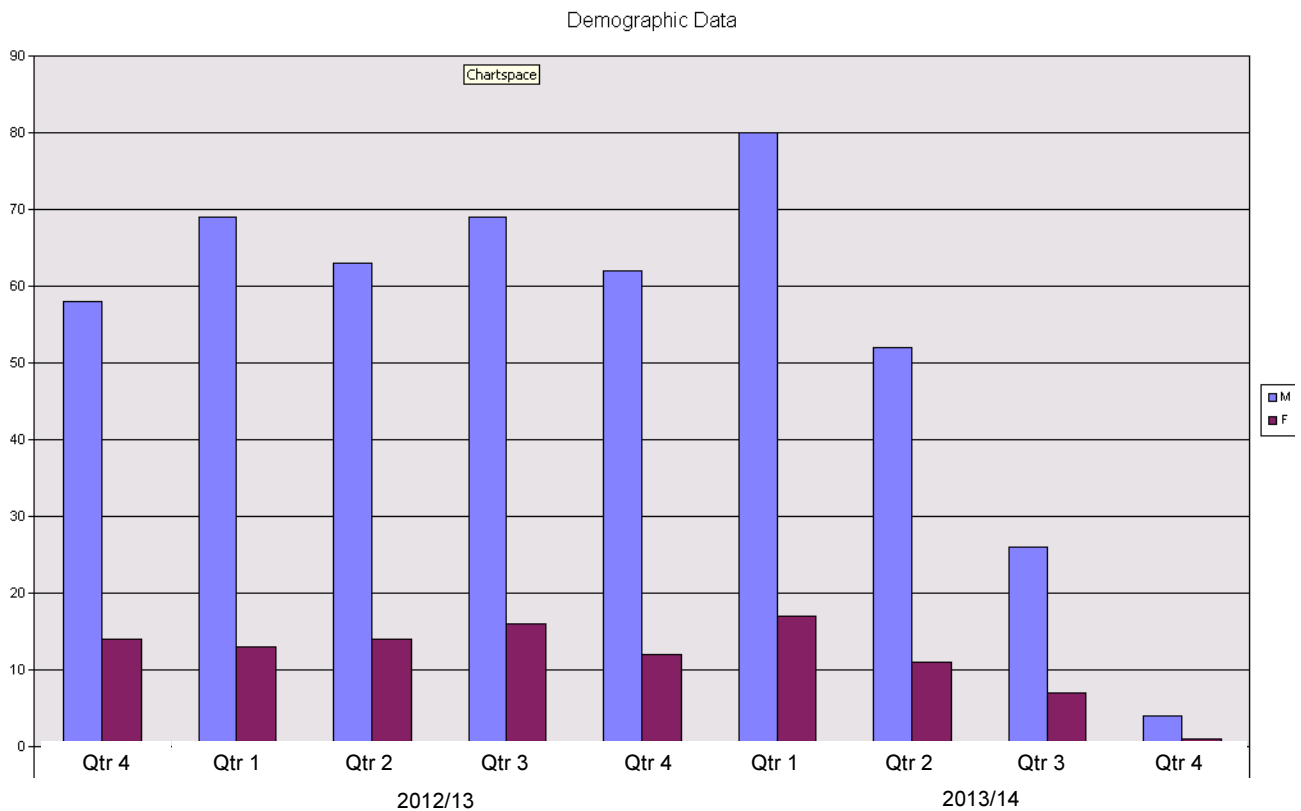


From the 33 referrals during Qtr 3, 104 separate appointments were made of which 64 were attended (61%). Despite there being a significant reduction in referrals, the percentage of appointments attended has increased by 4%. The chart clearly highlights that attendance at appointments gradually decreased during the months of November and December which is common with offenders when the weather deteriorates and other priorities are deemed more important, such as Christmas.

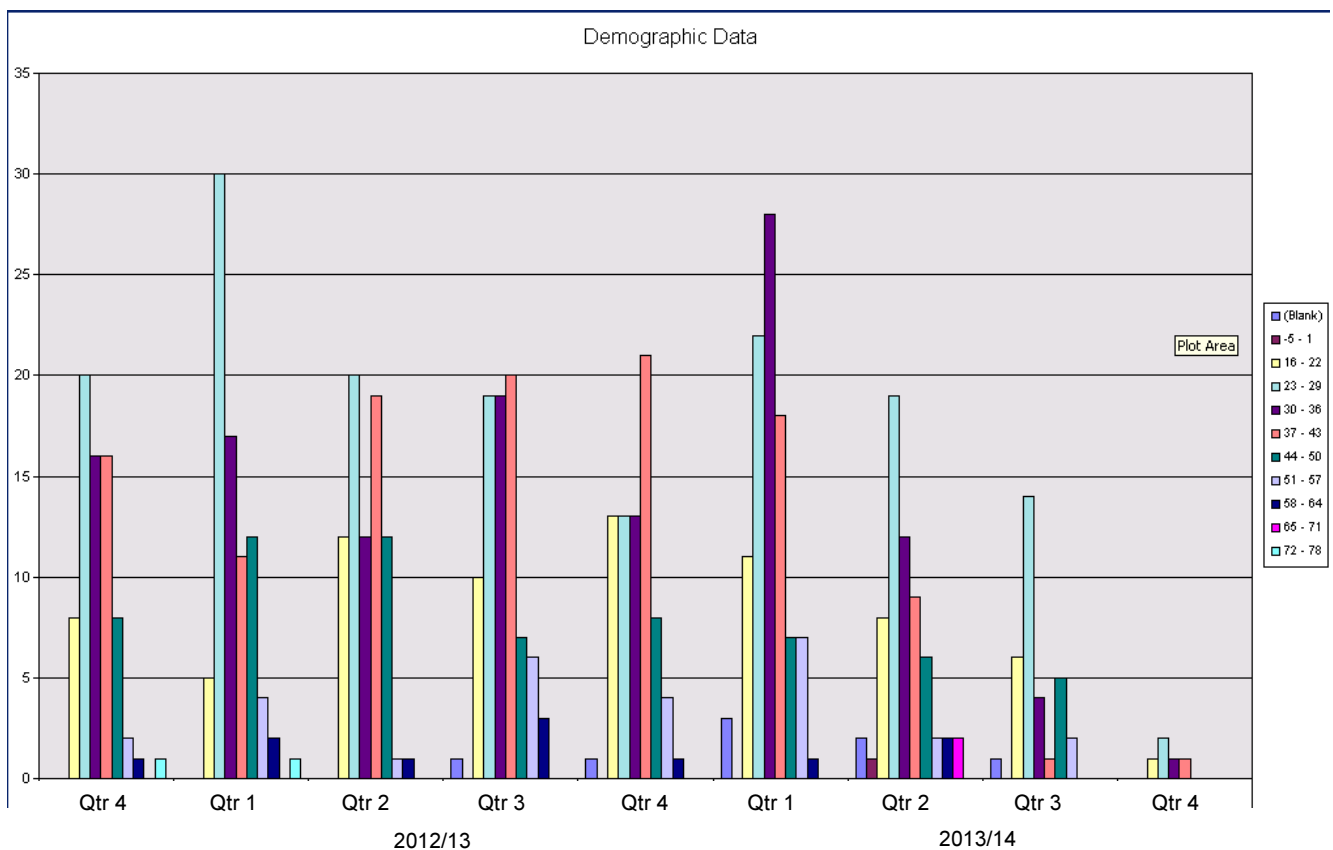
The annual target for helping offenders achieve health goals through one to one sessions is 300. Our year to date figure is 192 which is 64% of the yearly target.

Client Demographics

During the reporting period the following Age, Gender, Ethnicity and Postcode information was collected:

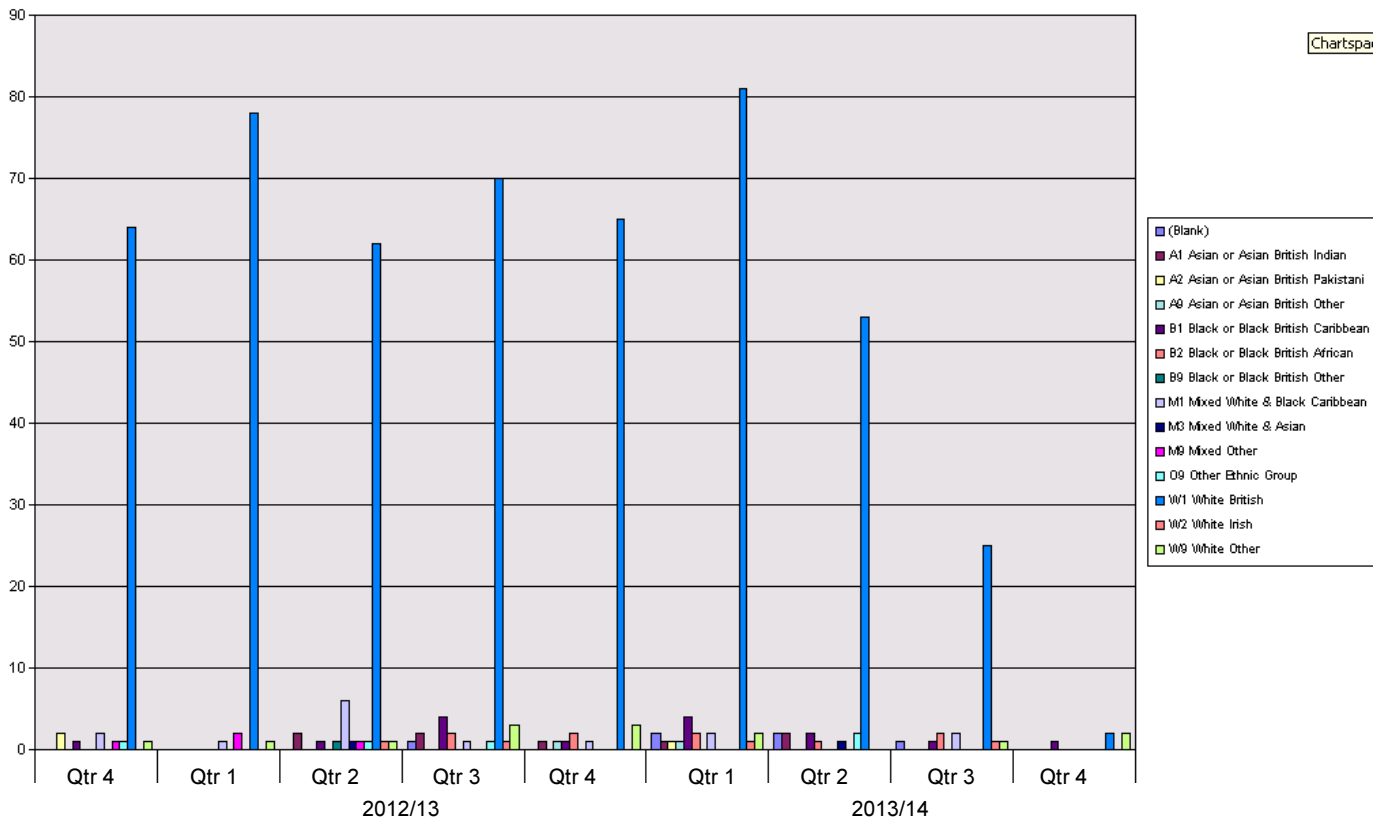


The gender split this quarter remains consistent with previous quarters with males being the main clientele at 79% of the referrals and 19% being female. The demographic profile for the City of Southampton records approximately 84% males and 16% females.



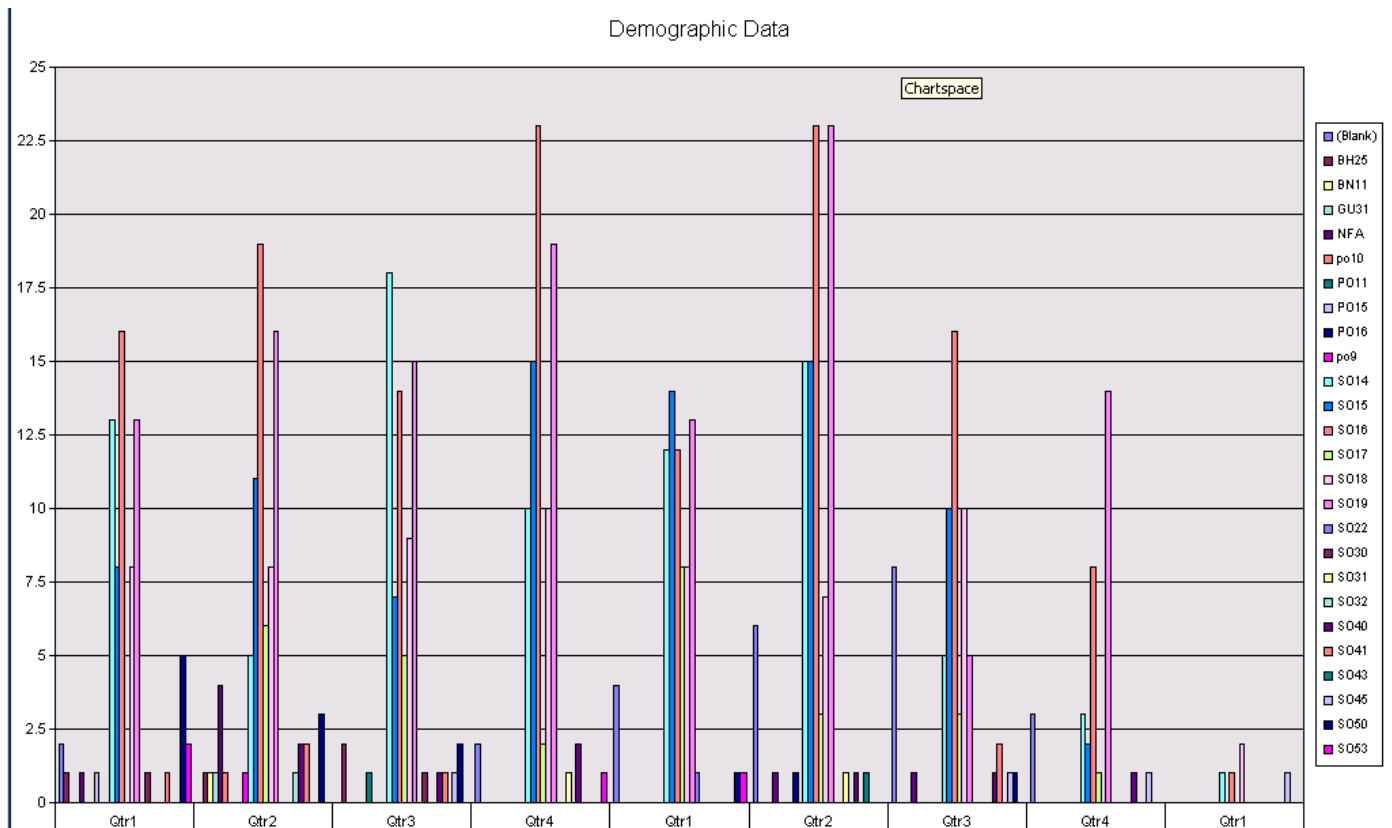
Age group trends remain consistent with the majority of referrals being within the age group of 23-29. This quarter there has been a decrease in referrals for 30-36 year olds, but an increase in the age group 44-50. However, over the year there is a consistent pattern of the main age groups being 26-34 and 35-49. These referrals are in line with the demographic profile for age group trends in the City of Southampton: approximately 35% for the age group 25-34 and 30% for the age group 35-49.

Demographic Data



The ethnic breakdown count for 2012/13 of ethnic groups represented on the HT caseload with white British making up the majority of referrals. The City of Southampton demographic profile for ethnicity confirms white British is the more prevalent ethnicity in the city at 76.35%.

Demographic Data

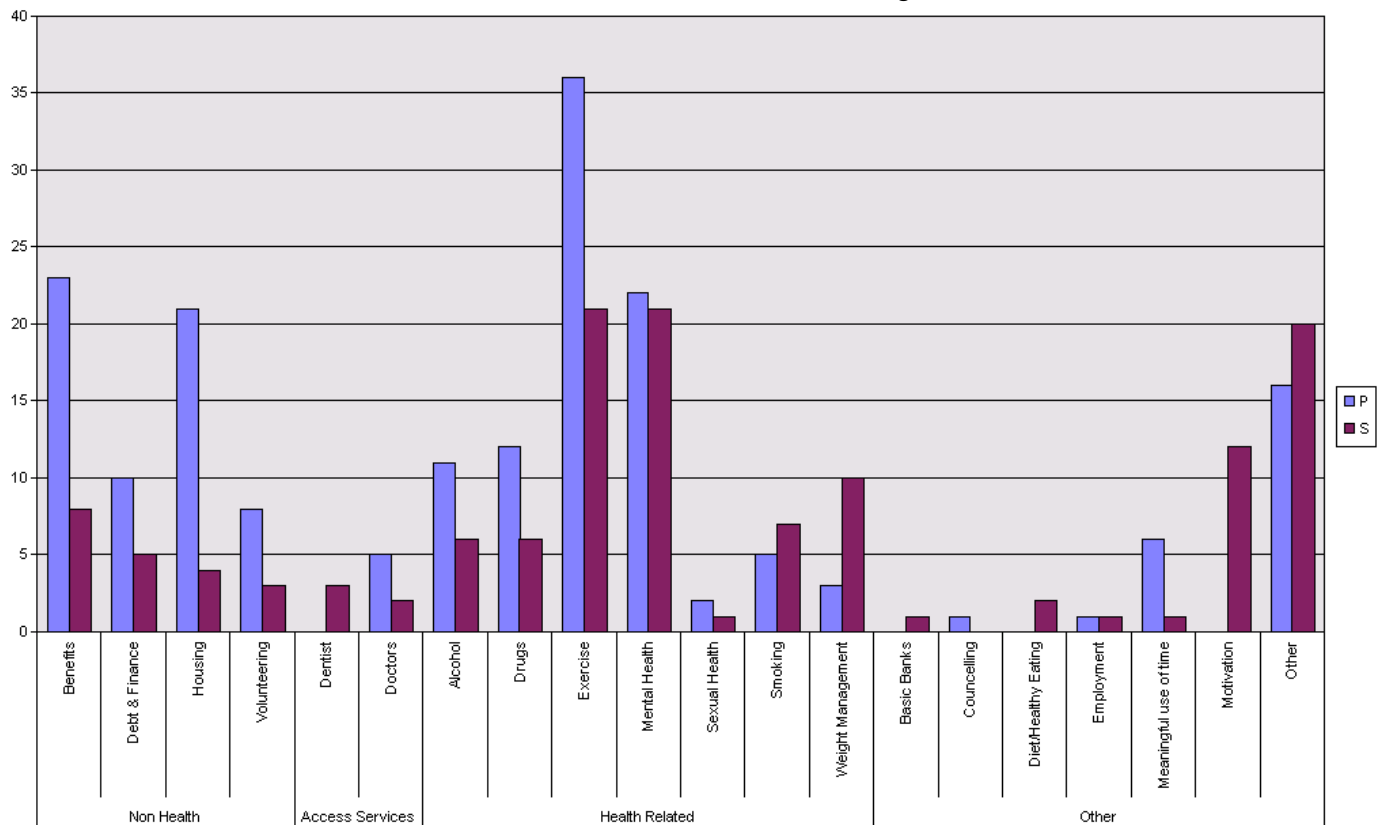


SO19 continues to generate the highest number of referrals at 25.27%. SO16 provides 22.65% and SO15 19.34%.

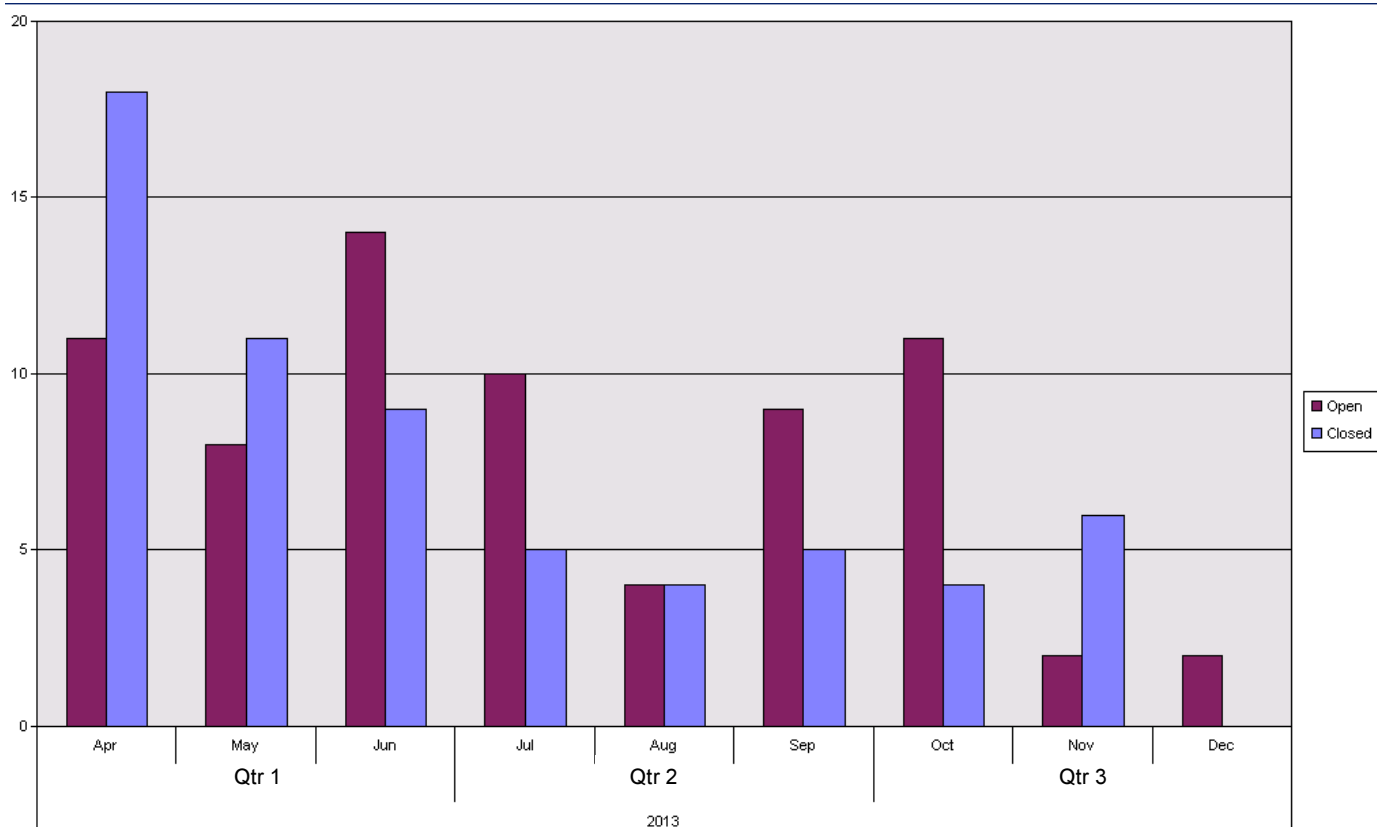
Interventions

The following individual interventions were carried out during the period. Positively the focus this quarter has been on exercise and mental health where previously housing and benefits have been the main focus.

There are still entries being recorded under "other". What exactly these primary and secondary interventions are is unclear. I will have this information for our meeting.



The graph below shows the number of cases being opened each month compared with those being closed. There was a significant increase in the number of cases closed in November. This was due to the team reviewing their caseloads as referrals were reducing giving them time to review old cases and close those no longer engaging.

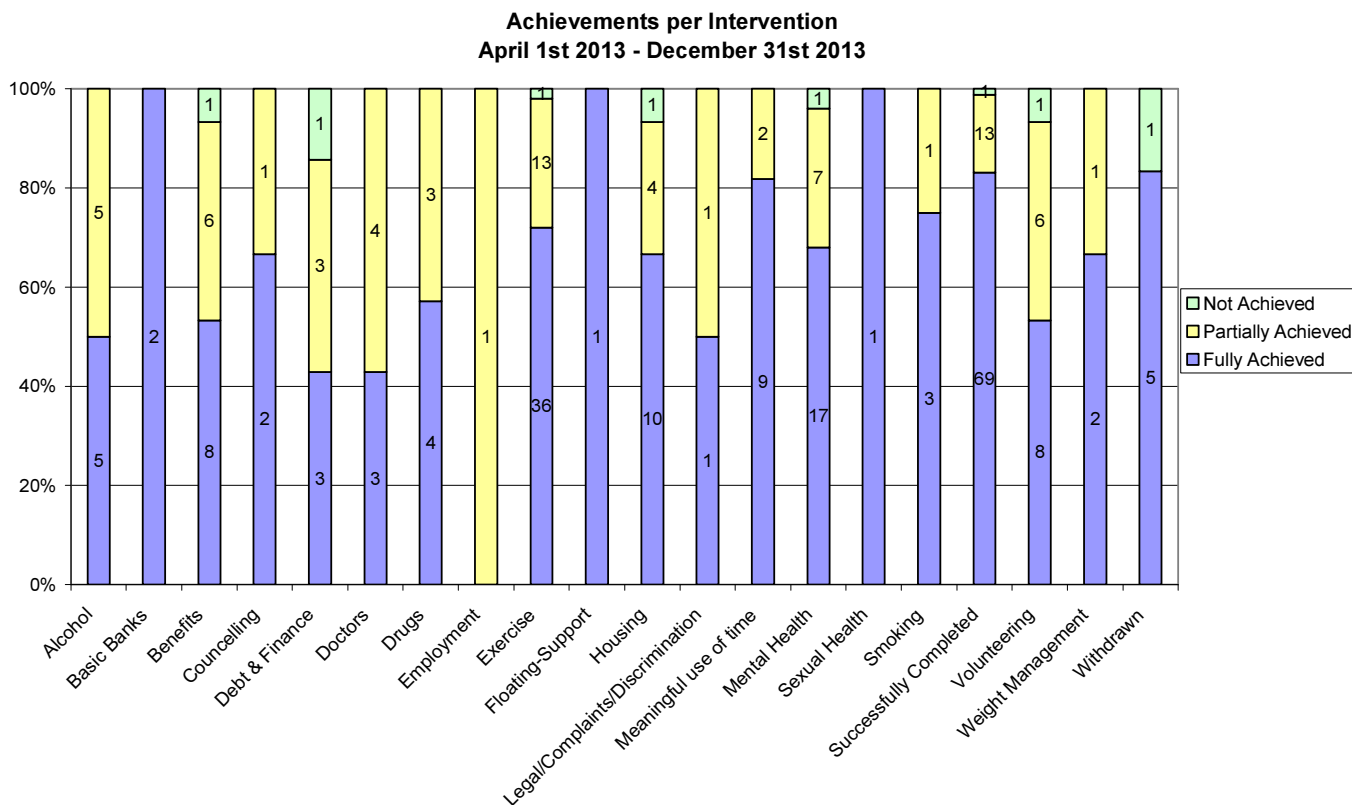


Successful completions

Health trainers are recording a status of 'not achieved', 'partially achieved' or 'fully achieved' against every meeting/intervention they have with an individual rather than against the journey the individual takes with the health trainer. The current database does not enable the health trainers to record a status for an individual's whole journey rather than that individual interventions. The Graph below shows the percentage of each status against each meeting/intervention type.

It is comforting to note the main areas of health such as exercise, mental health, sexual health, smoking and weight management are being fully achieved.

The reference to 'successfully completed' is an error in recording that will be addressed during the next quarter. This is being used when a case finishes working with a health trainer and should not be within this intervention section.

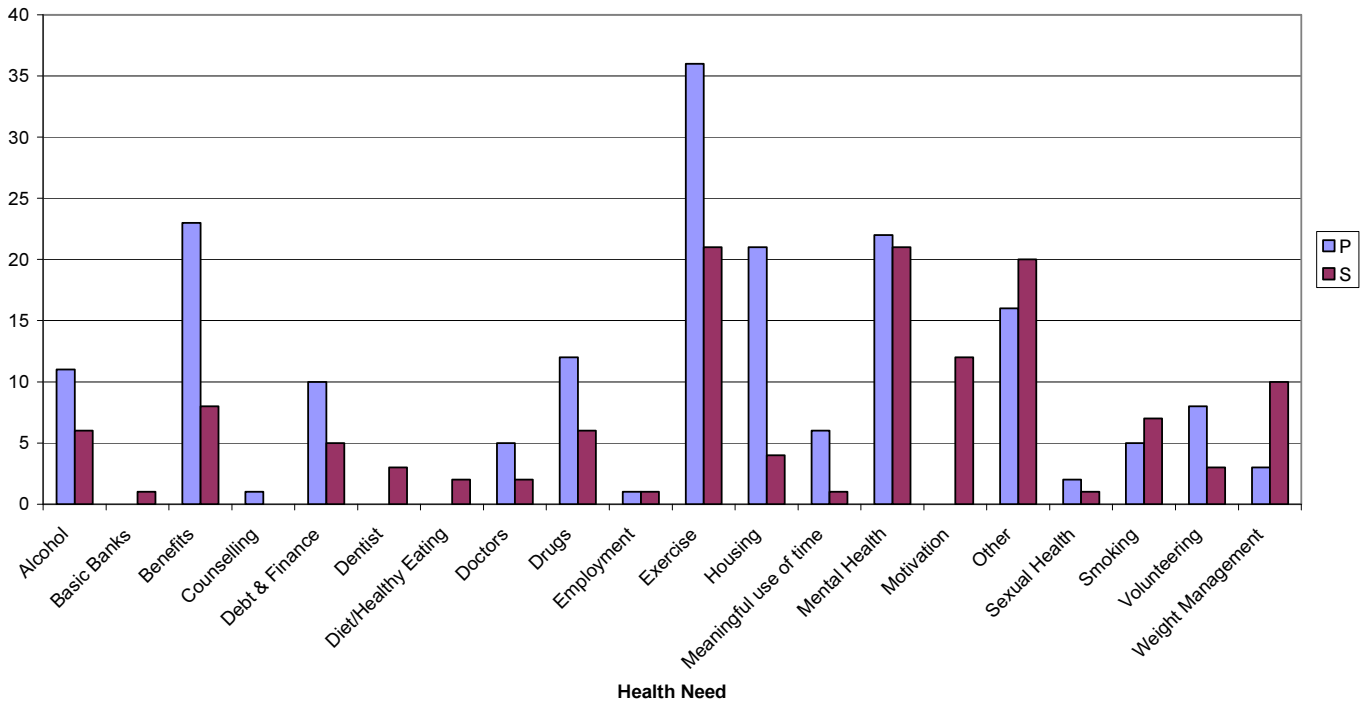


Primary and Secondary Needs

The graph below looks at the primary and secondary needs of service users at the time of referral into the service. Exercise continues to be the main reason for referral.

As already stated above, further information is being collated to find out what primary and secondary needs are being recorded under "other".

**Primary & Secondary Needs
April 2013 - December 2013**



Outcomes Stars

Since 1st January 2013 136 outcomes stars have been completed; 92 of those were classed as first stars; 29 were 'review' stars and 14 'retrospective' stars. The focus of the stars breaks down as follows:

	Drug use	Alcohol use	Diet & Weight Mngmt	Exercise	Sexual Health	Mental Health	Accommodation	Money	Offending	Smoking
Total	27	35	30	60	10	59	51	50	44	21
First	18	23	18	41	6	35	33	32	27	16
Review	7	7	7	12	3	16	12	12	10	4
Retrospective	2	5	5	7	1	8	6	6	7	1

The web graph below shows average outcome star score by review type and health need. It is encouraging to note that there is progress shown against mental health, accommodation, money, offending, diet & weight management and exercise. Further work needs to be done however as part of the launch to ensure the robustness of this information.

- 1-2 = Stuck
- 3-4 = Accepting help
- 5-6 = Believing
- 7-8 = Learning
- 9-10 = Self-reliance.

Average score by review type and health need

