

Case Study - Prison Health Needs Assessment Reports

Problem

Previous health needs assessments produced by other organisations have been expensive, unwieldy academic documents. These assessments were one off exercises which were then simply filed away after publication and not used to inform the commissioning cycle.

Solution

NECS was asked by NHS England to design a new model of health needs assessment reports for the 12 prisons in the Yorkshire and Humber region. Health needs assessment (HNA) is a systematic method for reviewing the health issues facing a population, leading to agreed priorities and resource allocation that will improve health and reduce inequalities (NICE, 2005).

The brief from NHS England was to create an innovative solution to the problem described above. Our intention was to produce a dynamic and consistent model of HNA reports which could be updated periodically and could be refreshed as and when required, for example if needed for a healthcare provider procurement. To ensure that the reports were fit for purpose, the report templates were developed in collaboration with NHS England Health and Justice Commissioners and representatives from NHS England, National Offender Management Service (NOMS) (now Her Majesty's Prison and Probation Service HMPPS) and Public Health England alongside prison healthcare providers, prison governors and patients/service users.

The focus of every report is to analyse the health and social care needs of prisoners in the establishment(s) and to consider how well these needs are being met by the health and social care providers. Areas of good practice are highlighted as well as areas for development or improvement and recommendations.



The Tasks

- The team designed a dynamic HNA model of delivery in collaboration with key stakeholders (including NHS England, NOMS and Public Health England, healthcare providers, Prison Governors and patients/service users).
- A clear programme management methodology was used to produce HNA reports for all twelve prisons in the Yorkshire and Humber area within a timescale of twelve months.
- The quality and feasibility of each report was improved (based on previous years) due to extensive consultation with stakeholders around what works in a HNA model, for example the scope of the report has been extended to include chapters on escort and bed watch, patient safety, learning disability and medicines management to give a wider scope of prison activity/need – in line with prison colleagues (Co-Commissioners with NHS England).
- The financial cost to NHS England Health and Justice Teams of each report was reduced (compared to previous years), on the basis that the more reports which are delivered, the cheaper the process is.
- The model was aligned to ensure the HNAs were outputs focused and linked to the ongoing prison contract review cycle and any procurements – ensuring all reports were embedded into 'business as usual'.
- The Health and Justice Team from NECS worked with their colleagues in Business Intelligence and other partners such as PHE and HMPPS to create a clear flow of information and automated statistical analysis, this process can be used on an ongoing basis for future reports.
- The HNAs were used as key documentation in multi-million pound re-procurement projects within NHS England.

"This is something I can use for evidence"

Jerry Spencer
Director (HMP Doncaster)

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Results

- Within our reports the patient voice has been a focal point of reports ensuring that service users are central to the commissioning cycle.
- Positive feedback was received on the overarching model from associated stakeholders.
- HNA reports for all twelve Yorkshire and Humber prisons were published, within cost, on schedule, within a twelve month period.
- All reports were effectively delivered to key stakeholders (NHS England commissioners, Heads of Healthcare and prison governors) at delivery meetings at the end of each report writing cycle.
- The completed reports have been shared, on request, with interested parties such as prison governors, academic researchers and staff from Public Health England.
- Services within NHS England have been recommissioned based on the reports.
- The reports have been used as evidence by associated stakeholders in business cases.
- Patients' health needs have been better met because our reports have been the basis for action plans (by prison healthcare providers) to review and improve their healthcare provision. In one prison this process has been driven by the prison governor who has scheduled regular meetings with the healthcare provider to review progress on their implementation of the HNA action plan.

Furthermore, NECS now has a standard HNA model which can be offered to NHS Health and Justice commissioners across the area teams in England. HNAs have now been commissioned in several other area teams across the UK (Including a Children and young person's HNA model) in collaboration with NECS Children's Commissioner.

"This process has really got me thinking of gaps in service provision"

Head of Health Care

"I am happy with the content and think it a fair reflection"

Maxine Harrison
Head of Health Care (HMP Wakefield)

"I saw my prison (in the report)...it's pulled out my 3 main areas of concern"

Dave Harding
Governor (HMP Wakefield)



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