

Form details:**Name of policy:** Probation Health Trainers Service**Department:** Public Health**Who has been involved in completing the Equality Impact Assessment:** Kirsty Walton - Strategic Lead for Public Health**Relevant contact information for those involved:** kirsty.walton@leics.gov.uk**Who is completing the EIA:**

First name	Surname
Kirsty	Walton

Email:

Email address
kirsty.walton@leics.gov.uk

What is the proposal?:

The Probation Health Trainers service has been a valuable resource for supporting offenders on community orders or license to adopt healthier lifestyles. This service, provided locally for several years, offers personalised assistance to help clients access essential health and wellbeing services, such as GP and dental care. Health trainers work individually with clients to assess their health and lifestyle needs, create Personal Health Plans, and provide ongoing support to promote lasting behaviour change and improved wellbeing.

Currently, the Probation Health Trainers (PHT) Service is being delivered by Ingeus on behalf of Leicestershire County Council, with a contract value of £67,500 per annum. The contract, which began in April 2022, is set to expire on March 31, 2025, with the option to extend for an additional 24 months in yearly increments until March 31, 2027.

In November 2023, the Public Health DMT reviewed an Options Paper that included the possibility of not utilising the extension clauses and allowing the contract to conclude in March 2025. Probation Practitioners have alternative options to refer clients, such as the NHSE commissioned RECONNECT service or broader public health services like First Contact Plus.

Considering the financial constraints on the Public Health Grant and the need to achieve a further £90,000 MTFs saving in 2025/26, the Public Health DMT has decided to engage with key stakeholders to assess the impact of discontinuing the contract by March 31, 2025.

The proposal is to not extend the Probation Health Trainers Service contract beyond the initial term and to decommission the service by May 31, 2025.

What change and impact is intended by the proposal? :

The change will be that the service is no longer delivered, and service users will no longer have the additional support from the Probation Health Trainers Service alongside their ongoing Probation Practitioner support.

The impact of ending the service is that without support this cohort of people may not be motivated to live a healthier lifestyle which may increase their vulnerability.

What is the rationale for this proposal?:

A service review was undertaken in Autumn of 2023, including engagement with key stakeholders. At that point the intention was to gain an understanding of what the service delivered and what key stakeholders thought of the service. In addition to this engagement, the Service Review included a literature review/evidence base, mapping of other similar services/alternative services locally, review of data and performance, and cost comparators. It was also noted that the service does not form one of the mandated Public Health service areas.

Following the Service Review, DMT considered options for the service and have proposed that the service is not extended beyond the initial contract term. Engagement with key stakeholders has been carried out during May 2024. This engagement asked for stakeholders opinion being explicit about the proposal to end the contract in May 2025

The Council is experiencing significant financial challenge and a programme of financial savings in order to address these. There are also other services that could meet the needs of this population, such as wider public health services, First Contract Plus and the NHSE commissioned RECONNECT service, thus the service could be viewed as duplicating other provision.

What equalities information or data has been gathered so far?:

Comprehensive quarterly Performance is collated via the service provider Ingeus.

When service users are referred to the provider their characteristic information is collected as part of the onboarding process.

What does it show?:

Local data of service users provided by the service provider, shows that compared to the population of Leicestershire women are under-represented within the service 17% compared with 50.6% (ONS 2021). Peterborough prison is the only female prison that links with the service and therefore a lower rate compared to the wider prison release population is expected.

Compared to the population of Leicestershire, white people are over-represented within the service 91.7% compared with 87.5%, and non-white/mixed are under-represented compared to Leicestershire at 7.5% compared to 12.5% (ONS 2021).

Compared to the population of Leicestershire, people either registered as disabled or identifying as disabled are over-represented within the service at 46% compared to 6.1% (ONS 2021).

It is not possible to compare age distribution of service users with Leicestershire population due to different age-bands being used in the different data sets.

The National Prisons Strategy White Paper was accompanied by an [Overarching Equalities Statement](#) which included a demographic breakdown of the prison population. This document identified some over-representation of particular protected characteristics in the prison population. These included:

- Those who are male
- Those aged between 18 and 39
- Those with a disability
- Those from an ethnic minority background
- Those who are Muslim

It is therefore likely that the over-representation of many of these protected characteristics in the local service, are as a result of the protected characteristics of the prison population overall.

What engagement has been undertaken so far?:

In May 2024 an engagement process took place for eight weeks to survey those linked to the PHT service to gain their views on the proposal to decommission the service; this included the staff within the service, the Probation Service staff and current / previous service users.

Reponses were received from:

- 18 individuals who are or have been supported by a Probation Health Trainer
- 18 Probation Service staff members
- 13 Ingeus Staff members

What does it show?:

Feedback suggests that the service is a great support to individuals and the probation service. 78% were against the proposal to decommission the service.

Evidence documents upload : Engagement analysis report

IMPLICATION – The proposal to decommission the service will mean that all operations within the service are closed prior to the end of the formal contract.

Age:

What are the benefits of the proposal for those from the following groups?	Is there any specific risks or concerns?	What are the identified risks or concerns and how they will be mitigated?
No benefits. All adults on probation will potentially need to seek alternative provision via their probation officer.	Lack of access to support from probation officers may result in service users living an unhealthy lifestyle or fail to book medical appointment.	Probation staff will refer clients to alternative provisions. Additionally, service users are able to self refer to public health wider commissioned services.

Disability:

What are the benefits of the proposal for those from the following groups?	Is there any specific risks or concerns?	What are the identified risks or concerns and how they will be mitigated?
No benefits. All adults on probation will potentially need to seek alternative provision via their probation officer.	Lack of access to support from probation officers may result in service users living an unhealthy lifestyle or fail to book medical appointment.	Probation staff will refer clients to alternative provisions. Additionally, service users are able to self refer to public health wider commissioned services.

Race:

What are the benefits of the proposal for those from the following groups?	Is there any specific risks or concerns?	What are the identified risks or concerns and how they will be mitigated?
No benefits. All adults on probation will potentially need to seek alternative	Lack of access to support from probation officers may result in service users living an unhealthy	Probation staff will refer clients to alternative provisions. Additionally, service users are able to self refer to

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provision via their probation officer.	lifestyle or fail to book medical appointment.	public health wider commissioned services.

Sex:

What are the benefits of the proposal for those from the following groups?	Is there any specific risks or concerns?	What are the identified risks or concerns and how they will be mitigated?
No benefits. All adults on probation will potentially need to seek alternative provision via their probation officer.	Lack of access to support from probation officers may result in service users living an unhealthy lifestyle or fail to book medical appointment.	Probation staff will refer clients to alternative provisions. Additionally, service users are able to self refer to public health wider commissioned services.

Gender Reassignment:

What are the benefits of the proposal for those from the following groups?	Is there any specific risks or concerns?	What are the identified risks or concerns and how they will be mitigated?
No benefits. All adults on probation will potentially need to seek alternative provision via their probation officer.	Lack of access to support from probation officers may result in service users living an unhealthy lifestyle or fail to book medical appointment.	Probation staff will refer clients to alternative provisions. Additionally, service users are able to self refer to public health wider commissioned services.

Marriage and Civil Partnership:

What are the benefits of the proposal for those from the following groups?	Is there any specific risks or concerns?	What are the identified risks or concerns and how they will be mitigated?
No benefits. All adults on probation will potentially need to seek alternative provision via their probation officer.	Lack of access to support from probation officers may result in service users living an unhealthy lifestyle or fail to book medical appointment.	Probation staff will refer clients to alternative provisions. Additionally, service users are able to self refer to public health wider commissioned services.

Sexual Orientation:

What are the benefits of the proposal for those from the following groups?	Is there any specific risks or concerns?	What are the identified risks or concerns and how they will be mitigated?
No benefits. All adults on probation will potentially need to seek alternative provision via their probation officer.	Lack of access to support from probation officers may result in service users living an unhealthy lifestyle or fail to book medical appointment.	Probation staff will refer clients to alternative provisions. Additionally, service users are able to self refer to public health wider commissioned services.

Pregnancy and Maternity:

What are the benefits of the proposal for those from the following groups?	Is there any specific risks or concerns?	What are the identified risks or concerns and how they will be mitigated?
No benefits. All adults on probation will potentially need to seek alternative provision via their probation officer.	Lack of access to support from probation officers may result in service users living an unhealthy lifestyle or	Probation staff will refer clients to alternative provisions. Additionally, service users are able to self

What are the benefits of the proposal for those from the following groups?	Is there any specific risks or concerns?	What are the identified risks or concerns and how they will be mitigated?
	fail to book medical appointment.	refer to public health wider commissioned services.

Religion or Belief:

What are the benefits of the proposal for those from the following groups?	Is there any specific risks or concerns?	What are the identified risks or concerns and how they will be mitigated?
No benefits. All adults on probation will potentially need to seek alternative provision via their probation officer.	Lack of access to support from probation officers may result in service users living an unhealthy lifestyle or fail to book medical appointment.	Probation staff will refer clients to alternative provisions. Additionally, service users are able to self refer to public health wider commissioned services.

Armed Forces:

What are the benefits of the proposal for those from the following groups?	Is there any specific risks or concerns?	What are the identified risks or concerns and how they will be mitigated?
No benefits. All adults on probation will potentially need to seek alternative provision via their probation officer.	Lack of access to support from probation officers may result in service users living an	Probation staff will refer clients to alternative provisions. Additionally, service

What are the benefits of the proposal for those from the following groups?	Is there any specific risks or concerns?	What are the identified risks or concerns and how they will be mitigated?
	unhealthy lifestyle or fail to book medical appointment.	users are able to self refer to public health wider commissioned services.

Other groups: e.g., rural isolation, deprivation, health inequality, carers, asylum seeker and refugee communities, looked after children, deprived, armed forced, or disadvantaged communities:

What are the benefits of the proposal for those from the following groups?	Is there any specific risks or concerns?	What are the identified risks or concerns and how they will be mitigated?
No benefits. All adults on probation will potentially need to seek alternative provision via their probation officer.	Lack of access to support from probation officers may result in service users living an unhealthy lifestyle or fail to book medical appointment.	Probation staff will refer clients to alternative provisions. Additionally, service users are able to self refer to public health wider commissioned services.

Action plan document (optional):

How will the action plan and recommendations of this assessment be built into decision making and implementation of this proposal?:

NO ACTION PLAN REQUIRED – the provider will be given 6 months’ notice of any decommission of the service. No mitigation will be needed at the point of closure as there will be no service users within Public Health.

How would you monitor the impact of your proposal and keep the EIA refreshed?:

As the contract will be decommissioned the EIA will no longer be required.

Date of completion: 6/8/2024