

East of England
Health Trainer Hub Partnership

“Health Trainers providing services to people in areas of deprivation, using evidence based health and well-being interventions to reduce health inequalities”.

Annual Report 2009-2010

The East of England (EOE) Health Trainer Partnership (EoEHTP) consists of 14 Primary Care Trusts (PCTs), 15 Prisons, 6 Probation Regions, a variety of Voluntary services and Businesses. The EoEHTP is funded by the Department of Health (DoH) to support the development of the Health Trainer (HT) service throughout the East of England. The EOE hub is part of a larger national implementation team that includes the hubs from the rest of England and the central team drawn from the DoH.

All the hub leads attend bi-monthly (previously monthly) meetings, to design, develop, share information and steer the work of the partnership. You can contact the hub lead Sue Green at Lakeside 400, Old Chapel Way, Thorpe Business Park, Norwich, NR70WG, telephone 07825364139; email Sue.Green@norfolk.nhs.uk.

The EoE hub is supported by a range of professionals that include Anne McConville EoE Government, the EoE Strategic Health Authority, Commissioners for Health and Offender Health, PCTs Education leads, City and Guilds, Royal Society of Public Health's Trainer's , the Prince's Trust, Job Centre Plus and JIF.

The Health Trainer Service

The HT service offers a fantastic opportunity to promote improvements in health and well-being to the most disadvantaged and hard to reach communities. Health trainers offer 1-1 support to people that want to make lifestyle changes. The role of the HT is to undertake a range of evidence based behavioural change interventions. This involves supporting people to develop their skills and knowledge to actively manage their own behaviour. Health Trainer services are leading in reducing health inequalities.

Health Trainers are recruited from their communities, because of this the HTs services benefit from their local knowledge and experience and this increases their ability to engage people locally.

Health Trainers are required to undertake the level 3 City and Guilds HT certificate, in addition to this each PCTs HT service adds on additional training such as smoking

cessation, mental health first aid, sexual health, 5 a day, health walks and a range of other subjects. The Health Trainer Champions (HTCs) complete the Royal Society of Public Health's Understanding Health Improvement course and many are also trained in a variety of subjects including, walking for health, warm front, eating healthily and so on.

The EoE Partnership consists of:-

Bedfordshire PCT

Cambridgeshire PCT

Great Yarmouth and Waveney PCT

West Herts PCT (the 2 Herts PCT are due to merge)

North and East Herts PCT

Luton PCT

Mid Essex PCT

Norfolk PCT

North East Essex PCT

Peterborough PCT

South East Essex PCT

South West Essex PCT

Suffolk PCT

Voluntary Norfolk HT Service

West Essex

Active Offender HT Services

HMP Bure (Discussions in progress)

HMP Chelmsford

HMP Hollesley Bay

HMP Norwich

HMP Peterborough (recruiting)

HMP Whitemoor (Board agreement)

HMP Littlehay

HMP Bedford (recruiting)

HMP Wayland

Probation HT Services

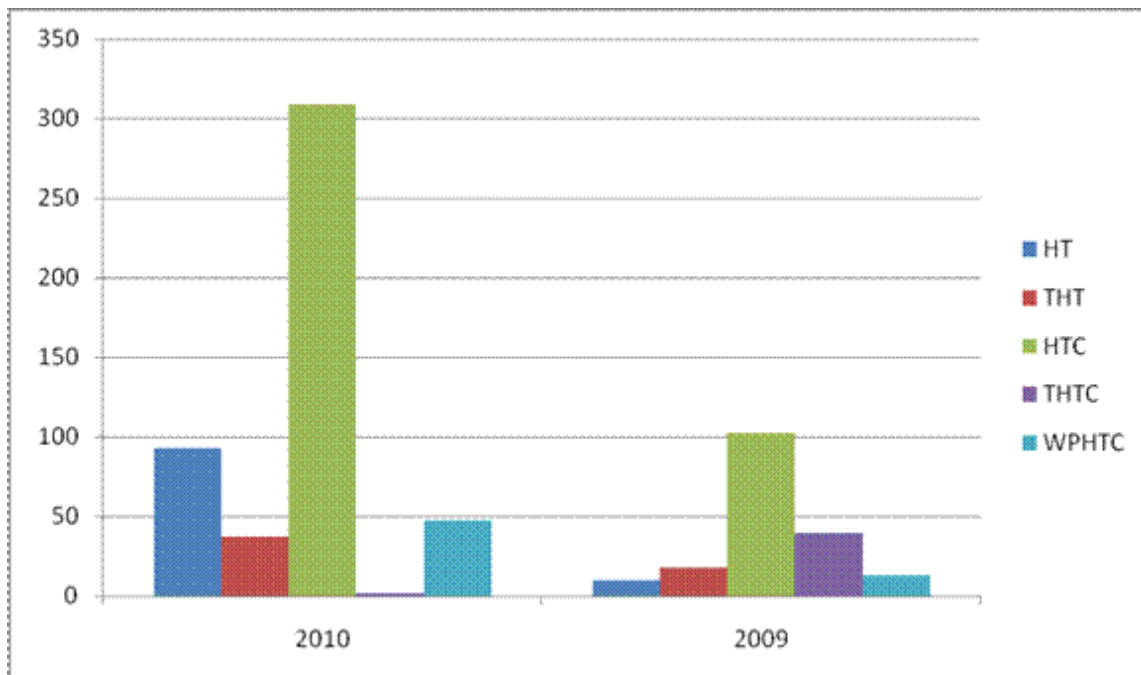
Norfolk Probation Service (active)

Herts. Probation Service (service in early stages of development)

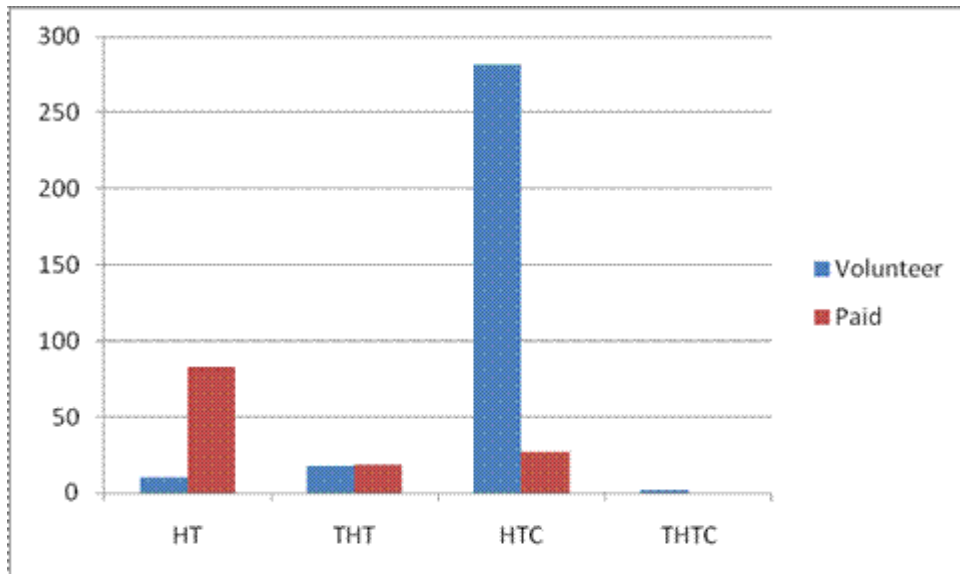
Annual audit data was received from 13 (13/14) PCTs and the information on the final PCT was collated from the DCRS. At the time of writing there were 93 qualified HTs, 37 THTs (due to qualify in the next few weeks), 309 HTC, 2 THTC and 48 Workplace HTC. This does not include data from the 2 Herts. PCTs as they are in the process of recruiting 1 Manager, 1 Co-ordinator, 3 THTs and 3 THTC. The data provided above shows a massive increase in HTs, THTs, HTCs, THTCs, and WPHTC compared to 31st March, 2009 numbers of 10 HTs, 18 THTs, 103 HTC, 40 THTC and 13 WPHTC.

This can be seen in the graph provided below (excludes Offender settings).

Increase in numbers of HT, THT, HTC, THTC & WPHT

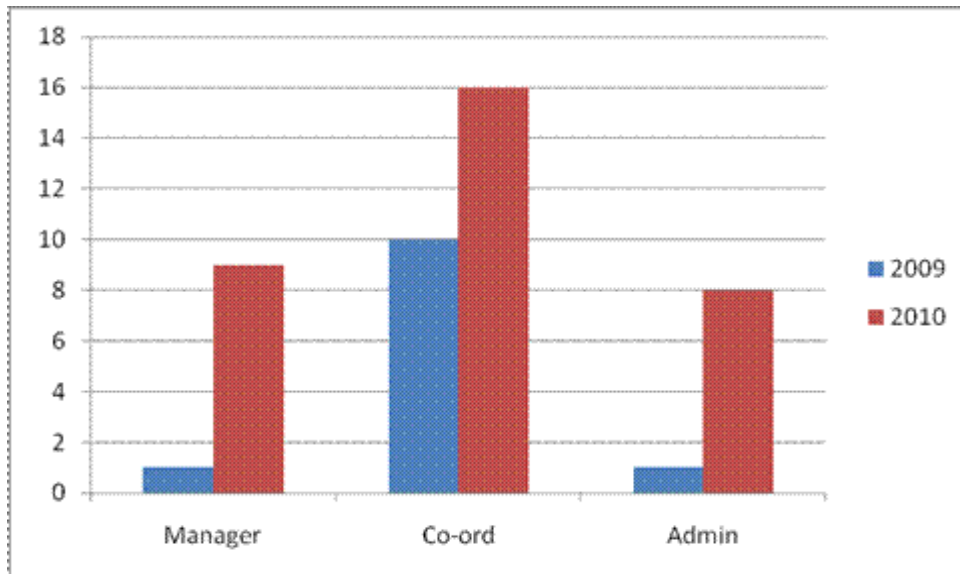


Number of Volunteer HTs Compared with Paid Staff, in 2010 (excluding management)



The number of qualified paid HTs and Volunteer unpaid HTCs have increased. Examples of the Volunteer HTC work will be discussed later in the paper.

Management of HT services in the EoE 2010 (excluding SHA, EoE Gov. The Commissioners and Public Health PCT staff that support the HT Services).

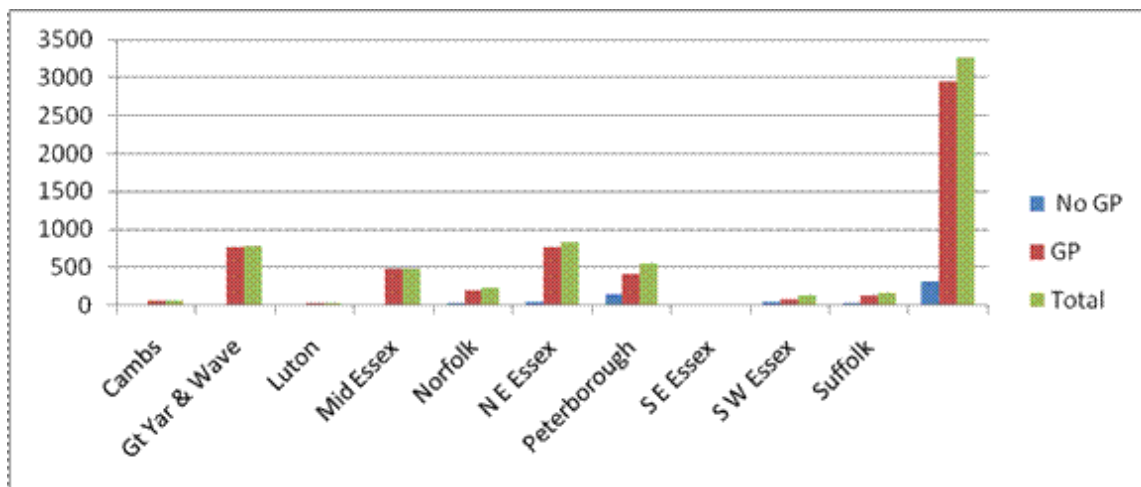


The numbers of paid Managers, Co-ordinators and Administrators have risen over the last year, providing help and support to the developing HT services.

Reaching the hard to reach

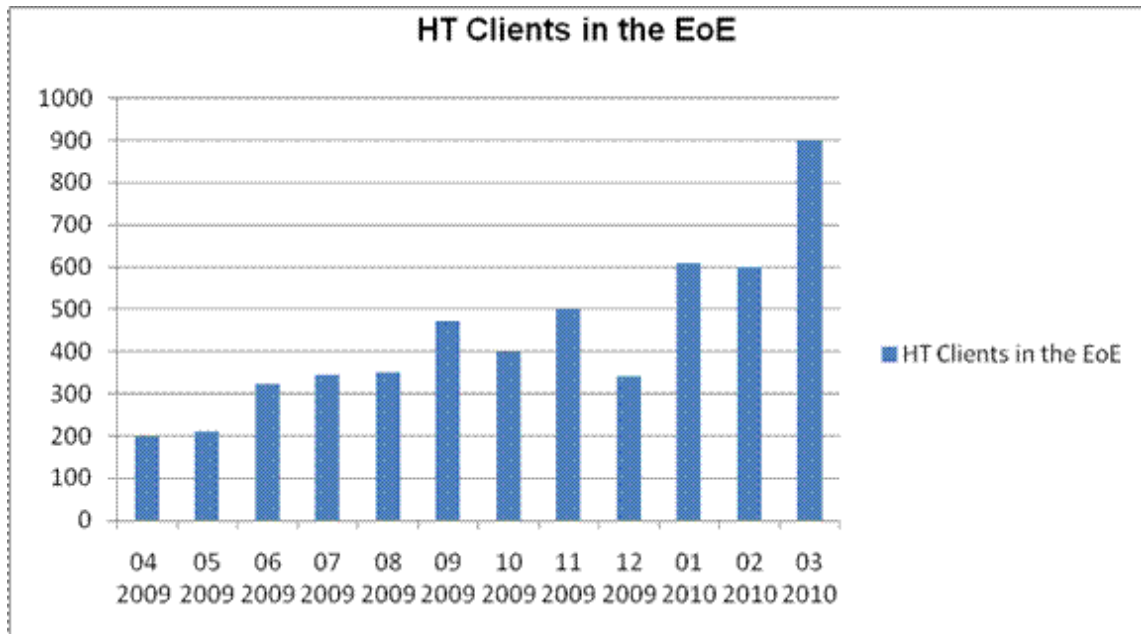
Health Trainers in the EoE are working hard to reach the most disadvantaged people in their areas. As can be seen above the HT service has successfully been extended to reach into all 14 PCTs, half of the prisons and one probations service.

Clients without a GP in 2009-2010



As can be seen above 314 out of the 2,950 people that saw a HT were not registered with a GP and were therefore registered by their HT service, preventing health inequalities.

Increase in the number of clients seen by HTs/HTC 2009-2010



The numbers of people seen by a HT has risen exponentially over the last year. The figures are expected to rise this year as several HT services only began to input onto the DCRS in the last few months of 2009-2010 (the reason for this was that many HTs only qualified recently and their services then applied for the DCRS training and registered to use the DCRS). We thank Ertan Fidan for travelling to our region to train us all, we now have 13/14 using the DCRS.

HT services in the EoE are reaching clients from deprived areas.

Clients from deprived areas by quintiles were as follows:-

Q1= 712

Q2= 928

Q3= 631

Q4=538

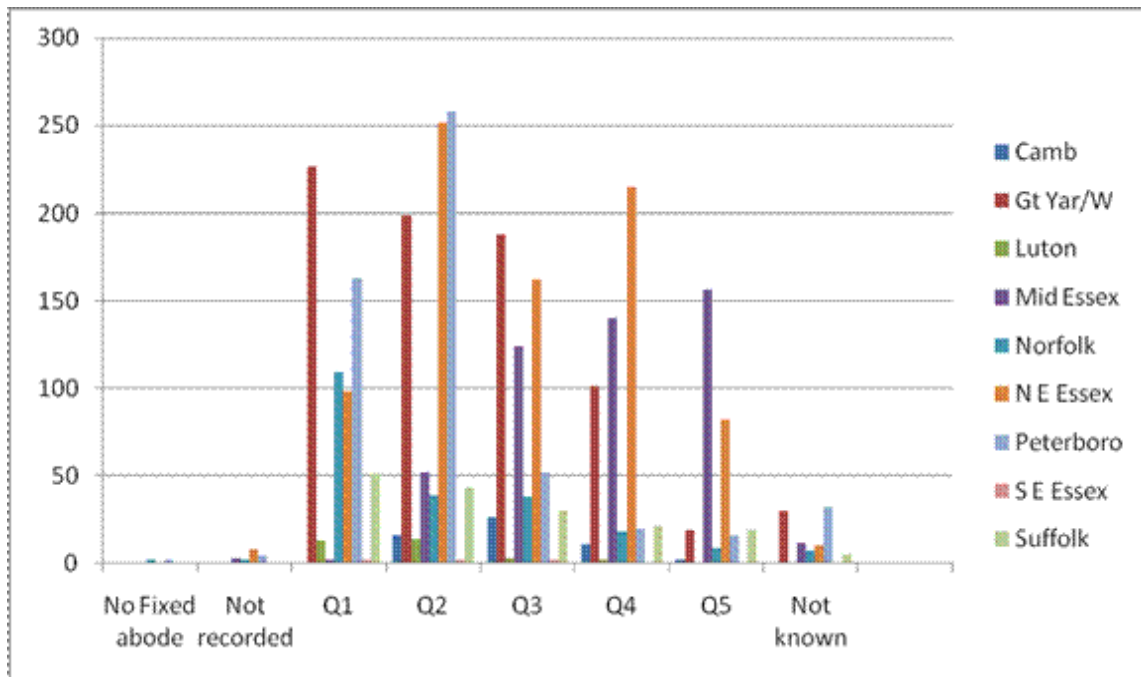
Q5=36

No fixed abode = 6

Not recorded = 36

Not known = 103

Number of Clients from Deprived Areas by PCT



Therefore, the number of clients from the 3 most deprived quintiles, seen by HTs (including the 6 people that had no fixed abode) was 2,377 people out of a total of 3,272 (78%) accessed a HT service; therefore HT services in the EoE were very successful at reaching those from deprived postcodes.

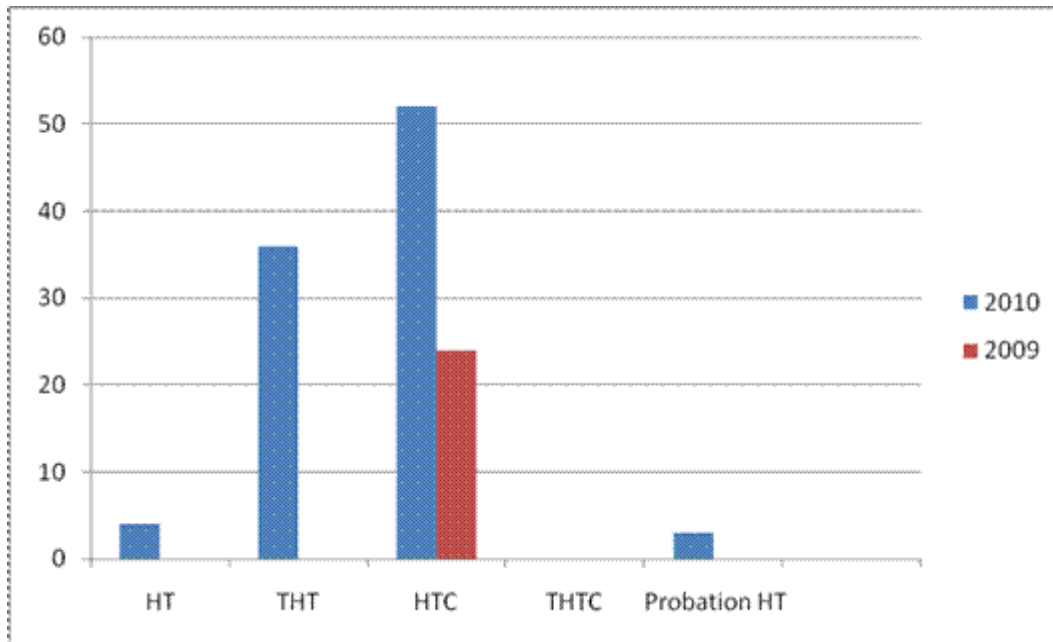
Recruitment

The majority of the HT services refined their recruitment strategy to attract people from their deprived communities. This has resulted in one PCT recruiting 6 ex-offenders, 3 of these (paid PCT staff) have been seconded to work in a Probation service; all 6 are now fully qualified HTs.

Offender HT Services

Offender Health Trainers are a new service in the EoE that offers inmates the advice and extra support they need to reduce their health inequalities. Prisoners are fantastic health advocates as they can be more confident working with offenders and offenders can be more open about issues that concern them.

Comparison of Health Trainers in Offender Settings 2009-2010



The number of qualified HTs and HTC in offender settings has risen over the last year.

In Norwich and Wayland Prisons the HTs have helped their prisons to fulfil one of the Prison Indicators (P.I.s) i.e. “Prisoners being involved in Health Promotion”. They did this by supporting the Public Health Team, by holding health improvement days, for example, 80 (under 25 year old) prisoners in HMP Wayland and 60 in HMP Norwich took part in a “pee-in-the-pot” day and was a great success. Another initiative was to offer support to quit smoking; this was so successful that there is now a waiting list to quit, so the HTs are being trained to do the level 2 smoking cessation.

One HT said, “Being a HT has offered me a fantastic opportunity to get a qualification, it has increased my confidence too, I really enjoy helping others to improve their health and my own too”.

Probation HT service

Three paid ex-offenders have been seconded by their PCT to work in their local Probation service. Until they were recruited by the PCT none of the Probation HTs had had a job since their offence. The City & Guilds was the first qualification they had achieved. The HTs said “We are all enjoying working and creating links in the Probation service and helping people to change their behaviours”. The HTs have been included in a pilot that is designed to integrate all the Probation services and is first of its kind. They provide help and support to individuals on probation orders. For example, one HT worked with a man that wanted to get a job but lacked the confidence to shop for the tools he needed to get back into work. The HT accompanied the man to the shops where he purchased all the tools he required, he now has a job; thanks to the help of the HT.

Workplace HTC's (WPHTC's)

A workplace Health Champion is an excellent approachable resource for staff in an organisation and can provide information about local health improvement services and initiatives.

The PCT provide WPHTC's with materials about a lifestyle related topic to display on notice boards that are accessible to staff and colleagues, this can be used to develop an innovative event or campaign for their colleagues. These have included "Swap a snack for a healthy one", lunchtime walking clubs ", a wine-tasting event to promote quality not quantity", weekly weigh-ins, smoking cessation and so on. 38 lifestyle checks have been carried out resulting in 18 referrals.



The 48 Workplace Health Champion's have been recruited from the following local organisations;

- Tendring District Council

- Colchester Borough Council
- NACRO
- NHS North East Essex
- Clacton and Harwich Job Centre
- Acorn Village
- Trinity House
- Hutton Construction
- Open Road
- Youth Enquiry Service
- Re-think
- YMCA
- Essex Police
- Colchester Hospitals University Foundation
Trust
- Sainsbury's
- Partnerships in Care
- Market Field School.

Volunteer HTCs



Stacey has been a volunteer HTC for 9 months. She had no formal qualifications and is a stay at home mother to her two sons in an area defined as having a low life expectancy. She heard about the service through her local careers advice centre and undertook her training in April 2009. She is a key player in developing and the delivering the “Fresh and Fruity” project and has been active in many other drop-in events. Since then she has undertaken 6 additional training courses and has almost completed her HT qualification. Stacey said “Becoming a HTC has given me so much more confidence. I have made changes to my own and my family’s lifestyles and diets and promote the services everywhere I go. The training has been excellent and I enjoy the work I do in the community tremendously”. Stacey has recently been presented with the volunteer of the year award 2010 by Essex County Council.

As can be seen from above the Hub Leads in the EoE have developed a wide range of HT services throughout the region, and these are beginning to make an in-road in health inequalities. Their HT services have seen more clients this year than last, registered 314 people with a GP, worked with 6 homeless people and saw high numbers of people from the most deprived quintiles. Offender HTs are increasing in number and are going from strength to strength and hopefully next year will be able to input data onto the DCRS and write reports to show the efficacy of their services. The Probation HTs are awaiting the results of their C& G and will be seeing clients on a 1-1 basis very soon. The volunteer HTs are still increasing in number and are providing a very valuable service.

Where do we Go from Here?

The next stage of development for the EoE HT Services is to extend the service into more Prisons, Probation services and Businesses throughout the region. It is recognised that embedding the existing services is essential too. Sustainability in a time of uncertainty can be seen as a problem, but if we all share good practice, monitor our services using the DCRS so we can show how well the services are doing we should be able to continue to make inroads into the health inequalities in the East of England.