

***A health needs assessment at  
Huntercombe Young Offenders' Institution***

*Executive Summary*

March–May 2005

Dr Tom Porter, Specialist Registrar (LAT) in Public Health  
SE & SW Oxfordshire Primary Care Trusts

# ***Executive summary***

## ***Introduction***

The responsibility for health care in prisons is being transferred to the NHS. South East and South West Oxfordshire Primary Care Trusts (PCTs) took over responsibility for health care at Huntercombe Young Offenders' Institution (YOI) on 1 April 2005. A health needs assessment was last carried out at Huntercombe in 2002. Since then many significant changes have taken place at the prison and a new assessment was commissioned to report by the end of May 2005.

The aim of the assessment was to identify areas where the health of the inmates (Trainees) could be improved and produce recommendations in the form of an action plan.

## ***Methods***

***Setting*** A health needs assessment was carried out at Huntercombe YOI between 4 March 2005 and 31 May 2005. Huntercombe accepts males aged 15 to 18 years and has accommodation for 360 Trainees with an annual throughput of c. 1200.

***Background preparatory work*** Contact was established with the Healthcare department at Huntercombe and an information leaflet explaining the project distributed. A Criminal Records Bureau Enhanced Disclosure was obtained.

***Identification of current service provision*** Facilities currently available to promote and protect the health of the Trainees were identified.

***Assessment of needs*** Four types of need were assessed:

- normative (practice was compared to national guidelines and 'best practice')
- epidemiological (common illnesses or hindrances to wellbeing were identified)
- comparative (facilities and practice were compared with similar institutions)
- corporate (the opinions of key 'stakeholders' such as staff and Trainees were sought)

Study techniques included one-on-one interviews, audits and internet searching. Results were drawn together as a 'draft list of needs' which was distributed to staff for comment and consensus.

***Producing an action plan*** Putative interventions were drawn up for each need identified and these were discussed with stakeholders. An action plan was devised which aimed to reduce or eliminate the health needs identified.

## ***Results***

***Current service provision*** Health care at Huntercombe is provided by a small Healthcare Department which is staffed by 7.25 WTE (whole time equivalent) nurses and a part-time GP. Other visiting professionals include a dentist, sexual health consultant, consultant psychiatrist and other members of a Child and Adolescent Forensic Mental Health Team (CAFMHT). Out-of-hours care is provided by the PCT GP out-of-hours service and Oxfordshire Mental Healthcare NHS Trust. There are no inpatient facilities. All Trainees at Huntercombe should undergo a reception health screen when they arrive.

**Needs identified at Huntercombe** Many unmet needs were identified. Major needs included difficulties in recruiting and retaining health care staff; a poor physical environment; problems accessing secondary care; a proportion of Trainees not receiving a reception health screen and no Trainees receiving a secondary health screen; difficulties accessing inpatient forensic mental health beds; recent problems with administering routine vaccinations; and under-diagnosis of low-level mental health problems.

**Action plan** An action plan is provided detailing recommendations for improving the health of Trainees at Huntercombe. High priority interventions include: improving access to secondary care; ensuring all Trainees get a reception and secondary health screen; creating a new post to oversee vulnerable Trainees; carrying out a mental health promotion ‘mapping’ exercise; holding a prison-wide debate on making it a smoke-free environment; and integrating Huntercombe into every area of PCT work.

**Discussion** A critique of the methods is given, as well as further interpretation of the results and suggestions on how to implement the action plan.

**Appendices** Appendices 1-10 provide further detail about the project including methods used, prison jargon and a complete list of needs identified at Huntercombe.

**Annex** Copies of an information leaflet distributed during the HNA and the semi-structured questionnaires (SSQs) used for one-on-one interviews are attached at the end of the document

For further information and/or a full copy of this needs assessment please contact the author: <a href="mailto:tomporter@doctors.org.uk">tomporter@doctors.org.uk</a>
---