

## Evaluation of the content and delivery of the student workbook for Royal Society for Public Health, Health Trainer Qualification, Level 2 Understanding health improvement for health trainer champions in prisons and the wider community

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# Evaluation of the Content and Delivery of the Student Workbook for RIPH Level 2 Award in Understanding Health Improvement for Health Trainer Champions in Prisons and the Wider Community

August 2009

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## Executive Summary

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The concept of Health Trainers (HT) being drawn from a given community is becoming well established and work has been ongoing around this theme since 2005. At a national level the current focus of this work centres on the development of this model within the offender health context. In 2008 the North West and East Midlands Health Trainer Hubs, in partnership with Offender Health collaborated to produce an educational workbook based upon the Royal Society for Public Health (RSPH) training programme. The workbook was launched nationally in July 2008.

In 2008, a team from Sheffield Hallam University conducted a first-phase evaluation of the 'RSPH Level 2 Award in Understanding Health Improvement for Health Trainers in Prisons and the Wider Community' Student Workbook'. This, second-phase of Health Trainer RSPH Workbook Evaluation 2009, whilst building on the previous findings, was designed with three aims around the reality of RSPH course delivery:

- To conduct consultancy work regarding the appropriateness of workbook content for trainers delivering and students attending the RSPH Health Trainers programme in prisons and the wider community
- To identify the mode in which this course has been delivered around the country since the workbook launch in June 2008
- To establish any impacts of the workbook and the wider health trainer programme on both the teaching and learning experience.

All those involved in the evaluation stated that their experiences of using the workbook had been positive and saw it as enhancing both the learning experience and the trainer's delivery of the course.

## Good Practice Examples

The evaluation team identified the following good practice examples:

- At one prison-based site, the delivery of the RSPH course benefited from an excellent relationship between the physical education department and the education provider. The education provider supplies a basic and key skills coordinator to deliver the RSPH training in partnership with Physical Education staff. This partnership has resulted in the development of a range of excellent student evaluation monitoring systems
- Exciting and innovative developments were identified at one site, where staff have established a Physical Education Passport: an effective method of providing evidence of all training undertaken, including RSPH courses, in the event of a student transfer or release
- One site is currently developing a local Health Trainer Data Collection System in partnership with their PCT which, it is envisaged, will also help produce data for more effective signposting
- A further site has used Health Trainer Champions to effectively host a series of Wellbeing Days for local community groups to come into the prison and have their health monitored
- A number of RSPH Trainers have developed useful supplementary teaching resources which complement the workbook, such as additional classroom exercises, power point slides and student evaluation systems. Many are keen to share their resources and get involved in the future development of the workbook.

## Key Findings

The key findings of the evaluation are as follows:

- The course trainers utilised the workbook in different ways, some selecting, photocopying and using exercises from the book in their classes, while some simply gave the workbook to students
- Some areas have not been taken on the workbook as there are no power point slides that correspond to the workbook and additional case studies to support delivery
- Trainers delivering the RSPH course felt they would benefit from support in collecting monitoring data in relation to participation on the course, including a way of tracking which students continue and what they achieve post course involvement
- Many participating in the evaluation (especially students) admitted being confused about the difference between a Health Trainer and a Health Trainer Champion
- Some participants (both students and trainers) felt that there should be two separate workbooks, one for training in the community and one in the prison, while the majority felt that the workbook's generic form was beneficial and promoted equal opportunity of access
- Prison-based students who have no opportunity currently to progress onto level 3 reported feeling frustrated, having enjoyed level 2

## Recommendations

As a direct result of the evaluation findings, the following recommendations have been made in three areas of development:

### Workbook Development

- The development of a working group/workbook development community to utilise existing resources (power points and case studies) and develop a holistic 'tool kit' around the workbook
- Consider developing an online approach to this RSPH workbook development community, where RSPH tutors and Health Trainer staff could co-author further developments<sup>1</sup>
- When revising the workbook, take into account the comments concerning separate workbooks and consider incorporating the 'expert' comments on the theory and managing change workbook sections
- Incorporate a 'quick set-up guide' (summary of the implementation guide) to inform decisions on which model of RSPH programme delivery to adopt

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<sup>1</sup> This could potentially be developed along side the Level 2 Award in Understanding Health Improvement e-learning programme <http://www.i4learnlive2.co.uk/derbyshirepct>

### **Clarifying Health Trainer and Health Trainer Champion Roles**

- The distinction between Health Trainers (NVQ level 3) and Health Trainer Champions (RSPH level 2) needs to be made clear to all students. The workbook would benefit from having this clarified in its title
- Consider inserting Department of Health definitions of Health Trainer and Health Trainer Champion into the workbook
- One recommendation for the 'quick set-up guide' could be introducing both levels 2 and 3 at the same time which may reduce student confusion around definitions of health trainers and health trainer champions and provide an effective progression route
- Consider inserting Health Trainer and Health Trainer Champion 'do's and don'ts' section into the workbook or toolkit

### **Monitoring and Evaluation Support**

- Develop templates to encourage the collection of monitoring and evaluation data, in relation to internal participation on the course, which could also be included in the 'toolkit'
- Consider developing the Delivery Questionnaire as a way of keeping track of who is delivering the Health Trainer courses

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## Section 1: Introduction

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### 1.0 The Health Trainers in Prison Programme

Health trainers (HTs) form part of a public policy initiative designed to tackle health inequalities. HT's were first proposed in the White Paper 'Choosing Health' (DoH, 2004) and initially some 1200 NHS accredited HT's were placed in post, providing support in areas with the worst health and deprivation indicators in key Primary Care Trusts (Spearhead trusts, DoH 2004). Exemplar job descriptions and standardised HT competencies were also developed, alongside two national HT accreditation schemes, the Royal Institute for Public Health (Level 2) and the City & Guilds (Level 3) qualification.

Alongside these developments, there has been considerable enthusiasm for HT's amongst not only the Prison Service; the North West and East Midlands HT Hubs have developed the HT programme further within the Prison and National Probation Services by the production of an educational HT Workbook to support prisoners in their attainment of the RIPH (2) award. A research team from Sheffield Hallam University were therefore commissioned to conduct a basic consultation exercise to ensure that a sample of prison staff, (who would be implementing the RIPH Level 2 workbook in practice), and prisoners (who had previously completed the RSPH level 2 training) were given the opportunity to contribute effectively to the design and content of the Workbook.

### 1.1 The Evaluation

A consultation activity was conducted in 2008 to ensure prison staff input into the development of the RSPH level 2 workbook content. This activity was undertaken by a team from Sheffield Hallam University's Public Health Hub. Two members of the original team have conducted this additional evaluation of the development and delivery of the RSPH workbook in the Health Trainer course. Where the focus in the 2008 study was to collate prison staff input on the content of the workbook, this present study focuses on the delivery, governance and impact of the RSPH workbook now it has been adopted into course delivery.

#### 1.1.1 Aims and Objectives of the Evaluation

The overall aim of this project was to conduct a process evaluation concerning the delivery of the RSPH workbook programme. The project generated qualitative data which has been utilised to inform the development and further implementation of the RSPH educational workbook in the offender health setting. This project was designed to identify good practice which can be mainstreamed into the development of the Health Trainer programme. Key evaluation activities included in this report have established:

- The impacts of delivery setting (prison/probation) on the effectiveness of the workbook resource and the appropriateness of the content
- The impact of the workbook and course on the learning experience
- Trainer views of the value of the RSPH workbook in the offender health setting
- Any sense of whether attending the course has an impact on the families and wider communities of offenders and (ex) offenders
- Governance issues



### 1.1.2 Evaluation Activities

In order to address the above objectives, the following four evaluation activities were undertaken:

#### Activity 1: Evaluation Visits to Four RSPH Level 2 Health Trainer Delivery Sites

Visits were conducted in four different RSPH Level 2 Health Trainers Award areas which use a variety of delivery methods. The case studies focussed upon understanding the critical factors and mechanisms underpinning each area's delivery of the RSPH course in order to identify good practice examples. This study acknowledges the uniqueness of the offender health setting with respect to healthcare and education both in prison and in the community setting. Therefore, visits were conducted to a prison cluster, two prisons and a community delivery site, as follows:

- HMP Liverpool, who employ of a third party provider to deliver the RSPH course
- Liverpool community delivery site (NOT Probation site) where the RSPH course is provided by a third party
- HMP Wandsworth, which is a RSPH registered delivery site where the course is delivered by the PE department
- HMP Sheppey Cluster (HMP Stamford Hill, HMP Elmley and HMP Swalesdale) where the RSPH course is delivered by the PE department

The evaluation team conducted one-day evaluation visits at each of these sites. Interviews were conducted with trainers and students at each site, as follows:

- 8 RSPH Trainers who have delivered the course using the workbook
- 4 Health Trainer Delivery Managers
- 17 RSPH students who have all studied with the workbook

The students' experiences of the Health Trainer programme are as follows:

- 12 students had completed up to the level 2 RSPH course **only**
- 5 students had completed the level 3 Health Trainer course in addition to the level 2 (2 from the community, 3 in prison)
- 1 student is a Senior Support Care Worker, who works with adults experiencing complex learning and physical disabilities
- 1 student is a duty Social Worker in the community
- 2 students are now full time Health Trainers who have been operating in their local communities for approximately nine months (have completed the City and Guilds Level 3)

All interviews were taped and transcribed with the permission of the participants.

#### Activity 2: Telephone Interviews

One to one telephone interviews were conducted with six strategic health trainer/offender health leads, with both local and national responsibility to examine how the programme has been received and taken up around the country. Governance issues were also explored. The interviews included:

- Two Regional Health Trainer Programme Managers
- A Practice Manager at a category C training prison
- National Programme Lead, Public Health & Physical Activity, Offender Health, Department of Health



- Regional Health Promotion specialist
- Head of Physical Education Department prison cluster in Kent

A total of 35 interviews were taped and transcribed with the permission of participants.

#### [Activity 3: Development of 'Expert' Advice Questionnaire](#)

The evaluation team worked with the author of the RSPH workbook and developed a template resource from which expert advice on the educational/ health content presentation in the workbook (e.g. the behavioural change models used in the workbook) was collected from four experts in this area.

#### [Activity 4: Inclusion of Delivery Site Questionnaire Data](#)

The Health Trainer Learning Co-ordinator designed a questionnaire which was sent to approximately 30 regional Health Hub Leads and 11 contacts in Care Services Improvement Partnership (CSIP) and Regional Leads for Health and Social Care in Criminal Justice. The information included on questionnaires returned to the Health Trainer Learning Co-ordinator have been included in this report.

## Section 2: Findings: Mapping RSPH Delivery

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### 2.0 Delivery Questionnaire Design

A questionnaire was designed by a Regional Health Trainer Learning Co-ordinator to investigate where the RSPH Level 2 Award in Understanding Health Improvement (UHI) programme is being used, or is intended to be used across the country (see Appendix 1). A full list of all registered RSPH delivery sites, which includes the 5 prisons sites registered, is provided by the RSPH (see Appendix 2). The questionnaires were sent out to support the development of the role of Health Trainers and Health Trainer Champions within Offender Health. The information taken from any returned questionnaires is summarised here to support and encourage sites to develop and deliver UHI courses and materials, and share knowledge and expertise across the sector.

#### 2.0.1 Questionnaire Returns

Eight delivery questionnaires were returned to the evaluation team, the details of which are outlined in this section. Additionally, two further areas contacted us directly (1 Local Council and 1 Primary Care Trust). They did not complete a questionnaire, but did provide delivery overviews via e-mail. More detailed information from both of these sources is provided in Appendix 3. Completed questionnaires were received from:

- 4 Prisons
- 3 Probation Areas
- 1 Health Trainer Hub

The respondents were all in senior positions in the health, Physical Education or Health Trainer arena.

### 2.1 Delivery of the RSPH Programme

A snap shot of the current status of the delivery of the RSPH programme has been extracted from the delivery questionnaires:

#### 2.1.1 RSPH Providers

- 3 returners reported that their programme will be developed by an internal provider
- 4 returners reported that the programme will be developed by a mixture of internal and external providers
- 1 returner did not respond to this question

#### 2.1.2 Commencing Delivery

- 4 respondents reported that the programme had been delivered since July 2008
- 3 reported they were about to deliver the programme in the next 3 months

#### 2.1.3 The Workbook

- 2 returners reported delivering the RSPH level 2 using the student workbook
- Both found it exceedingly useful

## **2.2 Good Practice Examples**

The following examples of good practice were identified in the returned questionnaires:

- Probation reported receiving a great deal of support from regional partners
- A regional Health Trainer Hub was identified as providing a good level of support and working hard to encourage all prisons in their area to take part
- One prison cluster reports holding 3 'well being' days which relied on the participation of their RSPH students, they were a 'great success'
- Prison-based RSPH schemes reported high levels of success and state that the course has had far reaching effects, both in and outside the prison
- The workbook was identified as 'invaluable', allowing trainers to tailor the lessons to their specifications
- The scheme is a 'great success on the cluster and is affecting catering, health care and a variety of other departments which has driven up health care provision for prisoner's staff and the community' (Returning Questionnaire).

## **2.3 Challenges to Delivering RSPH Training**

The following examples of the challenges returners felt the RSPH Health Trainer programme faced were identified in the questionnaires:

- The costs incurred by using officers' time and the cost of freeing up time to attend the courses were reported as an issue for probation areas
- Questionnaires returned by probation areas providing Health Trainer services stated their view that the workbook was written with prisoners in mind, rather than offenders in the community and suggest that two different workbooks need to be developed
- Booklets have had to be printed in black and white due to the high costs of colour printing
- It was felt that using the workbook would mean taking longer to deliver level 2
- Those in probation settings identified more potential barriers to the development and delivery of the programme compared to their counterparts in prison settings in terms of staff availability and staff costs

## **2.4 Further Support for the Programme**

The majority of respondents reported that they felt confident in managing the RSPH level 2 course; however 2 respondents reported that they would like some additional materials (such as more case studies and including power points) They also reflected that they would like the support to gain RSPH registration status (become an organisation/ establishment where these courses can be delivered).

## Section 3: Expert Feedback on Workbook Content

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### 3.0 Expert Opinion Questionnaire Design

A questionnaire was designed by the evaluation team and a Regional Health Trainer Learning Co-ordinator in order to illicit expert opinion on how models and theories of health should ideally be presented to learners. The questionnaire was broken down into three sections, giving experts the opportunity to comment on the following specific sections of the workbook:

- Models of behaviour change
- Setting goals, SMART principles and Managing Change
- Programme Evaluation Methods

Five experts were approached to provide feedback on the inclusion of this information in the RSPH level 2 workbooks. Experts were selected for their specific experience, with many being involved in the development of health trainer competencies and all were experts in changing health behaviour.

#### 3.0.1 Questionnaire Returns

Four delivery questionnaires were returned to the evaluation team, the details of which are outlined in this section. Completed questionnaires were received from:

- Two technical consultants responsible for leading on the development of the Health Trainer competences and related awards
- A qualified teacher and Health Promotion Specialist
- A vocational education and training specialist
- A member of the Health Psychology team with responsibility for the Health Trainer programme

### 3.1 Models of Behaviour Change

At level 3 (City and Guilds Health Trainer), students need to know, understand and utilise health behaviour change models. At RSPH level 2, students need to be aware that these models exist. The first section of the questionnaire was designed to illicit comments regarding the most appropriate way of conveying this often complex information in the workbook to students working to level 2.

#### 3.1.1 The Health Belief Model

Experts generally agreed that the workbook presented this section of theories and models effectively. One expert underlined the importance of students understanding the theories that are approved by the British Psychological Society for the Health Trainer programme, of which the Health Belief Model is one. However, one specialist noted that the theory models in the book and the power points available could be easily linked together more effectively. Two experts also recommended an additional exercise be included where students are asked to identify the 5 factors. It was felt that this would ensure their understanding and reinforce learning. However, two others felt the theory models in the book linked well very well to the case study already included.

### *3.1.2 The Stages of Change Model*

The inclusion of this model in the workbook split the experts evenly. Two felt that this model should not be included, one pointing out that evidence for this model was 'diminishing' (expert) and that it has not been included in the revised City and Guilds Certificate for the QCF. The two other experts felt this model's inclusion would be assisted with clearer diagrams and case studies. Finally, one expert felt that highlighting how the role of the Health Trainer Champion could help a client move from pre-contemplation to contemplation or even to action should be added.

It is important to note however that the inclusion of the Stages of Change Model is a requirement of the RSPH award.

### *3.1.3 The Theory of Planned Behaviour and Reasoned Action*

The inclusion of this model was felt to be presented effectively, especially given its complexity. Slight modifications were recommended with the inclusion of examples and/or case studies to help students understand how to 'use' this model. One example an expert found useful was the unprotected sex and condom use example. Experts reflected that the presentation of this model was viewed as effectively making the theory real and accessible for students.

## **3.2 Setting goals, SMART principles and Managing Change**

The RSPH Health Trainers Learning Outcomes are included in the workbook at the beginning of each section. The level 2 workbook is designed to be used with Health Champions, who do not function as Health Trainers. The rationale for this content inclusion in the workbook is based on the requirement that Health Trainer Champions need to be aware of goal setting and models of behaviour change. The content of the managing change section of the workbook is adapted from the level 3 Health Trainer Handbook. Experts were asked to reflect their views on the appropriateness of this content in the context of information being presented to students working to the level 2 RSPH course.

### *3.2.1 Goal Setting*

Experts reflected that this section was well written, easy to follow and the activities were very useful in helping understanding goal setting. However, all the experts reflected concerns regarding the appropriateness of the inclusion of this content for Health Trainer Champion level. Where experts were sure that this is made explicit by tutors, the concern was that anyone 'coming cold' (expert) to the workbook would not be aware of the difference.

As only Health Trainers and not the Health Trainer Champions will be performing goal setting with clients, experts felt this should be made more explicit in this section. One expert reported that this section is too complicated for Health Champions, who do not require this level of knowledge. Experts were concerned that throughout the workbook, references concentrated on the Health Trainer role, without mentioning the Health Trainer Champion role, which they felt was more appropriate here. Experts recommended that an overview might be more suitable in terms of outlining the theoretical content of the workbook and more clarity regarding the role of the Health Trainer Champion, clarifying the difference between that role and that of the Health Trainer.

However it is important to note that the inclusion of goal setting is a requirement of the RSPH level 2 qualifications.

### **3.2.2 SMART Principles and Managing Change**

This section was described as clearly written and helpful, with a minor note that the wording is ambiguous, with references to Health Trainers and not Health Trainer Champions. Experts suggested that the goal setting section could be used to support the SMART principles of the Health Trainer Champion rather than the client as students could work through goals relevant to themselves. This would provide information and learning about setting goals but keep within the remit of the Health Trainer Champion role.

## **3.3 Programme Evaluation Methods**

The programme evaluation method section of the workbook is also adapted from the Health Trainer Handbook. Experts were asked to reflect their views on the appropriateness of this content in the context of information being presented to students working to the level 2 RSPH course. It is again important to note however that the inclusion of programme evaluation methods is a requirement of the RSPH qualification.

### **3.3.1 ABC**

Experts reflected that this section of the workbook was well written and ‘comes across well’ (expert). However, considering the same Health Trainer Champion’s role reservations from the last section, experts expressed concerns about whether the section was too detailed for Health Trainer Champions. However, some felt that the ABC section could be utilised effectively as an exercise for Health Trainer Champions, as long as it was made clear that the activity was not part of their role.

### **3.3.2 Personal Health Guides**

Definitional issues were also identified in the personal health guide sections of the workbook, raising questions regarding the suitability of this content for Health Trainer Champions. However, other experts felt that the Personal Health Guides section was inappropriate for Health Trainer Champion stages of the RSPH qualification.

### **3.3.3 Behaviour Change Diaries**

Experts felt that behaviour change dairies were appropriate for Health Trainer Champions, again as long as they filled them in independently.

## **3.4 Developing the Workbook**

Returning questionnaires contained constructive feedback from experts regarding the presentation of content in the RSPH workbook. Experts reflected that overall, the workbook content was clear and well written and a ‘very good resource with a good variety of activities’ (expert).

Experts felt that the presentation of behaviour change models in the RSPH level 2 workbook would be improved by:

- Increased continuity between workbook and power points
- Reducing the number of models covered at this stage to two
- Including more case studies containing examples of how Health Trainer Champions could meaningfully use each of the models

With regard to the goal setting and programme evaluation method content of the workbook, experts reflected that this section would benefit from revisions predicated on the different ways in which Health Trainer Champion's, as opposed to Health Trainers, can meaningfully utilise this information. Experts felt that workbook development would benefit from revisiting the actual role of the Health Trainer Champion. The clarification of what a Health Trainer Champion 'can and can't do' (expert) could be made clear in the introduction to the workbook as clear boundaries 'need to be ensured' (expert).



## Section 4: Workbook Findings: Content, Impact and Governance

### 4.0 Introduction

This section contains evaluation data examining:

- The impacts of delivery setting (prison/probation) on the effectiveness of the workbook resource and the appropriateness of the content
- The impact of the workbook and course on the learning experience
- Trainer views of the value of the RSPH workbook in the offender health setting
- Any sense of whether attending the course has had an impact on the families and wider communities of offenders and (ex) offenders
- Governance issues, including workforce and course incentives

### 4.1 Revisiting Workbook Content

During the initial evaluation in 2008, the content of the workbook was evaluated before the workbook was launched. Some hypothetical concerns were raised about the workbook content. During this materialised during the reality of course delivery. The table below outlines the specific improvements recommended before the workbook was launched and contains the reflections of those (students and tutors) who have now used the workbook as to the appropriateness of the concerns and suggestions:

Potential improvements suggested in 2008 evaluation	An issue in reality?
'An introductory section explaining what a HT does'	Yes, students particularly felt the workbook needed a section covering this in detail. Although the tutor always covered this, many students felt they would rather examine this information by themselves
'More information regarding where the level 2 sits within the overall HT training (on a continuum)'	Yes, again, students, particularly those who did not currently have the opportunity to progress to level 3, felt confused about what they were/ were not qualified to do
'More introductory signposting of the sections explaining the relevance of what learning'	No, in actual fact all students and tutors felt the workbook provided very clear instructions
'Less jargon'	No, where a single student felt that 'easier' words could have been used, all others interviewed felt the workbook language was pitched very well.

'Test your knowledge sections' relating more closely to section they are placed in'	Yes, it was reflected that this would be beneficial, particularly by students
'The inclusion of HT paperwork'	This recommendation was controversial. The participants were split between those who felt this was appropriate and those who felt that this should wait until level 3.

#### 4.1.1 *The Appropriateness of the Health Trainer Programme in Prison*

Everyone involved in the evaluation reported that they felt the Health Trainer programme has many positive benefits, particularly for the offender population. Health Trainer students reported gaining respect for the knowledge that could impart to others:

*'You get kudos, you know... we wear shirts and have our own office and we are seen as being positive thing in prisons and most people will smile when they see us rather than frown'* (student).

Others felt that in prison this kind of information was very important, especially for the prison population:

*'It is an important addition in prison, we have guys in here into their weights, but you start looking at their diet and their lifestyles and you can see that they are setting a pattern for future problems'* (student).

Students reported that they felt the peer element of the work was vitally important in prison because particularly in male prisons, accessing health care orientated services is not considered a 'manly' activity. During their first three days in prison, inmates undertake induction, where fellow prisoners (Health Trainers) can tell them about the services available in a less threatening environment:

*'Men really don't really want to come to see you on a one-to-one- it's a macho thing going on here-whereas at induction you are brand new and you have got an audience, a captive audience and it works better'* (Health Trainer Champion).

#### 4.1.2 *A Welcoming Format*

All of the students and trainers involved in the evaluation spoke enthusiastically about the format of the workbook being suitable for engaging everyone, despite varying levels of literacy. Many of the students spoke about accessing the RSPH course as being their first experience of education since disruptive school days. In this way, the RSPH workbook format was viewed as supporting some of the hardest to reach in terms of engagement in education:

*'I liked the mixture of learning techniques used. If you see just pages of writing that can switch you off'* (Community student/ Social Worker).

'Because this was a new subject and not having done any study before I thought the Level 2 book helped with the steps because it broke it all down for you, made it less scary' (student).

Students also reported liking the workbook content not talking itself too seriously:

*'It has a bit of humour you know, enjoyable learning not like you are reading from a text book that's boring page after pages, definitely a different way of learning'* (student).

The same format throughout the five sections was appreciated as students felt it boosted their confidence and reported using the workbook in many different ways:

*'When the tutor has gone through something with us, and he breaks it all down on each step and then we use the workbook to write down notes, bits we need to ask about and we can look back at as a reference manual for it as well'* (student).

Two students however reported that they struggled with some of the workbook sections that were one colour text printed on another colour background:

*'My only issue with the workbook was that, well, someone who perhaps hasn't got good eyesight could struggle with some of the colour combinations in the book'* (Community student/ Social Worker).

#### 4.1.3 Homework in Prison

Students reported enjoying using the workbook to support homework tasks, however it is important for tutors to remember that doing homework in the prison environment is challenging

*'I was trying to do some homework the other day in the segregation unit and the riot squad were in with the masks on and as I am working they are dragging someone behind me and throwing them in the cell. The next minute a cell is set on fire and two cells were being smashed up- so I thought- I will try and do this tomorrow'* (student).

Students reported that often having to wait a week to ask tutors questions was sometimes frustrating, as, 'you have got nobody to ask on the wing' (student). However, some students preferred role play at the end of each session to reinforce their learning. Whilst all reported that the formatting at the end of each session felt like revision anyway:

*'You go through and each step finishes like this so it summarises everything you have learnt then it tests your knowledge and then it does a learning review. I found that like homework really- it was really helpful that way of doing it like that'* (student).

#### 4.1.4 Two Versions of the Workbook

The evaluation team found that some students and those involved in the delivery of the RSPH level 2 felt that there should be two versions of the workbook, one for prison and another for community delivery:

*'Some things you think about on the out and some things you think about on the in, so we could just have a book for prison' (student).*

*'The case studies don't match what we do in jail though, all the stuff in jail is different, like people cutting up, loads more stress and lots of people smoking. Loads of problems that out there just go over your head' (student).*

One student also highlighted that in prison, there are issues that will affect the health trainer role, such as:

*'in prison you need to know where your limitations are, promises you can't keep in here, like promising people appointments on certain days. In prison, if the staff are overloaded, they forget appointment times' (student).*

However, other students saw it as important to keep the same workbook:

*'prisoners have to remember how they used to live because they have eventually got to leave here and go back to that environment so it is all relevant' (student).*

*'It's discrimination, if we use different workbooks I think' (Community student).*

#### **4.1.5 The Workbook and the Learning Experience**

Students reported two different ways in which their tutors used the workbook as a resource to deliver the course:

- The workbook is handed into the care and control of the student
- Students are given selected pieces of the workbook

Students who received the workbook reported finding it very useful being able to use the workbook as a resource to refer back to:

*'I still go back to the workbook now and again now, almost a year later. I checked something out the other day. It's just good to know it is there if needed really- wherever you are' (student/Health Trainer in Community).*

*'Sometimes a word or an idea is hard to get it in your head but maybe if its there and you get stuck you can go back and read it then' (student).*

Students reported that just having the workbook 'boosts your confidence' (student) when accessing education again as an older student:

*'I left school at 14, but now I am older I have relaxed and have enjoyed this course. I was thinking about doing a physiology course next' (student).*

*'It was hard work, but to be honest in a strange way I enjoyed it, so much so I've gone back to college to do my English and Maths, which I never got the first time round' (Community student/ Health Trainer).*

In terms of engaging hard to reach populations, it could be suggested that the workbook has a part to play in engaging students in a supportive way, who may have had negative experiences with education previously:

*'Compared to courses I have done I have done every educational course over here and it's a lot more enjoyable, the layout its more enjoyable than sitting over there looking at the desk'* (student).

*'The book is good, it's more interactive, the way its laid out, you can get your teeth into it and you can actually relate every bit of information in this book to yourself or someone you know'* (student).

Students reported that although they initially may have struggled with some terminology, they often felt that having the workbook to go and look back at what had been done that day often helped them take time to familiarise themselves with these concepts and identify with the content:

*'When we learnt about contemplation/pre-contemplation it was odd to start with, but it gave us a way to think about and speak about behaviour change- we've never come across it before'* (student).

*'The workbook helped us to relate to the subject- to look at the theory/ behaviour and then case studies to help it make sense to us- so helped us identify with the content'* (student).

## **4.2 Trainer Views of the Value of the RSPH Workbook in the Offender Setting**

A key aspect of the evaluation of the RSPH Level 2 Understanding Health Improvement for Health Trainers in Prisons and the wider community involved conducting face to face interviews with trainers from five prisons across the country and one community setting, covering the appropriateness of the workbook, the workbook content, the adaptability of the workbook, the difference between Health Trainers and health Trainer Champions and the creation of a supportive toolkit, which are explored here.

### **4.2.1 Appropriateness of the Workbook**

Tutors reflected very positively on the RSPH workbook; all found it very useful for supporting the delivery of the course:

*'...when the handbook came along it was phenomenal, it made the most enormous difference. Having delivered lots and lots of other courses I have got to be honest, I've not come across anything as good before to help deliver a course. It's totally comprehensible, it's completely sequent, everything works. The exercises keep the prisoners engaged a hundred per cent and they are just sitting there waiting for more. They really learn from it, you really get the message across so it makes it very easy to deliver because everything is in there'* (Trainer).

*'...we find it very helpful because a lot of it is self assessment... (which is) quite good because...you...spend a lot more time marking than teaching where with the workbook, you can spend more time interacting, teaching, with students...the learning reviews we find very useful and...the self assessment is one thing we have learned from this'* (Trainer).

Furthermore, it was felt that the workbook is appropriate for attracting students both inside and outside prisons as:

*'...one size does fit all because its clever its cleverly done because you can take it, leave it here or you can take it further'* (Trainer).

*'this initiative was targeting people that don't traditionally come down to our Prison Gyms and so we thought yes this is good'* (Trainer).

Only one tutor suggested that creating separate resources for prison and the community would be more appropriate:

*'...you can make a prison specific one and a community specific one that might be a better idea rather than having the two separate ones because then you can sort of hone in on the prison ones'* (Trainer).

Tutors praised the content of the workbook as being wholly appropriate for the students they worked with and it accommodates different styles of learning:

*'...it's not just one dimensional there is a lot of different aspects to it and it caters for a lot of different styles there is variety of different styles'* (Trainer).

Similarly, the format and colour of the workbook was also praised for enhancing the learning experience and making the content more relatable. Tutors also reflected that they found the frequent questions that punctuated the workbook particularly useful:

*'...the colours, the pictures and stuff like that it builds on this sort of text and stuff...different coloured pages, little funny men, you can relate to it'* (Trainer).

*'I liked the confirming bits, I liked the questions throughout the book so because that's the bit we did use, you know we used all the little tests, we used all the little questions at the bottom so, therefore, we were confirming the knowledge with them'* (Trainer).

#### **4.2.2 Adaptability of the Workbook**

Trainers reflected that the flexibility of the workbook was a positive aspect for those delivering it who have different styles of teaching as they felt it left them in control of how to adapt the teaching style to each individual student group. This allowed tutors to take different approaches to how they used the resource, in terms of its distribution and individual teaching styles employed by the trainers. Some trainers preferred to follow the workbook verbatim:

*'...I didn't deviate from the book at all I used everything'* (Trainer).



While others preferred to adapt the workbook to their own teaching styles:

*'...I thought right this is brilliant but if I give each student this booklet they will be looking at everything and they wont really take it in' (Trainer).*

Therefore they:

*'...took photocopies of the bits that were relevant' (tutor).*

Tutors reflected that the adaptability of the workbook was also helpful as 'one size fits all', which they considered crucial when attempting to deliver the material to a range of students with varying background and different levels of education:

*'...those who you are teaching they come from a very wide background, a range of different cultures, different languages, different educational backgrounds, ages, everything. I always break it down so I find it difficult teaching by just projector or just overheads or just the computer. I always teach from the book and I put things down on the board. That way I can change words around to their own labels of language, things that they can understand and I break it down in that way' (Trainer).*

#### **4.2.3 Health Trainer and Health Trainer Champion**

The evaluation team found that, as identified elsewhere, confusion around the definition of a health trainer was an issue. Tutors also reported their concerns over the progression from level 2 to level 3.

*'...a lot of confusion still exists about this role and the title and everything like that and it sort of misguides people to being sent on courses and they think its going to be something different' (Trainer).*

*'I think if you jump from level 2 to City & Guilds level 3 it's a huge jump...this qualification now it just finishes at level 2 and they are like where do we go from here?...'...there needs to be some sort of progression for them which they can possibly do within the prison....how they get to that stage and you know any sort of steps they can take to achieving that' (Trainer).*

*'...there needs to be something like a module if RSPH can create modules whereby it will enable them as a bolt on to Level 3 City & Guilds' (Trainer).*

At the beginning of each cohort, tutors explained the difference between Health Trainers and Health Trainer Champions and the progression routes, however many felt the information did not register at this stage. Tutors felt that these issues could be summarised in the introduction of the workbook and that way they could remind students where to find the information throughout course delivery.

#### **4.2.4 The Creation of a Supportive Toolkit**

Tutors felt that the creation of a supportive toolkit, incorporating the workbook, would be extremely useful for delivering the training and would increase levels of engagement amongst the students:



*'The workbook needs to be part of a package or a tool kit for delivery...it could have hand outs, exercises and overheads' (Tutor).*

*'...if you give student stuff section by section they will fall asleep. We need interactive methods of delivery and overheads are great for that. Other areas would also adopt the programme so much quicker...'*  
(Health Trainer Programme Manager).

Tutors raised the issue that delivering training within the prison environment meant not having easy to access the internet and a library. Some tutors felt so strongly about the creation of a supportive toolkit around the workbook, that they did not feel they could use the workbook without other supporting materials.

*'the workbook does not have corresponding overheads to teach the course, and that is a considerable amount of work to work up the whole teaching pack to correspond with the workbook' (Trainer).*

*'We wanted to use the workbook- but as we have no overheads to match the book and that needs doing, so until then we will not be using it' (Trainer).*

### **4.3 Impact on the Families and Wider Communities of Offenders and (ex) Offenders**

The Health Trainer programme is not just about getting qualifications, it is a programme which aims to have a direct impact on people's views of their own health and that of their families and the wider community. This section includes participants' reflections on whether these impacts have occurred.

#### **4.3.1 Impacts on the Prison Community**

The RSPH level 2 course raises student awareness of a wide range of health issues and the workbook helps to ensure students can understand these issues within the context of their own lives. Indeed, students reported being able to identify with the content of the course and felt this had had a direct impact on their own behaviour:

*'It's helped me understand, really understand, I used to do the gym but I didn't understand nutrition and now I have got more of an understanding of my body and how it works. Now I understand, I want to pass that on to other people' (student).*

*'It's been like learning self respect and to respect your body with the kind of stuff you do here and if you respect your body it's a lot harder to kind of abuse it you know' (student).*

Students reported their view that the RSPH level 2 was essential, particularly to the prison population as, 'it is very easy to sit around and get fat in prison and we all smoke too because we are bored really' (Student). Students and tutors alike saw individuals on the RSPH course develop and change their behaviour as they analysed their own health and discussed what it meant to them and others in the class room. The Health Trainer role also appealed to these students, in terms of 'passing on' (student) their expertise. One observer noted that:

*'They suddenly get the idea they can do something for someone else without being all girly about it' (Delivery Manager).*

Many tutors were convinced that the workbook supported this empowerment of the prison population as alongside 'providing loads of different ways of picking up information, the workbook also gives them a sense of ownership over their own learning' (Tutor).

#### **4.3.2 Impacts on the Community Outside the Prison**

Any impacts of attending the RSPH level 2 course on the wider community are more difficult to quantify, however many examples were provided to the evaluation team:

*'We also talk to our girlfriends, saying "You know that thing you cook all the time...well did you know...so don't cook sausage and chips every night for the kids because"...and then when we go home we can show our wives what's the best to eat and why.....' (student).*

*'A lot of the lads have said that you know who have got kids and that they have said they will have a different look at things now' (student).*

Tutors were also very positive about the potential to influence their student's health long term:

*'I would hope that they have gained something from inside these walls with their health and their fitness that will carry on whilst they are outside' (Tutor).*

*'I like to think every student is going to be a snowball effect because they are going to pass that knowledge onto their children, onto their family' (Tutor).*

In this last quote one can see the result of exposing students to thinking about all the elements of health and the positive impacts this can have on those around them:

*"We were learning about oral hygiene and my son came to see me and I said something to my ex girlfriend. Two days later my son had to have 4 fillings. It was just on the very surface of his teeth it wasn't deep but the point is you caught it before it got bad. I've also been encouraging my girlfriend to get him to eat other stuff than just MacDonald's. She listened when I told her all that stuff gets him hyper' (student).*

## **4.4 Governance**

The evaluation team found that some issues regarding the governance of the Health Trainer programme may require further consideration from the Health Trainer steering group, such as definitional incongruence and course incentives.

### **4.4.1 Definitions and Pathways**

As evidenced elsewhere, students reported a general confusion as to the difference between level 2 and level 3 Health Trainer qualifications, particularly the students who had to stop at level 2:

*'The tutor showed us all this where you can go from the ladder and where it can lead to, but if you're not doing the level 3 then you should have it in the book really- otherwise you will forget'* (Student)

*'I can't understand why you'd stop at level 2, whereas if you are going onto Level 3, that's all right but if you are staying and just doing Level 2 then I think it needs more detail and more time putting into Level 2, so we know what we can and can't do as a Health Trainer Champion- not a Health Trainer'* (student).

As the quote above illustrates, although tutors show students the progression 'ladder', it may be more effective if this information is placed into the workbook as 'you can't go back and ask again if it's there in writing you can always go back and read it anytime' (student). Students also reported being frustrated as being unable to progress through to level 3:

*'I want the next level to go on to... not just leave it here- I'm really, really disappointed'* (student).

Tutors reported also reported these frustrations, as 'young men who have never engaged with learning before now have found something they are interested in. Not just for themselves, but wondering if they could find work outside in health and they have nothing to go on to- the gym provides nutrition and physical activity courses, but no more Health Trainers at the moment' (Tutor).

Both community and prison-based students highlighted their view that the general confusion around Health Trainers was further exacerbated by the title given to the course:

*'I think the name needs changing, people see Health Trainer and expect it to be a Personal Trainer course'* (student).

*'Most of my clients think they are getting a personal trainer, like Madonna has'* (Community student).

These students came up with an alternative title of 'Health Advisor' which they thought was more appropriate. Ultimately, it is important to note that although the RSPH trainers are clear about the difference between Health Trainer Champions and Health Trainers, others, mainly students, do not grasp the significance of the distinction.

#### **4.4.2 Course Incentives**

The prison population is often a fluid one, with many transfers and releases often affecting course attendance across the prison estate. Also, some prisoners are often resistant to attending education of any kind. Two institutions the evaluation team visited use innovative ways to support RSPH course attendance:

- One prison puts a hold on any student taking on the RSPH course (will not be moved unless essential)
- Another offers students on the RSPH course an hour extra in the gym on each day they attend

#### 4.4.3 RSPH Programme Start Up Support

It was reported that getting RSPH registered delivery status had proved on occasion, quite difficult and time consuming. Registration fees, where to access funding for these and purchase orders and acquisition notes all add to the time consuming activity of trying to register. Also, in terms of issues of governance, it was reported that a simple start-up guide to the options of buying in the course or delivering it internally would be most appreciated.

*'It feels like we stumbled onto the best way to approach the delivery of this, so it would be good to have information alongside the RSPH bump that aided an informed choice'* (RSPH Delivery Manager).

Many felt that having information about what other areas have done and how they have approached it would be very useful. The areas visited by the evaluation team were also interested in getting this scheme out and working in probation, so that (ex) offenders could access the Health Trainer Programme on release. One such successful scheme has been operating in the Hampshire probation area. They have 14 (ex) offenders operating as Health Trainers in four PCT's in the area. This scheme has won a Butler Trust Award, as each (ex) offender was released and had to stay incident-free for 4 months before beginning their paid employment with the PCT's. This scheme which is being disseminated to other areas could engage and inspire other areas to develop a similar project.

Delivery Managers also reported that they would appreciate support with regard to setting up tracking and data collection systems for their Health Trainer Programmes to help them monitor and evaluate internally.

## Section 5: Findings and Recommendations

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### 5.0 Introduction

The RSPH level 2 is being delivered in various sites in the UK, with many areas delivering the training with the support of the student workbook. All those involved in the evaluation stated that their experiences of using the workbook had been positive and saw it as enhancing both the learning experience and the trainers delivery of the course. All involved also saw the Health Trainer Programme as being wholly appropriate for the population of the prison estate. The workbook content and formatting was reported as being inclusive and engaging and despite certain challenges related to delivering courses in prison, all reported having many successes with hard-to-reach offenders who have often had negative educational experiences in the past. This section of the report contains good practice examples identified by the evaluation team and the key findings of the evaluation, along with a set of recommendations that, it is hoped, will feed into the further successful development of the RSPH level 2 student workbooks.

### 5.1 Good Practice Examples

The evaluation team identified the following good practice examples:

- At one prison-based site, the delivery of the RSPH course benefited from an excellent relationship between the physical education department and the education provider. The education provider supplies a Basic & Key Skills Coordinator to deliver the RSPH training in partnership with Physical Education staff. This partnership has resulted in the development of a range of crucial student evaluation monitoring systems
- Exciting and innovative developments were identified at one site, where staff have established a Physical Education Passport: an effective method of providing evidence of all training undertaken, including RSPH courses, in the event of a student transfer or release
- One site is currently developing a local Health Trainer Data Collection System in partnership with their PCT which, it is envisaged, will help produce data for more effective signposting
- A further site has used Health Trainer Champions to effectively host a series of Wellbeing Days where local community groups come into the prison to have their health monitored
- A number of RSPH Trainers have developed excellent additional teaching resources which complement the workbook, such as additional classroom exercises, power point slides and student evaluation systems. Many are keen to share their resources and get involved in the future development of the workbook

### 5.2 Key Findings

The key findings of the evaluation are as follows:

- The course trainers utilised the workbook in different ways, with some selecting, photocopying and using exercises from the book in their classes, while others simply gave the workbook to students
- Some areas have not taken on the workbook as there are no additional teaching resources, such as power point slides, to support delivery
- Trainers delivering the RSPH course felt they would benefit from support in collecting monitoring data in relation to participation on the course, including a

way of tracking which students continue and what they achieve post course involvement

- Many participating in the evaluation (especially students) admitted being confused about the difference between a Health Trainer and a Health Trainer Champion
- Some participants (both students and trainers) felt that there should be two separate workbooks, one for training in the community and one for the prison. Others however felt that having a single workbook lent itself to the inclusive aims of the RSPH Health Trainer Programme
- Prison-based students who have no opportunity currently to progress onto level 3 reported feeling frustrated, having really enjoyed level 2

### **5.3 Recommendations**

As a direct result of the evaluation findings, the following recommendations have been made in three areas of development:

#### **5.3.1 Workbook Development**

- The development of a working group/workbook development community to utilise existing resources (power points and case studies) and develop a holistic 'tool kit' around the workbook
- Consider developing an online approach to this RSPH workbook development community, where RSPH tutors and Health Trainer staff could co-author further developments<sup>2</sup>
- When revising the workbook, take into account the comments concerning separate workbooks and consider incorporating the 'expert' comments on the theory and managing change workbook sections
- Incorporate a 'quick set-up guide' (summary of the implementation guide) to inform decisions on which model of RSPH programme delivery to adopt

#### **5.3.2 Clarifying Health Trainer and Health Trainer Champion Roles**

- The distinction between Health Trainers (NVQ level 3) and Health Trainer Champions (RSPH level 2) needs to be made clear to all students. The workbook would benefit from having this clarified in its title
- Consider inserting Department of Health definitions of Health Trainer and Health Trainer Champion into the workbook
- One recommendation for the 'quick set-up guide' could be to introduce both levels 2 and 3 at the same time which may reduce student confusion around definitions of Health Trainers and Health Trainer Champions and provide an effective progression route
- Consider inserting Health Trainer and Health Trainer Champion 'do's and don'ts' section into the workbook or toolkit

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<sup>2</sup> This could potentially be developed along side the Level 2 Award in Understanding Health Improvement e-learning programme <http://www.i4learnlive2.co.uk/derbyshirepct>

### 5.3.3 *Monitoring and Evaluation Support*

- Develop templates to encourage the collection of monitoring and evaluation data, in relation to internal participation on the course, which could also be included in the 'toolkit'
- Consider developing the Delivery Questionnaire as a way of keeping track of who is delivering the Health Trainer courses



## Appendix 1: RSPH Delivery Questionnaire

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### Offender Health Champions RSPH Level 2 Award in Understanding Health Improvement

#### Questionnaire

The purpose of this questionnaire is to explore where the RSPH<sup>3</sup> Level 2 Award in Understanding Health Improvement (UHI) programme is being used, or intended to be used, to support Health Champion development within Offender Health. The information you provide will help us to develop programmes to encourage and support sites to develop and deliver UHI courses and materials, and share knowledge and expertise across the sector.

Prison / Probation Service:

Address:

Contact Name:

Role / position:

Contact phone no:

Contact email address:

Completion of the questionnaire should take no longer than 5-10 minutes, and will help us to provide appropriate support and resources to enable the development of Offender Health Champions and their attainment of the RSPH Level 2 Award in Understanding Health Improvement.

All contributors will be informed of the survey outcomes.

For further information or advice, please email or telephone 07899977270

Thank you for your co-operation

Ann Stuart  
HT Learning & Development Advisor

Please complete and return the questionnaire to: [Ann.Stuart@nhs.net](mailto:Ann.Stuart@nhs.net)

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<sup>3</sup> Royal Society for Public Health (formerly RIPH)

### **Question 1**

Has the Understanding Health Improvement programme been delivered in your area, since July 2008?

YES / NO (please highlight or underline)

If **NO**, please go to Question 2 on page 3. If **YES**, please answer the following questions:

a) Who was the training provider?

Internal provider (lead person):

External provider (organisation / lead):

b) How many courses have been delivered?

1 / 2 / 3 / more

(please highlight or underline)

c) How many learners completed the programme?

Offender

Staff

Others

d) Approximately what percentage of learners are still in your service?

.....%

e) How useful was the course workbook material to the trainers?

Exceedingly Useful / Very Useful / Useful / Not Very Useful / Not Used

(please highlight or underline one statement only)

f) How useful was the course workbook material to the learners?

Exceedingly Useful / Very Useful / Useful / Not Very Useful / Not Used

(please highlight or underline one statement only)

**Now, please go to Question 2 overleaf**

### **Question 2**

Does your service intend to deliver the Understanding Health Improvement programme within the next:

3 months / 6 months / 12 months / other (please state)

(please highlight or underline one statement)

a) Who will develop the programme?

Internal provider (lead person):

External provider (organisation/lead):

b) Who will deliver the programme?

Internal provider (lead person):

External provider (organisation / lead):

c) Do you perceive there will be any potential barriers to implementing the Understanding Health Improvement programme? If so, what might they be?

**Question 3**

Will your service require any support to:

(please highlight or underline)

a) Gain RSPH registration as a RSPH Centre

YES / NO

b) Train the trainers

YES / NO

c) Develop the training programme

YES / NO

d) Develop training materials

YES / NO

e) Deliver the training programme

YES / NO

f) Other (please state)

**Question 4**

Any comments, suggestions or questions?

THANK YOU for completing this questionnaire.

Please return your completed form to [ann.stuart@nhs.net](mailto:ann.stuart@nhs.net)

## Appendix 2: List of locations Registered to Deliver RSPH Level 2

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- Adult Education College Bexley
- Blackburn College
- Furness College
- Grimsby Institute of Further and Higher Education
- Leeds Thomas Danby College
- Newcastle College
- Northampton College
- Nottingham University School of Nursing
- South Birmingham College
- Sutton Coldfield College
- University of Cumbria
- Warwickshire College
- HMP Bedford
- HMP Durham
- HMP Morton Hall
- HMP Wealstun
- Warrant Gym Centre (HMPYOI Stoke Heath)
- Heathfield Gym (HMP Wandsworth)
- Ashfield volunteering
- Voluntary Norfolk
- Chorley and South Ribble CVS
- Ardan Training
- Beth Gibb Associates - Training Consultancy
- Castle Training and Development
- Creating Excellence - Fit for Business
- J + C Boylan Training Consultants
- Jennifer Archer Consulting
- Key Skills Specialists Ltd (KSS)
- Newleaf Consulting
- Nina Hughes Training
- Barceidillo
- Billington Associates
- Body Challenge P and R Centre
- Bourneville Carers Assessment Centre
- Calmspace Ltd
- Charles Aina
- Flexible Text Ltd
- Food Compliance
- Mason Caird Ltd
- Moss Health Skills
- Nutritrain Southwest
- Onelife Training
- Passion 4 Food
- PIP Professional Training and Services
- Pure Training and Consultancy
- Sodexo Ltd

- Step2Wellness
- Stephen Palmer Partnership Ltd
- The Centre for Workplace Health
- The Palace Hotel
- Train 2 Attain Limited
- Tricia Harper and Associates
- Tulliver Training and Consultancy
- Up and Running Training
- Wellbeing Consultants
- Wellbeing for Work
- Wellbeing for Work Ltd
- Wellkom Corporate Services Lts
- Zest People Ltd
- RBE Consultancy Ltd
- Graham Rushbrook
- Diplock Safety and Hygiene Ltd
- Health First
- PSS Liverpool
- Ashton Leigh and Wigan PCT
- Bath and North East Somerset PCT
- Berkshire West PCT
- Brent Teaching PCT
- Brighton and Hove PCT
- Bury PCT
- Camden PCT
- Cornwall and IoS PCT (Health promotion service)
- County Durham PCT and Darlington PCT
- Derbyshire County PCT
- Eastern and Coastal Kent PCT
- Greenwich PCT
- Halton and St Helens PCT (UHI only)
- Heywood Middleton and Rochdale PCT
- Manchester PCT
- NHS West Kent (PCT)
- North Yorkshire and York PCT
- Health Promotion Devon PCT
- Oldham PCT
- Peterborough PCT
- Plymouth Teaching PCT
- Public Health NHS Wiltshire
- Southampton PCT
- Stockport PCT
- Tameside and Glossop PCT
- Warrington PCT (UHI)
- West Essex PCT
- Westminster PCT
- National Public Health Service for Wales
- Exeter City Council

- Suffolk County Council Adult and Community Services
- Gateshead Council WFD
- Healthworks Newcastle
- Healthy Living Wessex
- London Borough of Waltham Forest - Chestnuts House
- Signpost Education and Health
- Queens Park Forum (PDT)
- Reading CAB Training Services Berkshire
- Bridge Project (T&E opportunities for women)
- Community Connections
- Environmental Health Support Services
- Gateway Family Services

## Appendix 3: Detailed Information from Delivery Questionnaire and E mail

### Question One: Level 2 Programme

	Delivered since July 2008?	Internal/external training provider	No. of courses	No. of learners	How useful?	To learners?
1	No	n/a	n/a	n/a	n/a	n/a
2	No	n/a	n/a	n/a	n/a	n/a
3	Yes	Internal	3	29 offenders, 2 staff, 8 trainers	Exceedingly useful	Exceedingly useful
4	Yes	Internal	1	12 offenders	Exceedingly useful	Exceedingly useful
5	Yes	External	1	1 staff, 7 paid sessional mentors	Not used	Not used
6	No	n/a	n/a	n/a	n/a	n/a
7	No response	No response	No response	No response	No response	No response
8	Yes	Internal and external (RSPH)	3	20 offenders (approx)	Very useful	Very useful

### Question two: Delivery

	Deliver within	Developed by: internal/external provider	Delivered by: internal/external provider	Any barriers?
1	3 months	Internal	Internal	None identified yet
2	3 months	Internal and external (PCT Health Trainer Lead and East Midlands Health Trainer Hub)	Internal and external (trainer and a accredited RSPH centre)	Co-ordinating training with adequate group sizes without long delays
3	3 months	Internal	No response	None
4	3 months	Internal	Internal	None
5	3 months	Internal and external (TBC)	External (TBC)	Staff being able to take time out to do training and the cost of backfill for those staff
6	Unknown	Internal and external	External (NHS)	The award has severe limitations in its content, accuracy and its not up to date in terms of health statistics.
7	No response	No response	No response	No response



8	Currently being delivered	Internal and external (RSPH)	No response	None at the moment
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### Question three: Support

	Gain RSPH registration	Train the trainers	Develop training programme	Develop training materials	Deliver the programme
1	Yes	No response	Yes	No response	No response
2	No	No	Yes	Yes	Yes
3	No	No	No	No	No
4	No	No	No	No	No
5	No	No	No	No	No
6	No	No	No	No	No
7	No response	No response	No response	No response	No response
8	No	No	No	No	No

### E mail Information

#### Dorset

1. Dorset probation are working on a bid to have two part time Health Trainers each based in a probation hostel, one in Dorset PCT area and the other in Poole and Bournemouth. This project is awaiting confirmation of recurring funding by the PCTS.
2. Devon PCT Health Trainer programme has commissioned a pilot project managed by Age Concern to work with older offenders in the Devon Prison Cluster (Exeter, Channings Wood and Dartmoor). This programme was due to commence in February 2009.

#### East of England

In the East of England 7 out of the 15 prisons have expressed interest in having Health Trainer Champions:

1. *HMP Norwich*: now has prison board agreement, a steering group has been set up and training providers are being discussed. A full time prison health trainer co-ordinator funded by NHS Norfolk is now in post to get health trainers into Norwich, Wayland, Coltishall and Norwich probation services.
2. *HMP Wayland*: has board agreement, a steering group has been set up and training provider being discussed (will probably be Reena Savage at Skills for Life in Norfolk as they will be delivering the health trainers in the community). Once this has been agreed the prisoners will be recruited.
3. *HMP Coltishall*: (not yet open) NHS Norfolk's prison commissioner wants to have health trainers in the prison but it is not yet open.
4. *Norfolk Probation Service*: agreed to have health trainer champions, they will be funded by NHS Norfolk (4 part time) they are currently in negotiation with the probation and the PCTs HR departments about how to recruit ex-offenders into NHS jobs. They will then begin to recruit. The probation health trainer will be trained alongside the community health trainer by Reena Savage (Abid).

5. *HMP Peterborough and Peterborough PCT:* are interested in having health trainers and the health trainer co-ordinator has a meeting next month to discuss what health trainers are their training etc.
6. *HMP Chelmsford:* Chelmsford prison board have agreed to have health trainers and the health trainer lead in the prison is developing a steering group, looking at protocols and looking into the services available to prisoners that exist already. Chelmsford has not yet decided who will deliver the training.
7. *HMP Bedford:* she has been liaising with Bedford. The PCT hub leads and Bedford are interested in having a health trainer's service. She is giving a talk to their prison board next week.
8. *HMP Hollesley Bay:* the PCT and prison board have agreed to have a health trainers service, paper are to go to the next board.

## Appendix 4: Expert Feedback Questionnaire

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SHARPENS YOUR THINKING

### RSPH Level 2 Understanding Health Improvement for Health Trainers in Prisons & the Wider Community

<b>Workbook Evaluation: Expert Questionnaire</b>
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As I'm sure you are all aware, this workbook has been developed for Health Trainers in prisons and wider communities as an addition to the learning and teaching resources which support the Royal Society of Public Health (RSPH) Level 2 Understanding Health Improvement Award.

The workbook is being used at several sites and further developments to the workbook are expected to be incorporated on completion to the evaluation process, in June 2009. The six sections of the workbook can be accessed from the Department of Health web site:  
<http://www.dh.gov.uk/en/Publichealth/Healthinequalities/HealthTrainersusefullinks/index.htm>

The two sections we are asking you to reflect on can be found at the address above, entitled:

- Download workbook 3 (PDF 642k)
- Download workbook 5 (PDF 717k)

This questionnaire has been sent to three other experts who have chosen to comment on this workbook for their expertise in this area. Any comments reproduced in the final evaluation report will remain **anonymous**.

This questionnaire has three sections:

- Models of Behaviour Change (workbook step 3)
- Setting Goals, SMART Principles and Managing Change (workbook step 3)
- Programme Evaluation Methods (workbook step 5)

This questionnaire is designed to elicit YOUR view as the most effective way (s) to convey this information.

**Please do not restrict your comments to the existing size of the boxes provided.**

**Theories and Models** (Step 3, begins on page 69 of the workbook).

As experts in this area, we are looking for constructive feedback from those with a developed view of how behaviour change theories and models could and should be most effectively presented to learners.

Please comment on the following workbook pages:

1) The Health Belief Model on page 77 of the workbook.

2) The Stages of Change Model on page 79 of the workbook.

3) Theory of Planned Behaviour and Reasoned Action on page 82 of the workbook.

**Setting Goals, SMART Principles and Managing Change** (Step 3, begins on page 83 of the workbook).

The RSPH Health Trainer Learning Outcomes are included in the workbook at the beginning of each section. The level 2 workbook is designed to be used with Health Champions, who do not function as Health Trainers. The rationale for this content inclusion in the workbook is based on the requirement that Health Champions **do** however need to be aware of goal setting and models of behaviour change.

With this in mind, please comment on the following workbook pages:

1) Goal Setting on pages 83-84 of the workbook.

2) SMART principles on pages 85-87 of the workbook.

3) Managing Change on pages 88- 89 of the workbook.

**Programme Evaluation Methods** (Step 5, begins on page 105 of the workbook).

As the following sections are taken from the level 3 Health Trainers Handbook, do you feel they work effectively in this different context for the same reasons as stated in the previous section?

1) ABC on pages 108-109 of the workbook.

2) Personal Health Guides on page 110 of the workbook.

3) Behaviour Change Diaries on pages 111-118 of the workbook.

**Thank you for taking the time to fill out this questionnaire. Your comments will be fed into the development of the RSPH level 2 workbook.**