

Improving healthcare commissioning for probation: Mapping the landscape

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Healthcare services available to people on probation and how they access them will be examined as part of a new research project.

The study, funded by the National Institute of Health Research (NIHR) Research for Patient Benefit Programme, aims to tackle relevant issues identified by the researchers in consultation with probation workers and service users.

Researchers say better [healthcare](#) could help increase the number of people successfully completing community sentences and could potentially reduce the rate of recidivism, while also saving the NHS substantial sums of money by reducing the unnecessary use of urgent and [emergency services](#).

The study, led by the University of Lincoln's Dr Coral Sirdifield and Professor Niro Siriwardena, with colleagues from Royal Holloway, University of London, will address three key areas: the best way of providing healthcare to achieve good health outcomes for probationers; how healthcare is currently delivered to probationers, for example by probation services, through local partnerships, or through clinical commissioning groups; and what data is already available that could be used to measure and improve probationers' health and the quality of their healthcare.

The team of researchers will carry out a literature review of the existing studies, conduct national surveys, examine written policy and procedure

documents, and conduct telephone interviews with senior members of probation and health services.

Lead investigator, Dr Coral Sirdifield from the University of Lincoln's School of Health and Social Care, said: "There are more than 200,000 offenders on probation in the UK, and they are often deprived, vulnerable and have complex health needs such as mental health, or drug and alcohol problems, compared with the general population.

"Many probationers are not registered with a GP, or only access healthcare during crises. To reduce health inequalities, we first need to understand how healthcare is provided to probationers, and how its quality can be measured and improved.

"This is important because providing better, evidence-based healthcare will improve probationers' [health](#), increase their chances of completing probation, and could potentially reduce their risk of reoffending. There are potential cost savings to the NHS by reducing the unnecessary use of urgent and emergency services."

The grant bid was put together following consultation with probation workers and service users to ensure the research would tackle relevant issues. Those probation workers and the [service](#) users will be on the project steering group and will help develop information resources, carry out interviews, and share the findings of the study. The funding is just under £150,000.

The findings will be shared with all participants, relevant organisations and policy makers as a toolkit, and submitted to relevant journals for publication.

Provided by University of Lincoln

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