



SOUTH BRISTOL

LOCALITY PARTNERSHIP

Q3 REPORT 2023/24

Summary of content and key updates for Q3

Our priority areas

- Increasing Child Healthy Weight
- Reducing alcohol harms
- Reducing falls in older people
- Community Mental Health
- Community Engagement (Community Connectors, Community Innovation Lead, Community Anchor Organisations)
- Communications and Co-production

Health Inequalities Funding

In Q3 South Bristol Locality Partnership received funding from NHSE towards reducing Health Inequalities in South Bristol for the remainder of Q4, and for three years from 2024-2027.

Here's how we have agreed to spend it:

Q4: £22k to further develop our partnership with Community Anchor Organisations, £15k to continue delivery of the Leg Club model in Swift PCN, £15k to Wesport to develop the Falls Collaborative.

2024-2027: £257k to continue to develop Community Connector work, and £315k to extend the Community Innovation Lead role in Swift to 2027, and recruit an additional role for the Connexus PCN 2024-27 (these figures show funding across three years).

Community Cardiovascular (CVD) Health Inequalities Project

Each locality had been allocated funding to expand the Community CVD prevention project that has been delivering in Inner City and East over the last year. The project aims to establish support within communities experiencing health inequalities relating to their cardiovascular health by providing health check and support through community champions and clinical advice. It will be lead by Accure Health who will be working with PCNs and local communities over the next few months to identify target areas.

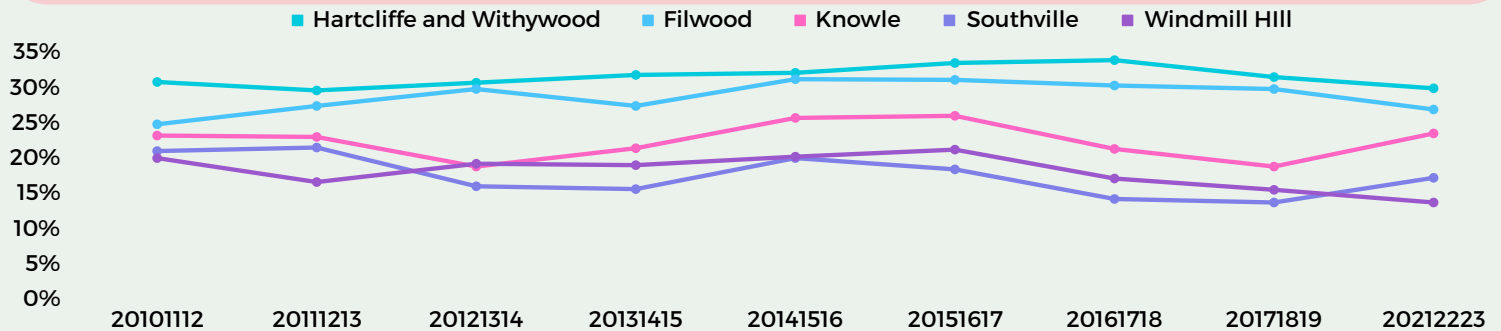
Early onset Type-2 Diabetes funding

South Bristol Locality have been allocated £15,600 to improve outcomes for those aged 18-39 with type 2 diabetes. After discussing at GP Provider Board we are working with General Practice to identify more information about the cohort of individuals so that we know how best to support their needs.

Child Healthy Weight

Goal: To reduce the number of children who are found to be overweight at ages 4–5 years old in Hartcliffe, Withywood and in Filwood from 360 to under 250 by 2028 to reduce the disparity between rates in these areas and other parts of South Bristol.

NCMP ward level data 22/23 shows rates in Hartcliffe and Withywood and Filwood have dropped slightly since last ward level data was captured in 2017-19, whereas Southville and Knowle have increased.



Training

In Q3 **55** multi-agency professionals across Bristol attended the 'Raising the Issue of Obesity' Training.

20 school Health Nurses/ Assistants attended training specific to the National Child Measurement Programme.



Family Programme

Six families across Bishopsworth, Filwood, Hartcliffe and Withywood, Knowle and Stockwood have joined the January programme, with more referrals coming in for the Spring rotation.

This is an increase from two families joining in September 2023.

Engagement with Early Year settings

In January, members of the South Bristol Child Healthy Weight group attended the Private, Voluntary and Independent (PVI) Early Years meeting to talk about our child healthy weight priority. The meeting was attended by several school leads for PVI settings across South Bristol, and sparked lots of conversation and ideas.

Feeding Bristol's The Children's Kitchen and Public Health Healthy Schools team came to discuss their offers for early years settings and what support and resources we can collectively share with early year settings.

We are planning to attend the next cluster school meeting in March to engage with primary school settings.

Oral Health for Children

Poor oral health for young children has been recognised as a concern across many South Bristol settings and partners in our working group.

In November, our Knowle West Community Connector facilitated a partnership between the Bristol University School of Dentistry and Christ the King primary school in Knowle West to provide pupils with dental care education. We're keen to explore how this partnership can be developed across South Bristol settings.

Looking at the role of local convenience shops

Not having local access to fresh, affordable food has come up many times as a barrier to families in South Bristol maintaining a healthy lifestyle. We recognise the role that convenience shops play in communities, many serving as the main source of food for families.

We're therefore keen to explore opportunities to work with local businesses to increase provision of healthy affordable produce. Starting with learning from the Shaping Places project in Knowle West.



Bristol Eating Better Award (BEBA)

The scheme sets out criteria and targets for catering venues to achieve to ensure the food and drinks they serve is fresh and sustainable in line with the Bristol One City Plan.

In the last Quarter, **five** South Bristol venues have signed-up/ achieved the BEBA including care homes across Stockwood, Hengrove and Whitchurch and Hartcliffe and Withywood.

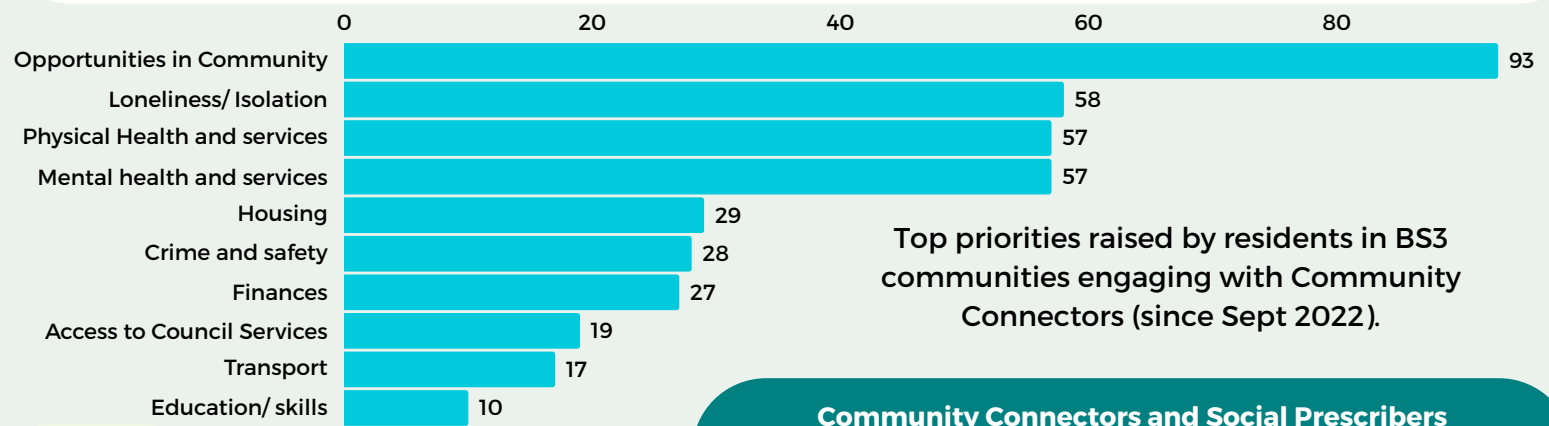
South Bristol total Award Holders - 55

Business Awards - 20

Schools Award - 26

Early years awards - 9

Community Connectors



Top priorities raised by residents in BS3 communities engaging with Community Connectors (since Sept 2022).

Community Connectors and Social Prescribers

In BS3, Leanne as a community connector received many referrals of individuals experiencing isolation from Social Prescribers. The majority have continued to engage with the groups and found new social connections.

The benefit of the relationship with Social Prescribers is that Leanne could introduce the individuals to her groups, and report back to the Social Prescribers how they were getting on and if necessary suggest further support following her conversations with them.

Now that Leanne is a part-time Social Prescriber herself, she has directed individuals to her Community Connector groups and works with them through the project, and as a result has been able to reduce cases on her social prescribing caseload. She can also share her network of resources with the Social Prescribing team.

Q3 KPIs

391 People supported across BS3 and Knowle West between Oct-Dec 2023. This is a combination of new and existing contacts.

961 instances of support in that time.

67 people verbally reported feeling more connected to others following engagement with Community Connectors between July and Dec 2023

32 case studies captured following people's journey with Community Connectors as well as community events. **13 of these were captured in Q3**

Examples where community connectors are increasing opportunities in community to reduce isolation, and improve physical and mental health:

With the money secured by the Safer Streets fund, the Hollidge Garden art group were able to make a trip to the Royal West of England Academy to see the open exhibition. They all had their photos taken in front of their favourite art works, and then enjoyed lunch together in the café afterwards.

This trip was so valuable, as many of the group would have been unable to access the building without support. The group is made up of members of the Hollidge Gardens art group, Monday lunch club and Marksby Road coffee morning.

This is just one of many social activities and groups that have been developed by the Community Connectors.



The Pop Up Wellbeing Cafe at Knowle West Health Park now has on average six regular attendees following their health and strength appointments at the centre where they can socialise over games, tea and toast.

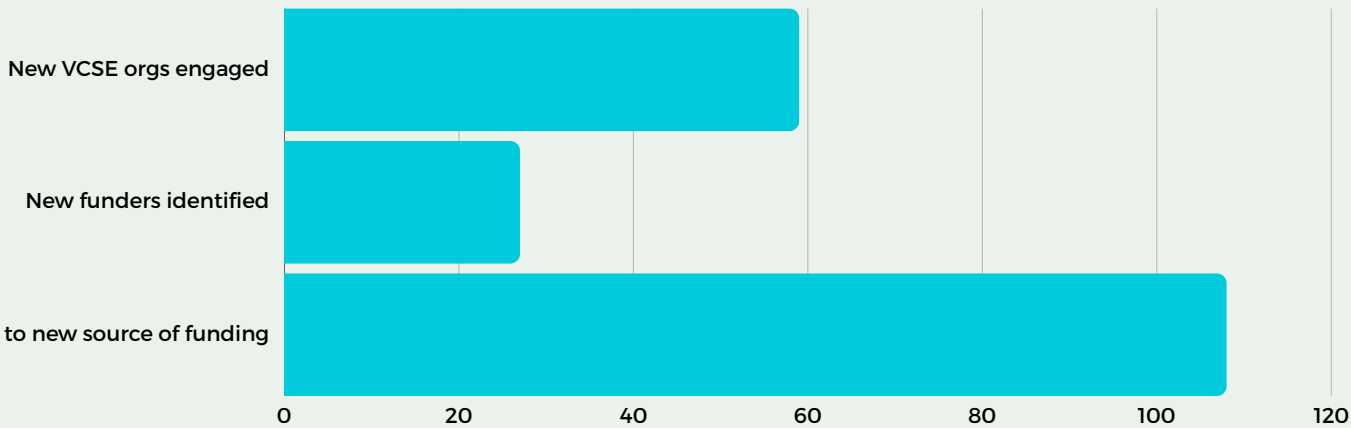


Community Connectors have linked up with community transport the Big Lemon and Sprint bus to support more people to connect with others through singing groups and community lunches



Community Innovation Lead

Q3 KPIs



Connecting General Practice and the Housing Advice Sector

In October, the Community Engagement Working Group met with members of the Council and wider housing advice agencies and OneCare to discuss the challenges faced by residents to access social housing, and how the social housing system works.

It came to light that in many cases, GPs were unsure what medical evidence to submit for their patients in relation to their housing needs, and in what format. With little information or guidance on what evidence is needed, GP letters often were rejected by the Council.

Hari coordinated a series of further meetings between housing agencies and OneCare to design three template letters to support GPs to provide medical evidence for vulnerable patients.

The housing template has been updated in EMIS, and so far two practices- one in Swift in South Bristol and one in BIC- East Bristol are keen to trial the templates.

Once the templates have been tested wider, the vision is to promote to wider BNSSG practices and interested parties.

"Hari's role shares timely, relevant information across the PCN and helps facilitate communication between different groups and teams. He finds out the priorities of each area and actively builds connections. Hari also researches local groups and activities that are often under the radar and has a solution-focused approach to finding ways of filling gaps in provision.

Fantastic spreadsheet keeps us up-to-date with what's happening locally. Great to have someone specialising in making connections across the community sector when services are often working independently due to time and service pressures."

Saba James- Merrywood Practice

"Meeting with Hari enabled me to understand more about the structure of the GP, Social Prescriber and PCN provision in south Bristol. This meant The Harbour could advertise the one to one therapy sessions and group information sessions more widely through making links with Practice Managers.

A huge benefit of meeting with Hari was his ability and commitment to introducing me to local community groups and online community forums who agreed to advertise The Harbour sessions. Thank you Hari for your efficiency and commitment to forging these links."

Mel Sweetland- The Harbour

Community Anchor Organisations (CAOs)

Between May and September 2023, community feedback was collated, and monthly reports produced summarising the key themes that stood out around child healthy weight, alcohol harms and falls in older people.

- Eight CAOs held 174 conversations (1:1, groups and surveys)
- with 559 residents
- In Knowle & Knowle West, Southville/Bedminster, Hartcliffe and Withywood, St.Annes, Brislington, Bishopsworth

Key themes from the conversations and responses from CAOs

Child Healthy Weight



Some of our CAOs have engaged with the scheme to improve the quality of the food they offer in their settings

01

Many families struggle to access support for children with special educational needs and disability (SEND)

02

Feels to be lack of 'community hubs' to access information- schools used to feel more present

03

Lack of public transport provides barriers to accessing activities or healthy food

04

Cost of organised physical activities indoor and outdoor can be a barrier to access

05

Parks need to feel safe for families to use them



And are recognised as breastfeeding friendly in their community



In response to the community conversations, many of the CAOs collaborated with Bristol family cooking providers to provide family sessions in their settings to bring families and community together whilst learning new skills, particularly where there were gaps in Holiday Activity Funds provision over the school holiday periods. In order to make this offer sustainable, CAOs have explored upskilling their staff to continue to run these sessions in their own spaces.

01

Having a social network through neighbours and family is really important for prevention and recovery of falls

02

Those that are more isolated are at most need of community networks and access to professional support

03

Having a social reason to keep active and access support helps motivate people to keep up activity

04

Emphasis of in-person services for older more isolated people in order to build trust with support available

Falls in older people



In response to conversations about falls prevention, CAOs hosted a series of community exercise sessions such as chair yoga, tai chi, walking groups, qui gong, and other social opportunities recognising the importance of having social networks and reasons to keep active were big themes that come out of the community conversations in preventing falls in older people.



CAOs have collaborated with organisations such as Age UK and Wesport to increase falls awareness locally and the sessions have proved to be really popular so far.



Alcohol Harms



It was recognised that of the three conversation topics, alcohol was the hardest for residents and CAOs to have comfortable conversations. This topic is complex, personal and sensitive and therefore highlighted potential need for more awareness of the topic and how to approach it for professionals and communities.

As such, CAOs are exploring how to support communities to have open conversations about alcohol.

For example, on February 2nd, Redcatch Community Gardens in collaboration with Knowle West Health Park hosted a community health talk with Professor David Nutt to engage residents in the topic of alcohol based on health research. The event was well attended and other CAOs have expressed interest in hosting similar events in their patches.

Evaluation and next steps following the event will be shared with the SBLP shortly.

01

Those with personal experience of alcohol harms knew where to get help from relevant agencies such as Hawkspring, BDP, AA

02

People with personal experience of alcohol harms reflected on the issue as more internal to themselves

03

Those less personally affected by alcohol harms saw the issues as external i.e. anti-social behaviour & public drinking

04

Online purchasing makes it easier for the problem to remain hidden

A partnership response to community trauma

On 28th January a fatal stabbing incident took place in Knowle West causing grief, anxiety and fear amongst the community. The local Community Anchor Organisations in the surrounding areas have played a huge role in supporting members of the community through this difficult time, working alongside residents, the Police, the Council and wider community VCSE organisations.

Having a strong partnership of Community Anchor Organisations has made it easier to pull and share resources quickly in order to support and bring communities together.

Community Mental Health & Alcohol Harms

Mental Health Integrated Network Team- MINT Go Live- April 2024

South Bristol MINT shared case reviews continue to operate fortnightly. MINT mobilisation meetings run fortnightly with attendance from MINT core team and partners, Digital Team, CMH programme team, AWP and ICB. A SPRINT plan is in operation to keep us on track for 'go live' in March 2024.

Recruitment

- Hub Manager and Administrator in place since October 2023, leading shared case reviews
- Clinical Psychologist post for South Bristol is out for recruitment
- Recovery Navigators x2- final arrangements in discussion with Second Step- timeframes tbc
- Social Worker recruitment and onboarding- tbc

Comms

- GP engagement led by CMH Lead at OneCare
- Regular updates through GP Forum
- Hub Manager and Administrator doing specific outreach engagement about MINT with each practice and wider partners
- CMH Programme Team planning key messages for GP communications and publications
- Specific SB TeamNet page in development to host MINT communications and resources

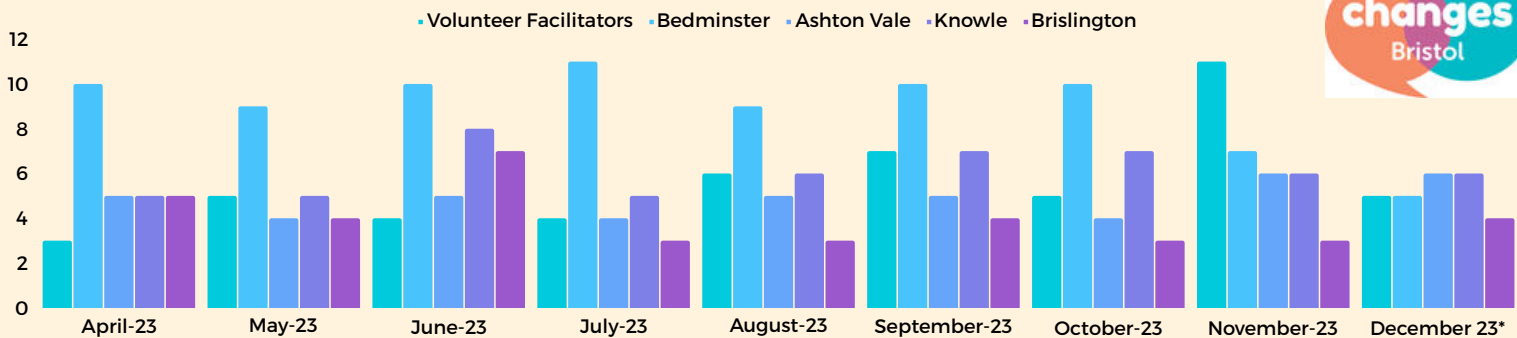
Estates

- The MINT Hub is currently operating from the Whitchurch Health Centre
- Discussions are ongoing to understand future estates possibilities for the longer-term MINT model

Digital & IG

- DPIA to be approved February to enable Data Sharing Agreement to be sent to all partners
- MOU to be sent for sign off to SB GP Directors end of February
- Draft SOP in development and aim to be signed off end of February
- MINT Hub Team have necessary access to Rio systems - complete
- MINT Hub team have a shared inbox and administer the Shared Case Reviews and mobilisation meetings.

Changes Peer Support groups attendance



Recruitment of volunteer group facilitators has been strong over the last quarter with a surge in November meaning the groups are well facilitated currently. Bedminster group remains the strongest for consistent high attendance, followed by Knowle, then Ashton Vale, then Brislington. Changes have ramped up their marketing in the last quarter targeting community and Primary Care spaces. Increased engagement with Connexus practices to follow to increase Brislington group attendance. Attendance across the groups had dipped slightly over December which is to be expected.

The South Bristol Locality Partnership are members of both the **Bristol Drugs Partnership Board** and the **Bristol Substance Use Collaborative Commissioning Board** and have contributed to the recommissioning of Bristol ROADS pathway, and will be panel members on the tender evaluation between April- June 2024. Mental Health partners will also contribute to this process.

Richmond Fellowship & Rethink

Following the discontinuation of the Peer Support group in Withywood due to low attendance, we invested £15k each to Richmond Fellowship and Rethink to provide mental health and practical advice and support for people in the Hartcliffe, Withywood and Filwood areas noting that there is high prevalence of poor mental health in these areas.

Work is underway with Richmond Fellowship to promote this service in the area.

We are in the final stages of contracting arrangements with the Council for the Rethink provision but expect this to commence in March.

Windmill Hill and Hartcliffe City Farm receive £13k from the ICB Community Mental Health (CMH) budget annually, and received non-recurrent £15k from SBLP CMH funds for 23/24 to deliver local mental health and wellbeing offers. Here is the impact it's had on their members across both sites:

88% of respondents agree or strongly agree that their mental health has improved.

69% of respondents agree or strongly agree that their physical health has improved.

80% of respondents agree or strongly agree that they feel less isolated.

92% of respondents agree or strongly agree that their confidence has improved.

-Windmill Hill City Farm

84% of respondents agree or strongly agree that their mental health has improved.

88% of respondents agree or strongly agree that their physical health has improved.

80% of respondents agree or strongly agree that they feel less isolated.

64% of respondents agree or strongly agree that their confidence has improved.

-Hartcliffe City Farm

Ageing Well

SB-LP Priority: Reduce the number of falls – we will aim to achieve a reduction in the number of people over 65 attending the Emergency Department after a fall (50% over five years)

Our Ageing Well Working Group will be stood down from February following agreement at board that due to the similarities between the members and areas of focus, progressing plans would be better monitored through Delivery Group as part of the plans to establish a community hub.

The below tables show the number of non-elective admissions due to falls across the South Bristol PCNs as well as the type of fall between 2019–2023.

Non-elective admission by PCN

PrimaryCareNetwork	2019/20	2020/21	2021/22	2022/23	2023/24
BRIDGE VIEW PCN	458	336	378	374	102
CONNEXUS PCN	678	677	618	592	189
SWIFT PCN	1,053	914	854	889	314
Total	2,189	1,927	1,850	1,855	605

Falls Prevention

Following boards decision to allocate £15,000 of Health Inequalities funding toward falls prevention in South Bristol. A service specification has been created for Age UK and Wesport who will be setting up classes over the next month.

Total non-elective admissions by type

Type of fall	2019/20	2020/21	2021/22	2022/23	2023/24
Injury	944	899	801	768	340
Non-injury	1,245	1,028	1,049	1,087	265
Total	2,189	1,927	1,850	1,855	605

Please note that 2023/24 figures only include data up to July of 2023

Stay Strong and Steady (Otago) led by Wesport

Frailer older people at high risk of falls. Considered to be a starting point for moving people into more challenging exercise. Three classes will be set up. One at Osborne Court will be starting in February, another at Haberfield House at the end of February. The final class's location is TBC.

ReACT led by AgeUK

Those with mobility limitations ranging between 4 and 9 in the Short Physical Performance test. Not restrictive to presence of falls the previous year. Three classes will be set up in St Monica Wills House, The Withywood Centre, and another which is yet to be identified.



Swift Leg Clinic

The Swift Leg club has given notice to cease delivery in the new financial year. Alongside the provision of £15,000 of health inequalities funding a working group a business case to demonstrate the positive financial and health outcomes that has been felt in many areas of the system and secure future stability of this clinic but also to expand a similar model into other areas.

The main challenges experiences so far is that although both Medicine Optimisation and Primary Care have shown support in the work, there isn't budget for them to commit to supporting it financially.

On the 13th of February we will be meeting with the Business Intelligence team to work through what they have found. We hope from this meeting that we will be able to gain evidence to support our case that without the leg clinic there will be an impact on activity on the rest of the system as well as just general practice and the individuals.

Next steps in Q4



Complete and share the leg clinic business case



Delivery of the six falls prevention classes



Establish new way of working through Delivery Group



Identify PHM data to support Early onset diabetes and Cardiovascular disease projects

Communications and Engagement

Widening of communications amongst partners

Maximising the quality of communications

Ensuring communications are accessible to all

Considering how to enable two-way communication

South Bristol Locality Newsletter

Q2

Q3

162 ↓ 159

Average monthly readers

172 ↑ 185

People on the distribution list

106% ↓ 86%

Of the distribution list views the newsletter

Our distribution list consists of colleagues from across the wellbeing and health sphere including; Voluntary sector organisations, Public health, PCNs, Acute trusts, ICB Executives and CEO, Social Care Providers

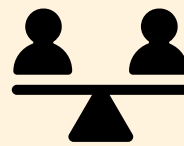


At the end of Q4 we will share the second edition of the South Bristol Locality Partnership Annual Review. We have started to map how we want to present the progress we have made this year through pictures, videos and interview.

Outcomes from February's Communications meeting



Suggestions were made on how we can best utilise our website pages. We will update it to include more information on the new roles and work happening across South Bristol. More information will be included around how we work together.



A review of data relating to population demographic information was shared to gain partners insight into how we can best engage with communities

Just under 1500 people in South Bristol may not be able to understand communication we share around wellbeing and health if communication are only available in English.

Christians (33.9%) and Muslims (2.7%) are the religions with highest prevalence within South Bristol.

There are 12,790 people in South Bristol that we know of providing unpaid care to someone

Of those in South Bristol who were born outside the UK, Italian, Polish, Indian and Romanian have the highest numbers of residents across the wards.



For questions and enquiries, or to
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South Bristol Locality Partnership

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