



Bristol Clinical Commissioning Group

Agenda Item 9

Bristol Health & Wellbeing Board

Bristol Alcohol Misuse Summit: Thursday 16 July: Next Steps	
Author, including organisation	Katie Porter, Bristol City Council, on behalf of Dr Martin Jones, Chair, Bristol Clinical Commissioning Group and Alison Comley, Strategic Director – Neighbourhoods, Bristol City Council
Date of meeting	19 August 2015
Report for Decision	

1. Purpose of this Paper

To update members of the Health and Wellbeing Board on the outcomes of the Bristol Alcohol Misuse Summit on 16 July 2015.

2. Executive Summary

Bristol Health and Wellbeing Board and the Safer Bristol Partnership Board co-hosted the summit. It brought around 70 people together from across the city to discuss a city-wide strategic approach to tackling the harm caused by alcohol misuse in the city. Attendees participated in an 'Open Space' session to discuss their priorities for action. The high-level outcome was to set up a short life working group to work on the alcohol strategy and priorities.

3. Context – Outcome of summit

- 3.1 The summit attendees had twenty 'Open Space' conversations about their priorities. The 'write up' report of these conversations has been summarised in paragraph 4. They range right across all aspects of this issue, from prevention to treatment and licensing to alcohol-related crime.
- 3.2 The event highlighted a high level of commitment and energy to tackle these issues and a desire to make swift progress towards this in order to keep up the momentum generated.
- 3.3 The high-level outcome was that there would be a short life working group set up to work on the alcohol strategy and priorities. Draft membership for discussion is attached as Appendix A. This will also be discussed at the Safer Bristol Partnership Board on 10 September 2015.

4. Open Space Actions identified

- 4.1 Establish Bristol as a pilot city challenging alcohol norms.
- 4.2 Set up a short life working group to develop a liver disease pathway for Bristol.
- 4.3 Lobby government for statutory changes on education (PHSE), drink driving limits, minimum unit pricing, greater local planning and licensing powers.
- 4.4 Roll out alcohol training for workers in services.
- 4.5 Work with young people and their parents.
- 4.6 Address the stigma people feel when using treatment services.
- 4.7 Develop alcohol-free events and venue.
- 4.8 Ensure people know what mutual aid is available (Alcoholics Anonymous, SMART).
- 4.9 Tackle child abuse linked to alcohol and other substances.

- 4.10 Provide immediate help for heavy drinkers seeking treatment.
- 4.11 Develop local powers to review licenses and a local licensees' code of practice.
- 4.12 Shape services to reach house-bound elderly.
- 4.13 Develop a vision for leadership across the city.
- 4.14 Work with the universities (and colleges) to deliver key messages.
- 4.15 Review whether treatment services offer what the clients need.
- 4.16 Change young people's perception that alcohol is cool.

5. Key risks and Opportunities

- 5.1 The opportunity is to build on the work of the Summit to develop Bristol wide action.

6. Recommendations

- 6.1 It is recommended that the HWB agrees to set up an Alcohol Strategy short life working group with the Safer Bristol Board.
- 6.2 It is recommended that that the HWB and Safer Bristol Board consider the membership of this working group.

7. Appendices

Appendix A – Proposed membership of Working Group

Organisation / Role

- Chair of Bristol Clinical Commissioning Group (in the chair)
- GP Special Interest – Substance Misuse
- ROADS
- Person with lived experience
- Hepatologist – University Hospitals Bristol
- Director of Public Health, Bristol City Council
- Health and Wellbeing Board Alcohol Champion
- Licensee
- Avon and Somerset Constabulary
- SW Ambulance

Supported by Public Health Alcohol Strategy Manager