

Working together to reduce unintentional injuries to children across the Bristol area, and to improve outcomes for children when injuries do happen.

OUR VISION

The aim of the CIPIC HIT is to work collaboratively across organisations to support commissioning and delivery of activities that reduce the incidence and the consequence of injuries in children and young people.

BACKGROUND

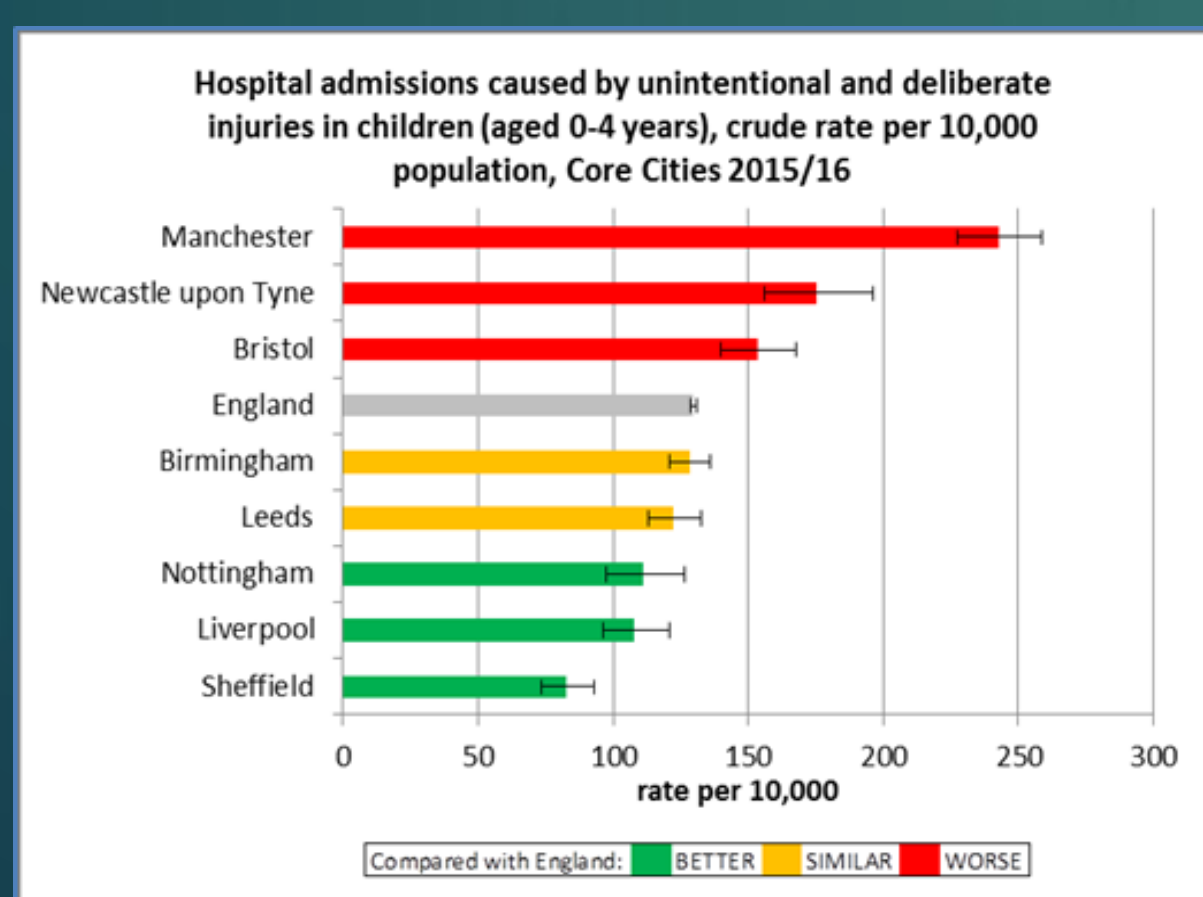
The CIPIC HIT started in 2013 with a focus on trauma care pathways. Following a strategic review in 2016 our focus is now on:

1) **Data** - The collation and interpretation of information describing the burden of child injury on the local population and service providers.

2) **Prevention** - The identification, development, delivery and evaluation of prevention activities that are supported by data and evidence.

We conducted a Joint Strategic Needs Assessment (JSNA) of Child Injury (0-18 years) to inform our understanding of current:

- Inequalities in injury occurrence
- Health and care spend on injuries
- Existing prevention activities



ACHIEVEMENTS

The findings from the JSNA include:

Children 0-4 years:

Between 2014-1017 there were 40,426 children 0-4 years were admitted to hospital in Bristol due to an injury. Further analysis has showed that 54% of these admissions were for children living in the most deprived communities. The most reason for hospital admission was falls followed by burns. Most of the injuries occurred in the home. Admissions to hospital for injury for children 0-4 are higher the England average.

Children and young people (5-18 years):

Falls were the most common reason for a hospital admission. In contrast to children 0-4 years most of the injuries for this group occur outside the home whilst children are an play or leisure or on roads. The number of children injured in Bristol is below the national average & may be related to the introduction of 20mph speed limits

We invited stakeholders to attend an engagement workshop to share the JSNA data and gain insight of their experience of unintentional injury in children and young people. We asked:

- What in their experience were the causes of injury in children?
- What services/interventions in their experience contribute to reducing childhood injury?
- What data did they collect on child injury?
- What are the gaps?
- What could we do better?

OPPORTUNITIES FOR COLLABORATION

During 2018-19 we have several opportunities to get involved:

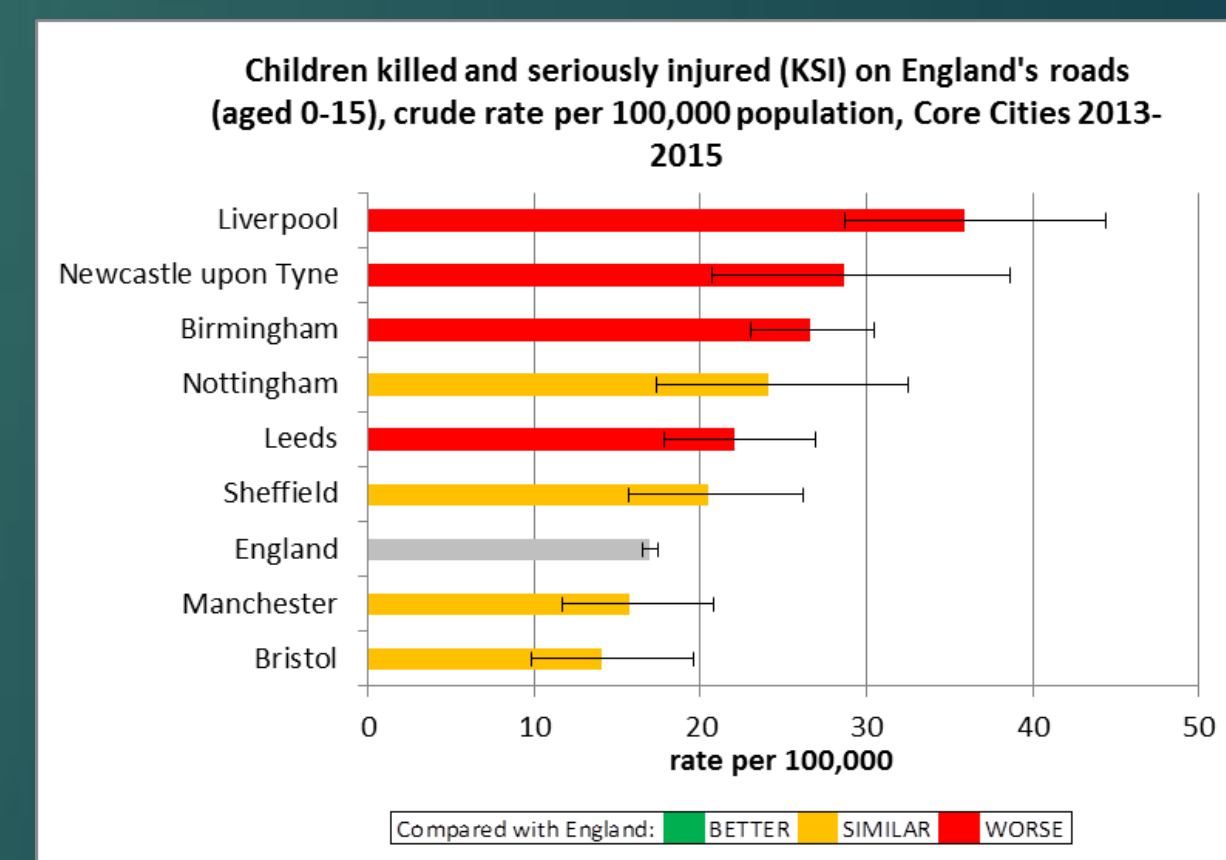
Service improvement working groups for <5s and 5-18y olds:

- Agreeing consistent injury prevention messages used by different professional groups
- Developing resources for parents on local options for minor trauma care
- Standardising responses by health visitors and school nurses to notifications of a child's injury.

A workshop to explore the potential for a sustainable model of first aid & injury prevention education for the parents of pre-school children.

Working with Connecting Care to collate discharge summaries from different urgent care providers.

A project with schools and pre-school settings to use Accident Books as a source of injury data.



Want to get involved? Get in touch:

Julie Mytton
Julie.Mytton@uwe.ac.uk

Jessica Williams
j.williams@bristol.gov.uk