Our vision

We are a team of public health experts, academics, doctors, other professionals and service users and carers.

We want to work together to reduce the harm caused by substance and alcohol use. For those already suffering harm, we seek to improve the early identification, treatment and management of their care.

Our work will connect with the priorities of service users and those close to them. It will be underpinned by our local research strengths.







Project snapshot – low dead space needles

We worked with CLAHRC West and HPRU to find out whether people who inject drugs would be willing to switch to new, safer equipment.



This diagram shows how syringe design can affect the amount of blood collected and transmitted when sharing needles. The far left shows a very high dead space syringe, and the far right is the lowest.

This research recommended that needle exchanges should do the following to help introduce low dead space needles safely:

- train needle and syringe programme staff
- provide education for people who inject drugs
- offer a few low dead space syringes to try with usual equipment, and eventually restrict usual equipment

Work is now underway with Bristol Drugs Project to develop materials to encourage uptake among service users, based on research evidence. £20K was secured from the Economic and Social Research Council to do this.

Working with other HITs

Joint internships We benefited from having an intern supporting our work-streams through literature reviews & drafting evaluation plans.

Would your HIT be interested in joining forces to supervise other internships?

Demonstrating system-level savings

We're interested in developing a rapid access to alcohol detox service for acute hospitals. In building the case, it can be difficult to describe and attribute savings.

Does your HIT have experience of generating system level savings, and being able to articulate these clearly?

Can we collaborate to agree some approaches to this issue?

Drug and alcohol interactions with mental and physical health We know that use of drugs and alcohol can interact with people's mental and physical health in complex ways.

Is your HIT thinking about how drugs and alcohol interact with the health issues you focus on?

Service user and public engagement

The people we need to have at the heart of our work are drawn from a wide range of backgrounds and communities. There is a risk that by engaging people on an issue-by-issue basis, we will not have a strategic approach.

Has your HIT got experience of conducting patient and public involvement that addresses the needs of different groups in a joined up way?

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