

Reference: FOI.ICB-2526/166

Subject: Innovation / QI Programmes, Fellowships/secondments and Equality, diversity and Inclusion Monitoring

I can confirm that the ICB does hold some of the information requested; please see responses below:

QUESTION	RESPONSE
Please provide the information held by BNSSG ICB for the period 1 January 2022 to present:	
<p>1. Innovation / QI programmes and pilot projects involving Sirona</p> <ul style="list-style-type: none"> i. Titles, descriptions, participating services, start/end dates ii. ICB funding/approvals, amounts, and decision papers iii. Evaluation reports, outcome summaries, or closure reports iv. Any ICB oversight or assurance papers/minutes 	<p>Information for Sirona Children's and Young Peoples services provided below table.</p> <p>There were no activities in the Sirona Adult Community Contract that align with the information requested.</p>
<p>2. Fellowships/secondments (innovation, QI, digital, research) awarded to staff in bnssg primary and community care trusts or cic</p> <ul style="list-style-type: none"> i. Scheme name, number of places, selection process used ii. Recipients' band/role (names not required), host dept, duration 	<ul style="list-style-type: none"> i. Clinical Leadership Fellowship, 1 place available. Approved by Bristol, North Somerset & South Gloucestershire Research & Evidence Team Advisory Group in the meeting held 14 April 2021. In line with ICB recruitment process the role was advertised on NHS jobs, followed by shortlisting and interview for the appointment.

iii. Any ICB funding and approval documents	ii. Advanced Nurse Practitioner, Host department ICB Population Health Management and the Research Team, duration 17/11/21-16/05/2023 iii. ICB funding = £36,395.19 Research Capability Funding
3. Equality, diversity and inclusion monitoring for the above <ul style="list-style-type: none"> Any ethnicity breakdowns across applicant → shortlist → award stages Any risk assessments, mitigations or actions regarding fairness in access 	The ICB does not hold this information.

Q1 Sirona Children's and Young People

The Children's Community Health Partnership contract, held by Sirona care and health CiC, is a co-commissioned contract between BNSSG ICB, Bristol City Council, South Gloucestershire Council and NHSE South West (Immunisations and Vaccinations only). Some of the information below

Year	Innovation / QI programmes and pilot projects	Titles, descriptions, participating services, start/end dates	ICB funding/approvals, amounts, and decision papers	Evaluation reports, outcome summaries, or closure reports	Any ICB oversight or assurance papers/minutes
2022/23	Pilot	Delivery of Extended Brief Interventions by School Health	£31,446 – BCC non-recurrent	Please contact Bristol City Council - https://www.bristol.gov.uk/data-protection-foi/freedom-of-information-foi	Please contact Bristol City Council

		nurses to overweight children in Bristol 01/09/22 - 31/08/23			
	Pilot	Delivery of Extended Brief Interventions by School Health nurses to overweight children in South Gloucestershire 01/09/22 - 31/08/23	£40,000 – South Gloucestershire Council non-recurrent	Please contact South Gloucestershire Council - https://www.southglos.gov.uk/council-and-democracy/data-protection-and-freedom-of-information/making-a-freedom-of-information-request/	Please contact South Gloucestershire Council
	Pilot	Delivery of bespoke school nursing health weight Extended Brief Interventions training and multi-agency healthy weight conversations training 01/06/22 – 09/07/23	£4000 – BCC non-recurrent	Please contact Bristol City Council	Please contact Bristol City Council
2023/24	QI and Pilot	User experience pilot for MAVIS system, capturing	£573.60 – NHS England South West	Please contact NHSE South West - https://www.england.nhs.uk/contact-us/foi/	Please contact NHSE South West

		SAIS Immunisation data			
2024/25	Pilot	Neuroprofiling tool and Neurodiversity hub model	£175,000 - ICB	Pilots still in progress as part of the ICB's Neurodiversity Transformation Programme	Neurodiversity Transformation Programme: What have we done so far? - BNSSG Healthier Together
	Pilot/QI	Provision of Multi-Agency Safeguarding Meetings	£450,000 – ICB	Please see enclosed spreadsheet. Pilot evaluated and recurrent funding approved for 25/26 onward.	ICB Business Planning
2025/26:	Pilot	Smokefree Health Visitor (Bristol and South Gloucestershire) The Smokefree Health Visitor Post will be responsible for championing smoking cessation interventions and implementing the South West Smokefree Homes Maternity/Health Visitor Pathway outlined in the	£133,000 (over two year duration) – Bristol City Council and South Gloucestershire Council	Pilot still in progress	

		'Guidance for Delivering Smoke Free Homes'. The aim of the pathway is to reduce tobacco dependence in the post-natal period and infant exposure to smoke-related harms. The post holder will be part of the Health Visitor team and employed by Sirona.			
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The information provided in this response is accurate as of 7 October 2025 and has been approved for release by David Jarrett, Chief Delivery Officer and Dr Geeta Iyer, Deputy Chief Medical Officer for NHS Bristol, North Somerset and South Gloucestershire ICB.

Item receiving investment	Provider	Progress of Implementation	Activity		Performance	
			Anticipated Benefit	Realised Benefit	Anticipated Benefit	Realised Benefit
Continuation of safeguarding strategy meeting provision	Sirona	<p>Team fully recruited until August 2024 - some staff attrition in September that will impact on data review. Senior support/management of team not accounted for in original business case</p> <p>Team at capacity but only meeting 75% of strategies demand across 3 x LA. Early data sets show an increase in strategies month on month for Q1-Q2 data will support validation of data and trends. Recruitment undertaken to replace leavers to ensure resilience within the team - will be in post by end of October 2024.</p> <p>Data collection - working with BI Team to develop data sets - Q2 data will provide some comparable data sets. New EMIS templates in development to support BI. SOP developed to ensure a consistent approach to strategy attendance and data</p>	The majority of strategy discussions will be attended by the SPA nursing team, thereby releasing Community Paediatrician time/ available resources. Funding 2024 – 2025 was to assess demand.	<p>Q2 Data – 589 strategies held across BNSSG with 100% attendance by a Sirona representative. 75% (n 442) attended by SPA/ locality nurse (Full evaluation report to follow)</p>	To fulfil Sirona’s statutory responsibilities within the multi- agency safeguarding process (Section 47 Children Act 1989), improving reliability, consistency, and quality of input. This currently sits with the Community Paediatricians.	<p>Q2 Data- 23% (n 135) strategies attended by Com Paed (within and outside of Scheme of Delegation) (Full evaluation report to follow)</p>

Clinical Outcomes		Financial Impact			
Anticipated Benefit	Realised Benefit	Anticipated Benefit	Realised Benefit	Approved investment	Revenue - Year 1 (reflecting ramp-up) plus recurrent annual costs (if applicable)
Improved sharing and interpretation of health information, contributing to more effective multi agency risk assessments and developed safety plans leading to improved outcomes.c Contemporaneous, response to Local Authority requests eliminating delays in information being available. Comprehensive information sharing pathway ensures that strategy outcomes are shared with relevant health providers (poor information sharing is the main issue identified in statutory reviews where children have died / been harmed due to abuse / neglect)	Significant improvement in health attendance at strategy discussions, quality of information sharing and safety planning. (Full evaluation report to follow)	Release of Community Paediatrician time / resources to support them in fulfilling other responsibilities.	Approximately 75% of strategies (within working hours) are now attended by the SPA/ wider Safeguarding nursing team.	£450,000	N/A

	Child/family and staff experience		Health Inequalities		Other
Capital - profile of costs	Anticipated Benefit	Realised Benefit	Anticipated Benefit	Realised Benefit	Anticipated Benefit
TBC	More effective multi-agency risk assessment and safety plans for children and families due to holistic system health information being available to strategy discussions. Enhanced multi- agency working and partnership working.	Positive feedback from across the BNSSG safeguarding partnerships. (Options for a broader independent evaluation of the SPA model are being explored with the ICB and UWE)	Children, young people and families suffering health and wider inequalities are overrepresented in safeguarding strategy discussions.	A robust process of representing health, sharing, and analysing health information and associated risks supports both a multi-agency partnership and system wide approach aiming at reducing health and other inequalities.	A strengthen ICB health system approach to strategy discussion.

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Realised Benefit	Key risks, issues and mitigations	Status of key dependencies for success	Contracting approach								
Improved collation, analysis and sharing of information from across the health system to safeguarding partners, in line with IG principles and statutory requirements.	<table><tr><th>Risk or Issue</th><th>Description</th><th>Rating (Likelihood x Consequence)</th><th>Mitigating action/response</th></tr><tr><td>Multiple platforms/systems for record keeping and storage across Childrens Team</td><td>Due to multiple different systems being used to record keep across CCHP team, there is risk of information governance breaches and inconsistent use of documentation platforms. This could result in: - loss of safeguarding records -Inconsistent standard of record keeping -Sensitive child protection issues documented on EMIS and potentially visible to other agencies when not appropriate (due to national EMIS sharing processes) -Confusion for staff with where to record keep and locating files -Vital child information may not be easily found</td><td>15</td><td>Urgent work currently ongoing to create a digital solution. Position paper produced and raised at execs</td></tr></table>	Risk or Issue	Description	Rating (Likelihood x Consequence)	Mitigating action/response	Multiple platforms/systems for record keeping and storage across Childrens Team	Due to multiple different systems being used to record keep across CCHP team, there is risk of information governance breaches and inconsistent use of documentation platforms. This could result in: - loss of safeguarding records -Inconsistent standard of record keeping -Sensitive child protection issues documented on EMIS and potentially visible to other agencies when not appropriate (due to national EMIS sharing processes) -Confusion for staff with where to record keep and locating files -Vital child information may not be easily found	15	Urgent work currently ongoing to create a digital solution. Position paper produced and raised at execs	The SPA initiative is achieving the key aims- to free up Community Paediatrician time, through the SPA/ locality nurses up taking the role of health. Resulting in improved attendance at strategies overall, improved information sharing, assessment of risks and safety planning.	Strengthening Sirona's compliance with safeguarding children statutory, regulatory, and commissioning requirements, as well as promoting / representing the role of 'health' across the ICB health system and the BNSSG safeguarding partnership. Going forward SPA Key Performance Indicators are to be developed, in conjunction with the ICB, and included into Safeguarding Quality Standards / Commissioning contract going forward.
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Recommendations

To support the request for on-going investment into the SPA initiative, internally and to the ICB.

Currently, the allocated money is being augmented by management support / supervision from the senior and wider safeguarding team to pick up the excess demand for strategies which the team do not have the capacity to meet.