

South East Community Healthcare

Healthy Ireland Implementation Plan 19

2018-2022

Seirbhís Sláinte Níos Fearr á Forbairt Building a Better Health Service

Foreword

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South East Community Healthcare Forward

"He who has health has hope, and he who has hope has everything." Thomas Carlyle

Health is a word that we are all very familiar with, particularly those working within the health service. However, it can mean different things to different people. It is sometimes described in broad terms as "being free from illness and injury" or as "being both mentally and physically well".

The aim of our Healthy Ireland Plan for the South East Community Healthcare (SECH) is to support people living in the South East to be happy, healthy and well in order to reach their full potential.

We are aware that many factors can influence a person's health, such as where they live and work; their access to education and to job opportunities; their individual lifestyle choices; their social supports and access to amenities such as clean water and transport.

Because health can be influenced by many determinants outside of the health service itself, we link closely with our partners through joint committees such as the Local Community Development Committees (LCDC's) and Children and Young People's Services Committee (CYPSC's) to ensure that we are all working together to create a happier, healthier South East Region.

In addition to partnership working, our plan focuses on positively influencing the lifestyle choices that people make in relation to smoking, alcohol, sexual health, healthy eating and physical activity.

Our health services protect our population from threats to their health and wellbeing

through their provision of immunisation and vaccination programmes and infectious disease monitoring.

We work with our National services to reduce morbidity by enhancing the up-take of screening programmes such as BreastCheck, CervicalCheck, Bowelscreen and Diabetic RetinaScreen.

Our teams are committed to supporting people at all stages of life, from the very young through to positive ageing for our older population. We adopt a life course approach to promoting Health and Wellbeing.

We know that the greatest population growth within the South East is among our older adults. This changing demographic profile provides valuable insight into how we will progress health and wellbeing programmes and activities across the region. We know we have a number of challenges facing us in South East Community Healthcare. These include:

- » The population within our South East region is growing and ageing and there is a corresponding increase in the number of carers.
- » We have many population groups in our region who have specific health needs.
- » The uptake of our Childhood immunisation programme in SECH is below the national target of 95%.
- » The uptake of the staff influenza vaccine in long term care facilities in SECH while improving, is still low.

South East Community Healthcare (SECH) Healthy Ireland Implementation Plan 2019-2022

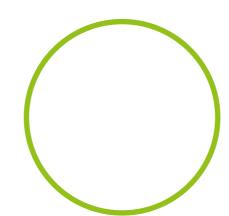
- » There are significant numbers of people in SECH, who need additional targeted support to help improve their lifestyle and health outcome.
- » There has been an increase in the number of people with self-reported poor health in SECH compared to 2011.
- » The statistics for our screening programme shows a low uptake in some geographic areas.

We have a very dedicated and skilled team of healthcare workers within the South East. Part of our role in health and wellbeing is to ensure that our workforce is happy, healthy and well. In order to support this, a section of our plan focuses on staff health and wellbeing.

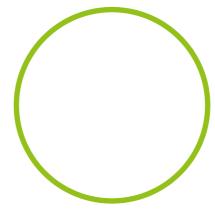
We know that significant investment is required to meet the growing needs across the health services. However, this investment needs to be married with a stronger focus on chronic disease prevention and the development of strong self-management support initiatives within the community as well as ensuring health and wellbeing support for our staff.

We look forward to working with you to make the South East a happy, healthy place for people to live, work and grow.

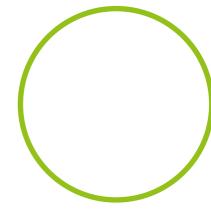
Le chéile ag forbairt sláinte agus sástacht



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Contents

1	Introduction	9
2	Healthy Ireland (HI)- An Overview	11
2.1	Healthy Ireland in the Health Services	14
3	What are we doing already on Healthy Ireland	17
3.1	HSE National Policy Programmes	17
3.2	Healthy Childhood	17
3.3	Healthy Eating Active Living	21
3.4	Mental Health and Wellbeing	24
3.5	Positive Ageing	27
3.6	Alcohol	29
3.7	Tobacco	30
3.8	Sexual Health Promotion	31
3.9	Staff Health and Wellbeing	32
3.10	Environmental Health Service	33
3.11	Chronic Conditions	34
3.12	Making Every Contact Count	37
4	Population Profile of the South East Community Healthcare	39
	Figure 2: Proportion of population by age groups in SECH	
	and Nationally, Census 2016	????
4.1	Minority Groups	39
4.2	Disadvantaged Groups	41
4.3	People Experiencing Homelessness	41
4.4	Disabilities	42
4.5	Staff Influenza Vaccination Programme	42
5	Our Service	44
6	Our Staff	46
6.1	HR Staff Survey	48
6.2	Human Resources	50

South East Community Healthcare (SECH) Healthy Ireland Implementation Plan 2019-2022

7	Developing our Healthy Ireland Implementation Plan	52
7.1	Healthy Ireland Steering Group	52
7.2	Governance	52
7.3	Information and Communications Technology	53
7.4	Intelligence	53
7.5	Strengthening Partnerships	54
8	Action Plan	56
	Healthy Childhood	56
	Healthy Eating Active Living	60
	Making Every Contact Count	62
	Wellbeing and Mental Health	64
	Positive Ageing	67
	Alcohol	71
	Tobacco Free Ireland	74
	Positive Sexual Health	76
	Prevent and Reduce Chronic Disease Self Management	
	and Making Every Contact Count	78
	Partnership Working	79
	Staff Health & Wellbeing	80
	Research & Health Intelligence	84
Appe	ndices	86
	of Figures	
	eviations	
	ary of Terms	
	ences	89

1. Introduction

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Introduction

The development of our South East
Community Healthcare (SECH) Healthy
Ireland implementation plan presents an
ideal opportunity for us to come together in
partnership, promoting health and wellbeing
across communities, care groups and
organisations. The creation of supportive
environments to enable individuals and
communities to improve their health is core
to our service provision. This requires us to
show strong leadership and commitment to
enhancing health outcomes for everyone who
lives in our region.

Our plan is guided and underpinned by the National Healthy Ireland Framework 2013-2025. It is also supported by a number of national strategies including those pictured below:

We have big hopes for our plan. They are to deliver integrated, holistic services across the region that will enhance health and wellbeing, reduce health inequalities, and prevent chronic diseases. We will seek to re-orientate health services, strengthen community action, build and develop personal skills and capacity, and create supportive environments. This plan maps ways to wellbeing.

This is our plan. It cannot and will not happen without everyone working together. Through working together and building on the incredible work that has happened to date, we can create environments that will support health and wellbeing. Together we can reduce health inequalities and prevent chronic diseases. Together we can make it happen.













National Health Strategies











6----

Figure 1: Covers of National Health Strategies

South East Community Healthcare (SECH) Healthy Ireland Implementation Plan 2019-2022

2. Healthy Ireland An Overview



Healthy Ireland (HI) - An Overview

The National Healthy Ireland (HI) Framework was published by the Government in 2013 as a Whole-of-Government, Health in All Policies (HiAP) approach. The significance of adopting this approach was that for the first time *all* Government Departments agreed that each had their own part to play in enhancing the health of everyone who lives in Ireland as opposed to "health" being "only the job of the Department of Health".

HI has a strong, clear vision of an Ireland "where everyone can enjoy physical and mental health and wellbeing to their full potential, where wellbeing is valued and supported at every level of society and is everyone's responsibility".



Healthy Ireland Goals

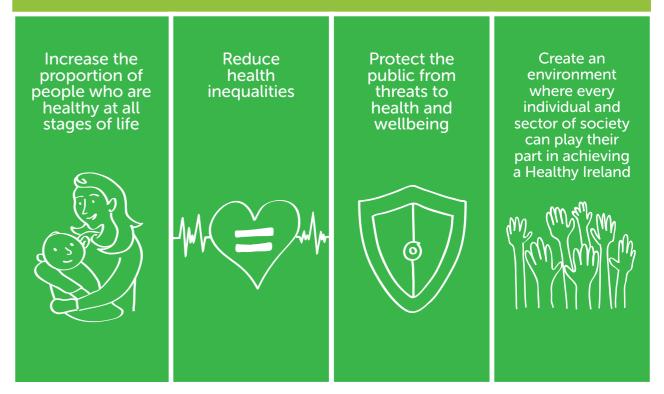


Figure 2: Goals of the Healthy Ireland Programme

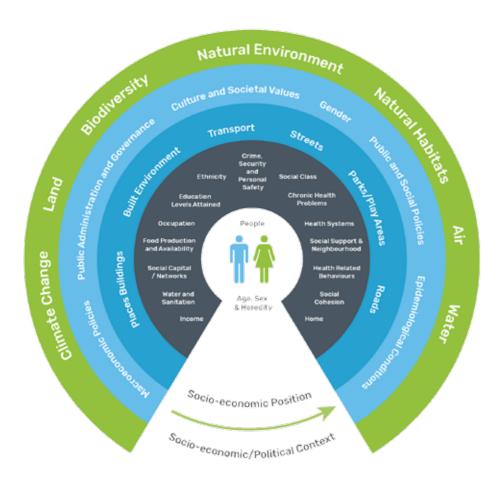
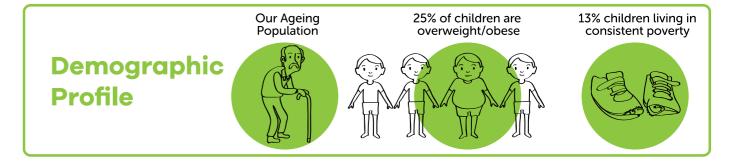


Figure 3: Determinants of Health (Adapted from Dalghren and Whitehead, 1991 and Grant and Sarton, 2006)

Giving the same service to everyone does not mean that everyone will have the same positive health outcomes. We need to ensure that our services are matched to each individual's own health needs and that health assessments take account of all the factors that can impact on our health.

The Healthy Ireland Implementation Plan for SECH sets out a clear pathway of actions that must be delivered upon to support individuals and society to be healthy at every stage of life. Delivering upon these actions will involve strategic planning and partnership working.



17% starting to smoke (reduction from 25%)

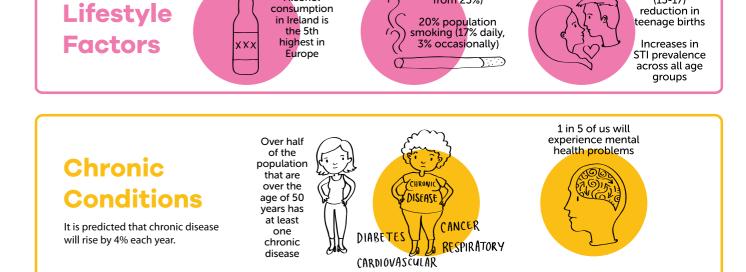


Figure 4: Challenges facing the health service in achieving the social determinants of health

Alcohol

consumption

27% reporting sexual activity (15-17) reduction in

2.1 Healthy Ireland in the Health Services

In 2015, the HSE developed 'Healthy Ireland in the Health Service' which set out how HI will be implemented within the Health Services.

Healthy Ireland in the Health Services focuses on 3 Strategic Priorities:



Figure 5: Strategic Priorities of the 'Healthy Ireland in the Health Services plan'

It dentifies 126 actions to be delivered at national and local level and places a particular focus on addressing these risk factors. It places a specific focus on Healthy Childhood, Healthy Eating and Active Living (HEAL), Wellbeing and Mental Health, Positive Ageing, Alcohol and Tobacco Free.



Figure 6: Healthy Ireland National Strategic Priorities (Healthy Ireland in the Health Services Implementation Plan 2015)

2.1.1 Target Model

We have expanded these priority policy programmes to include six further areas as set out in the diagram below. The Southeast Community Healthcare HI Implementation Plan provides the roadmap to deliver on these and has captured all of them into a twelve pronged 'Target Model' of delivery.



Figure 7: South East Community Healthcare Healthy Ireland Programme Strategic Priority Target Model

3. Healthy Ireland What are we doing already doing?



3. Healthy Ireland - What are we already doing?

This section highlights the National Policy Priority Programmes and the work that is currently happening in the SECH to address these priorities. It is not an exhaustive list of all that is happening in our region and a more comprehensive document outlining these activities can be accessed from the Health and Wellbeing office at SECH @ healthandwellbeingcho5@hse.ie.

3.1 HSE National Policy Programmes

At national level, the HSE has multidisciplinary teams in place to co-ordinate our response to the policy priority programmes.

Each programme has clear governance arrangements and provides strategic direction for a wide range of actions. These programmes should reduce duplication of effort and are the key drivers of the very many strategic priorities underpinning the health and wellbeing agenda across the HSE.

3.2 Healthy Childhood

In Ireland, our child health programme is currently based on:

- » Best Health for Children (BHFC) Original and Updated
- » The Framework for the National Healthy Childhood Programme
- » The First 5 Strategy

We know early intervention services have a positive impact on children and families. These include: home visiting services for pregnant women and families with new

babies; parenting skills training; family relationship education; family counselling; and support services for families with very young children, such as play groups. These help stimulate brain development.

Investment in early childhood development provides one of the most cost effective interventions available to reduce health inequalities and chronic illness in later life. Its impact is seen not just on the health of the child but it also provides the foundation for health.





funny frames



The Faculty of Public Health Medicine position paper "The Impact of Early Childhood on Future Health" sets out 5 key actions to promote child and adult health.

These are to:

- » Strengthen the leadership for children in the health arena
- » Develop a workforce that is trained and supported to deliver health services for all
- » Ensure the health system identifies and responds to the needs of children and their families
- » Ensure the work of the health services is embedded in the wider structures working to improve the lives of children
- » Ensure that funding is available for evidence-based interventions on behalf of children

In November 2017, a SECH child health seminar was organised. This seminar showcased some of our child health initiatives across the region and focused on child health from the national, regional and local perspective. It highlighted some of the excellent initiatives which we have in place in the South East currently, as well as exploring what areas of child health provision could be enhanced.

3.2.1 Childhood Immunisation Programmes

The National childhood immunisation target uptake is 95%. This is recommended by the World Health Organization, and ensures population immunity.

3.2.2 Recognising Schools as a setting for health and wellness for child health

Health Promotion and Improvement takes a whole school approach to health promotion based on evidence of best practice.

Health Promotion aims to empower schools to develop systematic and structured health and wellbeing action plans, through a process of consultation, action planning and review. This process reflects Department of Education and Skills policies. Each year a range of health and wellbeing training is offered to teachers on agreed topics.

3.2.3 Some examples of child health initiatives being progressed in SECH include:

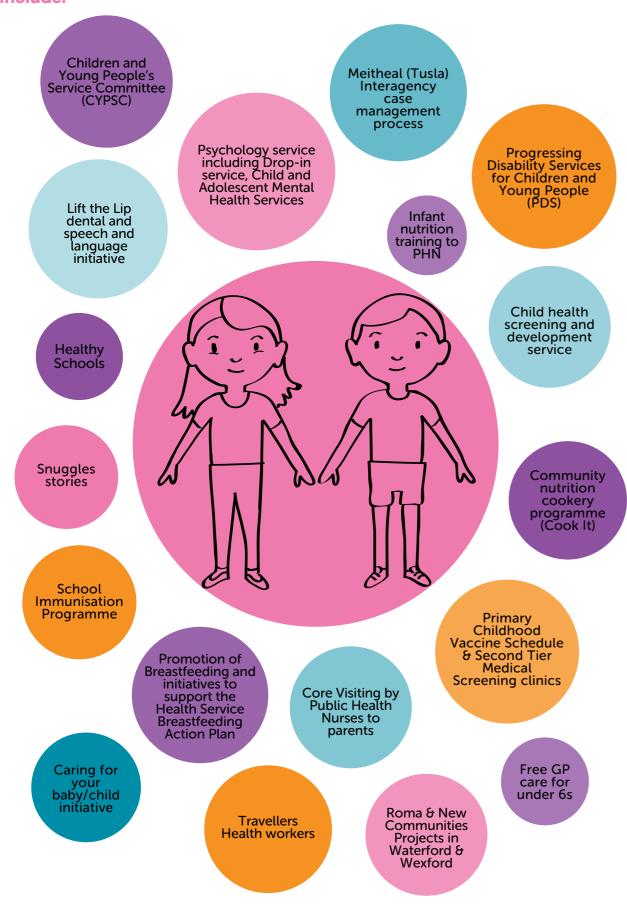


Figure 8: Child health initiatives in SECH

3.3 Healthy Eating Active Living Programme

The Healthy Eating and Active Living (HEAL) Policy Priority Programme was established to mobilise the health services to improve health and wellbeing by increasing the levels of physical activity, healthy diet and healthier weight of the population as a whole, with a particular focus on families and children. The National Policy Priority Programme Team coordinates and leads activity across the health service to ensure implementation of two policies: A Healthy Weight for Ireland: Obesity Policy and Action Plan 2016-2025; Get Ireland Active! the National Physical Activity Plan for Ireland.

Health Promotion and Improvement works in partnership with the 5 Local Sports
Partnerships in the South East and with the wider Healthy Ireland Network, to help build awareness of and promote health and wellbeing through physical activity initiatives and programmes.

Healthy Eating

Tackling healthy eating and active living requires multi-agency, multi-level and coordinated approaches. It requires strong partnership working and implementation of evidence-based programmes across the life course, in particular specific tailored programmes such as the COOK IT Progamme are delivered across the SECH in key settings. These structured community nutrition and cooking programmes are supported by community dietetics and health promotion and improvement staff. They offer practical nutrition education which aims to improve participants' skills, knowledge and confidence in providing healthy, nutritious, low cost meals and snacks for their families.

Suitable for use in a variety of settings, community nutrition and cooking programmes have been rolled out in marginalised community groups, in educational settings and for staff working in the health service.

The recent Childhood Obesity Surveillance report sets out the trends observed in relation to healthy weight, overweight and obesity in primary school children in Ireland over the period 2008 to 2015.

Some key trends identified include the following:

1 in 4 children are overweight or obese 60% of adults are overweight or obese The levels of overweight and obesity among children aged 7 and 8 years appear to be stabilising albeit at a high level, This stabilisation is not found in children attending Delivering Equality of Opportunity in Schools (DEIS) schools; and There is a marked difference across genders with more girls tending to be overweight and obese than boys.

3.3.1 Groups we have worked with in the South East Community Healthcare include:

Education

- Home school liaison teachers
- Home economics teachers
- School completion officers
- Youthreach workers

Healthcare

- Occupational
- Social workers
- TUSLA workers
- Mental health professionals
- Irish Wheelchair Association
- Schizophrenia Ireland
- **HSE Primary** Travellers

Community

- **Youth Services**
- Barnardos
- Family Resource Centres
- Mother & Toddler Groups

Let's

- Mens Shed
- **Catering Staff**





In 2017, 448 people completed a community nutrition and cooking programme across the South East.

Pictured: Families enjoying preparing food together as part of a community nutrition programme

South East Community Healthcare (SECH) Healthy Ireland Implementation Plan 2019-2022

3.3.2 Weight Management

Weight management workshops for adults are offered across the South East. These explore themes such as energy balance, healthy eating, understanding weight management and reading food labels. As part of our Healthy Ireland plan, these workshops will continue to be offered across the South East.

XPERT

Overweight and obesity is a key contributing factor in the development of diabetes. 1 in 10 people over the age of 50 now have Type 2 diabetes. A Structured Patient Education Programme, XPERT, is offered to people with Type 2 diabetes in the South East. Facilitated by dietitians, this award winning programme helps people look after diabetes and their health by learning about the up-todate treatment and management of Type 2 diabetes.



3.3.3 Active Living

Physical inactivity is now the fourth leading risk factor for global mortality. Physical activity promotes wellbeing, physical and mental health, prevents disease and improves quality of life as well as having economic, social and cultural benefits. A large number of Irish people are not meeting the levels of physical activity recommended in the National Guidelines.

The National Physical Activity Plan was launched in 2016 and aims to increase physical activity levels across the entire population, where everybody will be physically active and where everybody lives, works and plays in a society that facilitates, promotes and supports physical activity.

Currently 3 out of 4 Irish adults and 4 out of 5 Irish children do not meet these guidelines.

The HSE supports a number of initiatives which encourage engagement in increased physical activity, for example

Parkrun is a simple concept creating opportunities for people to become more active. It invites people of all ages to turn up every Saturday and run 5km, or if you're a junior there is a 2km run every Sunday. For more information visit www.parkrun.ie

GAA Healthy Clubs aims to transform GAA clubs into health-enhancing hubs for their communities. For more information visit www. gaa.ie

There are 26 Sli na Slainte routes across the South East Region, 7 of these are on HSE campuses. For a full list of routes please go to www.irishheart.ie.

Over 30 HSE staff from across the South East participated in Walking Leader and Active @ Work Training to develop and deliver a suite of Active Work Initiatives within HSE Worksites and to support existing initiatives such as Sli na Slainte, Love Life, Love Walking and the Steps to Health Challenge.

CarePALs training aims to empower those working in day and residential care settings to lead suitable physical activities with older



people who live in or visit these settings.

Men on the Move (MoM) is a wellness programme with a primary focus on physical activity. The purpose of this programme is to use physical activity as a hook to engage men in making improvements to their health.



Active School Flag (ASF) is awarded to schools that achieve a physically educated and physically active school community. It aims to get more schools, more active, more often.

HSE Community Games Steps to Health aims to promote and encourage community participation in a fun, active and healthy environment within local communities.





3.4 Mental Health and Wellbeing



Strengthening Communities

Reducing Structural Barriers

Figure 9: Framework for Mental Health

The World Health Organisation places mental health firmly on the European agenda citing its wide ranging influence on overall quality of life and prosperity:

"Mental health and mental wellbeing are fundamental to the quality of life and productivity of individuals, families, communities and nations, enabling people to experience life as meaningful and to be creative and active citizens."

The vision of Healthy Ireland is to create a society where: 'everyone can enjoy physical and mental health and wellbeing to their full potential; where wellbeing is valued and supported at every level of society and is everyone's responsibility'.

3.4.1 Mental Health Promotion

Mental health promotion focuses on promoting well-being among all age groups in the general population as well as addressing the needs of people at risk from, or experiencing, mental health difficulties.

It is important to recognise that everyone has mental health needs, whether or not they have a diagnosis of mental ill health. Mental health promotion focuses on strengthening the protective factors that enhance well-being and a person's quality of life, along with the early intervention and prevention of mental health problems. Our goal is to build on psychological strengths and resilience in order

to achieve well-being and positive mental health.

3.4.2 Connecting for Life



Connecting for Life is Ireland's National Strategy to Reduce Suicide 2015-2020. The Vision of Connecting for Life is an Ireland where fewer lives are lost through suicide and where communities and individuals are empowered to improve their mental health and wellbeing.

The strategy has seven strategic goals that are reflective of the goals in the SECH Healthy Ireland Plan, these are:

- 1. Better understanding of suicidal behaviour
- 2. Supported communities
- 3. Targeted approaches for those that are more vulnerable
- 4. Improved access, consistency and integration of services
- 5. Safe and high quality services
- 6. Reduced access to means
- 7. Better data and research

We have a range of mental health promotion initiatives running within SECH such as:

Children & Young People

Zippy's Friends (5-7 year olds); Mindout (Transition year and out of school youth); Introduction to Youth and Minding Youth Mental Health training in partnership with Jigsaw; Children's and Young Persons Services Committees – Mental Health Sub-groups.

Men

Engage Men's Health Training; The Men's Health Network provides community interventions and parenting programme focused on enabling individuals and families to identify issues that are impacting negatively on their lives so that they can begin to take steps towards addressing these issues.

Traveller Health

A Wellbeing Check-in Tool for Traveller Health Projects has been developed by the Traveller Health Unit; We have a dedicated Traveller Mental Health Liaison Nurse based in Carlow/Kilkenny.

Staff

Mind Your Well Being is a programme which we deliver to health and social care staff; We also provide Staff Resilience Training such as Managing Workplace Challenges.

Wider Community

In Waterford there is a Social Prescribing project currently being piloted. Connecting for Life local suicide prevention action plans are being implemented across the five counties and the Little Things Mental Health Promotion Campaign and associated workshops are also being supported across the five counties.

Local Partnerships

We are part of a number of Interagency Mental Health Networks e.g. Carlow Mental Health Association; Link-Up Waterford, STAN in South Tipperay and Life Link in Kilkenny. We are supporting the implementation of LCDC Healthy County Plans and LCDC and CYPSC Healthy Ireland funded Wellbeing and Mental Health actions.

3.5 Positive Ageing

Ageing is not an illness. The factors that determine healthy ageing are rooted in the life course.

The Irish population aged 65+ is growing by approximately 20,000 each year. Evidence shows that it is possible to live longer with a good quality of life by developing healthy lifestyles and social capital in our families, communities and society.

3.5.1 Programmes supporting positive ageing in the SECH

Age Friendly City and Counties is a World Health Organisation initiative which has stakeholders in cities and counties across the globe working together to make their communities better places to grow older, through working on outdoor spaces and building, transportation, housing, respect and social inclusion, social participation, communication and information, civic participation and employment, community support and health services.

All five counties in the South East are involved in the Age Friendly Counties
Programme and have strategies to address specific themes across each county.

Local Healthy & Positive Ageing initiative (HAPAi) surveys commissioned for Kilkenny, Tipperary and Wexford have been completed. These surveys were funded through a partnership between the Local Authorities, HSE, The Atlantic Philanthropies, Age Friendly Ireland initiative, and the Department of Health. The local findings will help to form a baseline to measure the health of the older population and to plan for any challenges ahead. A scaled back version of this survey

was used as part of the public consultation for Carlow Age Friendly County Strategy.

A positive development in SECH has been the implementation of the Integrated Care Programme for Older Persons (ICPOP) in Waterford. In addition, work is progressing on developing ICPOP in South Tipperary, Kilkenny and Wexford. The objective of ICPOP is to improve the quality of life for older people by providing access to integrated care and supporting them to live well in their own homes and communities.

The GEMS (Geriatric Emergency Medicine Service) at St. Luke's Hospital is a service which ensures that all patients over 75 years that present to the hospital as an emergency are assessed for frailty. Patients who are frail, receive a Comprehensive Geriatric Assessment and are reviewed by a member of the GEMS team and a Consultant Geriatrician.

South Tipperary has won a gold star award for its innovative **Five Steps to Living Well with Dementia Programme**.

Other Initiatives include:

- » Intensive home care package.
- » Dimentia cafe
- » Memory clinics
- » Occupational Therapy Musculoskeletal Clinics
- » Living Well Programme
- » Go for Life (Age & Opportunity)

3.6 Alcohol

We know alcohol causes enormous harm to the drinker's health and mental wellbeing. It also is an enormous cost to our society, to our health service. It is responsible for cancers, heart disease, injuries, relationship problems and exacerbates mental health conditions. In 2012, the National Substance Misuse Strategy Report set an aim to reduce the consumption of alcohol in Ireland to 9.1 litres per person per annum by 2020 (OECH average). Currently Ireland has a high level of alcohol consumption, above average of 1.4 litres per person per annum.

Building on this the Government developed it's National Strategy "Reducing Harm, Supporting Recovery, A health-led response to drug and alcohol use in Ireland 2017-2025". It aims to provide an integrated public health approach to substance misuse. In line with these and the Ask About Alcohol Campaign our HI plan aims to:

- » Let people know more about how alcohol harms our health and mental wellbeing.
- » Provide people with trusted facts from the
- » Support people who would like to reduce their consumption.
- » Signpost people to the supports and services that they need.
- » Support planned legislation that will reduce consumption and harm.

The Southeast has been to the fore in the development and delivery of brief intervention training for substance misuse and developed the SAOR Screening and Brief Intervention training for problem alcohol and substance misuse. The SAOR model was adopted and developed further by the National Social Inclusion division. It is complementary to the national model Making Every Contact Count (MECC) Programme. When implemented MECC will play a central role in enabling

positive behavioural change to support healthier lifestyles.





3.7 Tobacco

Tobacco use is the leading cause of preventable death in Ireland with 5,500 smokers dying each year from tobacco related diseases. Tobacco Free Ireland is our National policy on tobacco control and has set a target for Ireland to be smoke free (i.e. have a smoking prevalence of <5%) by 2025.

There is a national Quit service in place run by the HSE. This provides support to people who want to stop smoking .The Quit team is available on Freephone 1800 201 203. This takes potential quitters into a menu of resources available both online or face-to-face. Click here to see a video designed for the Healthy Waterford Initiative.

Ireland as a whole has made incredible progress in this area. In 2018, the national smoking prevalence for Ireland was 20% of the population which is a significant reduction from before the smoking ban came into place.

However, within some sectors in the Southeast prevalence is much higher, particularly in "out of school" settings, such as youthreach.

In 2018, a regional Tabacco free positive messaging campaign was rolled out in partnership with Local Community Development Partnership and Youth Organisations.

This initiative set out to implement evidence-based programmes in youth settings, for example the Irish Cancer Society X-hale programme and to develop youth designed positive messaging to support the Quit campaign.









3.8 Sexual Health Promotion

The National Sexual Health Strategy 2015
-2020 vision is that everyone in Ireland
experiences positive sexual health and
wellbeing and has access to high quality
sexual health information, education and
services throughout their life. The Strategy
highlightes the importance of developing
healthy attitudes to sexuality throughout
childhood and adolescence. It builds on this
as a foundation for positive sexual health and
wellbeing into adulthood and older age.

Sexual Health Promotion in the South East has a strong history in training and development. In November 2018, we brought together national, regional and local leaders in the area of positive sexual health. The following graphic highlights national and regional prevalance of STIs and the supports available to promote positive sexual health in the South East.



3.9 Staff Health and Wellbeing

Key to the delivery of a high quality, safe and effective health service is a happy and healthy workforce. Our employees have a direct impact on the health outcomes and the experience of our service users. We know that when staff are feeling well and satisfied with their work, the experience of our service users improves. We are committed to adopting measures to support health and wellbeing in the workplace for all staff. As an employer, we value our staff and in challenging times, our staff have shown innovation, resilience and commitment which we are very proud of as an organisation.

The HSE's Corporate Plan highlights the need to promote personal health and wellbeing among staff. The HSE People Strategy commits to the development of a Staff Health and Wellbeing Strategy. In addition, work is advancing in the Department of Health to ensure, through legislation, the mandatory development of supports to improve employee health and wellbeing through its Healthy Workplace Framework.

The HSE's 'Healthy Ireland in the Health Services' National implementation plan includes improving staff health and wellbeing as one of it's three key priorities. We intend to maximise the priority placed on Staff Health and Wellbeing and we will support staff to improve their Health and Wellbeing over the coming years.

We have established a HI sub-group which supports the development of initiatives to enhance the health and wellbeing of our staff.







3.10 Environmental Health Service

The HSE Environmental Health Service (EHS) supports the health and wellbeing of people living in the South East. It is a national service, with it's primary function as a regulatory inspectorate.

HSE Environmental Health Service (EHS)

Infectious Disease Investigation Sunbed Use

Cosmetic Product Safety

Environmental Impact Assessment Developments

estigation Drinkin

Drinking Water Supplies

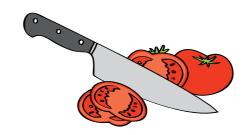
Food Safety

Tobacco Control

Figure 10: HSE Environmental Health Service functions

3.10.1 Food Safety

The main area of work of the EHS is to ensure that food business operators meet their responsibility for the production of safe food. The EHS supervises over 45,000 food businesses who are involved in a wide range of activities. This is approximately 96% of food businesses in Ireland.



3.10.3 Drinking Water Quality

The EHS investigates cases of suspected water borne illnesses and drinking water incidents. The Service is also responsible for overseeing the fluoridation of public water supplies which is critical to good dental health.

These functions involve activities such as inspection, sampling and enforcement. Many of these functions are delivered in collaboration with other HSE departments or state agencies.



3.10.2 Tobacco Control

The EHS enforces a range of legislative provisions which govern smoking in the workplace, restrictions on the sale and marketing of tobacco products and the prohibition on sales of tobacco to minors. The Service has alsobeen involved in the enforcement of controls on 'e-cigarettes'.



3.11 Chronic Conditions

The South East has a growing older population with an increase of +7,522 of those aged 65-74 years in the last census. Our health service is beginning to feel the impact from increases in presentations for long term chronic diseases such as diabetes, cardiovascular, COPD and asthma.

We know that 49% of Irish people over 50 years have 1 chronic disease and 18% have more than 1 chronic disease. The major chronic diseases: diabetes, cardiovascular and respiratory disease will increase by over 20% -30% in the next 5 years.

In order to support this, we have begun to implement the Integrated Care Programme for Prevention and Management of Chronic Disease.

This aim of this programme is to:

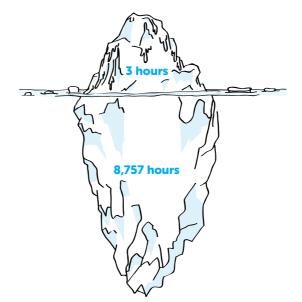
- » Prevent Chronic Disease by engaging patients in health behaviour change.
- » Provide a system of care for patients with chronic disease in their community coordinated with hospital services.
- » Develop a comprehensive spectrum of services in the community, supporting General Practice.
- » Empower patients to self-care and manage their condition.

3.11.1 Self-Management Support for Chronic Disease

There are at least 108,738 reasons in SECH to improve the way we support people with long term health care conditions such as asthma, diabetes, COPD, and Cardiovascular disease. 108,738 is the estimated number of people living with at least one of these four major long term health care conditions every day in the South East.

Healthcare provided by professionals represents just the 'tip of the iceberg' in supporting patients with long term health conditions. The majority of care is provided and coordinated by the person themselves with the support of family members and carers, at home and in the community.

Self- management support is the education and support available to people with chronic conditions and their families to help them understand their central role in managing their illness, make informed decisions about care,



and engage in healthy behaviours. Examples of self- management support include supports provided in groups such as cardiac rehab, pulmonary rehab, diabetes structured education, peer support groups, community cooking programs and those provided one to one such as regular clinical review from health and social care professionals and extra support such as smoking cessation services and social prescribing. Self-Management support is evidenced based to avoid GP and hospital attendances

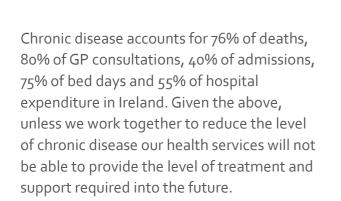
"Living well with a chronic condition: Framework for Self- Management Support" is the National framework and implementation plan for Self-Management support for chronic conditions: COPD,

Asthma, Diabetes and Cardiovascular disease. It was launched in November 2017. It sets out a whole system approach to implementation. A Self- Management Support Coordinator for chronic conditions was appointed to each health care area in December 2017.

The role of the Self-Management support coordinator is to support the awareness and development of Self-Management support services in the South East. A key outcome is the mapping of current Self-Management supports in the South East. This information is being used to advocate for service development and also to inform an online directory. An interim excel directory will be available in early 2019 to support health and social care professionals signpost people with a chronic condition to appropriate supports. It will also assist signposting as part of making every contact count.

The vision for successful self- management support for chronic disease is person centred co-ordinated care

"Person centred co-ordinated care provides me with access to and continuity in the services I need when and where I need them. It is underpinned by a complete assessment of my life and my world combined with the information and support I need. It respects my choices, building care around me and those involved in my care"





3.12 Making Every Contact Count Programme (MECC)

Healthcare professionals have millions of contacts each year with their patients. The Making Every Contact Count programme is about supporting these frontline healthcare professionals to use each of these contacts to improve the health and wellbeing of their patients.

The programme is about integrating health behaviour change interventions into routine clinical care. It is about enabling healthcare professionals to recognise the role and opportunities they have to raise the issue of lifestyle behaviour change with their patients and to do this in a supportive way.

The initial focus of the Making Every Contact Count programme will be on the four main lifestyle risk factors for chronic disease: tobacco use, harmful alcohol consumption, physical inactivity and unhealthy eating.



The vision for Making Every Contact Count is that every frontline healthcare professional will be trained to a level that will enable him/ her to carry out a brief intervention with their patients in all of these topic areas.

These interventions will be incorporated into individual care plans and built upon to support sustainable behavioural change to take place. The diagram below provides an overview of the model for Making Every Contact Count in the Health Service.

For further information on this programme please check out:

www.makingeverycontactcount.ie

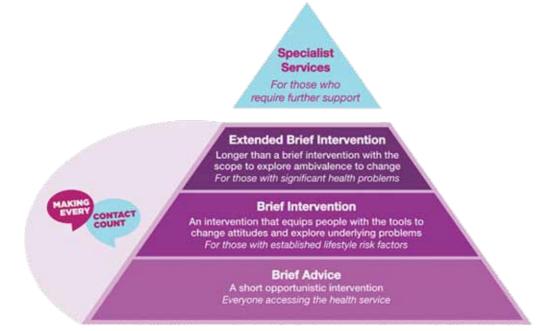


Figure 11: HSE Making Every Contact Count model

4. Population Profile of South East Community Healthcare (SECH)



4. Population Profile of South East Community Healthcare (SECH)

The following is a brief profile of the population living in the South East. According to the 2016 Census, the total population of SECH is 510,333 people, which represents a net increase of 12,755 (+2.6%) since 2011.

The greatest increases were in the older age groups, particularly those aged 65-74 (+7,522). The greatest decreases were in the younger age groups, particularly those aged 25-34 years (-11,447). In SECH, just over 21,000 people are carers' and over 74,000 people have self-reported a disability. Comparison of the population of SECH to the general lrish population shows that the proportion of age groups in SECH is similar to the national picture.

PUT IN POP GRAPHS

4.1 Minority Groups

Compared to National figures, the population of the South-East has a slightly higher proportion of Irish people (88.6% versus 85.7%). The largest migrant group is Polish with a population of over 13,000 (2.6% of the total population). Some groups have grown in size since the last Census in 2011; Irish (+2.8%), Elsewhere in the EU (+21.1%) and Visitors/Not stated (+20.4%). The numbers of UK (-7.9%) and Lithuanian migrants (-4.8%) has fallen since 2011, whilst the numbers of Polish migrants (+0.7) has slightly increased. Overall, these changes mean that the non-Irish population has increased by 243 people since 2011, and the makeup of that population has changed somewhat. We are conscious that these new communities may have particular health needs and many need support in accessing services.

4.1.1 ROMA Communities

Roma are an ethnic minority group.

Nationally, the Traveller Roma Inclusion

Strategy 2017 -2021 provides the roadmap
for Roma inclusion in Irish society. There are
approximately 650 Roma living in the South
East with over 400 living in Co. Wexford. The
majority of this population are Romanian
Nationals and EU Citizens. The Roma Health
Advocacy Projects in Wexford and Waterford
are funded and supported by HSE Social
Inclusion.

4.1.2 Traveller Population

A similar percentage of the population in the South East are Travellers (0.7%) compared to the National average (0.7%). Nearly four thousand (3,728) live in SECH, which is approximately 12% of the national Traveller population (30,987). The Traveller population have a shorter life expectancy than the general population, over 11 years shorter for Traveller women and 15 years shorter for Traveller men (Traveller Report 2014). Worryingly, this leads to a mortality rate far greater than the general population (three times greater for Traveller women and four times greater for Traveller men).

Community Traveller Health Projects are funded by the HSE Social Inclusion Department. These employ Traveller Health



Workers to deliver targeted key health messages and signposting advice directly to their own community. Traveller Men's Health Projects are also funded by the Social Inclusion Department. They deliver Men's health initiatives such as Men's Sheds which are accessible to men of all ages. This give an opportunity to receive health advice, get involved in healthy initiatives and learn about what health services are available.

The Traveller Health Projects have a specific responsibility to support Health Promotion in the area of Cardiovascular Health, Type 2 Diabetes and Mental Health and Wellbeing in the South East. This is particularly important to us as the All Ireland Traveller Health Study 2010 evidence is that Travellers are more likely to die from heart disease, stroke and cancer. Suicide accounts for 11% of death in the Traveller Community, with Traveller men almost 7 times more likely to die by suicide than their settled counterparts.

4.1.3 Refugees

The Irish government has committed to accepting an initial 4,000 people into Ireland under the Irish Refugee Protection Programme (IRPP). Refugees arriving via this programme are primarily from Syria, with a small number originating from Iraq. In December 2015, an Emergency Reception and Orientation Centres (EROC) was opened in SECH.

Refugee resettlement programmes are now in place in Waterford, Wexford, Carlow and Kilkenny. We provide an "In-reach Primary Healthcare Model". We developed this from our learning in providing healthcare education and support within the EROC. This model includes a Health Education Toolkit. Programme refugees living in EROC are provided with translated materials regarding

health orientation (information and access), Healthy Eating / Diet, Information about Exercise, Over the Counter Medication, Self Care (colds and flu etc) based on "Under the Weather.ie" and trauma information and education.



4.1.4 Asylum Seekers

SECH has five Direct Provision Centers (DPC); two in Waterford City, two in Tramore, Co Waterford and one in Carrick-on-Suir, Co. Tipperary. The total number of asylum seekers in SECH can be greater than 500 plus people at any one time, each with varying health needs. In partnership with voluntary agencies, we have developed a Model of Intercultural Health Advocacy which provides health information and supports access to health services for Asylum Seekers, our Roma Communities and the Refugee population within the region. The tools developed for programme refugees are also made available to asylum seekers through the health outreach workers for individuals and families living in the five Direct Provision Centres.

4.2 Disadvantaged Groups

Those who are most disadvantaged are more likely to have risk factors associated

with the development of chronic diseases
(e.g. smoking, addictions), and to develop a
chronic disease, be limited by it, and
to die prematurely. Across the South
East there are 149,740 people
characterized as disadvantaged,
very disadvantaged or extremely
disadvantaged. There are
obvious pockets of deprivation,
particularly within areas such as
Waterford city, but deprivation

is also evident across rural areas, where it can have an even greater impact due to there being less access to services.

Overall in our area, 8,615 people rate their health as bad or very bad. This is 1.7% of our South East population which is a little better than national figure (3%). Worryingly, the numbers who report such poor health has increased since 2011 by nearly 10% or 755 people.

4.3 People Experiencing Homelessness

Homelessness is becoming an increasing issue in Ireland and the South East is no exception. Homelessness affects men, women and children. We are seeing an increase in the complexity of need of people who are presenting as homeless. Substance misuse and mental health can be affected by or exacerbated by people experiencing homelessness. These can be particularly prevalent amongst those who are rough sleeping. Tackling these problems requires a joined up approach between the local authorities, the HSE, emergency homeless accommodation and increasingly the Gardai, particularly in Waterford where they have a Vulnerable Persons Unit.

Social Inclusion have developed good working

arrangements with their partner agencies which enables us to align our resources for the benefit of the person at risk of/or experiencing homelessness. The focus of our services is on improving people's health status. This is done through using a case management approach. Homeless agencies are funded by the HSE to employ project workers within emergency accommodation. These staff work with people who are accessing their services to identify their needs, facilitate their application for medical cards and link them into primary health care services, substance misuse services, mental health and other services as necessary, with the ultimate aim of supporting the person to move out of homelessness and into stable accommodation with support appropriate to their needs.

As Waterford is the area with greatest need the HSE also funds a homeless specific outreach worker and a community mental health nurse.

4.4 Disabilities

Over three thousand people in SECH are registered as having an intellectual disability (3,572) and over two thousand five hundred people in the South East are registered as having a physical or sensory disability (2,671).



hospitalised last season. 1 in 2 of these were children.

36% of our flu cases in the South East were

45 people died of flu-related illness in the South East last year.

Our aim in the South East is to create greater awareness of the impact of the Flu and to continue to increase the uptake of staff influenza vaccine and to grow this percentage on an annual basis.



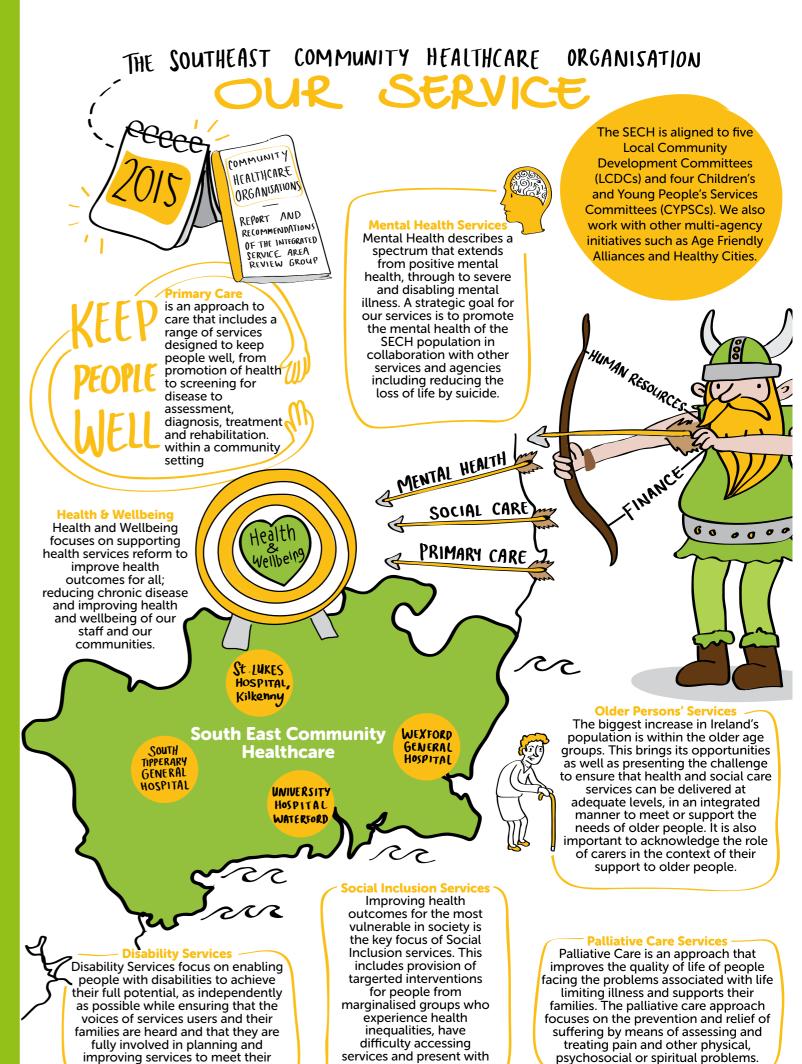
4.5 Staff Influenza Vaccination Programme

Approximately 200-500 Irish people will die each year because of flu. Most of these deaths occur in the elderly or those with underlying illness but between 10-25% of people admitted to ICU in Ireland with lab confirmed flu each year are healthy people with no underlying illness. 85% of those admitted to ICU were under 65 years. In the 2017/2018 flu season, 1,899 cases of flu were confirmed in the South East. Of these, 1 in 4 were children less than 10 years of age and 56 related to children aged under 1 year.



5. Our Service





multiple, complex health

and support needs.

needs.

6. Our Staff



THE SOUTHEAST COMMUNITY HEALTHCARE ORGANISATION OUR STAFF



Our Staff

The Health Service employs over 110,000 staff and here in the SECH we have over 5,200. A healthy staff can enhance the health and wellbeing of their families, who in turn can enhance the health and wellbeing of their communities. Studies have shown that where health care staff are happy, healthy and well, less patients die.

arts and culture among staff, to provide a proactive occupational health service and to ensure managers adhere to good employment practices.

A healthy workforce can be defined as:

- » A healthier, happier workforce
- » Motivated employees with increased morale
- » Employee retention and lower employee turnover
- » Reduced sickness absence
- » Good employee/management relations

A healthy workplace can be defined as:

- » A positive image in the eyes of both employees and service users
- » A place where health risks are recognised and managed if they cannot be removed
- » A place where work design is compatible with people's health needs and limitations
- » An environment that supports the promotion of healthy lifestyles
- » A place where employees and employers recognise their responsibility for their health and the health of colleagues.

The SECH encourages and supports staff to become health and wellbeing champions not only for their own benefit but also for others in their workplaces and communities. It is important that staff work in an environment that promotes opportunities to encourage and enable them to lead healthy lives and make choices that support their wellbeing. This includes encouraging staff to adopt healthy eating habits, to quit smoking, to increase their levels of physical activity, to promote

Feedback from staff highlighted that ensuring respect, promoting a positive atmosphere, valuing our staff and providing strong leadership are what is required to support a healthy workforce.

The HSE conducted the National Staff Surveys 'Your Opinion Counts' in 2014, 2016 and 2018. The aim of the surveys was to assess staff opinions in order to identify opportunities for improvement, which will help build "a better health service for all".

Further to the feedback from these national surveys and our south east consultation sessions, the HSE has increased its investment in improving health and wellbeing of our staff. HSE policy development for healthier environments has begun with supporting tobacco free campuses, physical activity engagement incentives, healthier vending and calorie posting. Many HSE worksites have taken a proactive approach to build on these through a variety of initiatives that focus on staff health and wellbeing.

6.1 HR Staff Survey (CN)

Funding for staff health and wellbeing initiatives was privided through Health and Wellbeing since 2016. This has facilitated a number of staff health and wellbeing initiatives set out on page 45.

6.2 Human Resources

Nationally, the Human Resource Service has developed a designated website for all health care workers to access dedicated information and resources relating to health and wellbeing. This website www.workwell.ie will be promoted throughout the SECH.

The HSE has endorsed the Work Positive psychosocial risk management tool to proactively identify and measure psychosocial risk in our organisation. We will be piloting this tool in the South East in 2019.

In summary the SECH has responded positively to staff feedback for health checks, funding staff health and wellbeing initiatives and supporting staff to engage with physical activity in their workplaces through events such as 'Love Life Love Walking' and the Healthy Steps Challenges. However, the information from the consultation sessions and the HSE national staff surveys highlights the need to continue to build on and increase health and wellbeing initiatives and to build a supportive culture and environment for those working within SECH. An increased focus on staff health and wellbeing will also provide us with an opportunity to influence the messages that go out from the HSE to families and communities.

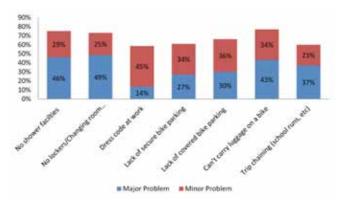


Figure 13: Barriers preventing staff cycling to work







Figure 14: Workplace Health & Wellbeing unit's Work Well framework

7.

Developing our Healthy Ireland Implementation Plan



This chapter outlines the steps that were taken to develop the our HI Implementation Plan. Our first step was to establish a Healthy Ireland Steering Group to guide the development of the plan and ensure that the process was inclusive and representative of all care groups.

7.1 Healthy Ireland Steering Group

The first meeting of the SECH Healthy Ireland steering group took place on 26th May 2017. The steering group was established to provide governance and direction to the development of the Healthy Ireland plan and its implementation in Carlow, Kilkenny, Wexford, Waterford and South Tipperary. Membership of the steering group includes representatives from each care group. A project plan was developed and an introductory Workshop for SECH HI Steering Group was facilitated to allow key stakeholders to set context and outline the process for the development of the implementation plan.

It was agreed that SECH would undertake a mapping or AS IS of existing services/ initiatives to form a base line of services and supports currently in place. This mapping took place in Q₃ and Q₄ 2017.

The SECH HI Steering Group developed a comprehensive consultation and engagement process as part of the development of the HI Implementation Plan. This consultation built on the previous staff engagement sessions. In addition, opportunities to link with LCDCs for broader consultation with the public was conducted. For example, a joint Local Authority SECH and the Mid-West town hall style consultation sessions across County

Tipperary and included Age Friendly, Disability and Healthy Ireland Plans. Consultation also took place with existing healthy cities structures within SECH ie Waterford. National guidance on the development of our local HI Implementation Plan was also available throughout this process.

On completion of this work a separate staff consultation and AS IS report was developed and both are available from the SECH Health and Wellbeing office (email healthandwellbeing@CHO5@hse.ie)

7.2 Governance

Promoting health and wellbeing offers individuals increased opportunities for health attainment and wellness as well as contributing to increased life expectancy and improved quality of life. The actions in this plan have been provided under a twelve pronged model of care. This model provides the roadmap to deliver on the strategic priorities as set out in the National Healthy Ireland Framework.

The Head of Health and Wellbeing, is the senior lead for the Health Ireland Plan. A Healthy Ireland Implementation Group, representative of each care group, will be established to provide direction and quidance to the implementation of this plan. Given the challenges of the SECH and cognisant of the pressures of operational service delivery, a number of approaches will be adopted to progress implementation of this plan. In the first instance, SECH wide governance structures will be established to provide leadership and advice for the overarching elements of this plan and those of which need to be embedded in an integrated fashion across the SECH. The adoption of a project management approach to achieve actions of

graph

a defined nature contained in this plan will be agreed and work will be undertaken with the SECH Project Management Lead to stage the implementation of projects over the lifetime of this plan.

While the projects will have defined aims and objectives, it will be important that these are owned and maintained within the operational service delivery areas. Hence, the existing care group governance structures will be utilised to ensure that these projects are embedded in the respective service areas with health and wellbeing actions and targets outlined in annual operational plans over the five year duration of this plan. Staff within local service areas will be encouraged to take lead roles in local projects.

Progress on the implementation of projects relating to the Target model of care will be reported to the SECH Healthy Ireland Implementation Steering Group. In turn, overall progress on the implementation of the Healthy Ireland plan will be incorporated into routine reports to the SECH senior governance



7.4 Research & Health Intelligence

Health profiles are designed to help local government and health services identify problems in their areas and decide how to tackle them. They provide a snapshot of the overall health of the local population, and highlight potential problems through comparison with other areas and with the national average. The profiles draw together information to present a picture of health in each local area in a user friendly format. They are a valuable tool for local health services in helping us to understand our communities' needs, so that we can work to improve people's health and reduce health inequalities.

We will continue to work closely with our Public Health colleagues to examine the region's health profiles to understand our population and to explore how our services need to respond to meet the needs of the population now and in the future.

We are aware of the financially challenging environment in which we operate and have tried to ensure that where possible the number of actions dependent on new resources was limited. While many of the actions can be achieved within existing resources, it is acknowledged that it will be challenging to achieve a number of the actions, in particular those that require the release of staff for training programmes eg Making Every Contact Count.

We recognise that these actions are required in the medium to long term to alleviate the pressures on the health service as a result of the increasing incidence of chronic diseases associated with lifestyle factors. There is a need to change the way we focus our resources and interact with our services

users so that prevention becomes a part of everything we do if we are to successfully address the challenge of chronic disease.

7.5 Strengthening Partnerships

Key to the achievement of the Healthy Ireland framework is the strengthening of partnerships and the creation of conditions for effective inter-agency collaboration. Healthy Ireland provides a shared vision and this means we need to work together in a meaningful way to address the challenges presented by the wider determinants of health. Each statutory, community and voluntary agency has something to offer and the SECH will work with our partners to achieve the objectives of our Healthy Ireland plan. In addition, we will ensure that the HSE is represented and supported on the multi-agency structures which have been developed to ensure more co-ordinated and joined up approaches to local and community development such as the Local Community Development Committees (LCDCs), the CYPSCs (Children's and Young Persons Services Committees), Healthy Cities and Counties and Age Friendly Alliances etc. We will advocate for the targeting of community development and Healthy Ireland funding to initiatives that enhance the quality of life and wellbeing of communities, that support the building of capacity of local communities to improve their quality of life and that make the best use of existing local assets, strengths and opportunities.



8. Action Plan



Healthy Childhood

No.	Key Objective	Action	Completion Date	Lead
HC1	To strengthen the leadership of child health provision	 Establish a regional child health committee and maintain and monitor activities Strengthen child health services across the region Support the implementation of the Framework for the National Healthy Childhood Programme, including the Nurture – Infant Health & Wellbeing Programme Staff with specific expertise will be released to facilitate the implementation of the National Healthy Childhood Programme, including the Nurture Programme 	2019 Review end of 2020 ongoing ongoing ongoing	HoS Primary Care & HoS Health & Wellbeing All HoS HoS Health & Wellbeing
HC ₂	To support a skilled workforce (primarily PHNs, CMDs and PNs) in the delivery of Best Health for Children/ The Healthy Childhood Programme	 Support staff as appropriate to attend specific training including facilitating them to complete the online Nutrition training e-learning module and face to face training. Facilitate staff as appropriate to undertake future e-learning training in relation to child health as specified under the Nurture and Healthy Childhood programmes Enable staff to undertake training by providing access to required ICT resources and facilitate staff to complete the relevant training modules 	2019 Review in 2020 ongoing ongoing "The eyears la lifetim	ast a

No.	Key Objective	Action	Completion Date	Lead
HC ₃	To promote breastfeeding, provide support and address barriers for all women least likely to breastfeed.	 Support the delivery of the relevant actions from the Breastfeeding Action Plan. Implement the Breastfeeding Policy for Primary Care Teams and Community Health Care Setting. Strive to achieve the breastfeeding KPI targets, including sharing relevant data with teams. Provide staff with the required time to undertake and update the relevant breastfeeding training. Provide information on breastfeeding to all pregnant women as part of the new antenatal contact. Work with Primary Care and acute services to develop a model for breastfeeding support in SECH. Promote breastfeeding in partnership with the national campaign 'Every Breastfeed Makes a Difference' and develop and support community based breastfeeding support groups (PHN led and peerto-peer) 	Ongoing Ongoing Ongoing Ongoing 2020 ongoing	HoS Primary Care & HoS Health & Wellbeing HoS Primary Care HoS Primary Care HoS Primary Care HoS Primary Care All HoS All HoS
HC4	To promote access to parenting support across the region	 Review/map availability of parenting course in SECH and to develop a directory of parenting courses available in SECH Consult with TULSA and other relevant community and voluntary organisations regarding capacity and resources to provide parenting courses in SECH To support the provision of an universally accessible evidence based parenting programme (note funding dependent) 	2019 2019 2020	Health & Wellbeing with Primary Care & Tusla & CYPSC Health & Wellbeing

Healthy Childhood continued

No.	Key Objective	Action	Completion Date	Lead
HC4 Cont	To promote access to parenting support across the region	 Ensure staff are aware of the local and regional availability of parenting supports i.e. parent & toddler groups and to provide appropriate information on parenting at each child health contact. Provide additional support for parents/families identified with greater need such as minority groups, groups at risk of health inequalities, disabilities and specific needs. 	ongoing	Primary Care Health & Wellbeing
HC ₅	To share Good Practice in relation to Healthy Childhood.	 To develop and deliver on a communication plan for child health initiatives in SECH Hosting of bi-annual Healthy Childhood seminars to share good practice and continue to release staff, with specific expertise, to input into the seminars Support local good practice 	2019 onwards ongoing	Comms & Health & Wellbeing HoS Health & Wellbeing
HC6	To promote partnership working	 Enhance interagency working across services to ensure best outcome for children and reduce gaps and/or duplication of services Collaborate with hospital paediatric services to maximise opportunities for making every contact count from early childhood Work with key personnel in Primary Care and Hospital Groups to identify pathways to additional services as required 	2020 onwards 2019 ongoing	HoS Health & Wellebing / Primary Care Acute Services CYPSC LCDC HoS Health & Wellbeing/ Primary Care

No.	Key Objective	Action	Completion Date	Lead
HC ₇	To support schools in promoting health and wellbeing.	Support schools to develop health and wellbeing action plans and provide health and wellbeing training to teachers on a range of topics agreed annually with the Department of Education and Skills.	2019 onwards	HP&I HP&I
HC8	To make every contact count by developing a workforce that is trained and supported to deliver healthy childhood initiatives	 Facilitate staff to complete the relevant training in child health modules such as: Making Every Contact Count Children First Training Breastfeeding training Nutrition blended e-learning training (as part of nurture programme) Multi-level training to promote Infant Mental Health (as part of the Nurture Programme) Substance Misuse & Pregnancy training programme being codeveloped with NMPDU/RCNME and Substance Misuse 	Ongoing	All HoS & HP&I
HC9	To ensure clear referral pathways for children to health services	 Roll out child health pathway as they are developed and agreed within the SECH. Roll out child mental health pathway document across the SECH. Implement the National Access policy Kathleen to provide exact wording 	2019 review in 2021 when developed	Management Team HoS PC, SC & MH

Healthy Eating Active Living

No.	Key Objective	Action	Completion Date	Lead
HEAL 1	To reduce obesity levels & promote positive health	Support the delivery of Community Nutrition and Cookery Programmes across the SECH in partnership with the community and voluntary	Ongoing	PC & HWB
	and wellbeing through the promotion of healthy eating and increased physical activity levels.	 organisations and LCDC's and CYPSC Support the Sports Partnership to deliver physical activity programmes for both targeted and the general public such as: Men on the Move, Get The Ball Rolling on your Health and Wellbeing, The 'Operation Transformation' Pilot Programme 	Ongoing	Ho H&W HP & I
		Link with county GAA's Health and Wellbeing Committees to support the implementation of the Healthy Club across the region.	2019	Ho H&W HP & I
		 Explore possibility of links with other sporting organisations such as Rugby, Camogie, Soccer etc to support healthy eating and active living 	2020	Ho H&W HP & I
		Support the dissemination of infant and child nutrition information including the START programme	ongoing	All HoS
		Support the implementation of Healthy Weight for Children Prevention Programme,	ongoing	All HoS
		Support the implementation of the Food and Nutrition Guidelines for Toddlers and Preschoolers.	When de- veloped	All HoS
		 To continue to further develop weaning clinics Support LCDC & CYPSC HI Fund 	ongoing	HO primary care
		to deliver programmes in : Healthy Eating/Nutrition programmes, Physical activity (Buntús Start programme) including young people with an Intellectual and/or Learning Disability	ongoing	HO Health & Wellbeing

No.	Key Objective	Action	Completion Date	Lead
HEAL 2	To implement HEAL across SECH	 Implement the HSE Healthier Vending policy across the health services Implement the HSE Calorie Posting policy across the health service Implement the clinical guidelines for management of malnutrition and nutrition and food policy (in development) in older peoples, disability and mental health services. Deliver structured patient education programmes for type 2 diabetes. Embed the integrated model of weight management services for adults and children across primary and acute care Support the national communications and social marketing strategy Support the dissemination of infant and child nutrition information 	Ongoing 2020 When developed Ongoing Ongoing Ongoing	All HoS All HoS All HoS HP&I/ Primary Care Dietetics Ho Primary Care All HoS communications All HoS

Making Every Contact Count

No.	Key Objective	Action	Completion Date	Lead
MC1	Communication and awareness raising of the programme	 Support the implementation of the National Making Every Contact Count communication plan at local level Identify and develop a number of learning sites for the MECC programme throughout the SECH. Support the roll out of the Making Every Contact Count programme by commencing implementation in our learning sites and including this in our operational plans Develop a local implementation plan Making Every Contact Count throughout the SECH using the proposed national implementation 	2019 on- wards 2019 2019 on- wards	H&WB/Communications All HoS All HoS
MC2	MECCTraining	 Provide healthcare professionals with access to the National blended learning MECC training programme Implement the MECC minimum dataset tool across services in the SECH to record information on patients' lifestyle risk factors and behaviour change interventions across the SECH in line with National guidance Identify and plan how local training targets will be met each year in line with national targets Implement the national training plan for Making Every Contact Count across the SECH commencing with 	Ongoing Ongoing 2020 onwards 2019 onwards	ALL HOS Learning site leads HoS H&W All HoS
		the learning sites.		

No.	Key Objective	Action	Completion Date	Lead
MC ₃	Support the integration of MECC into the Integrated Care Programme for SECH for the Prevention and Management of Chronic Diseases	 All healthcare professionals working in integrated care programme are prioritised to complete the MECC training programme In conjunction with the relevant stakeholders map the current referral pathways to specialist service available within the SECH to support Health Behaviour Change. In conjunction with the relevant stakeholders map the current community resources / programmes for signposting to support Health Behavioural Change in SECH 	Ongoing 2019	All HOS & HWB SMS coordinater Self management support coordinator
MC4	MECC is part of contractual arrangements	Ensure MECC is included as part of all job descriptions for Health Professionals and Key Support Staff Include MECC in relevant contractual arrangements with external service providers MAKING EVERY	2020 2020	Head of HR All HoS

Wellbeing and Mental Health

No.	Key Objective	Action	Completion Date	Lead
MH1	To work in partnership to protect,	Support the implementation of the National Mental Health Promotion Plan.	When Avail- able	All HOS
	promote and enhance individual and	Support the implementation of county based connecting for life plans	Ongoing	All HoS
	communities wellbeing and mental health	Work with the clinical, community and voluntary sectors to implement a social prescribing programme building on the learning from effective models	2019	HO H&W & Primary care
		 Support the pilot social prescribing initiative in Waterford Promote wellbeing and mental health of vulnerable people by linking them into community resources 	2019 on- wards Ongoing	head of h& W All HoS
		To document and share the Primary Healthcare In-reach model and Health Education Toolkit developed	2019	Social Inclusion
		in the Emergency Reception &Orientation Centre (EROC) for Refugees in SECH • Undertake research into the	Ongoing	Social inclu
		healthcare needs and healthcare access of Asylum Seekers, Refugees & Roma	Ongoing	Social Inclusion
		 Provision of Health Literacy Programme to Roma men Support the roll out of Intercultural awareness training in health and social care settings Support local wellbeing initiatives 	Ongoing	и
		such as Snuggles Stories Initiative in Waterford, Books for Babies in Wexford and the Early Years Bedtime Reading Project, Tipperary in partnership with CYPSC & the library services.		Head of H&W and Primary Care

No.	Key Objective	Action	Completion Date	Lead
MH1 cont	To work in partnership to protect, promote and enhance individual and communities wellbeing and mental health	 Work in Partnership with Youth Reach and out of school settings to support Youth Health and Well-being e.g. Building Resilience for Youth Reach Student Implement measure to prevent post- natal depression in mothers 	Ongoing Ongoing	Head of H & WB & HP &I Head of Mental Health
MH ₂		 Continue the roll out of the "Little Things Campaign" Implement "Improving the physical health or mental health service users" National Working Group report. Roll out Introduction to Youth Mental Health & Minding Youth Mental Health To pilot in SECH 'Minding your Well Being' – pilot study being carried out nationally and evaluated by IT Carlow To support the provision and the delivery of evidenced based mental health and wellbeing programmes across the SECH in partnership with key stakeholders To support the provision and the delivery of evidenced based mental training across the SECH in partnership with key stakeholders 	Ongoing Ongoing 2019 Ongoing Ongoing	All heads of service Ho Mental Health HP&I HP&I HP&I HP&I

Wellbeing and Mental Health continued

No.	Key Objective	Action	Completion Date	Lead
MH2 cont	To promote positive Mental Health and Wellbeing	 To support the delivery of physical activity programmes with mental health users and work in collaboration with key agencies to implement these programmes e.g. LSP, academic institutions, sports organisation Continue to support interagency mental wellbeing groups/committees to deliver specific wellbeing initiatives such as the Music in Mind Refugee Programme, Mind your Mental Health, Mensana, Traveller Wellbeing Check-In Tool and Its your Choice programme. 	Ongoing	Ho Mental Health & HP&I HoH&WB Social Inclusion

Positive Ageing

No.	Key Objective	Action	Completion Date	Lead
PA1	To support the development of a workforce that is trained and supported to deliver MECC	Implement training and use of the minimum data set tool across older persons services	Ongoing	All HoS
PA ₂	To support positive mental health amongst older people living in the community	Support the delivery of Age with Confidence, Taking Stock & Well Elderly Programmes	Ongoing	HP&I
PA ₃	To Understand Dementia Together	 Display the Dementia Understand Together resources. Develop a dementia care pathway in conjunction with the relevant Hospital Group(s), and support the implementation of the pathway Release relevant staff to undertake 2 day Dementia training and 9 week champion training. Support the roll-out of Dementia Training for GP's & Primary Care Teams (PREPARED) Develop a peer learning and support network of Dementia Champions across the region Promote the Memory Library Facilities Incorporate Dementia Friendly design in any new build or modification to existing buildings 	Ongoing Ongoing Ongoing Ongoing 2020 Ongoing Ongoing	All HoS Ho Social Care HG's hospital groups HoS Social Care Head of Primary Care HO Social Care All HoS Estates

Positive Ageing continued

No.	Key Objective	Action	Completion Date	Lead
PA ₄	To keep older persons safe from abuse	Promote the welfare and safeguarding of vulnerable older persons in line with the HSE Safeguarding Vulnerable Persons at risk of Abuse Policy.	Ongoing	All HoS
PA ₅	To support a Tobacco Free Ireland	Implement Tobacco Free Framework across older person's services including the treatment of tobacco as a care issue and provision of support for those that wish to quit.	Ongoing	HoS Social Care
PA6	To ensure good practice in the management of malnutrition	 Develop a Nutrition Supports Steering Group across care groups/ divisions for SECH Review regional guidelines for the management of malnutrition in line with the new national guidelines once developed. Continue the implementation of nutrition screening tool 	2019 2019 Ongoing	HoS Social Care and HoS Primary Care Community
PA ₇	To share good practice	Hosting a bi-annual older persons seminar to share good practice	Ongoing	HoS H&WB
PA8	To proactively prevent falls and injury to Older Persons	 Monitor falls and put in place quality improvement plans to reduce risk of future falls in residential and community setting Support the continued development of Waterford's Integrated Care Programme for Older People (ICPOP) and South Tipperary ICPOP in Wexford and Carlow/Kilkenny. 	Ongoing	HoS Social Care HoS Social Care

No.	Key Objective	Action	Completion Date	Lead
PA ₉	To promote independence of older persons	 Briefing sessions on Assisted Decision Making (Capacity) Act 2015 in partnership with SAGE. Support the roll out of the national advocacy programme for older persons 	Ongoing Ongoing	HoS Social Care HoS Social Care
PA 10	To ensure integrated patient centred care for older people	Progress the Respiratory(COPD & Asthma), Cardiovascular and Diabetes Integrated Care Programmes across the region	Ongoing	HoS Primary Care & HoS H&WB
PA 11	To enhance the levels of physical activity amongst older persons	 Provision of evidenced based physical activity training for older persons across the South East Support the Sports Partnership to develop physical activity programmes for older adults Support the development of Walking Football initiatives for older adults living in areas of social-economic disadvantage, Active Retirement groups and participants from a sedentary lifestyle background as part of the LCDC HI Fund partnership Support the provision of a physical activity programme for Men's sheds. 	Ongoing Ongoing Ongoing Ongoing	HP&I HoS H&W HP&I
PA 12	To support social Integration & reduce the isolation of older persons	 Support the development of Men's Sheds across the region Explore the development of linkages with community and/or voluntary organisation such as Muintir na Tire; Macra na Feirme 	Ongoing Ongoing	HoS H&WB H&WB HP&I

Positive Ageing continued

No.	Key Objective	Action	Completion Date	Lead
PA 13	To reduce threats to health	Promote and increase the uptake of the Flu Vaccine amongst LTCF residents & HSE staff "Life"	Ongoing	All HoS
		Livi		

Alcohol

No.	Key Objective	Action	Completion Date	Lead
AL1	To minimise the harms caused by the use of Alcohol & other Substance Misuse	 To support the Substance Misuse and Pregnancy training when developed. To support Alcohol and Substance misuse policy development with all secondary and third level colleges Continue links with National Fetal Alcohol Spectrum Disorder steering group 	Ongoing Ongoing Ongoing	All HOS Social Inclusion Social Inclusion
		 Increase awareness of staff and general population of risks of alcohol in pregnancy 	Ongoing	All HoS
		 Enable families and communities to support women to have an alcohol free pregnancy 	Ongoing	All HoS
		Challenge social norms and myths relating to alcohol harm by providing evidence based information on health impacts and social & psychological impacts on families & children.	Ongoing	All HoS
		 Promote awareness & understanding both to the public and to health care professionals of the specific HSE referral care pathways for alcohol and substance use based on the HSE Four Tier model of service delivery. 	Ongoing	All HoS
		 Traveller specific SAOR training for early identification and intervention for problematic drug and alcohol use. 	Ongoing	Social Inclusion
		To support the development of a bespoke SAOR programme for Intellectual Disability services	Ongoing	Social Inclusion

Alcohol continued

No.	Key Objective	Action	Completion Date	Lead
No.	To reduce the level of drug and/or alcohol harm	 To reduce the level of drug and/or alcohol harm Support the roll out of national alcohol risk campaigns; www. askaboutalcohol & www.drugs.ie Ensure knowledge of and implementation of the HSE Policy on Public Health Information Initiatives related to alcohol http://www.hse.ie/eng/services/publications/topics/alcohol/HSE-Alcohol-Partnership-Policy.pdf Provide tailored prevention and early intervention programmes via drug education officers and community based drug initiative workers. Continue development of specific SAOR (Support Ask & assess Offer assistance & Refer) training for targeted groups such as Traveller & ROMA health projects. To continue to roll out 'Alcohol Check in Tool' for targeted groups Through the implement of Making every Contact Count (MECC) empower staff to improve their skills and confidence to recognise and address alcohol and substance use in all settings so that patients are regularly offered screening and brief intervention for their alcohol/substance use. To provide tailored prevention activity & interventions to effectively 		Social Inclusion & All HoS HoS H&WB All HoS Social Inclusion Social Inclusion All HoS Social Inclusion All HoS
		address the needs of those who face a higher risk of alcohol & substance use because of their lifestyle or because they belong to a specific group or community of interest.		

No.	Key Objective	Action	Completion Date	Lead
AL2 cont	To reduce the level of drug and/or alcohol harm	 Advocate for the provision of local evidence based & professional specialist treatment services. Provide ½ day training on Alcohol Policy in the SECH area using the Alcohol Programme as a resource. 	Ongoing Ongoing	Social Inclusion Social Inclusion

Tobacco Free Ireland

No.	Key Objective	Action	Completion Date	Lead
TO1	To support a Tobacco Free Ireland by 2025 less than 5% smoking prevalence) by de- normalising tobacco use and protecting children	 To ensure that smoking cessation service information and QUIT support resources will be displayed in all appropriate SECH sites To support the provision of training in Brief Interventions to specific target groups (youth reach out of school settings) To progress the poster campaign for positive smoking cessation messaging To support the delivery of identified programmes to support smoking cessation for example Irish Cancer Society Exhale Programme Support the implementation of the Health Behaviour Patient Management System (e-referral to quit services) 	Ongoing all!	All HoS HP&I HoS H&W HoS H&W
TO ₂	To support a Tobacco Free Ireland	 Assign a nominated tobacco lead from senior management to support monitoring and implementation of local Tobacco Free Campus Policies across all sites and services All services (mental health, disability, older persons services and primary care) will implement the Global Network for Tobacco Free Healthcare Services Quality Standards, complete online self-audit and develop a quality improvement plan for Tobacco Free Campus policy implementation annually 	2019 Phased over 2019 & 2020	All HoS

No.	Key Objective	Action	Completion Date	Lead
TO ₂ cont	To support a Tobacco Free Ireland	 Each CHO will develop an action plan to progress the implementation and on-going monitoring of the HSE Tobacco Free Campus Policies across all sites and services. As part of this action plan the CHO will engage in a coordinated and timely process whereby Tobacco Free Campus Implementation and monitoring data is supplied to the Tobacco Free Ireland Office Implement Tobacco Free Framework across all health services including the treatment of tobacco as a care issue and provision of support for those that wish to quit. To support the delivery of smoking cessation clinics (resource dependent) Supporting the implementation of MECC training and implementation in relation to tobacco use (include in 	2019 Ongoing Ongoing Ongoing	All HoS HP&I All HoS
		alcohol HEAL)		

Positive Sexual Health

No.	Key Objective	Action	Completion Date	Lead
SH1	To support positive sexual health	Support implementation of evidenced informed sexual health training programmes	Ongoing	HP&I
		 Work in partnership with HSE colleagues, statutory and voluntary bodies to support local/regional sexual health initiatives & programmes 	Ongoing	HoS H& WB Social Inclu- sion HP&I
		 Co-edit Biannual Sexual Health News Identify and assign designated personnel to implement the sexual health strategy and associated campaigns 	Ongoing Ongoing	HP&I HP&I
		 Implement process to ensure all area leads are aware of the available free sexual health resources and training opportunities (Condom distribution service, Health promotion material, HSE & HSE funded training) and encourage uptake 	Ongoing	All HoS
		Map the current sexual health services	Ongoing	H&WB and HP&I

No.	Key Objective	Action	Completion Date	Lead
SH2 cont	To promote positive sexual health through Social Inclusion	 To support the LGBTI Project Health Workers to deliver LGB Awareness Training in the region to staff. To support TENI – Education and Training Manager to deliver Transgender Awareness Training across the SECH To evaluate and promote the Gender Identity Skills Ytaining (GIST) model of training as a capacity building tool for appropriate service providers Review LGBTI Sticker and completed Audit 	Ongoing Ongoing Ongoing	HSE Social Inclusion ALL!
SH ₃	To support the delivery of clinical STI services across SECH	 Ensure adequate staff to deliver the service in designated sites Work in partnership with practitioners to support clinical practice across services 	Ongoing Ongoing	HoS Primary Care

Prevent and Reduce Chronic Disease: Self Management and Making Every Contact Count

No.	Key Objective	Action	Completion Date	Lead
SMS 1	To enable those with a Chronic Disease to live life to their full potential.	 Support the implementation of the Integrated Chronic Disease Programme Establish local governance arrangements for self-management support. Map the current disease specific and generic self-management support provision within SECH Create a self-management support directory for SECH Development of a Self -Management Support Regional action Plan for SECH Increase access to structured patient education programmes for people with chronic disease Maintain co-ordinators for self-management support for chronic conditions in SECH Collect and report on agreed KPIs for SMS for chronic conditions Roll out of Traveller Health Chronic Conditions Programme to Traveller Health Projects in SECH To support the provision of specific training targeting those at risk of social exclusion or health inequalities for example: Ticker Heart Health training and Traveller & ROMA diabetes; national cancer screening programmes; substance abuse and positive mental health. (Physical activity) Training in Asthma 	Ongoing 2018 2018 2018 2018 2019 2018/2019 Ongoing Ongoing Ongoing	PC, HGs, H&WB SMS Coordinator & head H& WB SMS Coordinator SMS coordinator National SMS coordinator team SMS Coordinator

Partnership Working "A way of being"

No.	Key Objective	Action	Completion Date	Lead
PW 1	To ensure the implementation of our SECH HI plan	Establish a steering group to oversee the implementation of the plan and to ensure sustainability of the implementation of Healthy Ireland Plan.	2019	HoS H&WB
PW 2	Enhance health and wellbeing through linking individuals with social supports within their communities	 Work with the community and voluntary sector to focus on promoting health and wellbeing and the provision of patient centred care. Work with the community and voluntary sector to ensure a greater integration of services through the provision of social prescribing model across the SECH (pilot in Waterford) Support the LCDCs within SECH to implementation their Healthy Ireland local strategy plan 	ongoing 2019 Ongoing	HoS H&WB & Primary Care
PW 3	To create awareness of evidence based information, resources and supports to achieve positive health and wellbeing	Support the provision of appropriate health and wellbeing resources at each health service site	Ongoing	All HoS
PW 4	To create an environment where every individual and sector of society can play their part in achieving a Healthy Ireland	Support Community Health Awareness initiatives and day/events which are being lead out by LCDC/ CYPSC/PPNs	Ongoing	HoS H&WB

Staff Health & Wellbeing

No.	Key Objective	Action	Completion Date	Lead
SH & WB 1	To make the Southeast Community Healthcare Organisation 'the place' to work	• Ensure that we hear the voice of staff in relation to their own health and wellbeing through ongoing consultation, communication and surveys with staff across the	Ongoing	HoS H&W
			When de- veloped	All HoS
			Ongoing	HoS H&WB
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No.	Key Objective	Action	Completion Date	Lead
SH & WB 2	To support positive staff mental health and wellbeing and build resilience among staff	 Provision of coaching for managers and 1:1 Coaching for staff Provision of 'Managing Workplace Challenges' training Wellbeing and Resilience training Ensure access to personal and professional development Provision of Mindfulness for staff Implement Values in Action or similar initiative for Southeast Implement The Little Things campaign focusing on staff and ensuring resources will be displayed in all appropriate CHO sites Support the development of social clubs and interest groups e.g. workplace choir, art in partnership with the Hospital Groups Development of wellness programme for staff. Promote EAP for staff and supports available through local Occupational Health Departments. 	rest ongoing 2020	HoS H&WB HP&I/ HR H&WB/HP&I HR H& WB HR/H&WB All HoS HoS H&W H&W HP&I and HR All HoS
SH & WB 3	To reduce obesity levels & promote positive health and wellbeing amongst staff through the promotion of healthy eating and increased physical activity levels	 Promote walking and active travel as a strategy to reduce the risks of sedentary work practices through piloting the rollout of the smarter travel initiative in 5 pilot sites in Kilkenny— one county per year To make available bikes shelter and cycle bikes for staff in identified sites across the region 	Ongoing	H&WB HPI H&WB

Staff Health and Wellbeing continued

No.	Key Objective	Action	Completion Date	Lead
SH & WB 3 cont	To support positive mental health and wellbeing of staff	 To support staff to increase physical activity levels through the provision of fitness programs for example, Steps to Health challenge promoted with staff, and pedometers available for staff Promotion of peer led walking groups and development of Sli na Slainte routes on HSE sites where possible. Provision of lunchtime yoga classes for staff Cook it programme delivered to staff Pilot the Eat for Health workshop for staff Promotion of Happy Heart@Work catering awards To offer staff health checks 	Ongoing	Healthy Ireland Champions H&WB HP&I Healthy Ireland Champions HoS H&WB
SH & WB 4	To create a supportive environment for the promotion of positive staff health and wellbeing	 Support implementation of National Breastfeeding Action Plan for Staff, in supporting staff to continue to breastfeed in return to work Undertake staff survey on breastfeeding in order to look at ways to support employees to continue to breast feed on return to work. Review and enhance workplace environments to support staff health Implement Mens Health Policy for staff Provision of standing desks on a phased basis for those that require them most To implement Values in Action/Kindness in the workplace Healthy vending policy implemented in all HSE sites Provision and maintenance of Healthy Ireland notice boards. 	Ongoing 2019 2019 2020 Ongoing 2019 2019 Ongoing	All HoS H&WB/HP&I All HoS H&WB/HP&I Occupational Health/ HoS H&WB H&WB/HR All HoS Healthy Ireland Cham-

No.	Key Objective	Action	Completion Date	Lead
SH & WB 5	To reduce threats to health	Promote and increase the uptake of the Flu Vaccine amongst staff	Ongoing	HoS H&WB
SH & WB 6	To support a Tobacco Free Ireland	 Ensure that all HSE sites Tobacco Free Smoking cessation service information and QUIT support resources will be displayed in all appropriate CHO sites Staff supported to quit smoking through provision of 6 weeks free NRT and referral to specialist support (quit line and one/one support clinics) 	Ongoing	All HoS HoS H&WB

Research and Health Intelligence Protection from Harm

No.	Key Objective	Action	Completion Date	Lead
RH1	To use health intelligence to identify and reduce health inequalities	 Put a system in place to monitor uptake rates and trends on an ongoing basis. Use Health Intelligence to identify areas of disadvantage and health inequalities Develop actions to address health inequalities. 	Ongoing Ongoing Ongoing 2018	HoS H&WB H&WB Public Health HoS Primary care
Rh ₂	To use health intelligence to target areas of low take up for screening services	 Use health intelligence to target specific groups and geographic locations where take up of national screening programmes such as bowel screening, breastcheck and cervical check are low. Promote and support the delivery of the Primary Childhood Immunisation and School Immunisation programmes within the SECH. Promote the uptake of HPV in the Southeast Ensure timely inputting of immunisations to support clinical practice and monitoring of uptake. Support the Roma Pilot Vaccination Project To support the Traveller childhood vaccination programme including HPV vaccine 	Ongoing Ongoing Ongoing Ongoing Ongoing	HoS H&WB National Screening Programmes All HoS HoS Primary Care HoS Primary Care Social Inclusion Social Inclusion
TO ₂	To reduce threats to health	 Promote and increase the uptake of the Flu Vaccine amongst Long Term Care Facilities (LTCFs) residents & HSE staff Implement the Hand Hygiene Train the Trainer Programme across the Southeast Establish strong infection prevention and control structures within the Southeast Development of a Southeast Emergency Management Plan 	Ongoing 2019 2019	HoS H&WB H&WB QPS H&WB/ Public Health H&WB

Appendices



Table of Figures

Figure 1 Covers of National Health Stategies	9
Figure 2 Goals of the Healthy Ireland Programme	11
Figure 3 Determinants of Health (Adapted from Dalghren and Whitehead, 1991 and Grant and Sarton, 2006)	12
Figure 4 Challenges facing the health service in achieving the social determinants of health	13
Figure 5 Strategic Priorities of the 'Healthy ireland in the Health Services plan'	14
Figure 6 Healthy Ireland National Strategic Priorities (Healthy Ireland in the Health Services Implementation Plan 2015)	14
Figure 7 South East Community Healthcare Healthy Ireland Programme Strategic Priorities	15
Figure 8 Child health initiatives in SECH	20
Figure 9 Framework for Mental Health	25
Figure 10 HSE Environmental Health Service functions	33
Figure 11 HSE Making Every Contact Count model	37
Figure 12 POPULATION.	
Figure 13 Barriers preventing staff from cycling to work	49
Figure 14 Workplace Health & Wellbeing unit's Work Well framework	50

Abbreviations

ASF – Active School Flag **BHFC** – Best Health for Children **CHO** – Community Health Organisation **COPD** – Chronic Obstructive pulmonary disease **CYPSC** – Children's And Young Persons Service Committees **DEIS** – Delivering Equality of Opportunity in Schools **EAP** – Employee Assistance Program **EHS** – Environmental Health Service **EROC** – Emergency Reception and Orientation Centre **GEMS** – Geriatric Emergency Medicine Service **GIST** – Gender Identity Skills Training **GP** – General Practitioner **HAPA** – Health and Positive ageing initiative **HEAL** – Healthy Eating and Active Living HI – Healthy Ireland **HiAP** – Health in All Policies **HOS** – Head of Service **HP&I** – Health Promotion and Improvement **HPV** – Human Papillomavirus Vaccine **HR** – Human Resources **HSE** – Health Service Executive **H&W** – Health and Wellbeing **ICT** – Information and Communication **Technologies IRPP** – Irish Refugee Protection Programme **LCDC** – Local Community

LGBTI – Lesbian Gay Bisexual Transgender and Intersex LSP – Local Sports Partnerships LTCF – Long Term Care Facilities **MECC** – Making Every Contact Count MH- Mental Health MHS – Mental Health Services MMR – Measles, Mumps, Rubella MoM – Men on the Move NDRF – National Drug Rehabilitation Framework NMPDU – Nursing and Midwifery Planning and Development Unit NSS – National Screening Service **PC** – Primary Care **PDS** – Progressing Disability Services PHN – Public Health Nurse **PPNs** – Public Participation Networks **SECH** – South East Community Healthcare SC - Social Care **SMS** – Self Management Support **SOAR** – Screening and brief interventions for problem alcohol use in the emergency department & acute care settings. **STAN** – South Tipperary Action Network (supporting Mental Health) **TENI**- Transgender Equality Network Ireland **WICOP** – Waterford Integrated Care for Older People. **WRAP** – Wellness Recovery Action Plan

Glossary of Terms ??

Development Committees

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