



Healthy Ireland in the Health Services Implementation Plan 2015 – 2017

HI Status Update Report - November 2016



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Summary

Significant work has been undertaken across the health services since the publication last year of the *Healthy Ireland in the Health Services Implementation Plan 2015 – 2017*. Governance structures have been put in place at national and local level to support implementation, with leadership from across the health services, co-ordinated through the work of the Planning, Performance and Programme Management function within Health and Wellbeing.

A key element of this work is the development of hospital group and CHO level responses to the plan, articulating how actions will be delivered locally and with partners to advance the 3 overarching priorities identified in it:

- Health Service Reform
- Reducing the Burden of Chronic Disease
- Improving Staff Health & Wellbeing

To date 3 Hospital Groups (Saolta; RCSI and UL) have published plans and 2 others (Ireland East; Dublin Midlands) are engaged in the planning process in partnership with staff from Health and Wellbeing. CHO 4 has commenced their planning process and it is envisaged that all CHOs will complete theirs in 2017, enabled by the recent appointment of Heads of Health and Wellbeing to their senior management teams.

A range of workstreams are underway within the HSE across the critical policy priority areas of Tobacco, Alcohol, Healthy Eating Active Living, Sexual Health, Positive Ageing, Healthy Childhood and Wellbeing and Mental Health. Work is being progressed on a cross-Divisional and, where relevant, cross sectoral basis to bring a coherent, national response to multi-faceted challenges, often with lifestyle or behavioural issues at their core. This is supported by progress in enabling interventions such as the development of a framework for the development of Making Every Contact Count and for Self-Management Support, empowering both staff and individuals to address these challenges head-on.

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Progress has been made in almost all actions in the plan with examples included within the attached briefing. A brief summary is provided below.

Health Service Reform	Reducing the Burden of Chronic Disease	Improving Staff Health & Wellbeing
3 (43%) HI Implementation Plans in Hospital Groups developed	80% of hospitals have commenced calorie posting	100% of Hospital Groups / CHOs funded staff health and wellbeing initiatives in 2016
5 (71%) Hospital Groups have HI governance structures and leadership in place	1,062 staff were trained in Brief Intervention Smoking Cessation which is +22.5% above target to date in 2016	144 Groups from across the HSE comprising 2,177 staff participated in Operation Transformation
100% of CHOs have appointed Heads of Health and Wellbeing	QUIT campaign is running 85.6% ahead of Q3 target.	
100% of Local Economic and Community Plans (Local Authority) including health and wellbeing commitments	11,291 smokers received intensive cessation support from a cessation counsellor which is +25.9% ahead of target to date in 2016	
100% of Policy Priority Programmes in place or in development	49.2% of smokers on cessation programmes were quit at one month, which is +4.2% above target to date in 2016	
	1,394 people completed a structured patient education programme for diabetes to date in 2016	
	3,679 people attended a structured community based healthy cooking programme which is ahead of the target by +11.7% to date in 2016	
	13,868 5km parkruns were completed by the general public in community settings to date in 2016	

Work is underway to develop a monitoring and outcomes framework for the Healthy Ireland in the Health Services Implementation plan, building on developments to date. This will facilitate a more comprehensive overview of the cumulative impact of this work within the health services. It will also be informed by an outcomes framework for Healthy Ireland being developed by the Department of Health.

Healthy Ireland in the Health Services

Introduction

In July 2015 the Health Services launched “*Healthy Ireland in the Health Services Implementation Plan 2015 – 2017*” which sets out the priorities for the implementation of the Healthy Ireland Framework 2013 – 2025 in the Health Services. The plan focuses on where the Health Services can take concerted and specific actions, at all levels to improve health and wellbeing and prevent the onset of disease. The plan builds on existing good practices, exploits the unique scale of the HSE as the largest public body in the state, allowing it to capitalise on its influence, governance and decision-making, its powerful workforce, and the day-to-day interactions with everyone living in Ireland.

It identifies three strategic priorities:

- Building on the Health Services System Reform to embed health & wellbeing,
- Reducing the burden of chronic disease and self care management and
- Improving the health and wellbeing of our greatest asset our workforce.



The plan sets out 126 actions, 60 of which refer to Hospital Groups and CHOs. Each Hospital Group and CHO are developing their own implementation plan to deliver on these actions. HI Executive Leads and Project Managers are identified in a number of Hospital Groups.

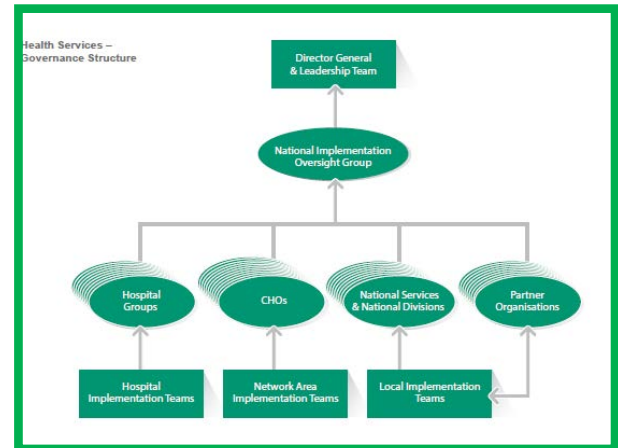
Underpinning this work are a range of workstreams within the HSE across the critical policy priority areas of Tobacco, Alcohol, Healthy Eating Active Living, Sexual Health, Positive Ageing, Healthy Childhood and Wellbeing and Mental Health. Work is being progressed on a cross-Divisional and, where relevant, cross sectoral basis to bring a coherent, national response to multi-faceted challenges, often with lifestyle or behavioural issues at their core. This is supported by progress in enabling interventions such as the development of a framework for the development of Making Every Contact Count and for Self-Management Support, empowering both staff and individuals to address these challenges head-on. Some examples of progress in relation to these areas are discussed further below.



Priority # 1: Health Service Reform

1.0 Governance Structure

Comprehensive governance arrangements and supporting architecture is in place to oversee and steer implementation of the Plan at national and local level. This work is co-ordinated through the work of the Health and Wellbeing Planning, Performance and Programme Management function.



1.1 HI Implementation Oversight Group

The Oversight Group, which is chaired by the National Director Health and Wellbeing on behalf of the Director General meets at least once per quarter. Its role is to provide an overarching governance structure for the execution of the *Healthy Ireland in the Health Services National Implementation Plan 2015-2017*. The group has representation from all the HSE Divisions and a representative from Hospital Groups and CHOs.

1.2 Hospital Groups and CHOs Governance

Similar governance structures exist at Hospital Group level and within CHO 4, where HI planning is at advanced stage. Identification of Healthy Ireland Executive Leads, Project Managers, Steering Groups, HI Leads in Hospitals together with HI Implementation teams in each hospital are in place with Saolta; UL; RSCI and Ireland East with a similar undertaking commenced within the Dublin Midlands Group.

A Head of Health & Wellbeing has been appointed to each of the CHOs. These Heads of Health & Wellbeing who are members of the CHO SMT will take on a lead role in implementing Healthy Ireland within community and with partners.

1.3 Policy Priority Programmes

Work is continuing on the establishment of national Policy Priority Programmes to deliver on the implementation of key government policies for improving health and wellbeing in Ireland. This includes the creation of small teams with dedicated expertise to lead and guide the development of national implementation plans across the policy areas in addition to the establishment of cross divisional/HG/CHO Implementation Groups to take ownership for the delivery of the agreed implementation plans within their respective services.

Key resources, full-time/part-time, have now been assigned across TFI, HEAL, Alcohol and Healthy Childhood (incl. Nurture) Programmes including National Leads, Project Managers, Communications, Research, Policy and Clinical Strategy and the teams are working to complete National Implementation Plans by year end.

1.4 Development and implementation of Hospital Group Plans

Work continues with the development of Healthy Ireland Implementation Plans within the Hospital Groups. Each of these plans have, as a core element, a number of national priority actions identified for implementation in all hospital groups and CHOs. They also include the health profile of the population that they serve which informs the identification of priority areas for including in their plans.

Good partnerships are established through the development of these plans with the Hospital Group and the Health & Wellbeing Division. There is a H&WB Support team with expertise from HP&I, Public Health and Environmental Health identified for each group that support the National Healthy Ireland Programme Lead, H&WB Division and the Groups Project Manager for the development of the Hospital Group Plans. This support structure has proved to work very effectively and builds good relationships for the implementation of the plan.

The development of each plan takes the follows steps:



The timeline for completion of these stages is working out as follows:

Task	Mth 1	Mth 2	Mth 3	Mth 4	Mth 5	Mth 6	Mth 7
Steering Group established							
Plan HI Information sessions							
Deliver Information sessions							
Agree process for AS IS Stock Take							
Complete the AS IS Stock Take							
Get feedback and input for plan							
Write the plan							
Finalise and Sign off plan & Launch							

1.4.1 The Saolta University Hospital Group

Saolta Hospital Group was the first Hospital Group to launch their HI Implementation Plan in October 2014. That plan and its ongoing implementation has informed the development of subsequent Hospital Group plans.



In March 2016 they published their first HI Implementation Annual Report 2015. This report highlights the broad range of health and wellbeing initiatives underway across the groups six hospitals. These include the implementation of the HSE Calorie Posting Policy, the HSE Vending Policy, smarter travel, stress management, mindfulness and tobacco free campus.



In September 2016 they published their Staff Health & Wellbeing Training Plan. This training plan offers a wide range of staff supports for physical and mental health. It provides many health and wellbeing training opportunities for staff within the hospital group and in the community.



1.4.2 UL Hospital Group

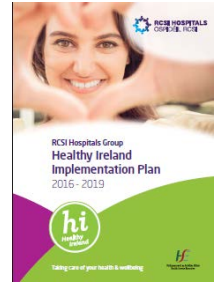
In June 2016 the UL Hospital Group launched their HI Implementation Plan 2016 – 2019. Mr Keith Wood, Chair of HI Council joined the Groups CEO, Ms Colette Cowan and Mr Hugh Brady, the Groups Finance Director and Healthy Ireland Executive Lead and Dr Stephanie O’Keeffe for the this launch.



A HAPPIER and healthier population and workforce is the aim of this ambitious four-year plan. It identifies some 60 priority actions to improve the health and wellbeing of the 380,000 people it serves and the 3,300 staff it employ.

1.4.3 RCSI Hospitals Group

In October 2016 Minister Corcoran Kennedy launched the RCSI Hospitals Group plan with the Groups CEO, Mr Ian Carter, Ms Sheila McGuinness, the Groups Chief Operating Officer and HI Executive Lead and Dr Stephanie O’Keeffe. This plan includes over 70 actions and with it having three of the largest maternity services in the country it has included improving breast feeding rates in all of these hospitals as one of its three priorities. Baby Friendly Hospital targets for breastfeeding to be reached in all three maternity units to include 2% annual increase in initiation.



1.4.4 The Ireland East Hospital Group

The Ireland East Hospital Group is at an advanced stage of the development of their plan. Communications sessions were delivered in all of their eleven hospitals and they have completed the “AS IS” Stock to establish their current baseline of good health & wellbeing practices in their sites and to inform the development of their plan. There are many HI activities already underway in this group. They aim to launch their plan in December 2016.

1.4.5 Dublin Midlands Hospital Group

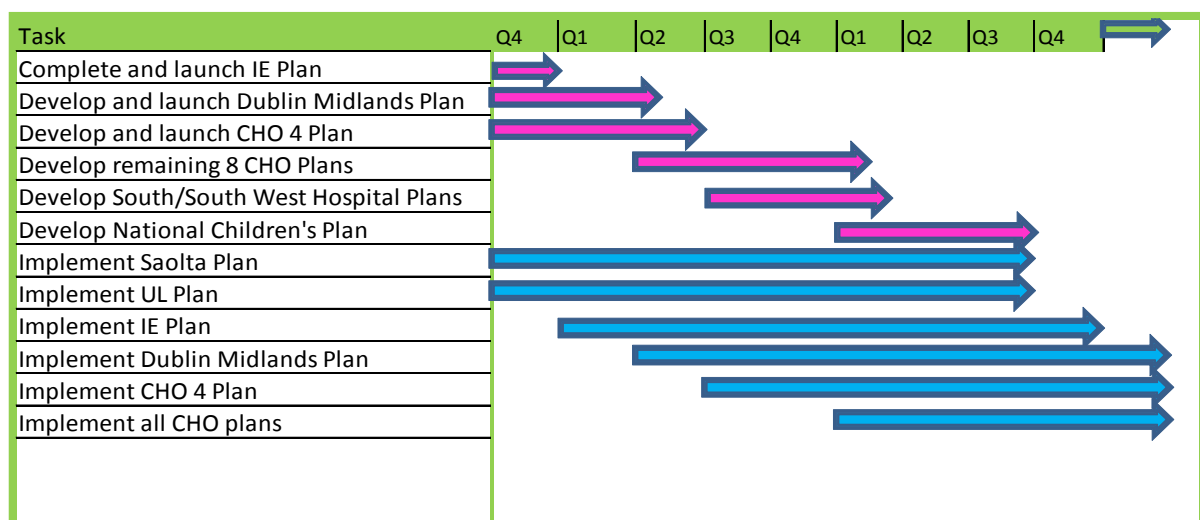
The Dublin Midlands have identified their HI Executive Lead, and a Group HI Project Manager. They held the inaugural meeting of their HI Steering Group in October. They are holding an initiation event to mark the start of the development of their plan on 21st November, in Farmleigh which Minister Corcoran Kennedy is attending. There are many HI initiatives underway in this Hospital Group and they took a lead role in our HI RTE Operation Transformation initiative in January 2016. (See section on staff health and wellbeing).

Work will commence with the remaining Hospital Groups **South/South West Group and National Children’s Hospital**) to develop their plans in 2017.

1.4.6 CHOs

Work has commenced with CHO 4 (Cork and Kerry) for the development of the first CHO HI Implementation Plan. Their Inaugural meeting of their Steering Group was held on 29th September. This development will be the pilot for the development of the remaining eight CHO plans which will be progressed in 2017.

The indicative timelines for the completion of this work is set out below.



Priority # 2: Workforce Health & Wellbeing

2.0 Staff Health and Wellbeing

The Health Service is the biggest employer in the country and has prioritised the health and wellbeing of its 100,000 staff working across over 2,500 work locations. A number of initiatives have taken place across the health services in the last year, which support improved staff health and wellbeing. This included a significant partnership with the Operation Transformation programme last year which encouraged staff to become more physically active.

In September a HI Team with staff members from the Department of Health and across the Health Services cycled as a team in the Great Dublin Bike Ride.



2.1 Funding for staff health & wellbeing initiatives

To promote staff initiatives to improve the health and wellbeing of staff, a staff health and wellbeing fund was created in 2016 on a once-off basis with proposals invited for relevant initiatives. Funding was distributed to all successful Hospital Groups and CHOs for a variety of activities including stress management courses, mindfulness, physical activities, staff choirs, arts and standing desks. The overall impact of a number of the targeted initiatives will be evaluated in 2017.

The launch of the National Healthy Workplace Framework will also strengthen the development of staff health and wellbeing, not just in the health services but in all work places.

2.2 Staff Health and Wellbeing Programme

The Staff Health and Wellbeing Programme sits within the HSE's Staff Health and Wellbeing Unit and a governance structure is being agreed comprising of HR, HBS and Health and Wellbeing, chaired by HR.

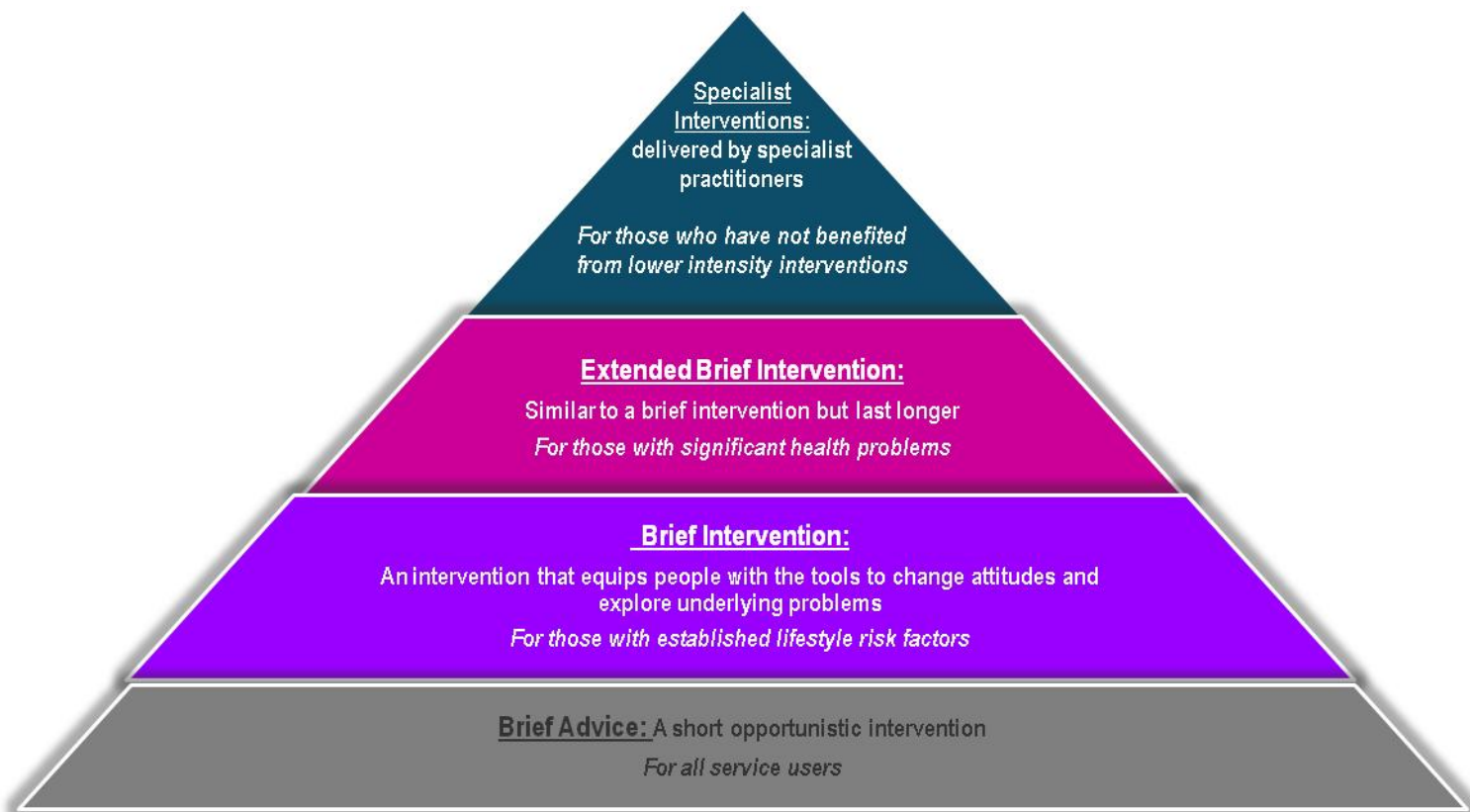
Priority #3: Reducing the Burden of Chronic Disease

3.0 Chronic Disease Prevention & Management

A range of actions outlined in the health service HI plan are underway in support of the objective above.

3.1 Making Every Contact Count

Making Every Contact Count (MECC) is the evidence based model where health professionals use their routine consultation to empower and support people to make healthier choices to achieve positive long-term behaviour change. It is envisaged that the national implementation of MECC will happen on a phased basis with initial phase in Maternity Hospitals. The MECC framework is at the final draft stage of development which includes the National Behaviour Change model, a core component of its implementation.



This model is a four step model – Brief Advice, Brief Intervention, Extended Brief Intervention and Specialist Interventions. A procurement process is underway to support the development and delivery of the training element.

A further aspect of work in this area is the convening of a Higher Educational Institutes (HEI) Working Group to develop a standard undergraduate curricula for MECC. The structure of the curriculum is agreed and sections are assigned to each HEI for development.

3.2 Self Care / Self Management Support

Self Care / Self Management Support is based on empowering patients to take greater control of their own health and address their individual modifiable risk factors to be able to reduce the burden of their condition and increase their quality of life. A national consultation process was undertaken to support the development of a Framework for Self Management, with the final report on this consultation to be completed by end of Q4.

3.3 Enabling ICT and Financial Reform

ICT systems are being reviewed for updating to include the agreed data set for recording risk factors and the interventions delivered through MECC. A standard data set for all ICT systems is agreed. The maternity systems will be the first to include this new data set. Work continues for the updating of the HIPE system.

One of the key actions included in the Healthy Ireland Implementation plan is to develop a greater focus on prevention through the harnessing of potential within the Activity Based Funding (ABF) project. However due to the need to focus on the immediate priority of the ABF project for the acute hospitals budgeting process, little progress has been made on this area to date.

3.4 Incorporate prevention and intervention requirements into existing and new clinical care programmes' models of care

Work continues with the Integrated Care Programme for Chronic Disease (CD) on the development of an Outline Document. Four demonstrator projects (Diabetes; Chronic Obstructive Pulmonary Disease (COPD); Asthma and Heart Failure) are underway supported by St Luke's Hospital, Kilkenny and the GPs in that area.

A standard pathway for Integrated Care Chronic Disease by GPs has been completed and forwarded to GP contract Steering Group, for inclusion in discussions underway.

3.5 Tobacco Free Ireland (TFI)

A Tobacco Free Ireland 4-Year Implementation Plan is at the final stage of development.

3.5.1 *Smoke Free Campus*

Implementation of Tobacco Free Campus policy continues under the auspices of the TFI Group.

As at the end of Q3 2016, the following compliance was observed:

- 46% of the 100% target for approved Mental Health units have implemented the TFC policy YTD
- 45% of the 50% target for Mental Health residential units has implemented the TFC policy YTD
- 65% of the 25% target for the Services for people with Disabilities has implemented the TFC policy YTD. The target is being exceeded with 65% of Services for people with Disabilities having implemented the TFC policy.
- 67% of the 75% target for the Services for Older people TFC has implemented the TFC policy YTD.
- There continues to be good engagement with new CHO managers and Health and Wellbeing leads to progress further implementation.

The ENSH Global Network for Tobacco Free Health Care Services Conference was hosted in Ireland on 19th October providing engagement opportunities for with a wide range of stakeholders in this area.

3.5.2 Brief Intervention Training

Brief Intervention Training continues. This training will continue until it is replaced with the National Behaviour Change Model as outlined above. 102 courses have been delivered to date in 2016 and 1,062 frontline staff trained.

3.5.3 Development of a National IT Patient Management System (PMS) for Quit Services.

A tender process is underway for the procurement of a National IT patient Management System for Quit services. While this is being procured for the QUIT service it will be generic and will support the recording of interventions for all the policy priority programmes. Closing date for tender applications was October, 2016.

3.6 Healthy Eating Active Living (HE&AL)

Work has been undertaken to develop a draft HEAL Implementation Plan. Engagement continues with National Implementation Group (NIG) and stakeholders to inform development of programme implementation plans.

3.6.1 Calorie Posting

Implementation of the HSE Calorie Posting policy continues. 84% of hospitals have commenced calorie posting with very positive feedback from staff. A plan is being developed to support implementation within the CHOs. A review is being undertaken of work to date with recommendations expected for 'best fit' for Calorie Posting going forward. The review is at advanced stage and will conclude in mid November.



3.6.2 HSE Healthier Vending Policy

Implementation of the HSE Healthier Vending Policy continues. Since 2015 all new contracts for vending services require the suppliers to provide a minimum 60:40 ratio of healthier food and drink options. The vending machines carry information and health promoting messages to prompt consumers to make the healthier choice. To end August 2016 the number of vending machines across HSE and Voluntary Hospitals under the contractual arrangements is 352.

3.6.3 National Physical Activity Plan Implementation

Promoting the health benefits of physical activity is one of the key roles the HSE in supporting the delivery of the National Physical Activity Implementation Plan launched in January 2016. Actions to date include:

- Commenced design and development of pilot Exercise Referral Scheme informed by the National Exercise Referral Framework.
- Commenced work with Mental Health Division to develop guidelines on promotion of and referral for physical activity with service users
- Social media campaign promoting physical activity via www.getirelandactive.ie social media channels
- Development and maintenance of publicly accessible database of facilities and amenities for being active
- Delivery of Be Active Afterschool Programme maintained and evaluation commenced.



for

3.6.4 A Healthy Weight For Ireland Obesity Policy and Action Plan

HSE actions from Healthy Weight for Ireland: Obesity Policy and Action Plan, published in October 2016, will be delivered through the Healthy Eating and Active Living Programme. Priority actions are being progressed on a cost neutral basis within existing resources in 2017.



3.7 Healthy Childhood

The Nurture Programme was launched in May 2016. The Nurture Programme - Infant Health and Wellbeing is being established with babies and their parents. The aim is to help to give each one of these babies the best start in life.

A draft framework for the National Healthy Childhood Programme is at an advanced stage of development. Monitoring of HSE Better Outcomes Brighter Futures Actions are being transitioned from Health Promotion & Improvement to the Healthy Childhood Programme.

The HSE Breastfeeding Action Plan is agreed. Implementation of this plan is being transitioned to the Healthy Childhood Programme. Discussions are ongoing with the Healthy Eating Active Living (HEAL) Policy Priority Programme to establish Healthy Weight in Childhood Implementation Group under the National Healthy Childhood Programme. Work continues with Health Intelligence to scope out data and information requirements of the National Healthy Childhood Programme.



3.8 Alcohol

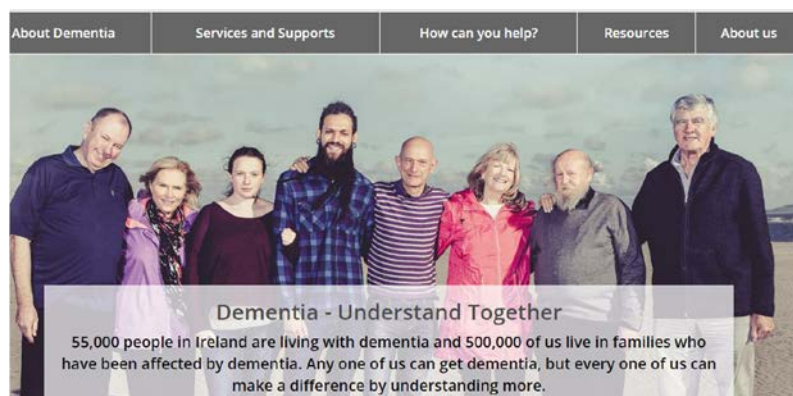
The Alcohol Programme Implementation Group has met twice in 2016 and is at an advanced stage in the development of its plan. A range of priority actions have been identified for implementation in 2017 through the various sub-groups supporting its development.

3.9 Wellbeing and Mental Health

The Wellbeing and Mental Health Programme is currently governed under the HSE's Connecting for Life Implementation Group; with specific project management and policy expertise assigned to deliver on key aspects of the policy.

3.10 Positive Ageing & Dementia

The Positive Ageing Programme is currently focused on the delivery of a number of co-funded Atlantic Philanthropies projects such as Healthy and Positive Ageing Initiative (HaPAI) and Dementia public information and education campaign. The HaPAI project will publish National and Local Indicator Reports before year end; with a Research Strategy and Funding Call to be launched in Jan '17.



Dementia Understand Together was launched on 24th October by the HSE and its partners. The communications plan for Phase 1 (Oct '16-Mar '17) includes radio, outdoor, digital, social media and public relations. A partnership strategy has been designed to support and drive this social movement, creating local ownership which will ensure sustainability of the campaign post its three-year funding programme. To date over 30 organisations from across the public and private sector, academia, representative bodies and community and voluntary organisations have committed their support.

4.0 Partnership Working

The building of partnerships is highlighted as a key building block in the HI Framework and considerable effort has been expended in increasing the size and effectiveness of the of the HSE's partnership and stakeholder network. Whilst this is a core element of the work of the all of the Policy Priority Programmes, it is also a key feature of the development and future roll out of MECC. Academic linkages have been advanced in a number of areas with great potential to be realised in the involvement of academic partners in local HI work in hospital groups.

4.1 Local Community Development Committees

A strong partnership is established with the Department of Housing, Planning, Community and Local Development and the Local Community Development Committees (LCDCs). A representative from the HSE is a member of almost all of the 31 LCDCs.

A National Health & Wellbeing LCDC support group is established to support the work of the HSE Reps on the LCDCs.

Three LCDC Representatives Networking Events have been held. They have been attended by the HSE Reps, CHOs, Heads of Health and Wellbeing (since their appointment) with representatives from the Department of Housing, Planning, Community and Local Development and the Health & Wellbeing Unit in the Department of Health.

A HSE LCDC Resource Guidance document was produced to provide guidance for the inclusion of health & wellbeing in the Local Economic Development Plans (LECPs).

The LCDC Working Group reviewed all of the LECPs recently published to identify the extent of the inclusion of the health elements for the improvement of health and wellbeing of their communities. A review report was produced from this process. This approach reflects a shared commitment in Government and throughout communities to support people to be as healthy and well as they can.

4.2 Healthy Cities

The aim of the National Healthy Cities and Counties of Ireland Network is to support implementation of Healthy Ireland at a local level – 'Healthy Wexford', 'Healthy Mayo' etc. Our Health Promotion and Improvement service works at the local level to support this work.

The National Healthy Cities and Counties of Ireland Network is being launched under the aegis of Healthy Ireland on Tuesday 29th November in Dublin City Hall.

5.0 Communicating the Healthy Ireland Brand

Considerable effort has been made by the HSE to use its work and resources to market Healthy Ireland the brand, as part of the overall implementation approach undertaken. A small quantity of HI Banners, HI T Shirts and HI Bags were purchased and distributed and different HI events, giving visibility to the logo.

5.1 Staff Communication sessions

As part of the development of the HI Plans in the Hospital Groups, extensive communications sessions have been held in all the hospitals in the UL Hospital Group, the RCSI Hospitals Group and the Ireland East Hospital Group. This has generated good buy in to the process and is supporting improved understanding of the objectives of Healthy Ireland. Through these sessions, significant numbers of HI champions are coming forward and taking leadership roles in different staff activities.

5.2 Exhibition stands

At a number of National conferences we have taken the opportunity to have a HI stand; these included the National Institute of Public Health Conference and the National Integrated Care Programme Conference. These exhibits have proved to be of great interest to the attendees.



6.0 Conclusion

Significant strides have been made in advancing the priorities and actions set out in the HI plan since its publication last year. Much progress has been made in developing the supporting building blocks; clear governance structures, strong implementation planning and supports and the creation of multi-disciplinary teams to translate Healthy Ireland from strategy to implementation. Increasing the 'foot-print' and reach of Healthy Ireland within the health services remains challenging however in the context of competing priorities and funding challenges. Maintaining the momentum for this work and the preservation of achievements to date requires sustained efforts into the future and parity of investment.