



Sláintecare.
**Healthy
Communities**

Healthy Communities CHO DNCC

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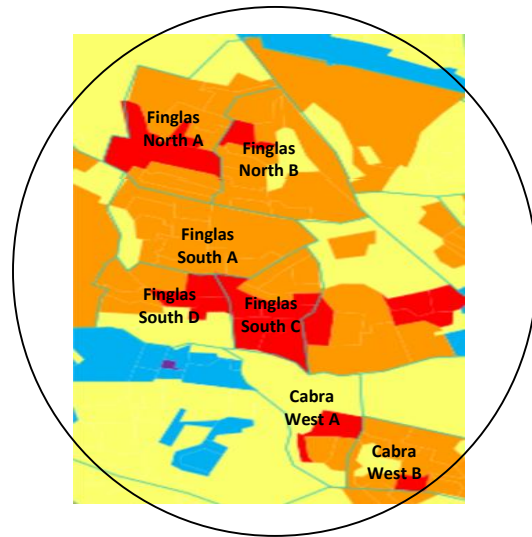
Areas Identified for Implementation in 2021

- North East Inner City

Areas Identified for Implementation in 2022

- Ballymun
- Darndale
- Finglas/Cabra

Initiatives focused on areas of highest deprivation and highest population of young families withing CHO DNCC



CHO: 9

EDs: Finglas North A/B, Finglas South A/C/D, Cabra West A/B

HP Pobal Deprivation: -12.7 to -20.3

Total Population: 18,224

HSE Stop Smoking Advisors and Clinics

To help people quit smoking, the Stop Smoking Advisor provides 1-1 support to smokers within the community with quit attempts, including the provision of Nicotine Replacement Therapy (Stop Smoking medication) and support smoke free environments

What has worked:

- Stop Smoking Clinics in Darndale, Ballymun, Grangegorman
- Referrals from HSE Staff, GPs and self-referral
 - multiple referral pathways
- QR Codes and social media
- Promotional stands in the PCC and community settings
- HSE Community Health Network Health Promotion Officers supporting connections

Challenges:

- Hard to reach groups
- Vaping
- Communication v saturation



Definitely go to the stop smoking service, they are friendly and will listen to you. It has been a great experience for me

PAUL (PAULIE) BYRNE, SMOKED 60+ CIGARETTES PER DAY

If you or someone you know is thinking about quitting:
Telephone 01 8976124
Email hwb.dncc@hse.ie
or scan the QR code to register for a call back from one of our advisors

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QUIT

We Can Quit

Stop smoking programme delivered by trained community facilitators through group work

What has worked:

- Free Nicotine Replacement Therapy and other stop smoking medication to help people quit smoking and stay quit for good
- Follows standard treatment programme for smoking cessation
- Peer lead programme
- Holistic approach to addressing life challenges
- Supporting people to Quit contemplation through initiatives such as Smoke Free homes

Challenges

- Training peer leaders- time and retention
- Recruitment to programme in some areas- takes time to get established



Social Prescribing

Social prescribing is a means of enabling healthcare professionals and other professionals to refer individuals to a range of local, non-clinical services, primarily provided by the voluntary and community sector

Social Prescribing Link Workers work with individuals who need support, linking them into community activities and services

The service is aimed at individuals who are experiencing social isolation, fear, loneliness and mild mental health difficulties

What has worked

- Engagement from Primary Care Teams
- Running service in Primary Care Centres- visible presence
- HSE Community Health Network Health Promotion Officers supporting connections
- Referral Pathways- GPs via software (NEIC)
- SP Link Workers- Individuals with community development experience and encouraging community referrals
- Word of mouth/positive feedback from other HP
- Peer Support group

Challenges

- New service- clarity on what it is/is not- more than just signposting
- Inappropriate referrals



Healthy Food Made Easy

Healthy Food Made Easy is a six week nutrition and cookery course that supports individuals to change to a healthier diet, plan meals on a budget and make easy to cook meals

What has worked:

- Delivered by peer leaders
- Standard suite of simple, low cost recipes provided
- HSE Dietician specific support – training and week 5 support
- Easy to engage people in
- Gateway to other health and wellbeing supports
- Can be a tool in addressing Food Poverty
- Hybrid delivery (online and in person)
- After school based delivery i.e.. Cool Dudes

Challenges

- Suitable community kitchens

Community Food and Nutrition Worker

- Aim to address Community Food and Food Poverty in the designated Healthy Community areas



Positive Parenting Programmes

The aim is to support the mental health of parents and healthy child development:

- Parenting Programmes will provide families access to evidence based parenting programmes for vulnerable families
- Triple P parenting programmes will be delivered in Darndale, Finglas and Cabra- Parent Plus in Ballymun

What has worked well:

- Well established organisations
- Training has increased pool of facilitators
- Links between disability services and parenting programmes

Challenges:

- Supporting recruitment to programmes
- Promotional piece- health literacy
- Background work that is required to support families



Making Every Contact Count

National HSE Brief Intervention Training Programme

- The programme works with local health professionals to ensure they have the capability to deliver brief interventions and advice for all patients regarding healthy behaviours (smoking, alcohol use, physical activity, mental wellbeing, diet and nutrition)

What has worked well:

- Enhancing Your Skills Workshop online
- Undergrad Education-new staff coming out of college with knowledge and skills
- Cross-sectoral partnership working E.g. ETB, HSE, Traveller Primary Health Care Workers
- Engagement with the community health network managers

Challenges:

- Competing training and work priorities
- No single assessment tool /computer based record



Learnings & Questions

Learnings

- Empowerment and Partnership Working- Importance of peers and community organisations in delivery model
- Support, support, support- key role of Community Health Promotion Staff in building the links between HSE staff and delivery organisations
- Creating a strong network of interagency collaboration among statutory and community organisations
- Different approaches needed in each area
- Iterative Process: Time required to measure impact, as evaluation grows learning will inform implementation

Questions

- Equity - How do we ensure we are reaching target populations and support people to move towards contemplation of tobacco cessation?
- Creating Tobacco Free Environments: How do we support all stakeholders to engage?





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Healthy Communities NDO

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Reform programme 2 – Addressing Health Inequalities

**Sláintecare
Implementation
Plan & Action
Plan
2021 - 2023**

Develop a Citizen
Care
Masterplan

Project 1



Rollout of Healthy
Communities

Project 2



Develop Regional
Health Areas

Project 3



Implement
Obesity Policy
and Action Plan
2016-2025

Project 4



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Marmot review 2010 - 6 ways to reduce health inequalities



**Marmot review
2020 - health
systems must
focus on health
prevention and
equity using :**





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Sláintecare Healthy Communities 2021

- Cavan Town & County (Cavan) Gaeltacht (Donegal) Inishowen (Donegal)
- West Mayo (Mayo)
- Limerick City (Limerick) Clonmel (Tipperary)
- North Cork City (Cork)
- Enniscorthy & Wexford Town (Wexford) Waterford City (Waterford)
- Bray (Wicklow)
- Athy (Kildare) Cherry Orchard (Dublin) Clondalkin (Dublin) Tallaght (Dublin)
- Athlone & Mullingar (Westmeath) Longford Town (Longford)
- Ballymun (Dublin) Finglas & Cabra (Dublin) Kilmore & Priorswood (Dublin)



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SHCP – ways of working / influences

Sláintecare Healthy Communities Programme

Taking a place-based approach to tackling health inequalities
in areas of deprivation

*Place-based initiatives (PBIs) to improve health and well-being
outcomes in deprived communities : An evidence brief*

Martin Keane, Caitríona Lee, and Jean Long (2022)



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Marmot – Tobacco Control

Table 1: Contribution of tobacco control to achieving the six Marmot goals

Marmot goal	Contribution of tobacco control
Give every child the best start in life.	The best start in life necessarily involves protection from secondhand smoke before birth and throughout childhood.
Enable all children, young people and adults to maximise their capabilities and have control over their lives.	Addiction is a loss of control. Preventing smoking initiation gives individuals greater control of their health and wellbeing in everyday life.
Create fair employment and good work for all.	Smokefree regulations have transformed workplaces, making them healthier and safer.
Ensure healthy standard of living for all.	Smokefree homes and workplaces underpin a healthy standard of living.
Create and develop healthy and sustainable places and communities.	Smokefree environments and public spaces are welcoming to all members of a community .
Strengthen the role and impact of ill health prevention.	Preventing people from starting smoking and helping them to quit remains the single most effective way of improving health outcomes for individuals.



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ash – Health Inequalities & Smoking - 2019



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“Closing the Gap” - Opportunities

- Integrate Health Inequality activity into the broader strategic local development/planning approaches – Local Authority/HSE etc ➡ LECP
- Leverage the involvement of the wider community – “real”
- Support consistent approaches across multiple providers



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What does that look like for SHCP & Local Government



Why it's important ?

Impact of Smoking on individual, family and community health.

Any success in reducing smoking in SHCP areas will have knock on benefits for the wider determinants of health, including through a reduction in poverty.



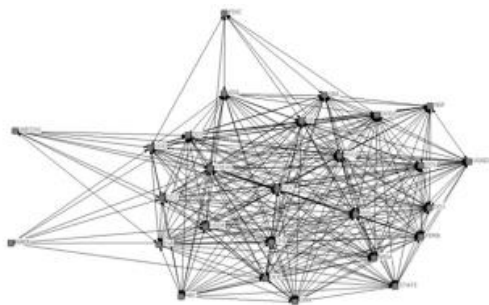
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What can SHCP do to “Close the Gap”



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