



CAWT Strategic Plan 2014 to 2022

Improving the health and
social well-being of people
living in border regions

FINAL: May 2018



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References

1.0 Introduction

CAWT is the cross border health and social care partnership for the Health Service Executive in the Republic of Ireland and the Southern and Western Health and Social Care Trusts, the Health and Social Care Board and the Public Health Agency in Northern Ireland. The CAWT partnership was established with the signing of the Ballyconnell Agreement in 1992 in order to pursue opportunities for co-operation by looking beyond the individual partner boundaries when planning and providing services.

Since then, great strides have been made in both the quantity and impact of cross border health and social care activity and collaboration. The CAWT partnership has evolved from an informal arrangement into an effective cross border delivery and implementation structure for the partner organisations.

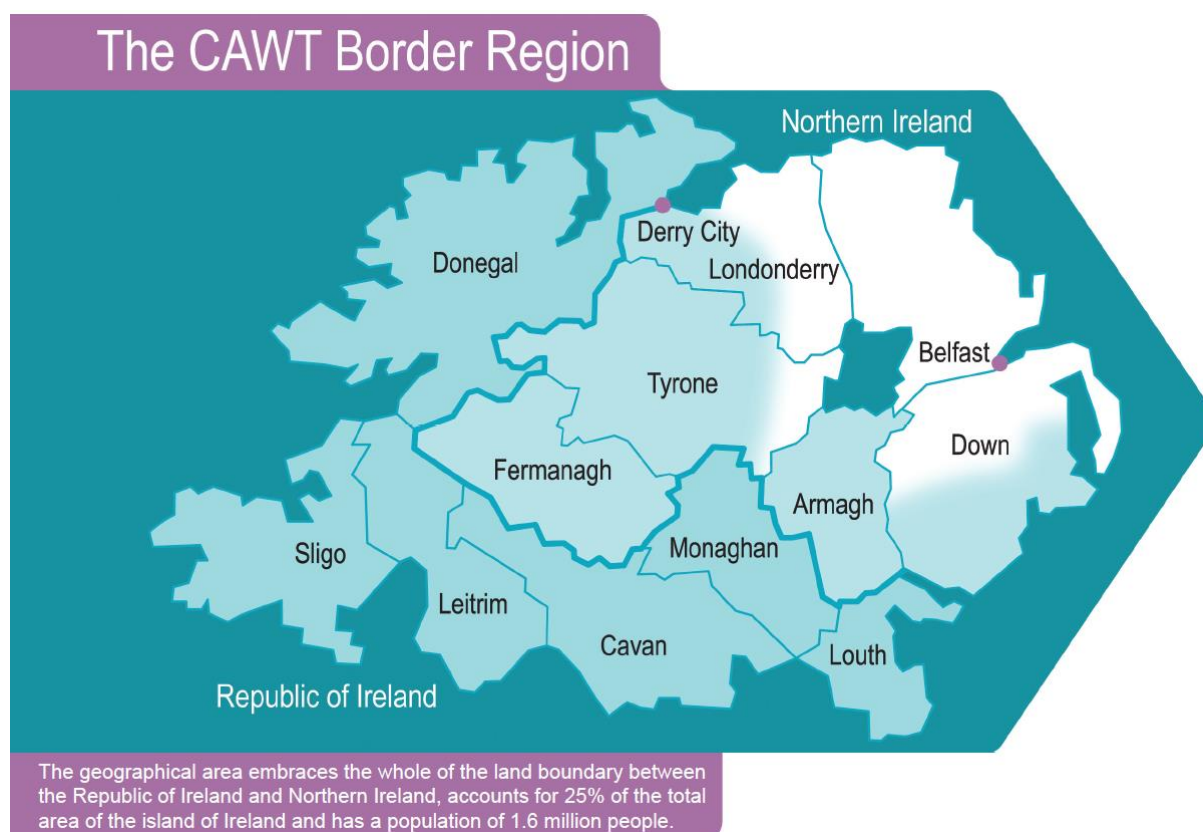
The CAWT Partnership is committed to supporting the change agenda in both Northern Ireland and the Republic of Ireland. Health and social care developments, policies and plans at national level will continue to provide direction for future activities. CAWT will continue to create ideas and exploit opportunities to support these policies through cross border initiatives.

The experience of cross border joint activity has led to a shared sense of identity and purpose between health and social care personnel on both sides of the border. We now have strong relationships and networks developed which will enable us to continue to implement new, value added cross border projects and services.

CAWT facilitates cross border health and social care joint working to add value, improve efficiency and share best practice among the partner organisations, ultimately leading to improved quality and access to patient services. Although CAWT has been in existence for many years prior to EU structural funds, INTERREG funding has enabled CAWT to consolidate co-operation in healthcare, resulting in targeted interventions to address health inequalities in the border region.

The Plan reflects on the mission, vision, core operating values and assumptions underlying CAWT's approach to its work.

This Strategic Plan sets out the CAWT partnership's focus and direction until the end of 2022.



1.1 CAWT's Purpose

To support the CAWT partner organisations in Northern Ireland and the Republic of Ireland in their collective work to improve the health and wellbeing of the people living in the border region and to enable better access to health and social care services.

1.2 CAWT's Vision

To realise opportunities and develop new ways to improve health and social care services for the well-being of people through collaboration across borders and boundaries.

1.3 CAWT's Values

We will:

- ◆ Be ethical, open and transparent in our work practices;
- ◆ Ensure a balanced approach in meeting the needs and expectations of patients and clients, funders and other stakeholders;
- ◆ Ensure that our work is pioneering and innovative and brings added value to health and social care activity and benefits to service users;
- ◆ Enable our staff to be involved in achieving the partnership's goals and to share knowledge and experience across organisations and jurisdictions;
- ◆ Build relationships with stakeholders in order to work collaboratively for the good of the service user; and
- ◆ Strive for excellence in all partnership activities.

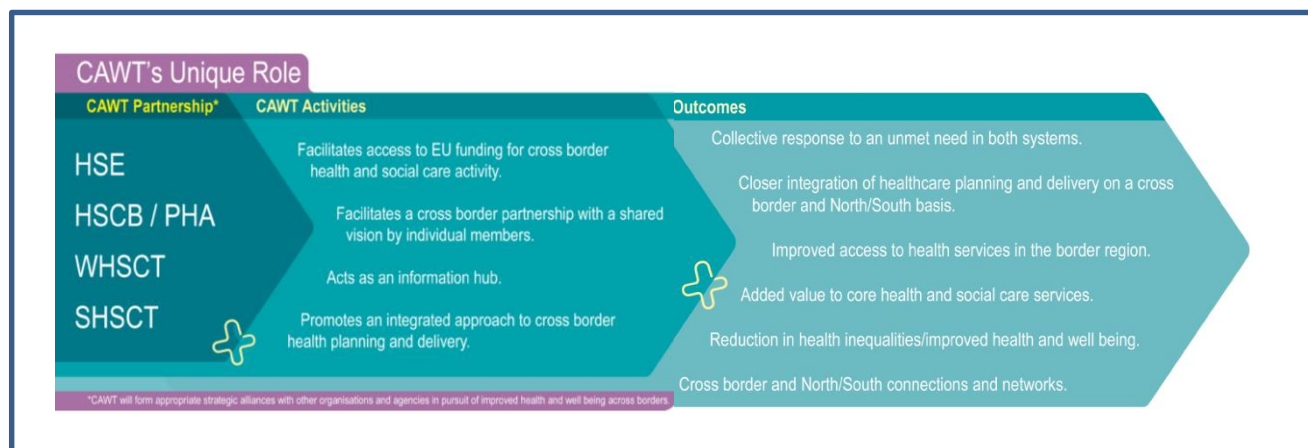
1.4 Strategic Goals

We will:

- ◆ Create opportunities for alternative, added value approaches to health and social care service delivery by facilitating people from both jurisdictions to collaborate, share ideas and develop practical solutions to common health challenges.
- ◆ Identify solutions to barriers to the cross border mobility of patients and professionals.
- ◆ Actively pursue strategic alliances with both internal health and social care partners and external agencies and groups in order to support the delivery of creative and innovative solutions to current and emerging health and social care challenges.
- ◆ Provide comprehensive intelligence and facilitate sharing of data and information on cross border health and wellbeing.
- ◆ Increase usage of technology within health and social care to improve care and enable better access to services.
- ◆ Engage with and positively influence policymakers and other key stakeholders in relation to the development and direction of cross border health and social care.

- ◆ Embed cross border planning and implementation in core activities, where more efficient and cost effective to do so.

Key actions to support the strategic goals have been identified and are described in Section 6.



2.0 Current Situation

Track record: Since its inception in 1992, CAWT has created and sustained a variety of cross border projects and services, built strong cross border linkages and has enhanced service provision to many rurally isolated and peripheral areas. The partnership has a proven track record in managing complex cross border health and social care projects and overcoming professional, legislative and administrative challenges due to the existence of the border. The CAWT Development Centre, as a specialised unit of management and administration, has been fundamental to this process.

Independent evaluation: Independent evaluations have confirmed that the CAWT partnership has been effective in delivering successive EU INTERREG funded activity and in meeting the targets set for the various work programmes. Indeed, thousands of people living in border communities have benefitted from CAWT's activities. It is most rewarding to know that our programme of work is now reaching more people than ever and has stimulated thinking on other possible areas of co-operation between the health and social care services in both jurisdictions.

Departmental Acknowledgement: Departments of Health in Ireland and Northern Ireland and Health Ministers, both current and past, have acknowledged the CAWT Partnership for its work in improving the health and well-being of border populations and welcome progress made in the implementation of the European Union's INTERREG funded projects in particular.

3.0 Achievements

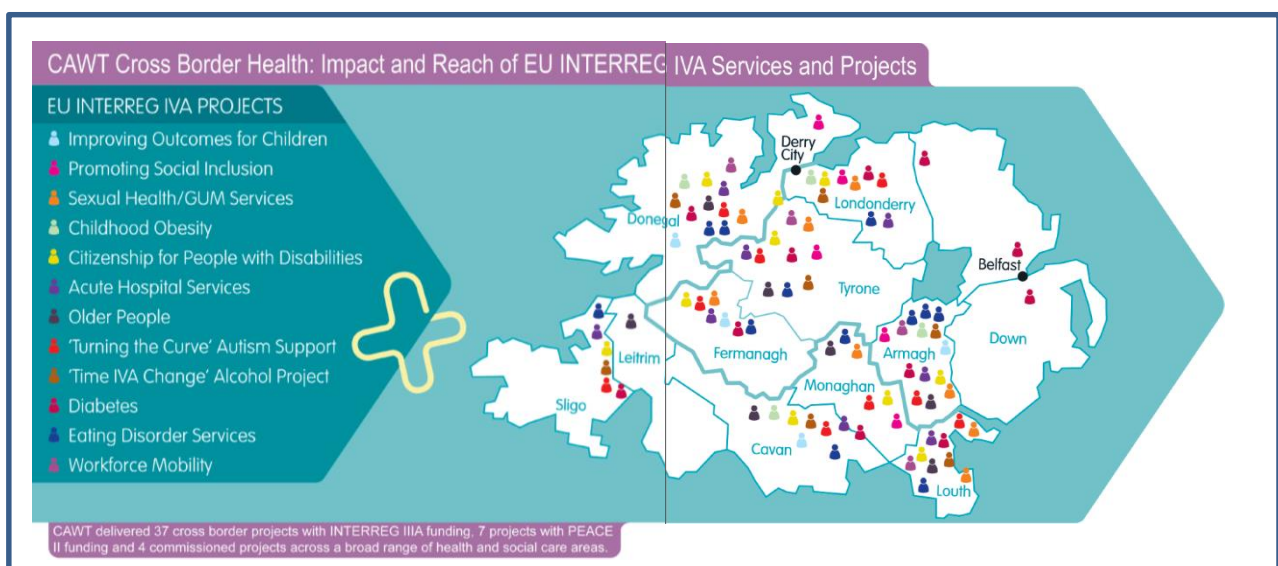
Securing EU funding: CAWT has secured significant EU funding for Ireland/Northern Ireland. In 1996 CAWT secured its first allocation of EU funding via the EU Special Support Programme for Peace and Reconciliation (PEACE I). This EU funding, along with the partner organisations' resources, allowed CAWT to formalise its organisational structure, appoint a full-time co-ordinator, procure financial monitoring support and establish an office base.

In 2003 CAWT secured funding from the EU INTERREG IIIA programme and the EU Programme for Peace and Reconciliation (PEACE II). This included funding to establish the CAWT Development Centre, to implement the recommendations from the independent review of CAWT carried out by the Centre for Cross Border Studies in 2001 and to support the implementation of the EU INTERREG IIIA, Priority 3, Measure 2.

INTERREG IVA: From 2008 to 2015 CAWT managed a range of cross border health and social care programmes funded by the EU INTERREG IVA programme, called 'Putting Patients, Clients and Families First.' 12 large scale, strategic, cross border health and social care service projects were delivered across the border region and within the eligible area of Northern Ireland. The programme had a strong focus on improving access to services, promoting health and well-being, reducing health inequalities and promoting social inclusion. Ultimately 53,000 people received services and 43,628 staff benefited from this successful programme. Up to 85% of services were mainstreamed or integrated into existing services after the EU funding period.

INTERREG VA: In 2017, the CAWT Partnership secured grant funding from the latest EU INTERREG programme, INTERREG VA, to support four large-scale

cross border health and social care projects up to 2022. A maximum grant of €26.4 million has been allocated for these projects in the areas of acute hospital services, mental health, children's services and community health and well-being. A fifth project, to the value of €7.9 million, in which CAWT is a partner, is being led by NHS 24 Scotland and is in the area of primary care and older people's services. The CAWT Partnership expects this EU INTERREG investment to lead to further consolidation of North/South co-operation in the health and social care sector in the future.



Commissioned work: CAWT also undertakes additional cross border work directly commissioned by the Departments of Health in both jurisdictions and also by the CAWT partner organisations. A selection of examples of CAWT's commissioned activities follow:

Since 2007 CAWT has co-ordinated a range of border major medical emergency planning exercises and cross border emergency medical assistance / trauma management courses. In recent years CAWT facilitated a number of cross border Humanitarian Disaster Response courses at the United Nations Training School Ireland in the Curragh. These courses were attended by medical, nursing and ambulance personnel from both Northern Ireland and the Republic of Ireland.

Between 2007 and 2011 CAWT facilitated the establishment of the Self - Harm Registry project in the Western Health and Social Care Trust region of Northern

Ireland as part of a collaboration with the National Registry of Deliberate Self-harm in the Republic of Ireland. This pilot has been mainstreamed and expanded throughout Northern Ireland by the Public Health Agency and the Health and Social Care Trusts.

In 2016 CAWT supported cross border Dementia Training by bringing the Virtual Dementia Tour®, which is a mobile simulated training initiative, to the North West. 144 healthcare personnel from across the hospital, community and voluntary services and some family carers from Derry/Londonderry and Donegal benefitted from the training.

In 2015, a North South Hidden Harm Working Group, facilitated by CAWT, developed a resource for use by those people working in the frontline to support children and young people affected by parental problem alcohol and other drug use. This all-island resource is now used for activities such as training and awareness raising and is informing the development of national guidelines for practitioners on Hidden Harm.

Advances in cross border mobility: As part of CAWT's work, impediments to the development of cross border services were identified and practical solutions developed to enable staff to work on a cross border basis between Northern Ireland and Republic of Ireland within specific contexts. For example, there is a cross border indemnity agreement in place which allows health and social care employees to work in both jurisdictions within a range of contexts described within the agreement. In relation to emergency planning, professional and regulatory bodies agreed for their registrants / members to be able to provide services in the opposite jurisdiction in the event of a Major Incident whilst still being accountable to them.

On-going relations are maintained with a range of professional and regulatory bodies in order to support future cross border service developments.

4.0 Context for cross border collaboration in health and social care

The landscape in which health and social care operates will continue to change. Key factors which will influence and guide CAWT's work include:

Financial constraints: With the continued financial pressures on the health and social care system in both jurisdictions, there is a need to ensure that value for money is being achieved. Recent health strategies in Northern Ireland and in the Republic of Ireland have referenced the challenges facing the health and social care sector and the need to reduce costs whilst maintaining and improving quality and outcomes for patients.

Demographics: The population is growing and ageing in both jurisdictions. Northern Ireland has the fastest growing population within the UK. The Northern Ireland Statistics and Research Agency (NISRA) has projected the NI population to rise from 1.8 million in 2010 to nearly 2 million in 2025 (this is an increase of nearly 8%). The population is projected to rise by 37% in the Republic of Ireland between 2008 and 2035 (Eurostat Commission 26/08/2008). In both jurisdictions, the growth in older populations will increase the incidence of chronic illness, e.g. diabetes, heart conditions, kidney disease, etc. with a consequential demand for increased services.

North South co-operation: In a climate of reform and rationalisation within the two health systems, there are real benefits to be derived for health service providers and patients, from closer collaboration on an all-island basis. Ministers for Health in the two jurisdictions, both current and previous, have expressed their support for sharing health facilities and resources and enhancing services through cross border and North South collaboration.

Tackling Social Inclusion and Health Inequalities: There is considerable evidence that the more socially and economically advantaged people are, the better their health. Many recent reports and studies highlight the continued existence of inequalities in health within the border region. Therefore the CAWT

partners will continue their focus on tackling health inequalities and promoting social inclusion.

EU developments/Europe 2020: Europe 2020 is the EU's growth strategy for the coming decade. This strategy focuses on the EU becoming a smart, sustainable and inclusive economy. There are five ambitious objectives - on employment, innovation, education, social inclusion and climate/energy - to be reached by 2020. The EU Commission recognises that combating poverty and social exclusion is mainly the responsibility of national governments. CAWT will continue build alliances with a wide range of stakeholders in developing solutions to both EU and national challenges and will seek out opportunities to access EU funding sources as appropriate.

Harnessing New Technologies: If properly harnessed, technology has the potential to improve the care and treatment of patients and clients, improve working lives and contribute to service modernisation. The CAWT partners will seek to collaborate and maximise use of technology where this approach can enhance the delivery of services and positively impact on health outcomes.

5.0 European Union INTERREG VA Funded Activity

The €283m EU INTERREG VA Programme is one of 60 similar funding programmes across the European Union that have been designed to help overcome the issues that arise from the existence of a border. The new programming provides opportunity for continued EU assistance to help create a more prosperous and sustainable cross-border region.

In total 85% of the Programme, representing €240m is provided through the European Regional Development Fund (ERDF). The remaining €43m, representing 15% is match-funded by the Irish Government and the Northern Ireland Executive.

The content of the new INTERREG VA Programme has been agreed by the Northern Ireland Executive, the Irish Government, the Scottish Government and the European Commission. Health and Social Care services on a cross-border basis is one of the four core objectives of the measure and has a monetary value

of €53 million. Unlike previous INTERREG programmes, this process did not involve a 'closed call' for statutory health services but rather was an open call for any organisation including those from the statutory, voluntary, community and private sectors to submit an application.

5.1 INTERREG VA Application Process

The CAWT Partnership made five project submissions to the EU INTERREG VA application process. All five projects passed the first stage and between April and Nov 2016, the CAWT Development Centre Team responded to detailed questions and clarification requested by the Special EU Programmes Body (SEUPB). This involved Team members linking in with the CAWT Strategy Groups to co-ordinate responses that required sign-off by all partners. In early 2017, various activities associated with the 'Permission to Start' phase commenced. This included the development of Partnership Agreements, restructuring Business Plan information to fit with SEUPB customised work plan formats and their on-line project management system, and provision of financial information to support SEUPB start up activities. A summary of the time line associated with these project submissions is outlined here:

Stage 1 Application closing date	16 Nov 2015
Stage 2 Business Plan closing date	29 Feb 2016 (5 projects)
Provision of further information / clarifications to SEUPB	Between April 2016 and Nov 2016
SEUPB Steering Group approval of projects obtained	Sept 2016 (3 projects) Jan 2017 (1 project)
Completion of 'Permission to Start' tasks as requested by SEUPB	May 2017
Final 'Letter of Offer' for grant funding issued by SEUPB	June 2017 (2 projects) July 2017 (2 projects)
Commencement of four EU INTERREG funded cross border projects which had successfully secured EU INTERREG VA grant funding	July 2017

Note: CAWT is also a partner in a Primary Care and Older People project called 'mPower Project' which is led by NHS 24 in Scotland. The CAWT Partnership supported the development of this project and is managing the implementation in Ireland / Northern Ireland.

Thus a comprehensive range of EU INTERREG VA funded projects will be delivered on behalf of the CAWT Partnership and support on-going cross border collaborative working arrangements. See Appendix 2 for summary project details.

5.2 New Scottish Partnerships

There has been significant engagement between the CAWT Partners and Scotland in terms of building relationships and partnerships with other stakeholders within the Scottish eligible area for EU funding. This engagement included interaction with the Department of Health Scotland, Scottish Europa Office and the Scottish Ambulance Service. Thus, a number of the EU INTERREG VA projects have developed strong links and partnerships as outlined here:

Community Health Sync Project (CoH Sync): When developing the CoH Sync project, considerable efforts were undertaken to secure a Scottish partner, both by the CAWT Population Health Strategy Group directly and by the SEUPB Scottish contact. NHS Dumfries and Galloway (Dept. of Public Health) responded positively to the CoH Sync project when approached by CAWT and subsequently confirmed willingness to be involved should funding be secured and were facilitated to input into the Business Plan, prior to submission. Thus NHS Dumfries and Galloway are now a full project partner in the CoH Sync Project along with the CAWT Partnership organisations.

The Community Paramedicine Project: As part of the overall CAWT Acute Project, under the EU INTERREG VA Programme, the ambulance services for the Republic of Ireland, Northern Ireland and Scotland are collaborating in the development and implementation of a community paramedicine project to improve the lives for patients in border and rural areas.

mPower Project: The mPower project is focused on connecting people to local activities and services which support health and well-being and also providing digital health solutions. The project idea was conceived by the CAWT Primary Care and Older Person's Strategy Group, and after collaboration with NHS Scotland, the project was broadened to include the three regions of Scotland, Ireland and Northern Ireland with NHS Scotland leading on the project.

5.3 CAWT and the UK EU Referendum (Brexit)

Despite the UK EU referendum result, CAWT's EU INTERREG VA programme of work has commenced with projects formally commencing in 2017. This has been enabled by the removal of the risk to the project funding by both Governments agreeing to underwrite the EU funding allocated, to ensure such projects are implemented in full as planned. This has been a welcome development as is the strong suggestion that both the UK and the EU are open to the continuation of / replacement to EU funding in the future.

Whilst at Governmental and EU levels there is a stated intent to minimise the impact of the UK EU referendum vote on the island of Ireland and to the border region specifically, the precise nature of 'Brexit' and its potential impacts have yet to unfold. It is evident that Brexit poses challenges to both formal and informal working relationships and arrangements which characterise cross border health and social care activity. In the meantime, cross border health and social care work will continue as normal, but with a sense that the landscape may change in coming months and years.

As the Brexit negotiations progress the CAWT Partnership would wish to see more clarity around continuation of open border arrangements which are integral to the functioning of border communities. From a health and social care perspective, it would be important that patients, staff and ambulances can continue to cross the border unhindered. It would also be important that there is continued mutual recognition of qualifications and mobility of health and social care staff.

In summary, the CAWT Partnership would consider it important that any post Brexit arrangements should not hinder existing cross border and all-island health and social care arrangements and future developments.

6.0 Actions to Support Strategic Goals

Key actions to support the strategic goals have been identified and are described in this section.

Create opportunities for alternative, added value approaches to health and social care service delivery by facilitating people from both jurisdictions to collaborate, share ideas and develop practical solutions to common health challenges by

- 1.0 Facilitating the exchange of best practice at a cross border and EU level in response to identified issues or emerging themes relating to health and social well-being.
- 2.0 Actively exploring opportunities for continuous development and modernisation of health services through collaboration with other statutory sectors, community and voluntary partners, academia and research institutes, at local, national and international level.
- 3.0 Utilisation of cross border Strategy Groups to identify services and activities suitable for cross border development and to support the EU funding application/business case process.
- 4.0 Participating in EU networks to support alliances for health and social care.
- 5.0 Ensuring awareness of the latest EU funding developments in order to increase the potential drawdown of EU funding for the border region/eligible area.

Examples of supporting activities

- In 2017 the CAWT Partnership secured EU INTERREG V grant funding for the implementation of four large-scale cross border health and social care projects up to 2022. These projects are in the areas of acute hospital services, mental health, children's services and community health and well-being. A fifth project in which CAWT is a project partner and led by NHS Scotland is in the area of primary care and older people's services. The total EU grant funding amounts to €30 million euros.
- Previously from 2008 to 2015, the CAWT Partnership was the Departments of Health nominated 'Delivery Agent' for the implementation of the 'Putting Patients, Clients and Families First' EU INTERREG IVA funded programme. The total value of this 12-project programme amounted to €30 million euros.

- From 2012 to 2014 CAWT was one of the 7 partners in a transnational programme called 'Recruit and Retain' which was funded by the European Union's Northern Periphery Programme project. The project examined the challenges and made recommendations in relation to the recruitment and retention of rural-based health care staff in more peripheral and remote communities.
- Since 2007 to the present, CAWT has co-ordinated cross border specialist training in the border region which provides health services and other emergency services personnel from both jurisdictions with practical opportunities to work together so that their readiness for medical emergencies is further enhanced. This training includes areas such as major medical emergency planning, advanced life support and humanitarian disaster assistance.

Identify solutions to barriers to the cross border mobility of patients and professionals by

- 1.0 Working with project teams to actively identify obstacles which impede service development and delivery.
- 2.0 Identifying examples of good practice in other EU countries.
- 3.0 Working with professional and regulatory organisations as obstacles arise.
- 4.0 Ensuring that indemnity arrangements are fit for purpose.
- 5.0 Profiling any new cross border agreements with all stakeholder organisations to ensure that future opportunities for cross border working and service delivery are maximised.

Examples of supporting activities

- There are a range of practical solutions in place, facilitated by the CAWT Partnership, which enable health and social care staff to work on a cross border basis between Northern Ireland and Republic of Ireland within specific contexts e.g. in response to a Major Incident. CAWT continues to regularly review and update the Indemnity Reciprocal Agreement for both jurisdictions.

Provide comprehensive intelligence and facilitate sharing of data and information on cross border health and wellbeing by

- 1.0 Enabling cross border contacts and networks between health and social care personnel in both jurisdictions.
- 2.0 Being a repository of information on health policies, strategies, protocols, demographics and community mapping of services in the border region.
- 3.0 Leading on cross border projects and services as requested by the CAWT partners, both Departments of Health and other stakeholders.
- 4.0 Sharing our experiences and learning with the EU funders and other cross border health and social care stakeholders.
- 5.0 Responding positively to requests to present to and participate in stakeholder and partner project events and information sharing forums.
- 6.0 Ensuring that the CAWT website is kept up-to-date and relevant in relation to CAWT's progress.
- 7.0 Issuing annual progress reports and quarterly newsletters.
- 8.0 Utilisation of social media to share information and data.
- 9.0 Co-ordinating best practice / showcase events for cross border projects in order to share learning and project outcomes and impacts.
- 10.0 CAWT will endeavour to embed and encourage appropriate evaluation methodologies.

Examples of supporting activities

- Organisation of workshops and other events for the current suite of EU INTERREG VA funded projects to share experiences and learning and inform policymakers and planners.
- CAWT regularly makes presentations to and meets with key stakeholders such as political parties, local councils and the Departments of Health to update them on cross border health and social care activity.
- The CAWT website and social media accounts are regularly updated with the latest news, events and publications.
- The CAWT Development Centre responds to selected consultations in order to inform policymakers and planners. Examples of such consultations to which CAWT provided a response include SEUPB's consultation on the 'Programme for Cross Border Territorial Co-operation (Ireland / Northern Ireland / Scotland) 2014-2020 (INTERREG V)' 2nd phase (3 June - 29 July 2014) and the Irish Central Border Area Network Ltd (ICBAN) consultation

on its 'Regional Strategic Framework for the Central Border Region 2013 to 2025'

- Coordination, sourcing and provision of information to a range of bodies including government, media, academia /researchers who contacted the CAWT Development Centre for information related to impact of the UK referendum result on leaving the EU (Brexit).

Increase usage of technology within health and social care to improve care and enable better access to services by

- 1.0 Working in partnership with the Departments of Health, health and social care, universities, research and development, academic institutions, private industry, voluntary and community sectors and other statutory agencies to identify opportunities to improve health and social well-being by utilisation of e-health solutions.
- 2.0 Building in the effective use of technology when developing and implementing cross border project and services in the future.

Examples of supporting activities

- The previous EU INTERREG IVA 12-project programme included technology-based aspects. For example the cross border Acute Project procured tele robots, which allows clinical specialists to provide patient care remotely and the Older Person's Project utilised Assistive Technology to enable individuals to function more independently and / or be maintained in their own homes.
- Participation in events organised by eHealth Ireland & Northern Ireland Connected Health Ecosystems and the International Connected Health Ecosystem Network.
- Participation in the NW Health Innovation Network.

Engage and positively influence policymakers and other key stakeholders in relation to the development and direction of cross border health and social care by

- 1.0 Sharing our experiences and learning with a broad range of cross border health and social care stakeholders.
- 2.0 Ensuring that project evaluations for EU INTERREG projects are shared with those who plan and implement health and social care policy.

- 3.0 Responding positively to requests to present to and participate in relevant events and information sharing forums.
- 4.0 Ensuring key influencers receive CAWT annual progress reports and quarterly newsletters.
- 5.0 Inviting health and social care policy makers and planners to best practice / showcase events for cross border projects in order to share learning and project outcomes and impacts.
- 6.0 Participation in EU networks and events to support alliances for health research and innovation.
- 7.0 Providing the CAWT partners with the necessary financial and project impact and evaluation information in order to inform mainstream decisions after the current EU INTERREG funding period.

Examples of supporting activities

- Ministers for Health, Chief Medical Officers and other senior Departmental officials invited to participate in key best practice / showcase events for cross border projects.
- Progress reports on all cross border projects provided at CAWT Secretariat and Management Board meetings.
- Provision of quarterly progress reports and other monitoring information to the Special EU Programmes Body in relation to EU funded projects.
- Gathering of project information related to implementation and progress towards achievement of targets for EU INTERREG funded projects in order to inform mainstream decision-making by the Departments of Health, Health and Social Care Commissioners and the individual CAWT partner organisations.

Embed cross border planning and implementation in core activities, where more efficient and cost effective to do so by

- 1.0 Ensuring that cross border health and social care is reflected in key policy documents and reports.
- 2.0 CAWT partners taking account of the cross border dimensions when planning and implementing services for their own catchment areas and regionally.
- 3.0 Ensuring that all the key stakeholders and influencers are involved in cross border projects from an early stage to influence project design and roll out.

4.0 Inputting to and supporting the development of business cases by the Departments of Health, Commissioners and Service Providers after the EU funding period.

Examples of supporting activities

- Supporting the evaluation activities of the Special EU Programmes Body for current INTERREG funded projects.
- Implementation of effective monitoring and evaluation activities for each INTERREG funded project.
- A communications strategy developed for each of the current INTERREG projects which ensures that information on project progress, challenges and achievements is shared in a timely and appropriate fashion.

7.0 Governance

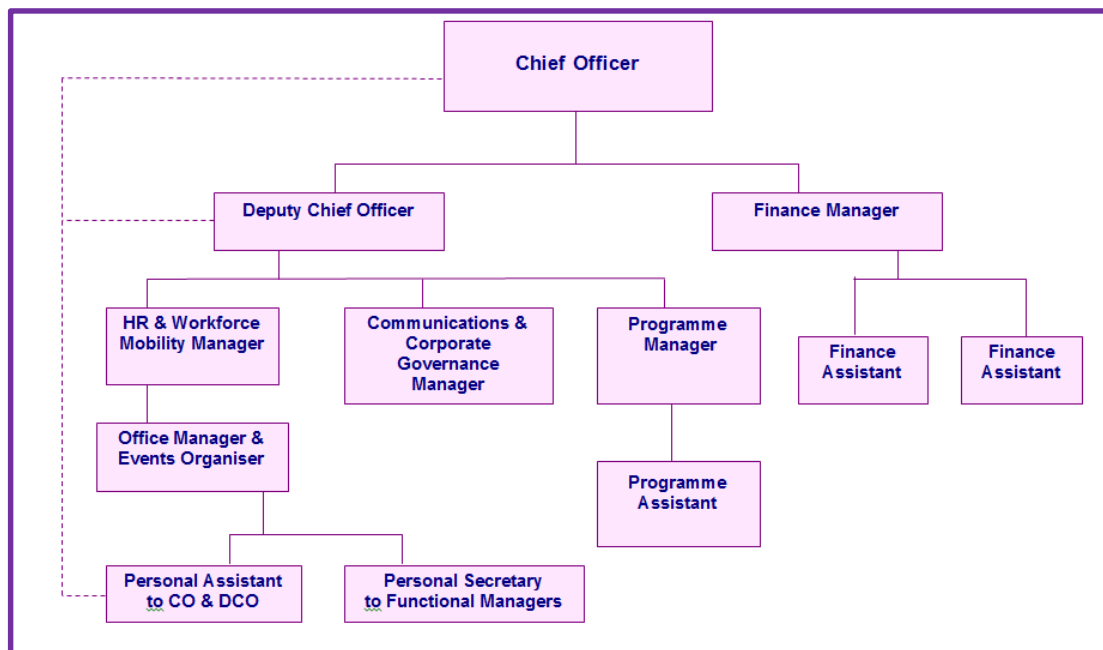
The CAWT Partnership is a unique arrangement whereby 5 statutory organisations from across the two jurisdictions have formally signed up to work in partnership for the benefit of their populations. Accountability and reporting arrangements across the CAWT Partnership have been enhanced and strengthened since inception in 1992. The CAWT Partnership has a Governance Manual in place which guides the work of the Partnership in its entirety and is regularly reviewed at the AGM. The CAWT Partnership has an agreed process for specific identified situations in order that the partner organisations can be assured that decisions made are consistent with existing governance arrangements in place within their organisations.

CAWT has a particular responsibility for exploiting opportunities for joint working and securing financial assistance from the European Union that would bring added value and extra resources to the health and social care sector. In managing this EU funding, the CAWT partners have agreed to a shared liability arrangement in terms of the management of this funding. It also means that the risks and responsibilities are shared equally among the CAWT partner organisations, embedding the principle that anything progressed by one CAWT partner on behalf of others becomes the shared responsibility of all.

8.0 CAWT Development Centre Staffing

Following discussions with the CAWT HR Group and the CAWT partners organisations, all posts within the CAWT Development Centre have been given permanent contracts. This regularises the long standing temporary nature of a number of the posts. The Host Organisation for CAWT Development Centre staff posts is currently the Health and Social Care Board.

CAWT Development Centre Staff Structure



9.0 Conclusion

The pioneering work associated with the CAWT Partnership, which is more than 25 years in existence, continues to progress unabated.

In addition to the substantial workload associated with EU funding, CAWT, in tandem with its partner organisations, is now well positioned to assist the Departments of Health, their Ministers and the North South Ministerial Council in facilitating and implementing cross border initiatives for the benefit of patients and clients in the border region of Ireland/Northern Ireland.

Ongoing activity continues to strengthen working across jurisdictions, not only in terms of funded projects but also, for commissioned projects such as emergency planning and staff education and training programmes.

Given the complexity of cross border working and the experiences of applying and accounting for EU funded initiatives, the expertise built up in the CAWT Development Centre offers a mechanism for the health services in both jurisdictions to avail of wider funding opportunities as they arise and broker agreements for cross border health and social care developments.

The EU INTERREG funding along with the support of the respective governments, the Departments of Health and other stakeholders enables the CAWT partners to seize 'a once in a lifetime opportunity' to improve the health and well-being of patients and clients through creating access to a range of additional and new services. This provision crosses organisational and professional boundaries and relationships as well as borders to help provide the very best services possible.

At all junctures the work supports existing services as well as helping to build social capital and community resilience. All projects are operating in support of the programmes for government and health and well-being service delivery plans.

The continued EU funding available to the CAWT Partnership and the ensuing work, together with the wide range of commissioned work such as that emanating from the North South Ministerial Council and the various Departments including, Health, NI Office, Foreign Affairs and Defence has ensured the strategic direction for the CAWT Development Centre Staff well beyond the completion date of EU INTERREG VA funding programme in June 2022.

Appendix 1: CAWT governance and decision-making structures

CAWT Management Board

The Management Board provides overall strategic guidance and comprises Chief Executives and senior managers from the statutory health service organisations comprising the CAWT Partnership.

CAWT Secretariat

Senior managers from each of the CAWT partner organisations have been nominated to the CAWT Secretariat, which serves as the link between the Management Board and the CAWT cross border Project Boards.

CAWT Project Boards

The Project Boards oversee the management, implementation and quality assurance of CAWT's EU INTERREG VA programme.

Functional Support

Groups and individuals from the health services provide specialist advice and guidance in the areas of Finance, eHealth, Project Management, HR, Procurement and Communications to support cross border working.

CAWT Development Centre

The CAWT Development Centre has a team of 11 staff who provides specialist expertise to support cross border working structures and networks.

Appendix 2: CAWT's EU INTERREG VA funded projects

<p>Acute Hospital Services</p> <p>The intention of this project is to increase acute episodes of care to patients, through improved / reformed service delivery on a cross-border basis. Enhancement of cross border services for dermatology initially and rolling out to other specialties e.g. urology, vascular etc. Development of more efficient patient pathways during the pre-hospital phase e.g. community paramedic hubs to see/treat/transport to appropriate medical facilities.</p>
<p>Mental Health <i>Innovation Recovery 'i-Recover'</i></p> <p>Empowering people with experience of mental illness. Patients and mental health practitioners will work together to co-produce and co-deliver a range of educational courses in response to the needs of people with mental health problems. Includes establishment of cross border recovery colleges which will include development of virtual education and support services.</p>
<p>Multiple Adverse Childhood Experiences 'MACE' – Breaking the Cycle Project</p> <ul style="list-style-type: none"> • The Multiple Adverse Childhood Experiences (MACE) – Breaking the Cycle Project aims to transform the lives of vulnerable children/families who are most at risk from multiple adversities in their lives, by identifying, intervening early and providing nurturing and support within their own homes and communities on a cross border basis. • MACE relate to the number of negative experiences to which a child is exposed e.g. parental alcohol/drug abuse, domestic violence in the home, parental mental illness, bereavement within the home, disability, etc. The focus will be on children within the age groups 0-3 and 11-13. • The main objectives of the Project will be to develop a comprehensive assessment tool to identify children and families most at risk and identify appropriate targeted interventions. Five cross border community networks of excellence will be established to deliver the interventions required.
<p>Primary Care and Older People (NHS Scotland leading) 'mPower'</p> <p>Creation of a modernised infrastructure for healthy ageing, access to personalised care services and community support systems to ensure older people can live safely and independently in their own homes. Facilitation of self-management of health and well-being through the use of digital e-health services. Provision of remote access to health services using a virtual platform to bring services to the older person's home or local healthcare clinic thus reducing the requirement to travel significant distances to access care services.</p>
<p>Population Health <i>Community Health Sync 'CoH-Sync'</i></p> <p>Development of a network of eight Locality Health and Well-being Hubs in the border region of RoI/NI and Western Scotland, resourced with Health Trainers who will support individuals and groups to become more active in improving their own health and wellbeing by making better use of existing resources, improving access through cross border working and filling identified gaps in service provision, thus building sustainable resilience through a community assets based approach. Focus is on tackling health inequalities and reducing the impact of key risk factors in the development of Long Term Conditions.</p>

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