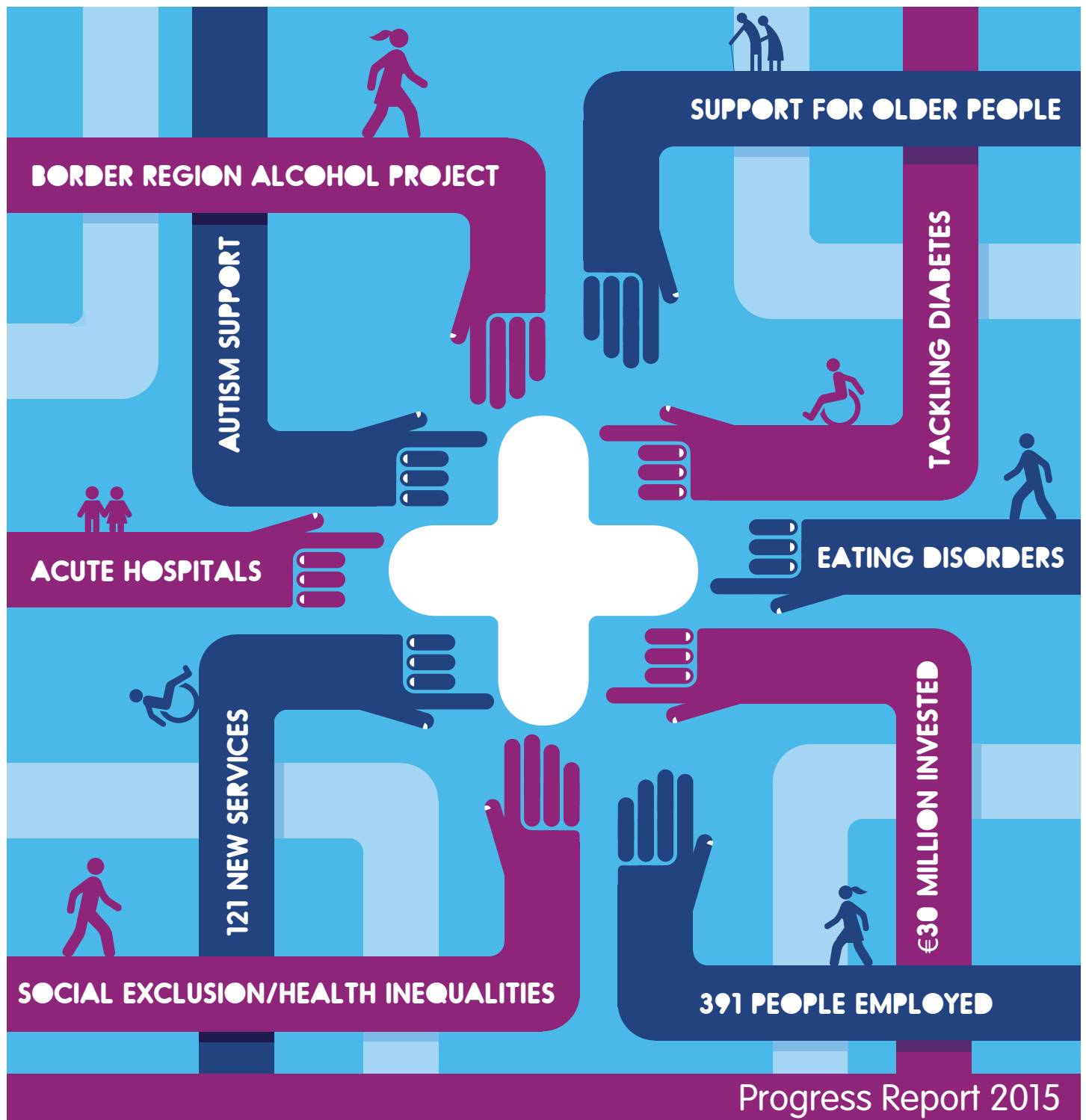


CAWT

cooperation and working together





Director General's Overview

Tom Daly, Assistant National Director, HSE.



Welcome to the CAWT Partnership Annual Progress Report for 2015. The year has largely been one of transition for the CAWT Partnership as we completed one major programme of work and intensified our preparations for the next. Specifically we have begun the process of making submissions to the new INTERREG cross-border co-operation programme for the Border Region of Ireland,

Northern Ireland and Western Scotland (2014-2020).

2015 saw the completion of the largest EU funded work programme ever undertaken by the CAWT Partnership. The 'Putting Patients, Clients and Families First' 12-project programme enabled a suite of cross border services and initiatives to be delivered in the border region which benefitted 53,000 service users. A further 43,628 staff benefitted from a range of training initiatives. The independent evaluation of this €30 million investment highlighted the effectiveness, efficiency and additionality of the entire programme delivered by the CAWT Partnership. The CAWT Partnership's reputation in planning and managing collaborative cross border activity has

been greatly enhanced by the tangible outcomes achieved in this latest EU funded programme of work and gives us a solid foundation for the future. The progress made, however, would not have been possible without the contribution, dedication and commitment of many health and social care personnel. Furthermore, the relationships and networks developed with other stakeholders, ranging from the Departments of Health in Ireland and in Northern Ireland to the community and voluntary sector, has enhanced the impact of the cross border activity undertaken.

Our focus on planning for the future increased during the second half of 2015 which culminated in the submission of six first stage applications to the EU INTERREG VA Programme's Health

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.



CAWT Management Board members. Back row (l to r): Francis Rice, Interim Chief Executive, Southern Health and Social Care Trust (NI); Damien McCallion, National Director Ambulance Service, HSE; Dean Sullivan, Director of Commissioning, Health and Social Care Board (NI); Paul Cavanagh, CAWT Secretariat, Health and Social Care Board (NI). Front row (l to r): Dr Eddie Rooney, Chief Executive, Public Health Agency (NI), Tom Daly, Assistant National Director, HSE North South Unit and Director General of CAWT and Elaine Way, Chief Executive, Western Health and Social Care Trust (NI).

Measure which opened in October for applications. The measure aims to 'improve the health and wellbeing of people living in the region by enabling them to access quality health and social care services in the most appropriate setting to their needs.'

This is an open and competitive measure for which the CAWT partner organisations have been actively preparing. CAWT's six cross border Strategy Groups have been developing projects that will bring added value and benefits to the region by adopting a cross border approach. Should these applications be successful in the first stage, then the next phase will involve the submission of a full business plan in early 2016 to the Special EU Programmes Body, the

managing authority for the EU INTERREG VA Programme. Thanks to all those who contributed their time and expertise to the process, which for many, is additional to their day-to-day duties.

I would like to thank my fellow Management Board members and the Secretariat for their vision for and commitment to cross border health and social care. In particular I wish to acknowledge departing Management Board member, Mairead McAlinden, Chief Executive of the Southern Health and Social Care Trust, who has provided tremendous leadership and support to cross border health and social care over many years. I would like to extend a warm welcome to those who joined us during the year: Damien McCallion,

HSE National Director for the National Ambulance Service; John Hayes, Chief Officer, Community Health Organisation Area, HSE and Angela Fitzgerald, Deputy National Director for Acute Hospitals, HSE, all who joined the CAWT Management Board. Welcome also to Aldrina Magwood, Acting Director of Performance and Reform, Southern Health and Social Care Trust who joins the CAWT Secretariat.

Finally, the CAWT partners are committed to working with the Departments of Health in both jurisdictions, the North South Ministerial Council, Health Agencies and other stakeholders in facilitating and implementing cross border services for the benefit of patients and clients in the wider border region. We look forward to our journey in the months and years ahead in continuing to develop innovative and collaborative ways to improve health and well-being and access to health services in border regions.



Joint Secretaries from the North South Ministerial Council viewing the recently published all-island Hidden Harm resource. From left: Shane O'Neill, Ireland Joint Secretary and Colm Shannon, Northern Ireland Joint Secretary.



Taking Stock and Looking to the Future

Bernie McCrory, Chief Officer, CAWT.

health and social care, supporting current policy and practice, and bringing social and economic benefits to local border communities within both jurisdictions.

In support of this process we have engaged with a range of stakeholders to develop workable and innovative cross border projects that fit with the dual requirements of the new EU INTERREG VA programme and which also support health and social care policy and practice.

Measure which opened in the second half of 2015.

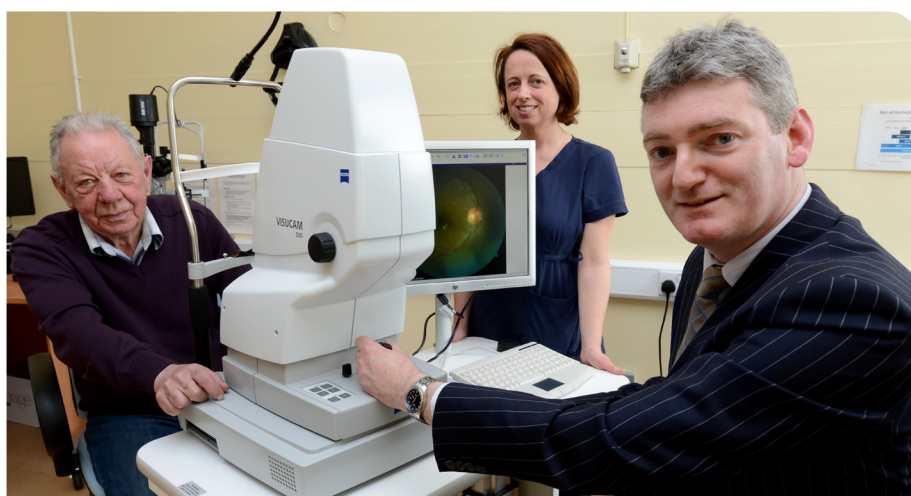
Our Strategy Groups have devoted substantial time to identifying the needs of their populations and devising collaborative cross border solutions to fill gaps in service provision and create new ways of working. The projects being developed by the Strategy Groups are focused on cross border solutions, adding value to

CAWT Strategy Groups

- Acute Hospital Services
- Children's Services
- Disability
- Mental Health
- Primary Care and Older People
- Population Health



Now that all completed projects under the EU INTERREG IVA programme have either been mainstreamed within existing health and social care services or concluded as planned, emphasis has shifted to our next phase. The CAWT Partnership's Strategy Groups, six in total, have concentrated their efforts in developing suitable proposals for submission to the new EU INTERREG VA Programme's Health



Frank Duffy, Dundalk (left) one of the first patients to undergo cataract surgery as part of the new Eye Service in Louth County Hospital with Geraldine Forrester, Clinical Nurse Manager and Mr James Morgan, Consultant Ophthalmologist at Louth County Hospital.

Some Notable Highlights From 2015

The four remaining EU INTERREG IVA projects concluded as planned during the year: the Eating Disorder project established extra Therapist posts in the HSE border counties, the Southern Health and Social Care Trust and also within the Western Health and Social Care Trust area. This has proved to be a much needed service and has now been mainstreamed by the CAWT partner organisations. The Assistive Technology element of the Older Person's Project also completed. This project impacted upon 1,000 people who received support within their own homes, thus reducing the risk of falls, accidents and hospital admissions. Patients in Louth, Monaghan and Cavan areas are continuing to benefit from the new Ophthalmology Service established in Louth County Hospital. This new service has made a significant impact on local waiting lists. Lastly, the CAWT Diabetes Project concluded in April, leaving a tremendous legacy that will benefit people with diabetes long into the future as both the CHOICE Structured Patient Education programme and the Pre-pregnancy Care clinics have now been incorporated into core health services on completion of the EU funding phase.

In April we welcomed 20 health and social care

professionals from Poland, Romania, Italy, and Greece who met with representatives from the Western Health and Social Care Trust and the HSE, to share best practice in protecting and promoting child health and wellbeing. The visit to Northern Ireland was co-ordinated by CAWT as part of a Leonardo Da Vinci programme which enables organisations from European countries to collaborate on education and vocational training initiatives.

It is most rewarding for the CAWT Partnership to be able to support cross border and all-island health and social care activity and to be the 'bridge builder' where necessary. So, in addition to our primary role of securing and managing EU funding for the benefit of border regions, the CAWT Partnership provided both practical and strategic support to enable cross border and all-island collaboration.

For example, the first all-island transplant conference held in the Titanic Centre in Belfast in September 2015, was organised by CAWT in partnership with the National Transplant Society. The event brought together some of the most renowned global professionals in the field of transplantation. Fifteen speakers, including those from the USA, Northern Ireland, UK and Ireland addressed the 250 strong

audience. As well as sharing best practice from both parts of the Island of Ireland, the event facilitated discussions around the opportunities and challenges of developing closer ties between both jurisdictions.

Continuing CAWT's role in enabling cross border and all-island collaboration, a further Advanced Trauma Life Support course was held in the United Nations Training School, the Curragh, County Kildare in September. This successful course was attended by medical and nursing personnel from both Northern Ireland and the Republic of Ireland and will be followed up with additional training in 2016.



Thanks to all those who have been part of the CAWT Partnership during the year. We hope to be successful in securing further EU investment for border regions and the wider INTERREG eligible area. This will allow us to deepen and strengthen cross border health and social care by enabling us to deliver a range of innovative services that will benefit citizens and leave a lasting legacy.

Spotlight on the Legacy of the INTERREG IVA Programme of Work

The EU INTERREG IVA funding for the overall 'Putting Patients, Clients and Families First' 12-project programme concluded as planned in 2015. The focus during the final months was on bringing the remaining projects to a successful conclusion and activating mainstreaming plans so that, where feasible, services could continue or be integrated into core activity of the CAWT partner organisations. The diagrams on pages 6 and 7 provide an 'at a glance' summary of the scale and achievement associated with this €30 million euro investment in the border region over the EU INTERREG IVA timeframe.

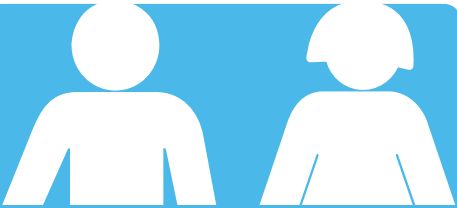
A key feature during the lifetime of the 'Putting Patients, Clients and Families First' Programme was the shift in the

economic climate which gradually became more constricted. This resulted in the tightening of health and social care budgets in both jurisdictions, thus reducing the capacity of the CAWT partner organisations to implement the many new services created after the EU funding, no matter how successful a particular initiative proved to be. Despite the challenges, the majority of the projects and services were able to prove their longer term sustainability. This is due to the fact that all projects funded demonstrated their compatibility with current health care policy and practice and were in line with the core services provided by the CAWT partner organisations. To illustrate this, some examples of projects and services which made a successful transition from EU funding include:



166 health and social care staff provided direct support and guidance.

166



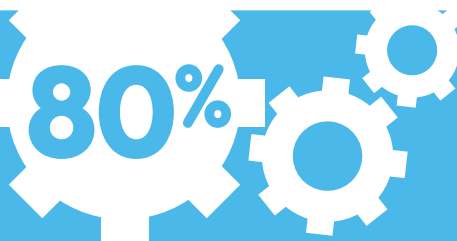
391 people employed in the delivery of the services and initiatives.



50 community and voluntary organisations were partners in delivery.



350 cross border Project Board meetings held.



80% of services (partially or in full) continued after EU funding.

Cross Border ENT Service

After the conclusion of the EU funding for the cross border ENT service established between the HSE and the Southern Health and Social Care Trust, Northern Ireland based hospital consultants are continuing to provide a sustainable ENT service. By working together and sharing resources across the border, both health services are able to provide better access to high quality ENT services for patients living in the more rural border areas. As part of this cross border service, Monaghan Hospital provides ENT outpatient and adult day case treatment delivered by a Southern Health and Social Care Trust consultant. Patients who require more complex surgery, inpatient treatment or paediatric surgery are receiving their treatment in Craigavon Area Hospital or Daisy Hill Hospital in Newry. This increase in catchment area, through cross border collaboration, has enabled the Southern Health and Social Care Trust to expand and enhance their ENT service and increase their consultant medical team numbers. Crucially, patients in both jurisdictions are benefitting from the enhanced cross border service.

Cross Border Eating Disorders Network

The CAWT Eating Disorders Network project enhanced therapeutic services for people suffering from mild to moderate eating disorders. The project deployed additional specialist eating disorder therapists in the border region within primary care and community settings and focused on building preventative and early intervention capacity. With the conclusion of the EU funding, the project achieved a high level of sustainability as the additional resources were mainstreamed into core services of the CAWT partner organisations.

Furthermore, at a policy level in Northern Ireland, the project has helped to shape future developments. Specifically in 2015, the Regulation and Quality Improvement Authority were commissioned by the



Southern Health and Social Care Trust Eating Disorder Therapist Esther Irwin in consultation with a patient.



DHSSPS to undertake a review of eating disorder services in Northern Ireland. The Southern and Western Health and Social Care Trusts participated in this review with both acknowledging the importance of the CAWT Eating Disorders Network project in how their respective services have been strengthened. Specifically the review report states that ***'The Southern Trust had, as a result of CAWT eating disorder project funding, employed three additional practitioners, to help provide services for patients with mild to moderate eating disorders. In September 2013, two CAWT staff transferred directly to eating disorder services.'***

Also noted in the report ***'At level 2, the Trust's [WHSCT] primary care mental health teams offer assessment and treatment of mild to moderate eating disorders. It offers evidence-based psychological treatments, such as CBT-E, which has been delivered through the CAWT project. CAWT eating disorder therapists have provided staff updates/training to GP practices. This is considered to be as a result of earlier interventions through the use of CAWT [EU] funding, and the upskilling of staff to deal with eating disorders.'***

Cross Border Diabetes Project

The two new services introduced by the CAWT Diabetes Project, with funding provided by the European Union's INTERREG IVA programme, have proved to be a great success and have demonstrated a high degree of sustainability. The first service, the CHOICE programme is for children and young people who have diabetes. The second service is specifically for women planning pregnancy who attend Pre-pregnancy Care clinics in their local area. 3,965 people in total have benefitted from the new diabetes services during the EU funding period. Since the conclusion of all EU funding for the project in April, both services have continued in full or have been incorporated into core services.

In June 2014 the DHSSPS published the 'Report of the Diabetes Review Steering Group - reflecting on care for people with diabetes 2003-2013.' This report highlights the contribution of the CAWT Diabetes Project and EU funding has made to enabling the Northern Ireland Health and Social Care Trusts to deliver structured

patient education. It acknowledges the importance of CHOICE and makes the case for 'the programme to remain part of routine care if children and young people are to continue to be educated in the management of their condition' and states that 'There has been significant progress in the education of children and young people with Type 1 diabetes following the introduction of CHOICE.' Recommendation 7 notes that 'It is recommended that the CHOICE structured patient education programme continue to be funded beyond Dec 2013 [after EU funding concludes].' The subsequent securing of mainstream funding is testament to the success of CHOICE and the overall CAWT Diabetes project.

Strengthening Families Programme

A particular success for the CAWT Alcohol Project was the piloting of the Strengthening Families Programme within Northern Ireland. Prior to EU funding, this evidenced-based Programme had been running successfully in the Republic of Ireland. The EU funding secured by CAWT enabled Derry Healthy Cities

to co-ordinate the delivery of the Programme in Derry /Londonderry. The Strengthening Families Programme is a 14-week early intervention programme, specifically designed for vulnerable families, to help prevent and reduce risk to children.

Commenting on the success of the programme,

Leona Scott, Programme Co-ordinator with Derry Healthy Cities said:
“The families who have participated on the Programme have been on an amazing journey. In week one families are always anxious and nervous but over the weeks they become more and more confident and happier as a family unit,

participating in activities together and enjoying each other’s company. This programme truly provides an opportunity for families to re-engage with each other.”

Evaluations of the Strengthening Families Programme demonstrate positive outcomes including increased family resilience

Summary Description of ‘Putting Patients, Clients and Families First’ Projects

Acute Hospital Services Project	Cross border ENT (including Ophthalmology), Urology and Vascular services.
Time IVA Change Border Region Alcohol Project	Early Intervention Services, Strengthening Families Programme and Community Mobilisation activities.
Turning the Curve Autism Project Support	Provision of support for children with Autism Spectrum Disorder and their families.
Citizenship for People With Disabilities	Increased participation, social inclusion and day opportunity services for people with disabilities.
Tackling Diabetes in High Risk Clients	Pre-pregnancy care clinics across the project region and structured patient education programmes for children and adolescents with diabetes.
Eating Disorder Network	Specialist eating disorder therapy services provided to patients in primary care and community settings.
Sexual Health/GUM Services	Development of sexual health / GUM clinics in the border area.
Prevention and Management of Childhood Obesity	A community-led approach to preventing and tackling obesity within families and young children.
Support for Older People	Provision of assistive technology and locally-based social support initiatives to enhance the independence and social inclusion of older people.
Improving Outcomes for Children and Families	Planning and delivering services so that better outcomes are achieved for children and young people.
Promoting Social Inclusion and Tackling Health Inequalities	Delivery of a range of Social Inclusion programmes aimed at marginalised groups including Travellers, vulnerable women and people with sensory disabilities.
Cross Border Workforce Mobility	Cross border exchange of knowledge and skills through specialised training and practical initiatives.

and reduced risk factors for problem behaviours in high risk children, including behavioural, emotional, academic and social problems.

According to the independent evaluation of the CAWT Alcohol Project, the Strengthening Families Programme (SFP) has been 'effective in responding to the needs of families with deep-rooted problems.' The evaluation also noted that 'there was an apparent need to build upon the legacy of the CAWT funded phase of SFP. The Trust's [WHSCCT] commitment to sustaining the programme was confirmed through the HSC Western Local Commissioning Group's allocation of £23,000 towards continuing the SFP.'

Thus the Strengthening Families Programme made the successful transition from being a pilot to a programme which is integrated into the range of family support services funded by the Public Health Agency and delivered throughout Northern Ireland. As of January 2013 the Strengthening Families Programme is operating in the Belfast, Northern, South Eastern and Western Health and Social Care Trust areas.

In Conversation With

Elaine Way,
Chief Executive of the Western Health
and Social Care Trust



the Trust has been able to add value to its day-to-day activities and enhance health and social care across the CAWT border area. Over the years many excellent cross border relationships and networks have been created that will continue into the future.

How does being part of the CAWT Partnership support you in your role / add value to your organisation?

As one of the founding members of the CAWT Partnership, the Western Trust has engaged positively with health service colleagues in the Republic of Ireland to design and deliver many innovative services for the benefit of people living in the border region. By sharing resources, ideas and expertise with colleagues in our neighbouring jurisdiction,

How important is the CAWT Partnership in contributing towards meeting the aims and objectives of your organisation?

We value the CAWT Partnership as, by being an active engaged member, it adds value to our core business of delivering quality health and social care across the Western Health and Social Care Trust area. Operating on a cross border basis not only provides the population size required to support the establishment of new services; it also helps the partners to achieve economies of scale. Current

examples of this are the development of the cross border radiotherapy centre and the introduction of 24/7 primary Percutaneous Coronary Intervention (PCI) services, both based at the Altnagelvin Hospital site. These services will provide more locally accessible and timely services and reduce travelling distances for thousands of people for generations to come.

Along with the other CAWT Partnership organisations, your organisation jointly delivered the EU INTERREG IVA funded 12-project programme, 'Putting Patients, Clients and Families First.' Were there any particular highlights and challenges?

The 'Putting Patients, Clients and Families First' programme involved delivering 12 large scale projects which resulted in an extra €30 million invested in health and social care across the wider border region. This experience of cross border activity led to a shared sense of identity and increased understanding among health and social care management and staff engaged in cross border work. It has also contributed significantly to staff development.

From a service perspective there have been many highlights – within acute

hospital services we have been able to provide additional ENT and Vascular services, using the latest technology, to our own populations and also to people from the Donegal, Sligo and Leitrim areas who wished to avail of a service closer to where they live. As with other regions, our ageing population profile is one that the Trust has to consider in planning services for the future. It was particularly beneficial to be able to use the EU funding provided by CAWT, to provide additional telecare packages to older people, thereby enabling them to live as independently for as long as possible.

The CAWT Diabetes Project allowed the Trust to put more structured patient education programmes on the ground for young people with diabetes and their families - the 'CHOICE' patient education programme

improved their understanding of and ability to self-manage their condition. I was delighted to hear the many positive comments from those who availed of this excellent service.

Our 'Citizenship for People with Disabilities' project was also tremendously successful in enabling people with disabilities to participate more actively in all aspects of community life. This project helped us to link our service users to a variety of social, leisure, education, and employment opportunities, thus enabling genuine citizenship based on enhanced choice and access. It has been such a positive experience for so many people.

Another highlight for me is the 'Turning the Curve' Autism Project which provided practical support to families with children and young people with Autism Spectrum Disorder (ASD). This integrated approach, tailored to the needs of the child or young person, helped to shape core ASD provision in the Trust.

Being able to have a joint approach in tackling health inequalities in the border region, where we share similar challenges in terms of rurality and deprivation, has been very rewarding. Our Social Inclusion, Obesity and

Being able to have a joint approach in tackling health inequalities in the border region, where we share similar challenges... has been very rewarding.

Alcohol projects have all contributed to improving health inequality by reaching out to vulnerable groups and working in areas of greatest need. The many partnerships we formed with the community and voluntary sector has been a particularly effective approach.

I believe that cross border engagement and activity can be both equally challenging and rewarding. A range of Trust staff across many of our directorates have engaged and are continuing to engage in cross border collaborative work. For many, this cross border activity, particularly in the early planning phase, is challenging and time-consuming and sometimes requires them to work outside their comfort zone. However, the reward of being able to provide quality services to our service users, which add value to the core work of the Trust, greatly outweighs the challenges. Thus, we in the Western Trust see the border as an opportunity and not as a barrier to enhancing services to our population.

What have been the learnings and legacy of the 'Putting Patients, Clients and Families First' programme?

The success of the programme has provided solid evidence that the CAWT

...we in the Western Trust see the border as an opportunity and not as a barrier to enhancing services to our population.

Partnership is effective in delivering for its catchment area.

In particular, the 12 cross border Project Boards were committed to ensuring the success of their respective initiatives. The Project Boards, each with Trust representation, successfully managed the planning and implementation of their project and are to be commended for their commitment and determination to succeed.

The Trust has been able to absorb and continue many of the EU funded services either as initially developed or in an adapted format. This demonstrates how the CAWT projects have complemented and added value to our existing provision and how they are aligned to national / regional strategic health and social care priorities within both jurisdictions.

As I have stated already, cross border activity is not

without its challenges and I have been greatly impressed by the willingness of all partners to overcome hurdles, both anticipated and unexpected, so that the project can be successfully completed.

I would also give great credit to Trust staff who have embraced cross border activity wholeheartedly because it enables them to provide enhanced, quality services to patients and clients and benefits the communities they serve.

How do you see cross border health and social care evolving in the future?

There is no doubt that having access to EU structural funds via the CAWT Partnership provides a stimulus for engagement in cross border activity, particularly when finance and budgets are restricted. This additional investment gives us scope to try new ways of working and to use the various cross border initiatives and services to enable greater patient mobility and also to facilitate health professionals to work across jurisdictions.

We are actively collaborating with all of the CAWT partner organisations in preparation for the new INTERREG funding measure which has up to €53 million in European Regional Development

Funding available for cross border health and social care for the delivery of specific outputs. We would hope to be able to access a sizeable portion of this funding to improve access to services for people in the North West and across the wider eligible area, including western areas of Scotland.

Whilst the funding mechanism for cross border engagement is on a project by project basis, we in the CAWT Partnership have taken a strategic view by ensuring that all our activities support the change agendas in both jurisdictions. We will continue to develop ideas and exploit opportunities to support policies through the development and delivery of cross border activities.

In our Trust we have taken cross border activity a stage further with a range of non-EU funded activities underway such as the cross border radiotherapy service and the primary Percutaneous Coronary Intervention (PCI) service at Altnagelvin as mentioned earlier.

So, we in the Western Trust are open to and indeed committed to further cross border engagement where it benefits our public, improves health and well-being and supports the objectives of the Trust.

In Conversation With

Damien McCallion,
HSE National Director,
National Ambulance Service



How important is the CAWT Partnership in contributing towards meeting the aims and objectives of your organisation?

CAWT is a key enabler in supporting our work in border areas and also in identifying border opportunities across both jurisdictions. Whilst we operate in different regulatory environments and in different delivery systems, it is still surprising how many challenges are similar in both systems. So, as planners and providers of health and social care we have much to gain from practical co-operation with our neighbours in Northern Ireland. Whilst cross border health and social care activity has been driven by the good sense in making public services more accessible to border populations who often live in more rural, peripheral areas and who cross borders regularly in their daily lives, there are also other

How does being part of the CAWT Partnership support you in your role / add value to your organisation?

I have been a board member of the CAWT partnership as HSE Area Manager and currently as HSE National Director responsible for Ambulance Services. CAWT has supported me in ensuring we provide the best services possible for people in the border regions.

... 'cross border champions' understand that cross border work brings tangible benefits to border populations and are thus motivated to lead and support cross border activity.

motivating factors. These include the opportunity to share resources and costs and to achieve economies of scale. However, there is no doubt that EU funding has been an important factor in developing cross border health and social care to current levels.

Along with the other CAWT Partnership organisations, your organisation jointly delivered the EU INTERREG IVA funded 12-project programme, 'Putting Patients, Clients and Families First.' Were there any particular highlights and challenges?

For me, the on-going work of the CAWT Partnership and its continued and indeed growing role in supporting the HSE in the delivery of a first class health service to all people, including those living

in border regions, is a notable achievement in itself. Despite the challenges in terms of on-going health reforms and a more constrained financial climate, we have been able to deliver a suite of 12 projects within the 'Putting Patients, Clients and Families First' programme.

For example, we delivered a range of cross border acute hospital services which helped us to meet waiting list challenges. These include ENT, Ophthalmology, Urology and Vascular services. We also supported activities which had a focus on early intervention and prevention in the areas of alcohol abuse, childhood obesity, autism support, diabetes and a broad range of social inclusion programmes. In doing so we engaged with third sector partners to ensure our programmes were focused on tackling inequalities and also to enable us to reach more vulnerable populations. This cross sector working proved to be successful and an effective way to develop and deliver community based programmes in particular.

I also want to pay tribute to the dedication and commitment of health and social care staff who assisted with securing the funding and delivering projects on the ground. These 'cross border champions' understand that

cross border work brings tangible benefits to border populations and are thus motivated to lead and support cross border activity.

What have been the learnings and legacy of the 'Putting Patients Clients and Families First' programme?

The health systems in our two jurisdictions are different in terms of policy, structures, coverage and funding and have been shaped by different experiences and influences. This means that engaging in cross border health and social care is not a straightforward process and normally requires significant pre-planning. Whilst we can learn from past programmes, there are usually no universal

... by the commitment of the Health Services North and South, to work in a collaborative way where a joined-up approach to particular service developments brings mutual advantages.

CAWT is a key enabler in supporting our work in border areas and also in identifying border opportunities across both jurisdictions.

solutions to draw upon and each cross border service has to be meticulously planned and executed. To achieve success however, a number of key factors need to be part of any cross border service planning. These include strong engagement and consultation with all the stakeholders as early as possible and services clearly linked to health and social care policies and priorities.

The delivery of the Putting Patients, Clients and Families First represents a major step for the CAWT Partnership in that our focus shifted more to practical service delivery benefitting people living in the border region. We have done that successfully by overcoming barriers and obstacles and ultimately thousands of people have benefitted from the new and enhanced services developed as a result of this

EU investment. The strengthening and deepening of cross border linkages that has resulted from implementing the Putting Patients, Clients and Families First programme means we are well placed to develop new areas, both EU and non EU funded, which would benefit from a cross border approach.

How do you see cross border health and social care evolving in the future?

There has been significant activity in cross border health and social care activity over the last decade. This has been greatly assisted by the availability of EU funding programmes, INTERREG funding in particular, and by the commitment of the Health Services North and South, to work in a collaborative way where a joined-up approach to particular service developments brings mutual advantages.

The new EU funding programme will be coming on stream in 2016 in which a total of €53m has been allocated to health interventions delivered on a cross-border basis. The CAWT Partnership has submitted funding applications to the health theme which, if successful, will result in improved access to health and social services by patients and clients,

particularly for people living in more rural border areas.

Another key area of cross border service development is the building of relationships at strategic and operational level. The CAWT Partnership facilitates this aspect as trust and value need to be built up on a cross border basis over time. Notwithstanding this, it is clear that there will be greater movement of patients across countries within Europe, to access health care. As a single island this will undoubtedly present both challenges and opportunities.

There has been significant activity in cross border health and social care activity over the last decade... greatly assisted by the availability of EU funding programmes... and by the commitment of the Health Services North and South, to work in a collaborative way.



Impact on Communities

View from our Community Partners

Up to 50 community / third sector organisations were key partners in the planning and implementation of many of the projects and services delivered under the 'Putting Patients, Clients and Families First' programme. Some representatives from this sector outline their experiences and viewpoints here:



**Anne Murphy,
Good Morning Louth**

"I regularly hear clients say that it is great to hear the human voice. They really appreciate being connected to the local community by our service. It lifts their mood and improves their well-being".

The Good Morning Louth service was established in 2011 by the CAWT Older

People's Project with EU INTERREG IVA funding for a 2-year period. Based in Dundalk, Good Morning Louth makes daily telephone calls to older people, listening to any problems or issues the older person wants to talk about and passing on information of interest to the client. Good Morning Louth also signposts clients to other local organisations and services. The service is about reducing loneliness and isolation and helping older people to stay well and safe in their home and also for the peace of mind of families. The Netwell Centre, which is part of the Dundalk Institute of Technology, received EU INTERREG funding for the service via the CAWT Older People's Project. Good Morning Louth is now a vital part of the network of integrated services for older

people, many of which are provided by the community and voluntary sector working in partnership with statutory services.

In 2013, Good Morning Louth was recognised by the Louth Business Award scheme, by winning the 'Age Friendly' Award category.

The service has continued to thrive since the EU funding concluded as planned in 2012. Reflecting on the establishment of the service, Anne Murphy, Co-ordinator commented:

"The EU funding we received through CAWT secured our place in the community and enabled us to establish a successful service that is now part of the wider community fabric of Dundalk and environs. The support was more than financial, as the CAWT project team helped us to develop a professional, well-run organisation with good systems and a solid foundation." She added: ***"The CAWT team really supported and mentored us for the first two years, they shared their experiences and connected us to similar services in other parts of the country."***

When asked about the key to making the service a success, Anne highlighted

that proper funding and effective management along with the mentoring support were the main ingredients. She also stressed that the service is meeting a need as loneliness and isolation is an issue for many older people. She also noted that older people are comfortable with the telephone as a means of communication and that worries and concerns can be more easily raised with an 'anonymous' volunteer on the other end of the line.

The service is now well bedded into the community and the future looks bright. There are currently 45 to 50 volunteers with 375 clients registered which is continuing to grow. On average the service is dealing with 8 to 9 new clients every month. This is all done with one full-time co-ordinator, some community employment interns and a team of dedicated and passionate volunteers.

The service has been sustained after the EU funding period. Good Morning Louth was awarded section 39 funding from the Health Service Executive (HSE) from 1st January 2014. Also the volunteers, through their voluntary forum, have raised additional funding.

Initially the service was confined to Co. Louth but has since broadened its catchment area to Co. Monaghan and even has a Dublin based client! Currently, an outreach office is being established in Ardee in Co. Louth which will be volunteer-led and will serve clients in that locality. Also the service now includes clients in residential long term care. Connecting with older people in long term care maintains their links with the community and makes an important contribution to the national guidance for nursing homes under the HIQA Standards.

Commenting on what the future may bring Anne said:

“we are getting a lot of self-referrals and our service could go much further and become a national initiative as it offers a cost effective, early intervention approach which, along with other services, can enable older people to remain independent for longer.”

A volunteer forum is now in operation in Good Morning Louth and the organisation will continue to exchange ideas and good practice, both internally and externally, leading to better work practice and a quality service to clients.



**Garry Glennon,
Letterkenny Youth
and Family Service**

Letterkenny Youth and Family Service (LYFS) was one of four community and voluntary sector groups which successfully tendered to deliver the CAWT Obesity project funded by the EU INTERREG IVA programme. LYFS won the tender in 2010 to deliver a childhood obesity and prevention and management programme in the Letterkenny area of Donegal and in partnership with three other areas across the border region. Garry Glennon, Manager of LYFS had previously attended a local information event on the forthcoming tender which convinced him to go for the opportunity, despite being a relatively small community-based organisation.

Commenting on the process Garry said: ***“When we tendered for the CAWT Obesity project, we were concerned about our small scale and that we might***



not have the capacity to deliver the project. We knew we could do a good job but felt that we were unlikely to win the bid against larger more established community and voluntary organisations located in Northern Ireland in particular. No one was more surprised than me when we won the bid!"

Letterkenny Youth and Family Service successfully delivered the MEET programme (Motivate, Educate and Exercise Together) to families within the Letterkenny area. The success of the MEET project was down to a number of key factors: Early on the CAWT Obesity Project Manager established a cross border learning network between the four service providers which met on a regular basis. Garry found this forum to be invaluable in sharing information and experiences. He felt that CAWT provided a 'mentoring' environment for his organisation which allowed them to grow in confidence and enabled them to learn how to manage a public sector contract. He also commented that the Project Manager and Project Board were very helpful and supportive and were available to help sort out any issues or challenges.

When the EU funding for the project concluded, Garry was able to continue the MEET programme on a smaller scale through HSE Health Promotion & Improvement support. Garry has no doubt that their involvement in the project raised the profile of his organisation and enhanced their reputation as being an organisation which can deliver successful programmes to the most socially excluded and vulnerable in society.

LYFS has built up invaluable contacts both locally and on a cross border basis as a result of involvement in the project. It has also led to new opportunities. For example, LYFS have since delivered a cross border teenage obesity project called HELP, 'Healthy Eating Lifestyles Programme,' in Limavady, Magherafelt, Strabane and Donegal. Also LYFS regularly facilitate people with disabilities to use their community gym, support the delivery of a social prescribing pilot project and are currently planning a breast-feeding boot camp for local families in partnership with Cuidiu (the Irish Childbirth Trust). Garry is hopeful that new opportunities will arise to enable LYFS to continue to deliver for local communities and to help those most socially excluded from society.



Patient/Client Perspective

Cross Border ENT Services - a Patient Experience

Fionn Murray from Monaghan town was delighted to have availed of the cross border ENT service recently. This cross border service was established as a joint initiative between the HSE in the Monaghan and Cavan region and the Southern Health and Social Care Trust in Northern Ireland. CAWT secured the EU funding initially to get the cross border initiative off the ground which has since proven to be a great success. The service has continued after the conclusion of EU funding with the support of mainstream health service funding.



Fionn's mother, Sheila, explained that his health problems started in his junior cert year, when he was aged 16 years. Sheila said: ***"Fionn had constant throat infections along with swollen, painful tonsils for a couple of years. His GP put him on a waiting list for the***

procedure to remove his tonsils." She added: ***"We were delighted when Fionn was offered an appointment over the border in Craigavon Area Hospital as it is only a 40 minute drive from where we live in Monaghan and was so convenient."***

Shortly after his pre-op assessment Fionn had tonsillectomy surgery in Craigavon Area Hospital and had an overnight stay. Fionn hasn't looked back since his operation. Commenting on the experience, Fionn said: ***"Within a month of my assessment appointment in Craigavon Area Hospital I had my operation. I was surprised to get the***

operation date so quickly. Everything went well thankfully and the staff were so attentive and helpful, checking on me every hour. They gave me loads of information and took really good care of me. I would say that staff went over and above what would normally be expected to ensure I was well looked after and got home safely. I would recommend this great service to anybody who needs it."

According to Sheila: ***"This is a great service for people like ourselves living near the border to be able to access. The facilities in Craigavon are fabulous. Once we got the first appointment in Craigavon it all worked out exceptionally well. It is great to see the good co-operation between the two health services, north and south. It certainly makes it easier for us to access excellent services closer to where we live."***

We were delighted when Fionn was offered an appointment over the border in Craigavon Area Hospital as it is only a 40 minute drive from where we live.

Cross Border Hidden Harm

'Opening our Eyes to Hidden Harm'

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. In recognition that hidden harm is an issue in both jurisdictions, the working group developed this all-island resource which is being used for activities such as training and awareness raising. The resource is targeted at a broad audience including teachers, GPs, youth workers, sports coaches, child care services and family support services. As well as outlining the scale



Bernie McCrory, Chief Officer, CAWT and Lt Col Anthony Corcoran, Defence Forces Ireland at a cross border emergency planning training event in the Curragh, Co. Kildare.

of the problem of hidden harm and how to recognise if a child or young person is affected, the resource provides practical advice on how to deal with the issue and who to contact if there are concerns. The main message is that if you have concerns you should not ignore them, rather explore the situation further, seek advice and offer support.

The feedback from those who have been using the tool has been positive. Ed Sipler, a Health Development Specialist at South Eastern Health and Social Care Trust has been using the resource in his training. He said: *"I was delighted to be part of this all-island team which developed this useful resource. Reducing alcohol and drug related harm and helping people change behaviour are key parts of my role. I have been using the leaflet with groups I am seeing for training for a range of issues including hidden harm and the feedback*

has been excellent. It's a good tool to have."

Similarly HSE Project Manager, Marion Rackard, Chair of the National Hidden Harm Steering Group in Ireland, commented that:

"We are pleased to have had the opportunity to work with Public Health Agency colleagues in the development of the resource, 'Opening Our Eyes to Hidden Harm' for frontline workers. This will now be a primary resource for both our sectors in raising awareness of the issue among our respective stakeholders and in the progression of the development of a national guideline for practitioners on Hidden Harm."



YOU CAN MAKE A DIFFERENCE

Opening our Eyes to

HIDDEN HARM

EMPOWERING FRONTLINE WORKERS
TO SUPPORT CHILDREN AND YOUNG
PEOPLE AFFECTED BY PARENTAL
PROBLEM ALCOHOL AND OTHER
DRUG USE

Teachers • GPs • Youth Workers • Sports Coaches
Child Care Services • Family Support Services

Cross Border Emergency Planning

CAWT supported the coordination of a successful Humanitarian Disaster

Assistance course which was held in the United Nations Training School, the Curragh, County Kildare in September 2015. The training course was delivered by members of the Faculty of Conflict and Catastrophe Medicine of the Worshipful Society of Apothecaries of the City of London, all who have wide ranging experience in the field of humanitarian aid and disaster management.

This course was attended by medical and nursing personnel from both Northern Ireland and the Republic of Ireland. Commenting on the course, Damien McCallion, HSE and CAWT Management Board member said: ***“Specialised training opportunities are extremely valuable because they enable ambulance and other medical staff, from both sides of the border, to engage in practical exercises and to build up a better understanding of each other’s systems and processes. I want to***

acknowledge the superb team effort by all those involved in organising and supporting this cross border training.”

Cross Border Nursing Award

For the second year running CAWT sponsored the Chief Nursing Officers' Award for Excellence in Cross Border Nursing. This Award, which was inaugurated in 2014, recognises innovation and excellence in patient care, either within the border region or on an all-Island basis. The winner was announced at the annual All-Ireland Chief Nursing Officers' Conference held in Belfast in November 2015. The 'Cross Border Senior Nurses and Midwives Forum,' received the Award, which was presented by the Departments of Health Chief Nursing Officers, Dr Siobhan O'Halloran and Charlotte

McArdle on behalf of CAWT. This Forum was established in 2013 by Anne Gallen, Director of Nursing at the HSE and Alan Corry Finn, Director of Nursing at the Western Health and Social Care Trust to progress joint initiatives and share practice. Accepting the Award on behalf of all the nurses and midwives involved in the cross border Forum, both founding members agreed that: ***“Given the close proximity of our health and social care services to each other in the NW border region, it makes sense for us to collaborate and learn from each other for the benefit of patients and the services.”***

All-island Organ Transplantation Event

In keeping with CAWT's role to enable and facilitate cross border linkages, the Partnership agreed to assist with the co-ordination of the first all-island transplant conference. CAWT partnered with the National Transplant Society to organise the event which was held in Belfast and brought together some of the most distinguished



2015 Excellence in Cross Border Nursing Award winners receiving their CAWT trophy (from left): Edel O'Doherty, Deputy Chief Officer, CAWT; Dr Siobhan O'Halloran, Chief Nursing Officer at the Department of Health, Ireland; Anne Gallen, Director of Nursing, HSE North West; Alan Corry-Finn, Director of Nursing, Western Health and Social Care Trust and Charlotte McArdle, Chief Nursing Officer, Department of Health, Northern Ireland.



Representatives from the National Transplant Society at the all-island organ transplantation event (l to r): Dr David Healy, Consultant Cardio-thoracic Surgeon at St Vincent's and Mater University Hospitals Dublin and Tim Brown, Consultant Transplant Surgeon at Belfast City Hospital.

professionals in the field of transplantation. Up to 15 speakers from the USA, Northern Ireland, UK and Ireland addressed the 250 strong audience. As well as sharing best practice from both parts of the Island of Ireland, the opportunities and challenges of developing closer ties between both jurisdictions was discussed.

Commenting, event co-organiser Tim Brown, Consultant Transplant Surgeon at Belfast City Hospital said: ***"The turnout for the event was excellent and provided us with a platform to consider how the two health systems on the island could further collaborate to improve services for the entire population. In Northern Ireland we are fortunate to have a population and system that supports the very best live donor rates and outcomes, not just in the UK, but in the whole of Europe and continental United States. This conference provided an***

opportunity to share our expertise and consider possible ways we could further develop organ donation opportunities across the Island."

European Parliament Presentations

CAWT was delighted to participate in two information events co-ordinated by the European Parliament Information Office in Ireland, one in co-operation with the

HSE and the other with the ICA on the theme of health and ageing. The objective of the events included the opportunity to learn about European health initiatives and innovative local solutions and supports as well as enabling citizens to voice their opinion directly to European representatives. A variety of contributors spoke about health issues and initiatives that are focused on promoting good health in older age. CAWT used this presentation opportunity to outline the activities undertaken by the EU INTERREG IVA funded Older People's Project. In particular, delegates were briefed on the wide range of successful social support initiatives implemented by the project including 'Befriending' and 'Good Morning' services to small grants awarded to older people's groups, health information sessions, social and volunteer car and information and signposting services.



Pictured at the EU Parliament / HSE event on Health and Ageing (l to r): Sadie Bergin, CAWT; Denise Curran, Acting General Manager, HSE Donegal; Francis Jacobs, European Parliament; Marian Harkin, MEP; John Hayes, Chief Officer, Community Healthcare Organisation, HSE and Gwen Mooney, Service Manager for Older People, HSE.

Future Planning

INTERREG VA and the Strategy Groups

managers, as members of one of CAWT's six cross border Strategy Groups have been actively meeting over many months to develop practical, tightly-focused cross border services/projects. These six cross border Strategy Groups have been developing projects that will bring added value and benefits to the region by adopting a cross border approach.



Pictured at a CAWT project event are (l to r): Arlette Howell, HSE, Brigid McGinty, CAWT; Miceal Crilly, Southern Health and Social Care Trust and Jackie Barron, HSE.

The CAWT Partnership has 23 years' experience of planning, managing and successfully delivering cross border health and social care initiatives across the eligible area, both EU and non EU funded. Thus, the CAWT Partnership organisations (the HSE, the Western Health and Social Care

Trust, the Southern Health and Social Care Trust, the Public Health Agency and the Health and Social Care Board) are well placed to work with a range of partners to develop creative and innovative solutions for the new INTERREG VA health theme. Up to 60 senior health and social care

The EU INTERREG VA Programme's Health Measure has approximately €53 million in funding available to support cross border health and social care initiatives. The Measure aims to 'improve the health and wellbeing of people living in the region by enabling them to access quality health and social care services in the most appropriate setting to their needs. It will result in an increased number of episodes of care delivered on a cross border basis.'

During 2015 the content of the new Co-operation Programme for INTERREG 2014-2020 was agreed by the Northern Ireland Executive, the Irish Government and the Scottish Government and formally adopted by the

European Commission. The Co-operation programme has four priority areas, one of which is health. The Special EU Programmes Body publicly announced the opening of the first stage for submissions from interested groups and organisations. The CAWT Partnership responded by submitting to the Special EU Programmes Body by the November closing date details of a range of practical, innovative initiatives suitable for cross border development. If successful, the next stage, scheduled for early 2016, will involve the submission of a full business plan for each of the six projects being developed.

The INTERREG VA programme is an open and competitive measure for which the CAWT partner organisations have been actively preparing. The CAWT Management Board wishes to acknowledge the significant contribution by their own staff, as members of the CAWT Strategy Groups, in terms of time and resources dedicated to the EU funding application process which is additional to their day-to-day roles.

There are a number of key aspects which the CAWT Strategy Groups have been incorporating into their

“The CAWT Acute Strategy Group enables our Hospital to work in close partnership with our near neighbours in the Western Health and Social Care Trust and across the wider CAWT Partnership. Ultimately we are striving to improve patient access to quality healthcare, and if we can secure additional EU investment through CAWT, we will be able to implement a range of innovative acute hospital projects on a cross border basis. Also these cross border initiatives will provide more locally accessible and timely services for our patients and reduce travelling distances for many people living in border regions.”



Sean Murphy,
General Manager, Letterkenny
University Hospital; Chair,
CAWT Acute Strategy Group

submissions. Current policy thinking in relation to tackling health inequalities and social exclusion is focused on genuine partnership working across a range of sectors including statutory, community, voluntary and private. In

keeping with the partnership approach, the CAWT Strategy Groups have endeavoured to ensure that their project proposals are tailored to meet local needs and reach the most vulnerable population groups. Other key aspects highlighted within the proposals developed include:

- Ensuring that existing facilities and resources within the health services are fully utilised and duplication reduced
- Working across larger geographies within the border region to achieve economies of scale
- Enabling people to access quality services closer to where they live
- Building capacity in local communities to tackle the root causes of ill health
- Focusing on early intervention and prevention
- Supporting caring communities and independent living
- Enhancing resilience and recovery within people and communities
- Ensuring greater utilisation of e-health and technology
- Developing mutually beneficial partnerships with the community / voluntary / third sector
- Overcoming barriers to mobility on a cross border basis
- Upskilling and building resilience within the health and social care workforce and other partners involved in delivery of health related programmes

“The CAWT Disability Strategy Group, which is representative of all the CAWT partnership organisations has developed a proposal which, if successful in securing EU funding, will contribute to improving quality of life for people with a disability across the CAWT region. Working within the Strategy Group has enabled us to think creatively about what we could do on a cross border basis. Whilst it has been challenging at times to arrive at a consensus as our services are different on both sides of the border, we have developed a solid project which will enhance the lives of those with a disability and also their families and wider communities”



Miceal Crilly,
Acting Director of Mental Health
and Disability Services,
Southern Health and Social
Care Trust.

Cross Border Proposals Submitted to the EU INTERREG VA Funding Process

Acute Hospital Services	Provision of additional acute episodes of care to patients, through improved/reformed service delivery on a cross border basis.
Mental Health Innovation Recovery 'i-Recover'	Development of cross border recovery colleges to empower people to increase knowledge and skills for recovery and self-management of mental health.
Children's Services Multiple Adverse Childhood Experiences 'MACE'	Identifying vulnerable children /families with multiple and complex needs and providing an early intervention support within the family and community in order to realise joined-up, innovative, and responsive solutions.
Population Health Community Health Sync 'CoH-Sync'	Stemming the flow of people who develop Long Term Conditions and reducing the burden of chronic disease by empowering and supporting people in local communities to manage their own health needs.
Disability Services Connecting Services, Citizens and Communities 'Connect-Abil-ITy'	Facilitating people with disabilities to achieve optimal independence and empowerment through the ability to pursue activities of their own choosing and supported by the development of disability friendly communities.
Primary Care and Older People (Scotland leading) 'mPower'	Support for healthy ageing through access to personalised care services, use of e-health and community support systems to ensure older people can live well, safely and independently in their own homes.



Financial Overview

EU INTERREG IVA Programmes

Overall £24/€30 million of EU INTERREG IVA funding had been allocated for the implementation of the 12-project programme, 'Putting Patients, Clients and Families First.' In 2013, an additional amount of £1,073,877 was allocated as a result of exchange rate differences within the overall programme. The majority of

projects concluded as planned during 2014 with a smaller number operational until 30 April 2015.

Total EU INTERREG IVA funding allocated to each project and total project expenditure claimed over the lifetime of the Programme is summarised in Table 1 below.

Table 1 – Budget Allocation and Project Expenditure Claimed up to 31 Dec 2015

Project	Total Project Budget (£)	Expenditure Claimed by 31 Dec 2015 (£)
Time IVA Change Border Region Alcohol Project	1,598,480	1,589,071
Acute Hospital Services	8,013,633	7,907,215
Eating Disorders	2,077,899	2,060,857
Turning the Curve Autism Project	1,369,423	1,364,577
Children's Outcomes	611,727	611,727
Citizenship for People with Disabilities	2,409,688	2,428,912
Diabetes	2,198,432	2,191,148
Cross Border Workforce Mobility	715,781	714,601
Obesity	923,300	923,299
Older People	1,934,456	1,905,334
Sexual Health Services	1,487,539	1,491,913
Promoting Social Inclusion and Tackling Health Inequalities	1,733,519	1,707,494
TOTAL	£25,073,877	£24,896,148

CAWT Development Centre

The Departments of Health in both jurisdictions have allocated the CAWT Development Centre funding to their respective agencies. Thus, the HSE in the Republic of Ireland and the Health and Social

Care Board in Northern Ireland, route this funding to the CAWT Development Centre, with equal contributions made by both on an annual basis. The Health and Social Care Board is the CAWT partner organisation that currently facilitates administration of payroll and non-pay services for the CAWT Development Centre. Table 2 contains an analysis of CAWT Development Centre expenditure up to 31 March 2015.

Table 2 - CAWT Development Expenditure up to 31 March 2015

	Budget Year Ending 31/3/15 (£)	Actual for Year Ending 31/3/15 (£)
Capital Costs		
Plant and Equipment	3,500	0
	£ 3,500	£0
Staff Costs		
Senior Management	353,300	346,236
Functional Support and Administration	151,592	147,009
	£504,892	£493,245
Running Costs		
General Administration	11,000	9,005
Travel and Subsistence	18,500	18,652
Training and Development	5,500	4,385
Printing and Stationery	5,000	3,178
Conferences and Events (Organised by the CAWT Development Centre)	25,000	34,667
Rent and Rates	2,777	2,695
Management Board Meetings	1,500	865
Marketing and Publicity	5,000	2,613
Cross Border Project Development Activities	5,331	18,695
	£ 79,608	£ 94,755
TOTAL	£588,000	£588,000

I confirm that the above financial information provided is accurate.

Bernie McCrory, Chief Officer, CAWT *Bernie McCrory (Mrs)*

Tom Daly, Director General, CAWT *Tom Daly*



cooperation and working together
for health gain and social well being in border areas

Co-operation and Working Together (CAWT)
Riverview House
Abercorn Road
Derry/Londonderry
BT48 6SB

T: 0044 (0)28 7127 2100
F: 00 44 (0)28 7127 2105
E: cawtinfo@westhealth.n-i.nhs.uk
www.cawt.com