



CAWT Annual Progress Report

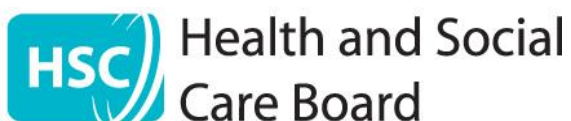
2018



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

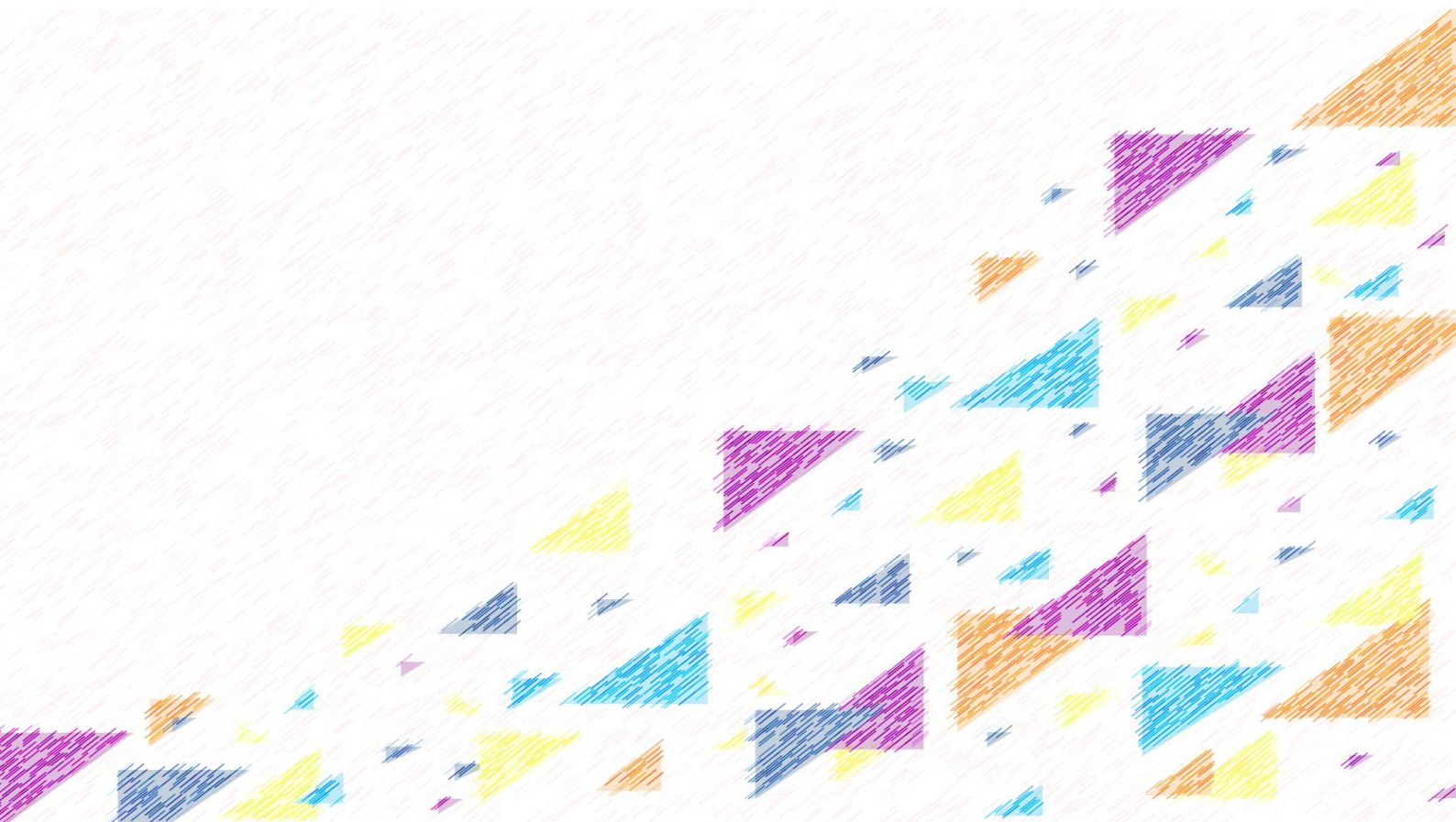


Quality Care - for you, with you



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Acknowledgements

We wish to acknowledge the support and guidance received from a range of organisations including:

The CAWT partner organisations

Achievements in cross border health and social care are due to the commitment to and goodwill from the health and social care organisations that comprise the CAWT Partnership. We acknowledge the many people who give time and expertise to cross border health and social care. The CAWT partner organisations are:

- Health and Social Care Board (HSCB)
- Health Service Executive (HSE)
- Public Health Agency (PHA)
- Southern Health and Social Care Trust (SHSCT)
- Western Health and Social Care Trust (WHSCT)

Special EU Programmes Body (SEUPB)

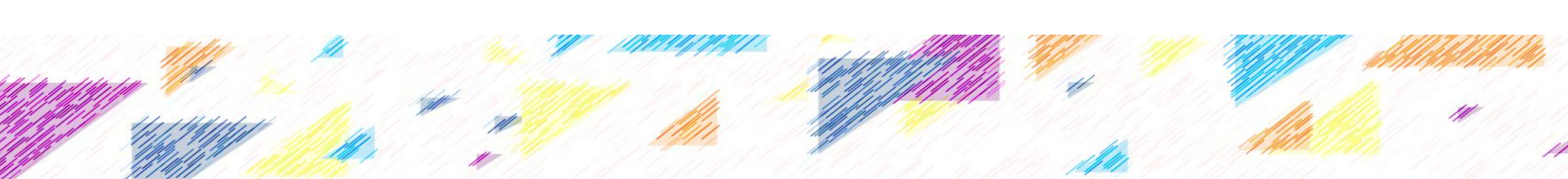
The CAWT partner organisations are grateful for the financial support received from the European Union's INTERREG VA Programme which is managed by the Special EU Programmes Body.

Department of Health, Northern Ireland and Department of Health, Republic of Ireland

The commitment and support of both Departments of Health to cross border collaboration in health and social care is greatly appreciated.

Project Partners

We also acknowledge the collaborative partnership working with a number of other organisations in the delivery of the EU INTERREG VA programme. These include the Scottish Government, NHS Scotland, the Scottish Ambulance Service, Northern Ireland Ambulance Service, National Ambulance Service, Tusla Child and Family Agency, Belfast Health and Social Care Trust (BHSCT) and NHS Dumfries and Galloway.





Foreword: Damien McCallion, Director General

Since 1992, the CAWT partners have been collaborating and working together in the border region of Ireland and Northern Ireland in support of national government and both health department priorities. The CAWT Partnership geography spans the entire border region, accounts for twenty-five percent of the total area of the island of Ireland and has a population of 1.6 million. As current Director General of the CAWT Partnership, I'm delighted to report that we are continuing to collaborate in the provision of practical solutions to the health and social care needs of local populations across the border region of Ireland / Northern Ireland.

The substantial cross border health and social care activity currently underway is due to the successful securing of significant funding from the EU INTERREG VA Health Theme during 2017 for five projects, four led by CAWT and one led by NHS National Services Scotland. This valuable EU investment, amounting to a total of €36 million across all projects for all areas, has provided the CAWT partners with a superb opportunity to further intensify and embed cross border health and social care activity. Therefore, I would like to acknowledge the Special EU Programmes Body and the Departments of Health in Northern Ireland and in Ireland who have helped to make this possible.

The focus which the overall suite of EU INTERREG VA funded projects is addressing, complements and supports the priorities of the health services. This includes alternative pathways for accessing acute hospital services, prevention & early intervention, tackling health inequalities, supporting independent living, building resilience and recovery within people and communities and partnerships with the community and voluntary sector. These projects also provide a mechanism for overcoming barriers to mobility on a cross border basis.

A key priority for 2018 has been on driving forward and rolling out all five EU funded projects. I am delighted to report that we have made good progress during the year despite the continued uncertainty created by the Brexit negotiations and developments. In particular, as both Governments have agreed to underwrite the EU funding allocated, this will ensure that those EU funded projects are implemented

within the full timescale as planned. This commitment has been warmly welcomed by ourselves and other stakeholders delivering EU funded projects. The CAWT Partnership remains positive and hopeful that any post-Brexit arrangements will not hinder existing

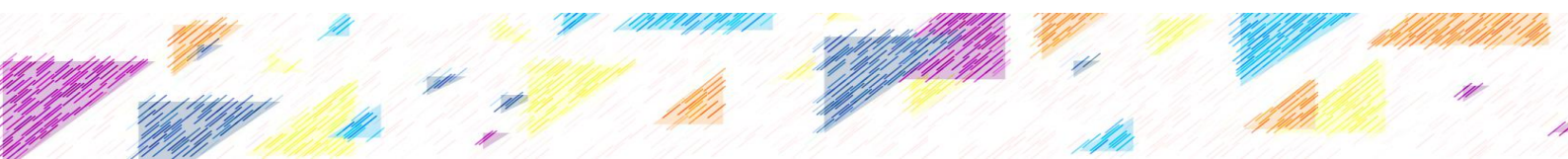


cross border and all-island health and social care arrangements and future developments. Indeed, the CAWT Partnership continued to support other, non EU funded cross border / North South activity. This includes the delivery of Humanitarian Disaster Assistance training, cross border leadership courses and an all-island Transplant conference.

I would like to sincerely thank my fellow Management Board members for their support and continued commitment to cross border health and social care. In particular, the efforts of each member in ensuring that the CAWT cross border projects are aligned to the health and social care services provided to their respective populations are most welcome and will support mainstream plans after the EU funding period. This embedding of CAWT cross border activity within mainstream services has been a key factor in CAWT's way of working and successes achieved to date.

During 2018 we welcomed one new Management Board member, Shane Devlin, Chief Executive of the Southern Health and Social Care Trust. I would also like to thank the CAWT Secretariat for their support in assisting Management Board members to ensure cross border activity is aligned with the day-to-day business of health and social care delivery.

A fundamental feature of CAWT is that it is a partnership of organisations not a single organisation. Therefore, at the heart of the partnership is the many Health and Social Care personnel, including managers and medical staff, involved in CAWT cross border activities and structures. The cross border work they undertake is additional to their main roles within their employing organisations and I would like to sincerely thank all of them for the excellent work they do over and above their day-to-day work.



Central to the Partnership is the CAWT Development Centre which provides specialist support in co-ordinating activities on behalf of the partner organisations during the year. I wish to thank all team members and Chief Officer Bernie McCrory, for their professionalism and support.

I would also like to welcome our new Project Managers and staff who have the challenge of implementing the demanding targets and objectives along with the support of their Project Boards and the wider CAWT network.



Overview: Bernie McCrory, Chief Officer, CAWT

Another year has passed and I am delighted to report that all our EU INTERREG VA funded projects are now underway. This achievement is due to a range of factors. Not least, the support of the many health and social care staff within the CAWT partner organisations: the HSE, the Southern and Western Health and Social Care Trusts, the Public Health Agency and the Health and Social Care Board. Also our new partners in the delivery CAWT's EU funded activities has broadened the geographic reach and impact of our work.

I would like thank all concerned for the leadership and guidance they provide as members of the CAWT Management Board and Secretariat and their role in ensuring these cross border services and projects successfully commenced.

I would also like to commend the team at the CAWT Development Centre who have, along with the CAWT Strategy Groups, steered these EU funded projects from Business Plan stage to the commencement phase. The CAWT Development Centre Team provide vital support to projects in areas such as project management, procurement, governance, finance, communication and human resource management.

Equally important has been the expertise provided by the Corporate Support Groups, which enable cross border projects to operate smoothly and efficiently. There are 5 such groups, including finance, procurement and contracts, human resources, communications and e-health. I am grateful to members for the professional advice and guidance they provide to our cross border projects.

As all our EU INTERREG VA funded projects are in the early stages of their development, our priority has been on the successful establishment of Project Boards to manage the individual projects and on project staff recruitment, particularly the Project Manager posts. Almost all of our European Union funded projects are already benefiting citizens in the border region. For example, the two most advanced projects, the cross border Acute Hospital Services Project and the cross border Population Health Project, CoH-Sync have both succeeded in meeting their EU funding targets for people benefitting from the services provided. This is a remarkable achievement and a great start to our new work programme. The two other CAWT-led projects, Innovation Recovery and MACE have all laid the groundwork for gearing up activity levels in coming months. The Scottish-led mPower is also in the early stages of rolling out services in the project pilot areas.

Despite the uncertainty created by the outcome of the UK referendum on membership of the EU, cross border health and social care continues to thrive. The CAWT cross border health and social care activity underway is a positive development in a Brexit dominated landscape and serves to highlight the mature and enduring relationship between the health services, North and South. The CAWT Partnership continued to respond to requests from a range of sources including political, media, government and research-based stakeholders on the potential impacts of Brexit on cross border health and social care activity.

The practical benefits of cross border co-operation to citizens, particularly for those living in border regions, means that cross border health is likely to continue to thrive. The funding support from the EU has been vital to the development and growth of activities in cross border health and social care. I look forward to all our INTERREG funded services being rolled out in coming months and years across the eligible area.

"...The most successful north-south network here is Cooperation and Working Together (CAWT), the partnership of health boards and trusts set up in 1992 to serve the whole border region between Derry and Dundalk. It has used EU funding to undertake and provide a range of cross-border projects and services in acute care, primary care, family and child care, learning disabilities, health promotion, public health and mental health...."

Source: Belfast Telegraph: Andy Pollak: 'Whatever happened to north-south co-operation?' 1

February 2019

EU INTERREG VA project update (Jan 2018 to Dec 2018)



Special EU Programmes Body
Foras Um Chláir Speisialta An AE
Boord O Owre Ocht UE Projects

Interreg 
Northern Ireland - Ireland - Scotland
European Regional Development Fund

The Special EU Programmes Body has directly awarded grant funding, with a total value of approximately €31.1 million euros, to the CAWT Partnership area to support five large-scale cross border health and social care projects up to 2022. The projects are in the areas of acute hospital services, mental health, children's services and community health and well-being. The fifth project led by NHS Scotland, in which CAWT is a partner, supports primary care and older people's services. This project has secured grant funding up to a total value of €8.71 million euros, of which €3.5



million is earmarked for the border region.

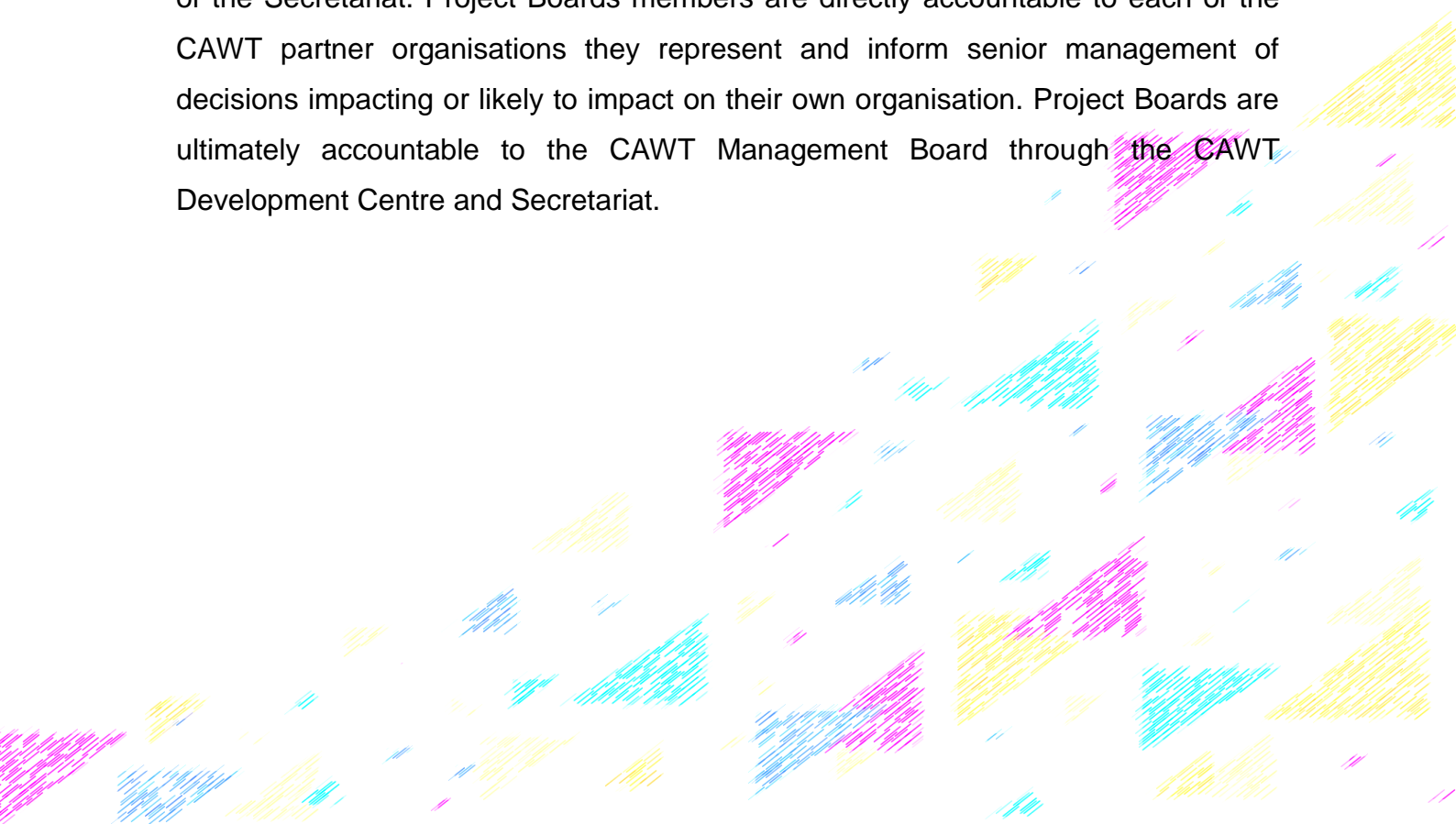
Launching the cross border Community Paramedic Project involving the Northern Ireland Ambulance Service, Scottish Ambulance Service and the Republic of Ireland's National Ambulance Service. Pictured (from left to right) are: Bridget Clarke and Louise Potts, Cross Border CAWT Acute Project; Brian McNeill, NI Ambulance Service; Bernie McCrory, CAWT; Martin Dunne, National Ambulance Service (Rep of Ireland); Wendy Quinn, Scottish Ambulance Service; Sean Murphy, Letterkenny University Hospital and Michael Rooney, HSE.

Collectively, these projects focus on a range of aspects including:

- Prevention & early intervention;
- Tackling health inequalities;
- Supporting independent living;
- Building resilience and recovery within people & communities;
- Technology as an enabler for change and to underpin services;
- Partnerships with the community and voluntary sector;
- Improved use of existing health and social care infrastructure;
- Upskilling and building staff resilience; and
- Overcoming barriers to mobility on a cross border basis.

Project Governance

Each EU INTERREG VA funded project is managed by its own Project Board comprising nominated representatives from the CAWT partner organisations and other partners. Each is chaired by an appointed representative from the Project Board. The Project Boards are responsible for ensuring that projects deliver their Project objectives and targets within the agreed timeframe and budget and to a defined quality standard. On an ongoing basis, the Project Boards update the CAWT Secretariat (through the CAWT Development Centre monitoring systems) on progress made within projects and flag any issues that require the input or direction of the Secretariat. Project Boards members are directly accountable to each of the CAWT partner organisations they represent and inform senior management of decisions impacting or likely to impact on their own organisation. Project Boards are ultimately accountable to the CAWT Management Board through the CAWT Development Centre and Secretariat.



Mental Health: Innovation Recovery Project

Commenced: Nov 2017

Scheduled end date: Dec 2021

EU INTERREG VA grant funding: €7.61 million



In the context of mental health illness, recovery is the personal journey people with different mental health experiences take to recover and to enable them to create satisfying and meaningful lives. Recently, the recovery approach has been incorporated into the delivery and design of many mental health services, including those in Northern Ireland, the Republic of Ireland and Scotland.

At a cross border level, the CAWT Innovation Recovery Project is developing a 'Hub and Spoke' Recovery College Learning Network operating across 3 geographical regions. This Recovery College Network is enabling service providers and users, and their families, to come together to co-produce and co-deliver educational programmes to enhance mental wellbeing and personal resilience. The project also plans to develop a Virtual Recovery College which will extend access to education and provide support to those geographically or socially isolated.

The Innovation Recovery project complements and enhances mental health services, delivered by the health services and community and voluntary sector stakeholders, by empowering and supporting individuals and their families and the wider community through a learning, educational approach. At the heart of the recovery college approach is that the participants engage with and learn alongside those who have experienced similar mental health issues.

During the year, the main focus of the Project was on the recruitment of staff and getting new staff settled into posts.

Recovery College Locations

Hub	Hub Area
Hub 1 - Western	HSE CHO Area 1: Letterkenny and West Donegal WHSCT: Derry and Strabane
Hub 2 - Southern	HSE CHO Area 1: Cavan, Monaghan, Sligo and Leitrim WHSCT: Fermanagh
Hub 3 - Eastern	HSE CHO Area 8: Dundalk and Louth SHSCT: Armagh and Newry BHSCT: Belfast City

Key achievements during 2018

- Formal launch of the Innovation Recovery Project in March with representation from SEUPB, both Departments of Health and stakeholders from the three jurisdictions;
- Agreement on the 3 Hubs regions and the target areas within each Hub region;
- In relation to project posts, 14 new posts have commenced, a further 12 people are awaiting start dates and the remaining 3 posts are undergoing recruitment;
- Commencement of the Western Hub which is working closely with the WHSCT Recovery College to scale up recovery education both within WHSCT and also at a cross border level in Donegal areas;
- By the end of the year, 240 people have benefitted from a mental health recovery course and 280 people have received specialist training;
- Agreement on the Innovation Recovery Project Board terms of reference, with individual members supporting the implementation in their own localities and providing overall direction to the project;
- Completion of a competitive public procurement exercise to secure quality assurance support to the project which resulted in the appointment of the Scottish Recovery College;
- Specifications have been developed for a number of areas for public procurement and include aspects such as a virtual recovery college, marketing support, training, community and voluntary sector input and other external expertise;
- Successful collaboration with the Ulster University in the planning and management of the 'Young People and Mental Health in a Changing world' – a Cross Border Conference which highlighted the inherent challenges that exist within modern society for young people and the potential adverse effects that this can have on their mental wellbeing;
- Successful 'Write to Recovery' Facilitator Training provided to 15 participants by Scottish Recovery Network. This valuable training helps people with lived experience of mental health difficulties to reframe the narrative around their lives, to one of strength and survival.

Plans for year ahead (2019)

- Progression of the recruitment process to appoint a new Project Manager;
- Commencement of the Southern and Eastern Hubs with staff locations established and continued engagement with key stakeholders, particularly with community and voluntary sector organisations;
- Formal launches of each of the Hubs;
- Co-production and delivery of broad range of Recovery courses across the Recovery College sites;
- Hosting of Project Assemblies to facilitate cross border training and development of further training;

- Implementation of public procurement exercises essential for the progression of the project including a virtual recovery college, marketing support, community and voluntary sector input, training and other external expertise;
- Ensuring that the experiences and learnings which emerge from the Project are shared appropriately.

Innovation Recovery Project Staff team (2018)

Name	Job title	Base
Brenda Toal	Project Manager	Armagh
Mary Leonardo	College Coordinator	Cavan
Lisa McCrystall	College Coordinator	Derry/Londonderry
Rachel Forbes	Business Coordinator	Derry/Londonderry
Tracy Gray	Lead Peer Educator	Derry/Londonderry
Eileen Bell	Lead Peer Educator	Newry
Lorraine Kirwan	Lead Peer Educator	Cavan
Wendy Risby	Peer Educator	Derry/Londonderry
Karen Elliott	Peer Educator	Derry/Londonderry
Karen Matthews	Peer Educator	Newry
Margaret Dooley	Peer Educator	Newry
David McBride	Peer Educator	Donegal Town
Mary Cleary	Admin Support	Newry
Maria Quinn	Admin Support	Belfast
Michael Cullen	Admin Support	Derry/Londonderry

Innovation Recovery Project Board (2018)

Name	Organisation
John Meehan (Chairperson)	HSE
Padraig O'Beirne	HSE (CHO1)
Ger McCormack	HSE (CHO8)
Michael Ryan	HSE
Adrian Corrigan	SHSCT
Brian Simpson	WHSCT
Eithne Darragh	HSCB
Briege Quinn	PHA
Mary O'Brien	BHSCT
Martin Daly	BHSCT
In attendance:	
John McCormack	Scottish Recovery Network
John McCardle	HSE CHO1 (Donegal)
Martin Daly	BHSCT

Case Studies and testimonials

Case Study 1: Deirdre Mc Laughlin, Innovation Recovery College student



I was first introduced to the Recovery College in December 2018 when attending a very powerful 2-day course on the 'Write-to-Recovery' programme. I was immediately drawn in by the passion of the facilitators and their vast amount of personal experience of recovery. I loved how the focus was on mental wellness and recovery methods rather than mental illness.

I was diagnosed with Bipolar back in 2007 and hadn't come across such a positive approach to well-being prior to this. I was eager to help-out and get involved from the get-go!

The College was happy to offer me the opportunity to become involved through the 'Train-the-Trainer' course which I thoroughly enjoyed.

Recently, I have volunteered with the 'Learning to Like Yourself' and 'Managing Setbacks' workshops. I got a great sense of achievement and enjoyed helping out, I have personally found this to be a great boost for my own mental well-being. I currently attend the 'Walk to Wellness' group run by the College and find this a great networking opportunity. They even helped me celebrate my 30th birthday in style during the first walk!

I am glad the Recovery College was recommended to me and will continue to promote it to family and friends as I think it is a great wellness resource which is available to everyone.

Case Study 2: Aggie Boylan, Clinical Nurse Specialist, Community Mental Health Team, Letterkenny, Co. Donegal



My name is Aggie Boylan and I am a Clinical Nurse Specialist with the recovery team in Letterkenny. I have been working in co- production for a number of years and engaged with the Recovery College over the last year, delivering educational programmes. I strongly believe the ethos and working in this way has created positive change for our communities. The testimonials from attendees have reflected ongoing change, resulting in maximizing their potential and therefore enhancing their recovery journey. We have a walking group which meets in Letterkenny Town Park every Friday from 10am-12noon.

Called 'Walk to Wellness' the walking group started in May and we have 20 students all out walking every Friday morning.

Innovation Recovery College participant testimonies:

"Very friendly group"

"I am now not afraid to talk about my illness."

"I would love to do this again, a wonderful initiative"

"It is a great social exercise and encourages mixing and getting out and about."



Pictured are (l to r): Aggie Boylan, Clinical Nurse Specialist, Community Mental Health Team, Letterkenny, Co. Donegal and Deirdre Mc Laughlin, Innovation Recovery College student.

Wendy Risby, Peer Educator, Innovation Recovery Project, Western Hub



I have lived experience of mental health issues and my ethos is to help others by sharing my journey of recovery. Prior to joining the Innovation Recovery Project as a Peer Educator, I had been volunteering with the Western Health and Social Care Trust Recovery College since May 2014. My experiences involve co-producing, co-delivering workshops, promotional events and telling my recovery story. This has re-enforced my passion for recovery through education, due to the fact that my own recovery was aided with learning about my own mental health. I have built strong relationships with other volunteer Peer Educators and been privileged to help facilitate groups and learn from other beneficiaries of the Innovation Recovery College.

My previous experience with the Western Health and Social Care Trust Recovery College has given me a great stepping stone for the role of Peer Educator and I have been delivering workshops from the onset. I am learning new skills and hopefully I will gain accredited qualifications to add to my portfolio. I am meeting many different people and am learning from all perspectives in relation to recovery. After this project concludes, I hope to find further employment either with another project or within the Western Trust. For now, I just hope that I keep myself grounded and not forget why I began this journey.

Website: www.cawt.com/irecovery



Pictured at the “Young People and Mental Health in a Changing world” cross border conference (left to right): Mark H Durkan, MLA; Marie O'Neill, University of Ulster; Kieran Downey, Western Health and Social Care Trust; Noella McConnellogue, Zest Healing the Hurt; Edel O'Doherty, CAWT and Dr Kevin Moore, Ulster of University.



Members of the Innovation Recovery project board. Standing (Back row/ l to r): John McCormack, Network Manager, Scottish Recovery Network; Adrian Corrigan, Assistant Director of Mental Health, SHSCT; Edel O'Doherty, Deputy Chief Officer, CAWT; Padraig O'Beirne, Area Director of Nursing, HSE and John Mullan, Service Improvement Manager, WHSCT. Seated (front row / l to r): Ger McCormack, Business Manager, HSE; Briege Quinn, Mental Health Nurse Consultant, PHA and John Meehan, Assistant National Director, Head of National Office for Suicide, HSE.

Population Health: Community Health Synchronisation (CoH-Sync) Project

Commenced: July 2017

Scheduled end date: Dec 2021

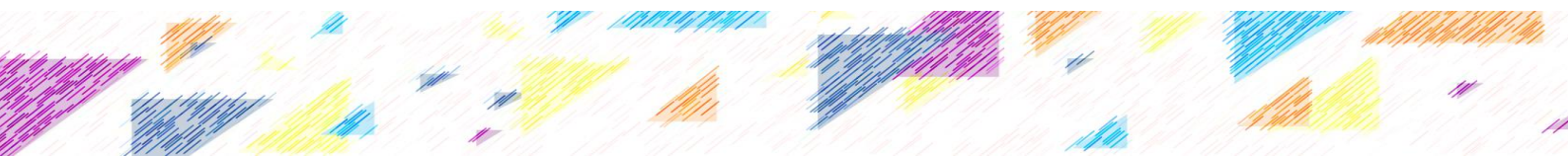
EU INTERREG VA grant funding: €5.01 million



Research shows that people living in border areas are affected to a greater degree by obesity, lack of physical activity, smoking and alcohol misuse. The CoH-Sync Project is a cross border EU INTERREG VA funded project, which is supporting individuals and groups to become more active and engaged in improving their own health and wellbeing, by making better use of existing resources within their community. The project has developed a network of 8 locally based Health and Well-being Hubs in the border region of Northern Ireland, the Republic of Ireland and Western Scotland.

Each Health and Well-being hub is working on a cross border basis, facilitating people to improve their health and wellbeing in areas such as physical activity, mental health, nutrition, smoking and alcohol consumption. Such areas are known to be key risk factors for the development of long term conditions such as heart disease, stroke, cancer, type 2 diabetes, obesity, and arthritis etc.

These Hubs are resourced with Community Health Facilitators who are motivating and supporting people to improve their health and wellbeing in the 5 key risk factor areas. They are working with individuals on their health improvement journey from assessment of their current health status, development of a personalised health and well-being plan, engagement in a health and well-being intervention through to completing a post programme review to measure impact. In addition to reducing the risk factors associated with chronic illness, the project is working towards improving health literacy and contributing to reducing health inequalities.



Health and well-being Hub Location	Hub Provider
Letterkenny - North Donegal, Rep of Ireland	Donegal Local Development Company
Ballyshannon - South Donegal, Rep of Ireland	Donegal Local Development Company
Co. Cavan and Co. Monaghan, Rep of Ireland	Donegal Local Development Company <i>in partnership with Monaghan Integrated Development and Breffini Integrated Development (Cavan)</i>
Derry - Strabane, Northern Ireland	Bogside and Brandywell Health Forum
Enniskillen - West Fermanagh, Northern Ireland	Arc Healthy Living Centre
Armagh - Dungannon, Northern Ireland	Connected Health
Dumfries - Nithsdale, Scotland	NHS Dumfries & Galloway <i>in partnership with third sector</i>
Stranraer - Wigtownshire, Scotland	NHS Dumfries & Galloway <i>in partnership with third sector</i>

Key achievements during 2018

- Formal launch of the CoH-Sync project in May with representation from SEUPB, both Departments of Health and stakeholders from the 3 jurisdictions;
- Establishment of 8 Health and Well-being Hubs after a competitive public procurement exercise support by the HSE's procurement specialists;
- Recruitment of full project team successfully completed with all project posts filled;
- Achievement of 2018 output target set by the Special EU Programmes Body (SEUPB) to secure a minimum of 2,500 Personal Health and Wellbeing plans in total across all the Hubs;
- Agreement on the CoH Sync Project Board terms of reference, with members actively supporting the project implementation in each of their respective geographic areas and providing overall direction to the project;
- Completion of a competitive public procurement exercise to secure a provider for accredited training for the Health Facilitators;
- Delivery of a successful customised 2-day training session by NHS Dumfries and Galloway health and wellbeing specialists to Hub Health Facilitators in Ireland and Northern Ireland in August.
- Development of publicity material to enable the Hubs to promote and market their services and to support the recruitment of people in their catchment areas.

Plans for year ahead (2019)

- A further 2,400 individuals supported with a Personal Health and Wellbeing plan across all the Hubs;
- Roll-out of the Health Facilitator accredited training by North West Regional College who were successful in their tender submission to deliver the training;
- Implementation of an on-line data collection, reporting and monitoring system to track and monitor progress and to support project evaluation activities;
- Review of the Health and Well-being plan format and process in order identify and implement improvements;
- Continuation of active engagement with Hub staff on key project developments in line with the partnership working ethos of the project;
- Continuation of work underway on project evaluation activities and on ensuring that the experiences and learnings which emerge from the Project are shared appropriately.

CoH Sync Project Staff team (2018)

Name	Job title	Base
Brigid McGinty	Project Manager	WHSCCT
Emmett Lynch	Project Worker	WHSCCT
Aoife Balfour	Project Worker	WHSCCT
Janet Swinburne	Project Worker	HSE

CoH Sync Project Board (2018)

Name	Organisation
Maura O'Neill, Project Chair	WHSCCT
Gerard Rocks	SHSCCT
Anne McAteer	HSE
Brid Kennedy	HSE
Michele McCoy	NHS Dumfries and Galloway
Sophie Lusby	HSCB
Christine McMaster	PHA

Case Studies and testimonials

Case Study 1: Brandy Micheletti, Cavan and Monaghan CoH Sync Hub



'My experience of being a CoH-Sync Community Health Facilitator.'

My working experience is varied; however it has always involved helping others in some way. Since marrying and moving to Ireland, I have been raising my children and volunteering in my local community. I applied for the position of CoH-Sync Health Facilitator and discovered that I am naturally suited to the work.

In my role, I have found most people to be open and honest with me about their health concerns. I think that being able to meet with people in a community setting has a lot to do with helping the clients feel at ease. Some of the people I have met with do have serious issues and I would have suggested that they continue with or contact a health care professional. Most folks, however, are just pleased to meet someone who is genuinely concerned about their welfare and offers a safe space and has the time to listen to their concerns.

I can help a client by working with them to create an Action Plan and directing them to local activities such as dance classes or walking or cycling clubs. Most often I provide them with links to HSE websites where they can source information that meets their needs. This helps to enable them to take control of their health in a practical way.

What I hear most often in the way of feedback is, "Thank you for asking me about my health and giving me an opportunity to talk about it".

I have found that being a Community Health Facilitator is a rewarding role because it gives me an outlet for helping people which is important to me. I am confident that if any of you do ever have the opportunity to use a CoH-Sync Health Facilitator that you will find it a rewarding experience.

Case Study 2: Northern Ireland CoH-Sync Client

First time mum in in 30s breast feeding her baby

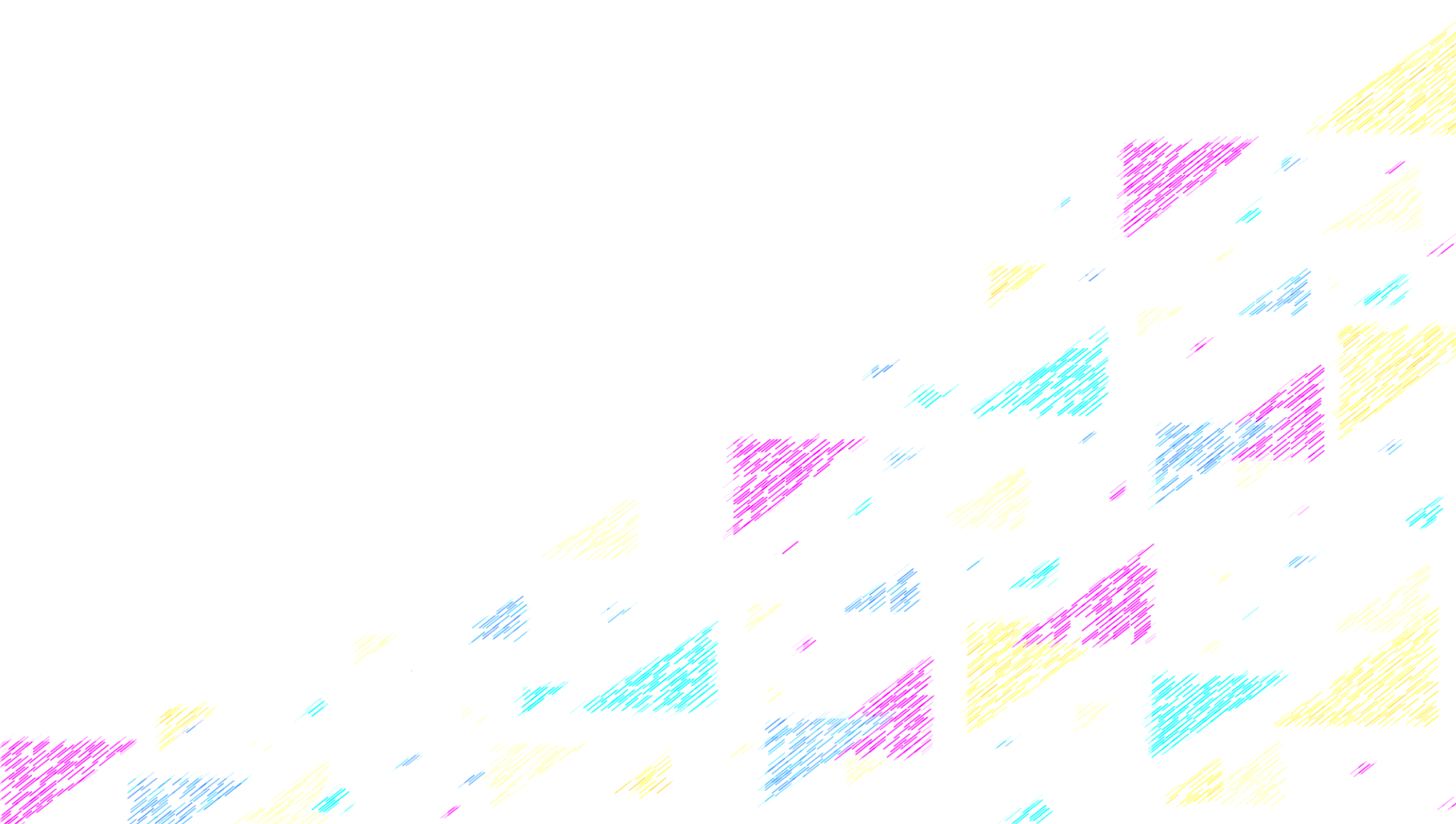
The CoH Sync Health Facilitator outlined that she had come into contact with the young mother who was attending a Sure Start mother and toddlers morning. This first time mother was very stressed and exhausted:

We discussed the plan for an action area and she was very interested in the Mental Health Resilience aspect of it. Her Warwick scale result was below average and as well as getting incredible support from Sure Start she was very open to learning about the EFT tapping technique to help with relaxation and sleep. I explained to her how it works and we also spent time practicing how she would incorporate this at home into everyday life.

The aim was when baby was sleeping the mother would have some time to do the tapping and say the statement of calm and peace to help focus and calm her mind and improve her breathing. All was put into an action plan and I would follow up or she could call me if needed.

After a few weeks via telephone and lots of encouragement we met again face to face and this client said she felt much more relaxed but was still tired and continuing to feed her baby. She was planning to join another support group for mothers in a similar position.

The score in the post CoH-Sync evaluation had increased by 10 points which showed an improvement and also gave her the confidence to keep joining any groups that could support both her and her baby so she is not isolating herself and is able to talk to others and share ideas that help. As a result of this other mums came forward to have a plan done and to learn about EFT.



Website: www.cawt.com/coh-sync



Attendees at the launch of the Co-Sync Project in Antrim in June 2018



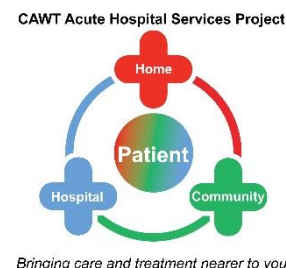
Pictured are the local launch of the Donegal Hubs in Letterkenny are (left to right) Brid Kennedy, HSE; Padraic Fingleton, Donegal Local Development Company; Louise Brogan, Donegal Local Development Company; Patrick Murray, HSE; Lorraine McGowan, Donegal Local Development Company and Brigid McGinty, CAWT CoH Sync Project.

Acute Hospitals Services: ‘Connecting Services, Citizens and Communities’ Project

Commenced: June 2017

Scheduled end date: Dec 2021

EU INTERREG VA grant funding: €10 million



The Acute Hospitals Services project is being funded by the European Union’s INTERREG VA Programme. The project aims to assess and treat higher volumes of patients more effectively through improved or reformed service delivery models on a cross border basis. This will be achieved through the establishment of cross border frameworks for scheduled and unscheduled care across Northern Ireland, the border counties of the Republic of Ireland and the west coast of Scotland.

When fully implemented, the project will result in 14,500 patient beneficiaries along with providing training and up skilling opportunities for a minimum of 338 staff during the EU funded lifespan of the project.

The project is implementing services under 3 frameworks as described here:

Framework 1 – Reform and modernisation of the management of unscheduled pre-hospital care

Framework 1 aims to reform and modernise unscheduled/pre-hospital care services by ensuring that the assessment and treatment of patients is delivered more effectively at the point of contact and if appropriate a referral made to an alternative care pathway. It also involves training staff in emergency response and where possible utilising technology to deliver these services. Unscheduled / pre-hospital reforms will encompass the following aspects:

- **Clinical Decision Unit/Direct Access Unit at Daisy Hill Hospital, Newry:** To manage patient flows by meeting the needs of patients who require evaluation, testing, treatment and medical management for up to 24 hours;
- **Consultant led Service:** The service is a consultant led service, based in the Sligo initially, that will develop a community outreach pathway of care for frail older people over 75 years with the aim of avoiding admission to hospital and the provision of supported early discharge;
- **Community Based Cardiac Investigation Service:** This is a community based service, initially developed within rural areas in County Sligo for less complex diagnostic cardiology investigations. This service will give patients access to services in their own local community, thus avoiding lengthy journeys to an acute hospital site;
- **Community Paramedic Service:** The project will upskill community paramedics to provide safe and effective care to patients in their own homes and

communities, thus reducing the need to travel to and wait in Emergency Departments for treatment;

- **A&E Reform:** Establishing new ways of working in the assessment and management of patients along with the training and upskilling of staff to support these changes.

Framework 2 – Reform and modernisation of outpatient services and supporting the relocation of specific diagnostic activities to outpatient settings.

The project's scheduled care activities are focused on the specialties of dermatology, urology and vascular. Examples of initiatives include the transfer of some activity currently undertaken in day theatres to an outpatient setting, the establishment of an integrated clinical Dermatology Network using telehealth / digital technologies and additional technology solutions enabling clinicians to communicate with patients outside of acute hospital settings.

Framework 3 – Reform and modernisation of the delivery of minor, intermediate, major operations and procedures

This framework is focused on supporting a range of surgical specialisms to utilise day case, endoscopy and main theatre facilities to maximum efficiency. It aims to achieve better access to surgical interventions for patients outside their normal jurisdiction and the development of more efficient patient pathways with better use of the physical, human and financial infrastructure available.

Project locations

Strand	Location
Community Paramedic Service	Area 1- Buncrana/Carndonagh, Co Donegal Area 2 - Monaghan Area 3 - Castlederg, Co Tyrone Area 4 - Argyle, Scotland
Consultant Led Service	Sligo initially with potential for adjacent counties
A&E Reform	Support in this strand is available to all Acute hospitals in the eligible area and to date Sligo and Letterkenny University Hospitals and the South West Acute Hospital in Co Fermanagh have accessed project resources to improve patient flow through their ED and in their hospitals.
Clinical Decision Unit/Direct Access Unit	Daisy Hill Hospital, SHSCT (note: Republic of Ireland patients may present as an emergency

	case to Daisy Hill ED and receive treatment in the CDU/DAU)
Cardiac Investigations	Sligo with potential for adjacent counties
Interoperability	Donegal/Sligo/Western Trust areas in the first instance
Urology	Letterkenny General Hospital Altnagelvin Area Hospital catchment areas
Vascular	Letterkenny General Hospital WHST catchment areas
Dermatology	Eligible area of Scotland All Trusts in Northern Ireland HSE border areas

Key achievements during 2018

- Formal launch of the cross border Acute Hospital Services project in May with representation from SEUPB, both Departments of Health and stakeholders from the 3 jurisdictions;
- 2,642 unique patient beneficiaries achieved by the end of 2018 which exceeds the Special EU Programmes Body (SEUPB) output target set for the project (2,500 unique patient beneficiaries);
- CAWT Community Paramedic project launch in March with the Northern Ireland Ambulance Service, Scottish Ambulance Service and the HSE's National Ambulance Service representatives attending;
- Commencement of the Community Paramedics project which is providing quality care to patients in their own homes and communities resulting in a reduction in the number of unnecessary ambulance transports to emergency departments;
- Establishment of the Dermatology services in the WHST with two National Dermatology Improvement Nurses based in Scotland, developing and delivering training and education pathways for staff in the eligible area;
- A Clinical Decision Unit/Direct Access Unit has been developed within Daisy Hill Hospital supporting patient access and reducing overall waiting times for patients currently attending the Hospital A & E;
- Community Cardiac Investigations commenced in November 2018 and is currently delivering services in rural areas of County Sligo;
- Sligo and Letterkenny University Hospitals were supported to open new Discharge Lounges to improve patient waiting times and improve bed efficiency in both hospitals;
- Cross border Consultant lead vascular services have commenced as a collaboration between Letterkenny University Hospital and the WHST;

- Specialist training and development delivered to 577 staff.

Plans for year ahead (2019)

- Strive to complete outstanding recruitments to staff posts and procurement of equipment and specific training required by the project;
- Urology Services will be developed collaboratively between WHSCT and Letterkenny University Hospital;
- Photo-triage, as part of Dermatology services, will be implemented during 2019 throughout Northern Ireland on a phased basis commencing in the Northern and Belfast Trust areas;
- A Phototherapy service will be provided in Letterkenny University Hospital employing staff and investing in equipment;
- Relationships within the partnership will continue to be developed resulting in further collaboration between the partners in the eligible area;
- Training will continue to be provided to project staff and staff within the health and social care services in order to ensure they have the necessary skills to deliver a modern, high quality service to patients, which will include new technologies where appropriate.

CAWT Acute Hospital Services Project Staff team (2018)

Name	Job title	Base
Louise Potts	Project Manager	HSE
Bridget Clarke	Clinical Pathway Manager	HSE

CAWT Acute Hospital Services Project Board (2018)

Name	Organisation
Sean Murphy, Project Chair	HSE
Paul Cavanagh	HSCB
Siobhan McIntyre	PHA
Siobhan McEniff/Jo Short	HSE
Paula Keon	HSE
Dr Ray Nethorcott	WHSCT
Esther Gishkori	SHSCT
Geraldine McKay	WHSCT

Case Studies and testimonials

Cross border Vascular Patient

“I suffered greatly from protruding varicose veins which became itchy and inflamed on a regular basis. I had read some horror stories about procedures where veins were stripped and patients were wrapped in heavy bandages for a number of weeks after surgery. I heard about the new service in Omagh just 25 miles from my home in Donegal where a patient could have the procedure without having to stay overnight in hospital.



I was seen by a consultant in my local outpatients in Letterkenny Hospital. I was scanned and told I was suitable for treatment. I went to the new Hospital in Omagh and was greeted by very friendly nursing staff that looked after me very well both before and after I received the treatment. It only took three hours from beginning to end. I was pain free throughout my time at the Hospital. I am symptom free since and I would recommend this service to anyone who suffers as I did.”

Dermatology Patient Scottish: “This local service has impacted on my whole life, both professional and personal.”

Siobhan McEniff, Clinical Project Officer, Sligo University Hospital

A discharge lounge was opened in Sligo University Hospital (SUH) in autumn 2018 to improve patient flow at the Hospital. Since opening many patients have provided feedback which has been very positive, with a 99% satisfaction rating from patients and families.

As a result of this initiative, Sligo University Hospital personnel have focused on discharge. Medical discharges have increased in comparison to the same period in 2017. Furthermore, morning discharges have increased 40% on the same period last year. Additionally, there has been an increase in the Emergency Department /Assessment patients being transferred to wards before lunchtime.

This project is changing the culture of discharge for patients and staff at SUH. Early signs are yielding benefits in bed efficiency, with many patients spending less time on trolleys. We have expanded the work within the lounge to include patients on oxygen, those requiring phlebotomy, and those waiting on test results. For 2019, we will continue to focus on increasing occupancy in the lounge. Our slogan for this project will be ‘**think about tomorrow today**’ so that our team at the Hospital can improve the next day planning process for all discharges.

Website: www.cawt.com/acute



Visiting Dermatology project sites in Scotland are (left to right): Louise Potts, Project Manager, CAWT Acute Project; Bernie McCrory, Chief Officer, CAWT; dermatology patient Natalie Pacitti and Hilary Nicholson, Lorn and Islands Hospital.



Pictured at the launch of the EU INTERREG VA funded CAWT cross border Acute Hospital Services Project in Letterkenny (Left to right): Dr Margaret Whoriskey, Scottish Government; Bernie McCrory, Chief Officer, CAWT; Edel O'Doherty, Deputy Chief Officer, CAWT; Gina McIntyre, CEO, Special EU Programmes Body (SEUPB) and Alastair Campbell, Director of Secondary Care, Dept. of Health Northern Ireland.

Children's Services: Multiple Adverse Childhood Experiences (MACE)



Commenced: Nov 2017

Scheduled end date: Dec 2021

EU INTERREG VA grant funding: €5.01 million

The Multiple Adverse Childhood Experiences (MACE) 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. ACEs relate to the number of multiple adverse childhood or 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 project is establishing 5 cross border community networks to deliver tailored interventions to identified families. These networks will build upon existing community infrastructure on both sides of the border and will ensure that the appropriate interventions are delivered in a community setting, to families in need. A range of interventions for families with children in age categories 0-3 years and 11-13 years will be developed and implemented.

During the year, the key priorities have been on progressing the recruitment of key project posts and establishing the cross border community networks groups. These groups are helping to identify current service provision and are supporting the needs analysis underway to inform the development and implementation of interventions within each of the network areas.

MACE Community Networks Group Locations

1. Derry/Londonderry and Letterkenny and Inishowen, Co. Donegal
2. Strabane and West Donegal
3. Fermanagh and Sligo & Leitrim
4. Armagh and Monaghan & Cavan
5. Newry, Co. Down and Louth

Key achievements during 2018

- Formal launch of the MACE Project in Sept with over 550 attendees from a wide range of disciplines and sectors and representation from the Special EU Programmes Body, both Departments of Health, TUSLA and stakeholders from the 3 jurisdictions;

- Agreement on the 5 cross border community networks areas;
- The cross border community networks have begun to meet and are working on developing their community plans and are sharing information at a cross border level;
- A priority for the Project was to progress the recruitment of the Project Manager post, with the appointee commencing in July 2018 and the five Project Co-ordinator posts, with the first in post by December 2018;
- Agreement on the MACE Project Board terms of reference, with individual members providing overall direction to the project in their respective geographic areas;
- Development of a technical support specification for screening tools which will go out to tender via a public procurement exercise.

Plans for year ahead (2019)

- Progression of the recruitment process to appoint a new Project Manager due to existing post-holder securing another post within the HSE;
- Development of a bespoke induction programme focusing on Adverse Childhood Experiences and trauma informed practice for the Project Co-ordinators scheduled to commence in early 2019;
- The cross border community networks will recommend the types and levels of interventions required in each of their areas which will inform the specifications for the public procurement exercise planned to commence in 2019;
- Development of a data collection tool to capture the activity of the project and its progress and impact over the life of the project;
- Ensuring that the experiences and learnings which emerge from the Project are shared appropriately.

MACE Project Staff team (2018)

Name	Job title	Base
Sean McGrory	Project Manager	TUSLA Child & Family Agency
Donna McGee	Project Worker	TUSLA Child & Family Agency

MACE Project Board (2018)

Name	Organisation
Martin Quinn	HSCB
Maurice Meehan	PHA
Paul Morgan	SHSCT
Kieran Downey (Chair)	WHSCT
Deirdre Mahon (Chair)	WHSCT
Aisling Gillen (Dr)	TUSLA Child & Family Agency
Linda Creamer	TUSLA Child & Family Agency
Edel McAweeney	HSE
Brid Brady	HSE
In attendance	
Carmel McPeake	CAWT
Caroline Jordan	TUSLA Child & Family Agency
Fergal Landy	TUSLA Child & Family Agency

Website: www.cawt.com/mace



MACE Project Board pictured at the project launch and conference. Seated (l to r): Kieran Downey, Chair of MACE Project, Western Health and Social Care Trust and Carmel McPeake, CAWT. Standing: (l to r): Edel McAweeney, HSE; Fergal Landy, TUSLA; Caroline Jordan, TUSLA; Martin Quinn, HSCB; Pamela Cooper, TUSLA; Maurice Meehan, Public Health Agency; Paul Morgan, Southern Health and Social Care Trust; Brid Brady, HSE and Sean McGrory, MACE Project Manager.



Mark Feeney, Director, Managing Authority, SEUPB chats with the members of the Young Person's Panel, part of the recent cross border CAWT EU INTERREG VA MACE Project launch and conference (l to r): John Brattin from Derry City, Mark Feeney, SEUPB; Finn O'Farrell from Monaghan and Kaylem Toner from Galway.

Primary Care and Older People: 'mPower' Project



mPower Project (led by NHS National Services Scotland)

Commenced: Jan 2017

Scheduled end date: Sept 2021

EU INTERREG VA grant funding: € 8.71 million in total (€3.5 million for the NI/RoI border region)

Many more people will have one or more long term conditions by the age of 65, so promoting self-care at home is an important step in alleviating the pressure the health service faces, while enabling people to better manage their conditions. Across all 3 regions of the mPower project: Republic of Ireland, Northern Ireland and Scotland; health policies and strategies are all advocating for more care delivery in peoples own homes and communities.

The mPower project is creating a cross-border service for older people (age 65+) living with long-term conditions across Republic of Ireland, Northern Ireland and Scotland in defined pilot areas. mPower is working with communities to enable people to take the steps needed to live well, safely and independently in their own homes by self-managing their own health and care in the community.

Within the project pilot areas, Community Navigators are being employed to work with people referred from health and care services to develop well-being plans and link them to activities in their community, as well connecting them to technology to enhance support for health and wellbeing.

As detailed below, mPower is being rolled out within 7 deployment sites across Scotland, Northern Ireland and the border counties of the Republic of Ireland.

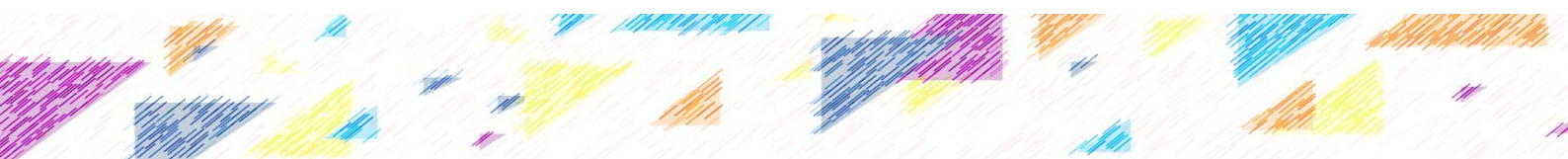
CAWT partner area	Deployment Site in the CAWT region
Western Health and Social Care Trust	Lisnaskea / Southeast Fermanagh
Southern Health and Social Care Trust	Armagh / Newry
HSE Community Health Organisation - <i>Community Health Organisation 1 (CHO1)</i>	Donegal, Castlefinn / South Leitrim
HSE Community Health Organisation - <i>Community Health Organisation 1 (CHO8)</i>	Carrickmacross/Drogheda

Key achievements during 2018

- The Project Board in November was hosted by SHSCT in Newry and coincided with the Project Assembly, which provided some 40 mPower staff with an opportunity to update on progress, develop next stages and learn from each other;
- Given the importance of having the full project team in place, there has been a focus on ensuring that as many project posts are filled as quickly as possible;
- Since the project commenced, 9 new posts have commenced, a further 4 people are awaiting start dates and the remaining 3 posts are undergoing recruitment;
- All local teams are now up and running;
- The new Business Lead Ireland, seconded from HSE CHO1, started as a member of the Lead Partner's team at the end of October;
- Over 300 guests attended 4 learning events which were hosted by HSE CH01, HSE CH08 and the Southern Health and Social Care Trust;
- The learning events were held in Sligo, Letterkenny, Drogheda and Newry with a view towards increasing participation, understanding and ownership of mPower;
- Implementation Leads continue to engage with clinicians and community organisations to build engagement with the project and identify potential beneficiaries;
- Joint ICT group established to guide closer working between Southern and Western Trusts in the area of eHealth.
- A total of 842 e-health episodes were achieved by the end of November 2018, exceeding the project's eHealth target for 2018 of a minimum of 700 people access to eHealth tools to support their health and wellbeing;
- Production of two project leaflets: a general marketing leaflet aimed at potential beneficiaries and a more detailed client information leaflet about what to expect;
- SCVO have worked with partners to design new leaflets and update the branding with NSS logos and compliance with SEUPB;
- UHI have recruited a research assistant to carry out qualitative interviews.

Some of the plans for year ahead (2019)

- The last few project posts to be recruited are expected to be in post during the year;
- Western Trust will be hosting a learning event in early 2019;
- Development and printing of localised printed leaflets for each partner with distribution planned early in 2019;
- Following discussions with CAWT partners, a shared learning event focusing on best practice locally and lessons learned from Scottish partners is planned for 2019;



- In a similar vein, community engagement events, developing partnerships with existing Social Prescribing partners through Social Prescribing Networks and exploring shared delivery opportunities with other health themed SEUPB funded projects will be undertaken across the regions.

mPower Project Staff team in Ireland / Northern Ireland (2018)

Name	Job title	Base
Alan Connor	Programme Manager	NHS National Services Scotland
Morag Keith	Finance Manager	NHS National Services Scotland
Klaire Trench-Morris	Business Lead Technical	NHS National Services Scotland
Ryan Prentice (left Sept 2018)	Business Lead Service	NHS National Services Scotland
Peter Walker	Business Lead Service (Northern Ireland / Ireland)	HSE
Karen Burns	Project Support Officer	NHS National Services Scotland

mPower Project Board members Ireland / Northern Ireland (2018)

Name	Organisation
Edel O'Doherty	CAWT
Seamus McErlean	HSCB
Ann Coyle	HSE CHO 8
Cara O' Neill	HSE CHO 1
Gerard Rocks	SHSCT
Vincent Ryan	WHSCT

Website: www.cawt.com/mpower



Attendees from the partners from HSE, WHSCT, SHSCT areas, Scottish partners and mPower Project Office staff at the Newry Project Assembly in November 2018



In the foreground, representatives from HSE CHO 1 and CHO 8 areas, and WHSCT and Scottish Council for Voluntary Organisations at the Learning Event led by Chris Wright NHS 24 on 'Developing a Sustainable Service' in Newry in 2018

Governance of the CAWT Partnership

The CAWT Partnership comprises five statutory organisations from two jurisdictions who have agreed to collaborate for the benefit of their resident populations. The core purpose of CAWT is to enable its partner organisations in the Republic of Ireland and Northern Ireland in their collective work of improving the health and well-being of the people living in the border region and to enhance access to health and social care services.

CAWT Partner Organisations
Health and Social Care Board
Public Health Agency
Southern Health and Social Care Trust
Western Health and Social Care Trust
Health Service Executive (HSE)

Established in 1992, the CAWT Partnership's governance arrangements have evolved to meet current needs. There are agreed processes in place for specific situations in order that each of the partner organisations can be assured that decisions made and activities undertaken are consistent with their own organisation's governance arrangements.

CAWT is currently implementing its Strategic Plan 2014 to 2022. This plan underscores the purpose of the Partnership and sets out strategic goals and actions.

CAWT has a particular responsibility for maximising opportunities for cross border activity and securing financial assistance from the European Union that would bring added value and extra resources to the health and social care sector. 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 partners, embedding the principle that anything progressed by one partner on behalf of the others becomes the shared responsibility of all.

The governance structures for the CAWT Partnership are the CAWT Management Board, the CAWT Secretariat, the CAWT Development Centre and the Corporate Support Groups. In addition, for any individual EU INTERREG funded project, a cross border Project Board is established to direct the project, to ensure the delivery of its aims and objectives and to identify and manage risk. All Project Boards report to the CAWT Secretariat and CAWT Management Board via the CAWT Development Centre.

The CAWT Management Board

The CAWT Management Board provides overall guidance to the Secretariat, the Development Centre, and ultimately the individual cross border projects. The Management Board is responsible for strategic direction and also monitors and evaluates progress. The Management Board met three times during 2018 and held their AGM in October.

The Director General, via the CAWT Chief Officer, oversees the work of the CAWT Partnership on behalf of all the partners and he/she works closely with the CAWT Chief Officer and Development Centre.

Current CAWT Management Board Members (as at Dec 2018)		
John Hayes	Chief Officer, Community Healthcare Organisation	HSE
Angela Fitzgerald	Deputy National Director, Acute Hospitals	HSE
Damien McCallion	National Director and Director General of CAWT	HSE
Paula Keon	Acting Assistant National Director	HSE
Shane Devlin	Chief Executive	SHSCT
Anne Kilgallen	Chief Executive	WHST
Valerie Watts	Chief Executive	PHA/HSCB
Ed McClean	Deputy Chief Executive and Director of Operations	PHA

The CAWT Secretariat

The CAWT Secretariat members enable the implementation of the decisions of the Management Board. Senior management representatives, who comprise the Secretariat, regularly meet to review progress and to resolve issues and challenges in developing and delivering cross border activity. The Secretariat members met four times during 2018.

CAWT Development Centre

The CAWT Development Centre has a specialised staff team providing dedicated support in the areas of cross border strategic development and operational guidance. Practical support is provided in the areas of project management, procurement, HR, finance, communications and publicity. The Development Centre has been centrally involved in developing and supporting cross border health and social care activity and also in applying for and successfully implementing EU funded and other cross border projects over many years. Additionally, team members contribute to consultations, research studies, provide expert information, make presentations and participate in and organise stakeholder and funder events as appropriate.



Pictured at the cross border Humanitarian Disaster Response Course held in the United Nations Training School Ireland in the Curragh Camp in Co. Kildare are (l to r) Chris Gibson, SOS Medical; Dr Andy Griffiths, SOS Medical; Dr Jaish Mahan, SOS Medical; Tom McGuinness, HSE; Damien McCallion, HSE; Bernie McCrory, CAWT and Alan Moore, Western Trust.

Corporate Support Groups

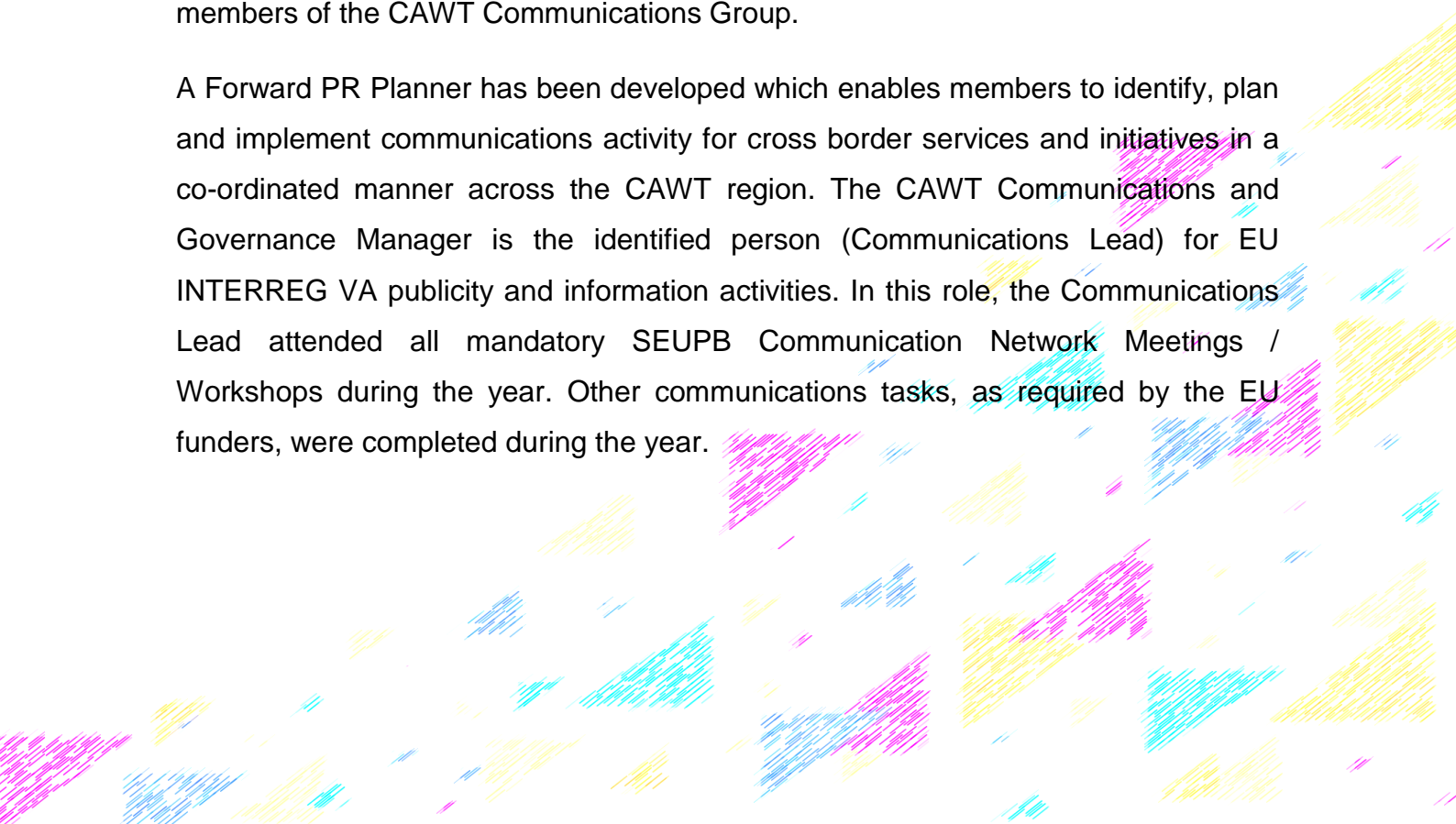
The CAWT Partnership is reliant upon the expertise of the Corporate Support Groups, which enable cross border projects to operate smoothly and efficiently. These Groups include Finance, Procurement and Contracts, eHealth, Human Resources, Recruitment, and Communications and have representation from the HSE, the Southern and Western Health and Social Care Trusts, the Health and Social Care Board and the Business Services Organisation.

Members of these Corporate Support Groups, who are senior health and social care personnel, provide the CAWT Partnership with professional support and guidance, thus contributing to effective governance. Group members provide advice and guidance in relation to their professional area and link with CAWT Development Centre specialist staff in the areas of finance, HR, communications and procurement & contracts.

CAWT Communications Group

The CAWT Partnership is committed to communicating effectively with its stakeholders and funders and also to keeping staff within the CAWT partner organisations updated on cross border developments. Therefore, a range of internal and external communications activities are undertaken by the CAWT Communications and Governance Manager, which are implemented locally by the members of the CAWT Communications Group.

A Forward PR Planner has been developed which enables members to identify, plan and implement communications activity for cross border services and initiatives in a co-ordinated manner across the CAWT region. The CAWT Communications and Governance Manager is the identified person (Communications Lead) for EU INTERREG VA publicity and information activities. In this role, the Communications Lead attended all mandatory SEUPB Communication Network Meetings / Workshops during the year. Other communications tasks, as required by the EU funders, were completed during the year.





Senior staff from the HSE and the Western Health and Social Care Trust at the cross border 'Applied Leadership in Adversity' course in the South West Acute Hospital (l to r) Geraldine Mullarkey, HSE; Mary Rose Carr, HSE; Dr Neil Black, WHSCT and Rose Mooney, HSE.

CAWT Finance Forum

The CAWT Finance Forum comprises senior finance personnel from the CAWT Partner organisations. It is the responsibility of the project partners to ensure there are adequate systems and procedures in place which will ensure that only eligible expenditure is incurred within approved limits, on approved projects. It is the responsibility of each organisation participating in EU INTERREG VA projects to ensure that proper internal financial systems and procedures are in place for the management of the funds approved to be expended within its organisation.

The role of the CAWT Finance Forum is to provide assurances to the CAWT Management Board that the financial responsibilities of the CAWT partner organisations are being met. The Forum also oversees CAWT financial management arrangements in relation to CAWT Development Centre and EU INTERREG VA projects and updates the CAWT Management Board via the CAWT Finance Manager.

CAWT Procurement and Contracts Group

Procurement support continues to be provided by the CAWT Procurement and Contracts Group. As part of this group, HSE Procurement in the Republic of Ireland and the Business Services Organisation in Northern Ireland facilitate cross border work by providing expertise and guidance to the EU INTERREG VA projects in particular. Additionally, procurement and contract staff within the Southern and Western Trusts supported the procurement of goods and services during the year. A range of tenders were coordinated and delivered in support of CAWT's new EU INTERREG VA range of projects. This support is greatly appreciated as it has enabled CAWT to progress projects in support of spend and beneficiary targets.

CAWT eHealth Group

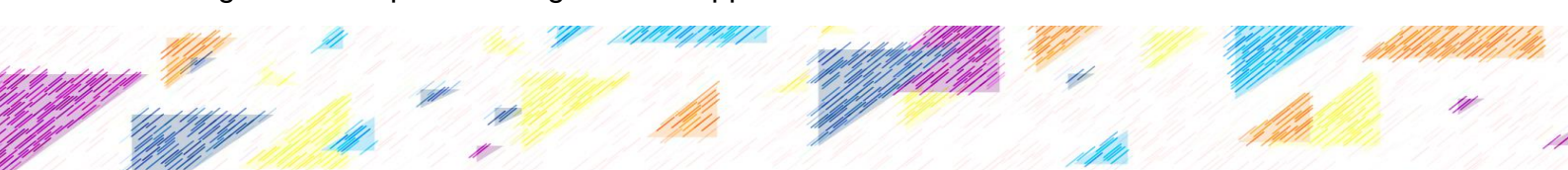
The eHealth Group will provide specialist advice by bringing together strategic advisors; technical experts and representatives from Project Boards to oversee implementation of the eHealth activities associated with the CAWT's EU INTERREG VA funded services and activities.

The eHealth Group is focusing on a number of key areas including the interoperability requirements of the Acute Hospital Services project in particular. In doing so, the Group is examining the strategic context for North South Interoperability in line with the EU Interoperability Framework and establishing systems for safe and efficient processes for transmission of data in the interest of patient safety.

CAWT Human Resources / Recruitment Groups

The CAWT HR Strategy Group comprises Directors of HR in Northern Ireland and Assistant National Directors of HR in the Republic of Ireland from the CAWT partner organisations. CAWT's HR Manager works with group members to address recruitment and employment issues relating to cross border working.

The Recruitment Sub Group, which comprises Recruitment Managers from the CAWT partner organisations, has worked closely with CAWT's HR Manager to provide advice from their respective teams. During 2018 the CAWT partner organisations provided significant support to ensure the recruitment of staff for EU



INTERREG VA programme of work commenced. This practical hands-on support is greatly appreciated.

CAWT's HR Manager continues to provide project staff and project boards with on-going advice and support in the areas of cross border recruitment and selection, induction, absence management, employee relations issues and training.



Pictured at the MACE Project launch and conference are Irene Smith, Sectoral Manager, North South Ministerial Council; Alasdair MacInnes, Head of Child Protection Unit, Dept. of Health, Northern Ireland; Bernie McCrory, Chief Officer, CAWT and Eimear Fisher, Assistant Secretary, Child Policy and TUSLA Governance Division, Dept. of Children & Youth Affairs.

Financial Overview

EU INTERREG VA Projects

Total EU INTERREG VA funding allocated to each project and total project expenditure claimed by the end of 2018 is summarised in the Table below.

Project	Total Project Budget (€)	Total Budget claimed by Dec 2018 (€)
Acute <i>'Connecting Services, Citizens and Communities'</i>	8,810,775.20	1,684,822.92
Mental Health <i>'Innovation Recovery'</i>	7,614,750.66	266,942.30
Population Health <i>'CoH-Sync'</i>	5,010,370.75	610,489.23
Childrens <i>'MACE'</i>	5,010,240.11	110,134.52
PCOP <i>'mPower'</i>	3,512,373.45	154,399.27
TOTAL	€29,958,510.17	€2,826,788.25

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. The Table below contains an analysis of CAWT Development Centre expenditure up to 31 March 2018.

CAWT Development Expenditure up to 31 March 2018

	Budget for year ending 31/3/18 (£)	Actual for year ending 31/3/18 (£)
Capital costs		
Plant and equipment	4,500	4,433
	£4,500	£4,433

Staff costs		
Senior Management	353,962	352,434
Functional support and administration	168,538	168,148
	£522,500	£520,582

Running costs		
General Administration	7,100	6,772
Travel and subsistence	18,700	16,305
Training and development	4,600	4,750
Printing and stationery	3,600	3,517
Conferences and events (Organised by the CAWT Development Centre)	8,000	7,672
Rent and rates	3,100	2,766
Management Board meetings	1,500	2,098
Marketing and publicity	2,000	350
Cross border project development activities	12,400	18,755
	£61,000	£62,985

TOTAL	£588,000	£588,000
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I confirm that the above financial information provided is accurate.

Bernie McCrory (Mrs)

Bernie McCrory, Chief Officer, CAWT

Damien McCallion

Damien McCallion, Director General, CAWT