

ANNUAL PROGRESS REPORT 2021



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

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1.0 ACKNOWLEDGEMENTS

CAWT's work would not be possible without the guidance and expertise of a range of organisations – we are indebted to them for their support.

Special EU Programmes Body (SEUPB)

The CAWT partner organisations are grateful for the financial support for cross border health and social care activity, 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.

The CAWT Partner Organisations

Progress in cross border health and social care is reliant on the commitment of the CAWT partner organisations. We acknowledge the valuable time and expertise dedicated to cross border health and social care by the frontline teams, managers and staff of the CAWT partner organisations:

- **Health and Social Care Board (HSCB)** ¹
- **Health Service Executive (HSE)**
- **Public Health Agency (PHA)**
- **Southern Health and Social Care Trust (SHSCT)**
Western Health and Social Care Trust (WHSCT)

Project Partners

We recognise the collaborative effort of our project partners in the delivery of the EU INTERREG VA programme. These include the Scottish Government, NHS Dumfries and Galloway, NHS Ayrshire & Arran, NHS Western Isles, NHS Greater Glasgow and Clyde, NHS Tayside, the Scottish Ambulance Service, Northern Ireland Ambulance Service, National Ambulance Service, Tusla Child and Family Agency, Belfast Health and Social Care Trust and delivery partners in the community and voluntary sector.



¹ Will transfer to the Department of Health as the Strategic Planning and Performance Group (SPPG) in March 2022.

2.0 CHAIRMAN'S FOREWORD

Damien McCallion, Director General



Throughout 2021, CAWT partnership organisations continued to collectively face the most serious public health emergency in a century. I have been privileged to see at first-hand the tireless dedication, sacrifice and selflessness of colleagues across the sector to protecting and promoting population health throughout the cross border region. Despite the unprecedented challenge, partners have continued to progress many important service developments and sustain activity, supporting the health and social care workforce to deliver high quality, accessible outcomes for our cross border communities. As Chair of the CAWT Partnership, I am exceptionally proud of that spirit of collaboration and inter-professional cooperation.

Added to the sector's vulnerability due to COVID-19, our capacity to deliver core health and social care services was further impeded in May, when the HSE suffered a major ransomware cybercrime. Although, the HSE responded swiftly, the incident had a protracted impact on recovery efforts, which continued for a number of months. It is credit to the considerable effort made by staff, including IT and healthcare professionals in all areas that teams were able to respond, to recover and to ensure continuity of services through innovative approaches such as extra evening and weekend clinics, extended working days and virtual clinics.

While the cyberattack caused much disruption and distress to patients and their families, the global vaccination programme has triggered considerable optimism. The evidence has shown that the vaccine is highly effective in protecting against death and hospitalisation, thereby significantly reducing the threat to high-risk groups and enabling us to return gradually to a much more normal way of life. The impact of the pandemic will endure however, influencing all aspects of social, cultural and economic life for some time to come – it is in this challenging context that I reflect on 2021 and look ahead to 2022.

Implementation of EU INTERREG VA Projects

With the continuation of the pandemic, CAWT partners were agile in adapting working practices to ensure continued project delivery of EU INTERREG VA funded projects. During 2021, digital solutions were further embedded and staff developed and implemented innovative care pathways to deliver on projects across acute services, community health & well-being, mental health, children's services, and primary care / older people's projects, with support from a wide range of agencies. Progress in the delivery of projects during 2021 is testament to the perseverance and resilience of our project teams, so I commend them on their endeavours and extend my thanks to them

for their commitment to our service users during the past year and as we navigate through the next phase of the pandemic.

A snapshot of progress during the year, showcases the importance of our projects in generating 'on the ground' impacts through a community-based approach. The Acute Hospital project allowed a number of new patient pathways to be explored and implemented to reduce hospital admissions when appropriate, and to treat patients either at home or in the community; The CoH-Sync project continued to build on the successes of 2020, helping new participants see significant improvement in their emotional well-being, and even under strict lockdowns, people's physical activity and diets both saw marked improvements; The Innovation Recovery online/virtual recovery college was bolstered during the year, enabling individuals with 24/7 access to free mental health and well-being educational programmes which support individuals to self-manage their mental health and well-being on their journey of recovery. MACE project co-ordinators have worked in collaboration with the CAWT partner organisations and Tusla practitioners to deliver trauma informed interventions across five cross border areas. During 2021 the menu of MACE interventions expanded, enabling practitioners to provide timely interventions to help vulnerable children before their situation worsens. Finally, the priority for the mPower project team was on the creation of community digital hubs and engagement with the community/voluntary sector on Community Funding initiatives. Further detail on the progression of projects is detailed in the following pages.

Governance

During 2021, CAWT partners engaged in a wide-ranging programme of activity to enhance and future-proof our governance structures. Shaped by the distinctive perspectives of the partners, the CAWT Partnership developed a revised Governance Manual as a primary source of the principles, policies and operating rules that guide the work of the Partnership in its entirety.

The Governance Manual is a key resource for use by staff, management and other stakeholders. It sets the standards for our collective operation and behaviours. It also establishes a framework for monitoring performance against these standards. We will continue to work collaboratively to ensure that the CAWT Partnership's governance and accountability frameworks complement and support each partner organisation's own governance processes and activities.

CAWT Partnership

2021 brought significant change to the Partnership with the retirement of Bernie McCrory, who had been CAWT Chief Officer for 16 years. Bernie stood down following a 40 year career in public service, mainly in Acute Services as a hospital

manager/business manager with Sperrin Lakeland Trust and as directorate manager for Surgery and Critical Care at the Altnagelvin group of hospitals.

As a stalwart of cross border health and social care services in NI and RoI, Bernie worked with partners throughout the European Union to strengthen strategic alliances and promote the collaboration of health care providers across national borders as a way to improve access to care. She made an immense contribution to the CAWT Partnership during her tenure and has been central to all we have achieved. As a leader, she helped take us through periods of remarkable growth and change and I am sure she will continue to be a strong advocate for CAWT and cross border health and social care in general, in the years ahead. We all wish her a happy, healthy retirement.

In September, Bill Forbes was appointed as the new Chief Officer, having previously served as the Chief Ambulance Officer for the National Ambulance Service in the Republic of Ireland. Alongside his extensive experience in person-centred frontline care, Bill brings a strong commitment and affinity to cross border health provision and will be a significant asset to the Partnership. I wish him well as he takes on the role in these unprecedented times.

Appreciation

As always, I wish to convey my gratitude to the members of the CAWT Management Board and Secretariat for their strategic oversight and leadership of the work of the CAWT Partnership. To the members of the CAWT Functional Groups, Project Boards and Strategy Groups, I extend grateful thanks for your professionalism and commitment to CAWT. I would also like to pay tribute to the Chief Officer and staff of the CAWT Development Centre, project managers and teams for their excellent work during a period of significant internal change and ongoing external instability. Your work in supporting and championing cross border collaboration deserves recognition and thanks.

We cannot deliver cross border healthcare in isolation, and so must acknowledge the contribution of our many community/voluntary sector partners, who have added so much value to cross border collaboration. Your expertise and insight empower the CAWT Partnership to deliver on its EU INTERREG VA objectives and targets within a constantly changing environment.

Looking forward

Much like the preceding year, 2021 brought widespread challenges to all of us in the healthcare sector. With the passage of time, it has become clear that the pandemic has acted as a catalyst for transformation, accelerating the implementation and

adoption of progressive changes in public health interventions and shaping new models of healthcare delivery.

As the EU INTERREG VA Programme delivery continues into 2023 and we look ahead to the new EU PEACE PLUS Programme, our collective expertise in the provision of services in acute hospital settings, mental health, children's services, community health and well-being as well as primary care and older people's services, will stand us in good stead as we seek to harness all the innovative opportunities the new programme has to offer. Staff within the CAWT Development Centre will continue to support our partner organisations by exploring new initiatives and engaging with potential collaborators to co-create cross border projects which can be advanced through our partnership structures.

What is certain, is that our collaboration – established over a period of 30 years – will continue to complement and add value to core health and social care services for the benefit of thousands of citizens, particularly those living in border areas. Alongside my fellow Management Board members, I am looking forward with optimism and confidence.

3.0 2021 OVERVIEW

Bill Forbes, Chief Officer



As I present my inaugural overview of the CAWT Partnership during what has been another year dominated by the ongoing challenges presented by COVID-19, I wish, at the outset, to acknowledge the contribution of my predecessor, Bernie McCrory.

Bernie had been at the helm of CAWT for 16 years. During that time she championed the innovative work of all our partners and made a significant impact in consolidating alliances, generating funding and steering the Partnership's strategic direction. She led through an incredibly challenging period with compassion and assurance, and managed to inspire partners and project teams to continue to deliver significant healthcare impacts despite all the obstacles posed by COVID-19. Bernie deserves our sincere thanks for all she achieved in her time with CAWT and leaves a strong legacy to build on, in the context of a transforming cross border health and social care system.

The CAWT Chief Officer has traditionally been skilfully supported by a strong network of partners and staff, through the Management Board and Secretariat, functional groups, project boards and strategy groups. I am delighted to be able to draw on their expertise. Since taking up post in September 2021, I have been truly impressed by their dedication, knowledge and commitment to cross border activity, despite the many conflicting priorities they manage daily in their respective organisations. In the years to come, I will be grateful for their ongoing guidance and leadership.

Sincere thanks is due too to the Special EU Programmes Body (SEUPB), for the responsiveness and flexibility of staff, particularly during this difficult time. SEUPB's support has been vital in enabling the CAWT Partnership to continue to successfully deliver the EU INTERREG VA funded cross border services.

It has also been gratifying to observe how the staff of the CAWT Development Centre, project managers and teams have collaborated so effectively during 2021. Their efforts have minimised the COVID-19 impact on our operation and critically, on the people who benefit from our services. This report reflects an impressive year of project delivery.

Implementation of EU INTERREG VA Projects

While COVID-19 has presented enormous challenges to our EU INTERREG VA funded projects, it hasn't diminished their impact. Each of the five projects successfully adapted and continues to deliver on objectives and targets. Throughout the whole year, our entire project teams showed huge resourcefulness in preserving project

continuity in the face of the pandemic, and have shouldered the burden of leadership by focusing on protecting people, projects and performance. I commend board members, project managers and their staff teams for their continued resilience, support and expertise.

Patients suffering from coronavirus placed additional demands on acute care throughout the cross border region, resulting in a need for rapid implementation of remote working practices with an increased reliance on digital tools. The CAWT Acute Hospital Services Project continued to build capacity in scheduled and unscheduled care services, through the application of technology in developing more responsive health and social care services. It has successfully utilised some of the latest advances in e-health technology to enable more efficient access to assessment, diagnostics and treatment and in many situations, enabled patients to be treated much closer to home. This project has helped strengthen cross border and north/south co-operation in the delivery of acute care.

The Community Health Synchronisation project (CoH-Sync) project is gaining recognition as an exemplar cross-jurisdictional model for supporting population health and tackling health inequalities across the region. Designed to help build the capacity of communities to deliver sustainable health and well-being programmes, the project supported eight hubs to recruit and train 32 local community health facilitators to deliver a diverse range of healthy lifestyle programmes to residents within their communities. Participants were encouraged and supported to take control of their own health by making sustainable small changes. During 2021, hubs offered a hybrid model of face-to-face/online classes, group activities, signposting and direct referrals to other services and opportunities. As that project draws to a close, it is heartening to know that CoH-Sync was successful at reaching and engaging around 12,000 citizens in areas of high deprivation, with many participants seeing a marked improvement in their mental well-being, their diets and their physical activity levels.

The cross border Innovation Recovery project partners established the first ever online Recovery College on the island of Ireland in 2021. The online college was jointly launched by Minister of Health for Northern Ireland, Robin Swann and Ireland's Minister of State for Mental Health and Older People, Mary Butler. The online Recovery College platform provides access to a wide range of online user-friendly courses to improve mental health and well-being. The course content was devised by people who have experienced mental illness in association with health professionals, who co-produce and co-deliver the training. During 2021, participants availed of tailored online courses, including the *COVID-19 Wellness Toolbox*, *Mindful Sleep*, and *Mindfulness and Relaxation*. These courses provide opportunities to encourage individual recovery, wellness, empowerment, progress and life-long learning. Our learning over the past year will be useful in informing both jurisdictions as they develop services, systems and cultures to promote positive mental health.

The MACE Project has continued to transform the lives of vulnerable children and their families, most at risk from a range of challenges in their lives, by identifying, intervening early and providing support within their own homes and communities. During 2021,

almost 2,500 more families received a CAWT EU INTERREG VA MACE intervention. In addition to direct interventions, two major training initiatives took place, providing our workforce with clear, tangible examples of where trauma informed practice has been successfully embedded across different sectors of the workforce and how that learning can be applied in a range of contexts. The Trauma Informed Practice Assessment Toolkit Training was delivered to 290 practitioners and the Trauma Informed Practice Assessment Toolkit 'Train the Trainer' delivered to 11 practitioners. The range of interventions delivered by this project also increased during 2021, with some more specialist interventions such as equine and nature-based occupational therapy introduced for children who have experienced trauma in their lives.

The mPower project (also drawing to a close in 2022) supports older people (age 65+) living with long-term conditions across the Republic of Ireland, Northern Ireland and the west of Scotland. Since its inception, mPower has worked 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. Community Navigators were employed to work with people referred from health and care services to develop well-being plans connecting citizens to activities in their community and to technology to enhance support for health and well-being. While the final evaluation won't be available until 2022, there is much evidence that beneficiaries have found the interventions provided as part of mPower to be extremely positive, particularly in terms of decreased social isolation and loneliness, increased feelings of empowerment and improvements in digital literacy which supported better self-management of chronic conditions.

North/South Co-operation

The CAWT Partnership facilitates other non EU funded cross border/North South activity including all-Island Emergency Planning, incorporating joint academic learning and the delivery of Humanitarian Disaster Assistance training. In November 2021 a very successful cross border humanitarian disaster planning course, hosted by the United Nations Training School in the Curragh, shared experiences and learning, from a range of military and health contributors, on both jurisdictions' response to COVID-19.

Looking forward

During 2020 and 2021, SEUPB offered citizens and other key stakeholders extensive opportunities to share their views on the content and administrative arrangements of the PEACE PLUS Programme as a successor to the EU PEACE IV and INTERREG VA Programmes. Our partner organisations contributed significantly to the conversation and formally submitted a response to the consultation under the CAWT Partnership umbrella. It is likely that the programme will be launched and mobilised in early autumn 2022 and will build on and continue the work of both the current INTERREG VA and Peace IV programmes.

The potential for cross border collaboration is significant, due to the scale of the overall programme. Anticipating that the six proposed themes and investment areas will be agreed by the European Commission, colleagues throughout our partner organisations have, during the course of the year, initiated preliminary conversations with potential partners (existing and new) and begun to scope out possible collaborative, cross border projects where we should consider making submissions.

As I take on the Chief Officer role in CAWT, I have been very encouraged by the commitment of our partners to cooperation and practical application of cross border and north south engagement. This is due in large part to all of those who have worked so hard to build relationships since the Partnership was established in 1992. Looking ahead to the 30th anniversary of CAWT in 2022, there are many past accomplishments to reflect on and recognition of those who made their mark on cross border collaboration and engagement, but our focus will certainly be on the future.

4.0 EU INTERREG VA PROJECT UPDATE

During 2021 all four of the CAWT Partnership's cross border health and social care projects have made significant progress. This is made possible with the continued support of the Special EU Programmes Body and EU grant funding of €31.1m from the INTERREG VA Programme up to 2022/23.

The INTERREG VA Programme aims to overcome issues, which arise from the existence of a border, through greater levels of cross border co-operation. This includes access to health and social care services within the eligible area and serves Northern Ireland, the border counties of Ireland and Western Scotland. This geographic and cross-jurisdictional diversity is demonstrated across all four health and social care projects delivered by the CAWT Partnership under the INTERREG VA Health theme. CAWT is a partner on a fifth project – mPower, which is led by NHS Scotland:

- Acute Hospitals Services Project
- Population Health: Community Health Synchronisation (CoH-Sync) Project
- Mental Health: Innovation Recovery Project
- Children's Services: Multiple Adverse Childhood Experiences (MACE) Project
- Primary Care and Older People: mPower Project

CAWT projects focus on improving the health and well-being of people living in the eligible region by enabling them to access health and social care services in a setting most appropriate to their needs. Successful implementation of these projects relies on effective partnership working across a range of thematic areas:

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

4.1 ACUTE HOSPITALS SERVICES PROJECT: ‘CONNECTING SERVICES, CITIZENS AND COMMUNITIES’



Commenced: June 2017

**Scheduled end date:
November 2022**

**EU INTERREG VA grant
funding: €10.4 million**

The Acute Hospitals Services project, comprising 10 sub-strands continued to complement and enhance the work of CAWT partners throughout the pandemic. Aimed at assessing and treating more patients more effectively through improved or reformed service delivery models (including exploitation of new technologies), it is enabled by the establishment of three 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.

During 2021, scheduled care activities focused on the specialties of dermatology, urology and vascular interventions. Unscheduled care initiatives implemented – including both completed and services still underway – encompassed new advanced community paramedic services, a clinical decision unit, community cardiac investigations and a community respiratory led service. Scheduled and unscheduled care took place throughout the cross border regions as follows:

PROJECT STRAND	DELIVERY SITES
UNSCHEDULED CARE	
Respiratory Led Service	Republic of Ireland – Sligo and Leitrim
Cardiac investigations	Republic of Ireland – Sligo, Leitrim and Donegal
Clinical Decision Unit (CDU)	Northern Ireland – Southern Health and Social Care Trust
Community Paramedic Hubs	Republic of Ireland – Buncrana and Monaghan areas
	Northern Ireland - Castlederg
	Scotland NHS – West Coast of Scotland

SCHEDULED CARE	
Urology	Republic of Ireland – Letterkenny University Hospital
	Northern Ireland – WHSCT, Altnagelvin
Vascular	Republic of Ireland – Letterkenny University Hospital
	Northern Ireland – WHSCT, Altnagelvin
Dermatology	Republic of Ireland – Letterkenny University Hospital
	Northern Ireland – WHSCT, NHSCT
	Scotland NHS – West Coast of Scotland

During 2021, both scheduled and unscheduled care services were – and continue to be – reformed and modernised as part of the project. By year-end 2021 the Acute Hospitals Project had delivered services to 16,877 beneficiaries. Progress was achieved across each project framework.

Key Achievements

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.

The Clinical Decision Unit (CDU)/ Direct Access Unit (DAU) strand allowed patients to be treated using new pathways and resulted in reduced hospital admissions, thereby alleviating pressures on A&E and GP services. This strand was completed in 2021, with the CDU significantly over-delivering on the beneficiary target, due to a reform and modernisation plan implemented in the SHSCT in 2019.

The paramedic strand has become an example of best practice through the incorporation of new developments in the field of community paramedicine. By the end of 2021, the Community Paramedics Project had successfully assessed and treated over 3,000 patients in their own homes and communities. This strand of the project is complete and feedback from a recent patient experience survey indicates that 100% of patients who responded were extremely satisfied with the quality of care they received by these health professionals. The NI Ambulance Service and the National Ambulance Service have plans in place to mainstream community paramedic services at the end of the funding period.

Interoperability

In healthcare, interoperability relates to the ability of different information technology systems and software applications to communicate with each other and transmit patient data safely and securely. Effective sharing of information across systems and organisational boundaries is fundamental to patient safety. Therefore the information should be easily understood and usable by clinicians and healthcare professionals who are treating patients in other jurisdictions. This is of particular relevance on a North-South basis.

Cross border interoperability formed part of the INTERREG VA Acute/Vascular project. A focused piece of work was undertaken to examine the strategic context for North South interoperability in line with the EU Interoperability Framework. This initiative aimed to analyse and identify solutions to sharing information and establish systems for hospitals in the border region to transfer patient information in accordance with legal, organisational, semantic and technical standards.

The project successfully developed and tested out a mechanism for cross border interoperability, demonstrating that Vascular patient 'use cases' could be safely shared with other EU countries. This ground-breaking work will be further replicated and scaled up as part of the next round of EU funding.

Patient Safety Training

A further specialist training initiative, developed by Public Health Agency's NI Improvement Hub for Health and Social Care Quality Improvements and the Health Service Executive's National Quality Improvement (QI) Team was rolled out during the year, to support health and social services to lead sustainable improvements for safer, better healthcare.

Following a successful tender bid, Trinity College Dublin developed and delivered five human factors masterclasses with defined learning objectives. In total 192 health and social care staff availed of the training. The course was delivered using a live webinar format and comprised several offline learning elements complemented by a three-hour live tutorial. Pre-session study materials were released to the Moodle online study platform in advance of the teaching sessions. From May-November 2021, a pilot and four masterclass sessions were delivered and have been independently evaluated.

Participants were asked if their knowledge of human factors had changed post-course, with 94% of the cohort agreeing that it had. Respondents also noted that their knowledge had deepened and that they had increased awareness of the vastness, complexity, and broad application of Human Factors as well as the potential for Human Factors to drive improvements and deliver safer healthcare. Some commented that they have been motivated to pursue further education in the field.

Framework 2: Reform and Modernisation of Outpatient Services and Supporting the Relocation of Specific Diagnostic Activities to Outpatient Settings

This strand of the Acute Hospitals Project focuses on scheduled or planned care, specifically the dermatology, urology and vascular specialties. Examples include the transfer, where appropriate, of 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. Communications activity undertaken in January 2021 underscored the success of the cross border phototherapy service (Dermatology) and its importance in delivering local services to patients in the border regions.

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.

Urology

Since its inception in 2019, the consultant-led cross border Urology Service at Letterkenny University Hospital has welcomed more than 500 patients for their initial outpatient appointment – 162 in 2021. Many patients have subsequently received day case and inpatient interventions. Significant progress has been made in the collaboration with the Western Health and Social Care Trust; this will support both Urology Departments to provide services for the patient catchment populations of both jurisdictions.

Future steps

The Acute Hospitals project is scheduled to conclude in November 2022. Until then, the focus will be on continuing to deliver patient care across each strand and to work towards mainstreaming services using the lessons learned – ultimately enabling many more patients to continue to benefit from innovative acute services in each clinical field of expertise.

In terms of ongoing education, the project team will work towards the development of a dermatology e-learning module for health care support workers and staff nurses

and a phototherapy e-learning module. A number of study days for clinical nurse specialists will be facilitated and a closed Facebook page for dermatology nurses – enabling the sharing of good practice will be initiated across the project's catchment area.

Where possible, technology will be delivered to enhance service delivery and training. The project team will also continue to develop cross border relationships and plans in preparation for the upcoming PEACE PLUS programme.

4.2 POPULATION HEALTH: COMMUNITY HEALTH SYNCHRONISATION (COH-SYNC) PROJECT



Commenced: July 2017

Scheduled end date: April 2022

EU INTERREG VA grant funding: €5.01 million

The EU INTERREG VA Community Health Synchronisation (CoH-Sync) Project is a cross border and community-based project which is facilitating and supporting people to achieve a healthier lifestyle. The aim of the project is to improve the health and well-being of participants by supporting them to develop personal health and well-being plans and to take action to meet health goals.

The project is seeking to address the known risk factors associated with long-term conditions/chronic disease. These risk factors are physical activity, smoking, mental health, nutrition and alcohol. The project is being delivered in the border region of Ireland/Northern Ireland and SW Scotland in eight Hub locations. These eight Hubs are staffed with trained Community Health Facilitators who recruit and support participants to develop a personal health and well-being plan.

COMMUNITY HUB LOCATION	COMMUNITY HUB PROVIDER
REPUBLIC OF IRELAND	
Letterkenny, North Donegal	Donegal Local Development Company
Ballyshannon, South Donegal	Donegal Local Development Company
County Cavan and County Monaghan	Donegal Local Development Company in partnership with Monaghan Integrated Development, Breffni Integrated Development (Cavan)

NORTHERN IRELAND	
Derry and Strabane	Bogside and Brandywell Health Forum in partnership with Waterside Neighbourhood Partnership, Strabane Health Improvement Project and Derg Valley Healthy Living Centre
Enniskillen, West Fermanagh	Arc Healthy Living Centre in partnership with Oak Healthy Living Centre, Fermanagh Rural Community Network and Lakeland Community Care
Armagh and Dungannon	Connected Health
SCOTLAND	
Dumfries, Nithsdale	NHS Dumfries and Galloway in partnership with third sector organisations
Stranraer – Wigtownshire	NHS Dumfries and Galloway in partnership with third sector organisations

The Hub Community Health Facilitators (CHFs) provide support to each client with the development of a customised Health and Well-being Plan, with at least one health goal set. The CHF then supports the client to achieve these goals. Such supports focus on improving health and well-being in relation to physical activity, nutrition, smoking cessation, alcohol misuse and mental health. Once a participant has identified the health goal(s) they wish to achieve, the CHF will assist them to find and access health improvement initiatives and services. They will continue to keep in touch with the participant to provide support and motivation and to ensure a post-assessment questionnaire is completed.

Hub partners are working to a common Health and Well-being plan across the Island of Ireland and are using the NHS Midlands and Lancashire's Data Collection Recording System (DCRS) to record and report on client data information. This includes information on 'before and after' scores for participants across the thematic areas of the project (nutrition, mental health, smoking, physical activity, mental health). There is also a cross-cutting theme of health literacy which has been integrated into the system. Work continued during the year to develop standardised performance management reports for our wide range of key stakeholders.

2021: Key Achievements

Project Achievements to December 2021		
8 Health and Well-being Hubs established	10,052 beneficiaries achieved	60 staff trained

Achievement of targets Hubs

2021 was an important year for the project as the target of securing 10,000 unique beneficiaries by the end of September 2021 was a priority. In the early months of 2021 the COVID-19 pandemic numbers had significantly increased after the festive break. The pandemic made it more difficult for Hubs to recruit and engage with potential participants, particularly with those from the most marginalised groups. Despite this, each of the eight CoH-Sync Hubs diligently strived to meet their targets to support people in their communities to improve their health and well-being. Great credit is due to the Hub Community Health Facilitators and their teams that by the end of September 2021, a total of 10,052 people had availed of the CoH-Sync service. This is a tremendous accomplishment and demonstrates how these community-based Hubs successfully adapted to the challenges and difficulties caused by the pandemic.

Participant support and interventions

This admirable commitment from the Hub Community Health Facilitators to their communities meant that the Project continued to thrive throughout 2021 with a growing number of people availing of their services. At the early stages of the pandemic, the Hubs had successfully transitioned to providing support online and via telephone to replace previous face-to-face interventions. This approach continued throughout 2021 and enabled the Hubs to support the immediate needs of the communities which they serve.

All eight Hubs developed creative and innovative ways to engage clients. As well as signposting to services in the community or online, the Hubs created bespoke community health interventions to support the local populations throughout the pandemic. Support services ranged from online book clubs, creative writing classes, art and craft tutorials, to a wide range of physical activity classes, online cookery classes, mindfulness and life coaching.

“It has given me ideas to make small changes that will lead to a more physical and healthier lifestyle.”

PROJECT BENEFICIARY

Training

In line with seeking new ways to meet the health and well-being needs of local communities and increase the capacity and reach of CoH-Sync Community Hubs, 28 members of staff from Hubs completed accredited Chi-Me Leader and/or accredited Chair Based Activity Leader Training during the year. This provided participants with the tools and skills to deliver this type of training suitable to a wide range of age groups and has proven very popular.

CoH-Sync Community Health Facilitator & Support Staff Networking and Appreciation Event

An online CoH-Sync Community Health Facilitator & Support Staff Networking and Appreciation Event was held in September to coincide with the successful completion of Hub Provider contracts. The CAWT CoH-Sync team were keen that all the Hub Community Health Facilitators (CHFs) were appropriately acknowledged. Thus they organised this event to celebrate CHF achievements and also provide an important opportunity for networking.



Some attendees at the CoH-Sync Community Health Facilitator & Support Staff Networking and Appreciation Event

Project Webinar

On 15 December, a webinar 'Synchronising Health across Borders and Boundaries' was broadcast to profile the experiences and achievements. The event was addressed by the Ministers for Health in the three jurisdictions/regions: Robin Swann MLA Minister for Health Northern Ireland; Stephen Donnelly TD Minister for Health Ireland; Maree Todd MSP Minister for Public Health, Women's Health and Sport, Scotland.

“The project has enabled The Cooperation and Working Together Partnership (CAWT) to progress work on early intervention, prevention of disease and the reduction of health inequalities. This is a key priority for all the project partners and the Departments of Health. This initiative has transformed the lives of those experiencing isolation and poor mental and physical health – conditions further exacerbated by a global pandemic.”

ROBIN SWANN, MINISTER OF HEALTH, DEPARTMENT OF HEALTH, NORTHERN IRELAND

The three Ministers outlined their perspectives on the wider benefits of the delivery of CoH-Sync's community-based interventions in helping to contribute to health and social care policy. Ms Gina McIntyre, CEO of the Special EU Programmes Body highlighted how the investment from the European Union's INTERREG VA Programme had made a positive impact on the health and well-being of local communities.

“This project, like other INTERREG projects, provides a great opportunity for us to work together across jurisdictions and to learn from each other, as we are often facing the same health challenges in our populations. CoH-Sync's emphasis on enabling local people to take ownership of their health and well-being aligns well with Sláintecare and the Healthy Communities Programme.”

MINISTER STEPHEN DONNELLY, DEPARTMENT OF HEALTH, IRELAND

Representatives from each of the Hubs outlined their experiences and the impact the project had made on their clients. In particular, the CoH-Sync Community Health Facilitators articulated how they had overcome many challenges and had still managed to deliver an innovative and creative activity programme during a global pandemic.

Throughout 2021 the CoH-Sync project team supported Hubs to achieve their targets by focusing on a number of key priority areas including;

- Support to the Community Partner Hubs in effectively utilising the DCRS as a client management system and in quality assuring the client information uploaded.
- Provision of an updated bespoke Health and Well-being Plan (COVID-19 Participant Support Form 2021) to enable Hubs to better engage and meet the needs of participants during the ongoing pandemic.
- Provision of training in Chi-Me and chair-based activity training for Community Health Facilitators to deliver interventions within communities.

Beyond 2022

The CoH-Sync project is scheduled to conclude at the end of April 2022. The EU INTERREG VA funding will end on that date. The project has been recognised as an exemplar cross-jurisdictional model for supporting population health and tackling health inequalities across the region. Project Board members wish to ensure the project experiences and learnings are shared widely. Thus the key activities for the final phase of the project in 2022 include:

-
- The production of a qualitative and quantitative evaluation report
- Sharing the learnings of the project with partners and stakeholders
- Highlighting the findings and recommendations from the evaluation report and the Hub experiences to inform future health and well-being policy and practice.

4.3 INNOVATION RECOVERY PROJECT: EDUCATION FOR MENTAL WELL-BEING



Commenced: November 2017

Scheduled end date: March 2023

**EU INTERREG VA grant funding:
€7.6 million**

The Innovation Recovery project aims to establish a cross border Mental Health Recovery College Network, covering 12 counties across the Republic of Ireland and Northern Ireland, to support people recovering from mental ill-health. Through participation in the Recovery College process, people who have experienced mental illness come together with health professionals to co-produce and co-deliver a wide range of free, local, educational training and support programmes to enhance mental well-being and personal resilience. By December 2021, 5,272 people had benefited from Innovation Recovery's innovative approach to improving mental health and well-being and 14 of the 24 staff currently working on the project have lived experience of mental health issues.

The project is delivered across three cross border regions as follows:

LOCATION	INNOVATION RECOVERY HUBS	
Area 1: West (Western)	WHSCT: Derry, Limavady and Strabane	HSE CHO Area 1: Letterkenny and West Donegal
Area 2: South (Southern)	WHSCT: Fermanagh	HSE CHO Area 1: Cavan, Monaghan, Sligo and Leitrim
Area 3: East (Eastern)	BHSCT: Belfast City SHSCT: Armagh and Newry	HSE CHO Area 8: Dundalk and Louth

The ethos of recovery education is based on five interrelated processes known as 'CHIME': Connectedness, Hope and optimism, Identity, Meaning in life and Empowerment. Using the CHIME model allows students to tap into their personal resilience and strengths and to become experts in self-care. Working within the CHIME framework brings the principles of recovery into the learning environment and provides an evidence base, which facilitates measurement of the effectiveness of Innovation Recovery interventions. These principles underpin the development of all of Innovation Recovery's mental health and well-being workshops and courses. These include; Life through Lockdown; The Wellness Toolbox; Living with and Managing Depression; Introduction to Menopause; Practising Self Care, and many more.

2021: Key Achievements

The Innovation Recovery Project managed over 400 mental health and well-being courses in 2021. The provision of the online courses was so important throughout the pandemic and allowed more people across the border counties to attend from the comfort of their own home. The courses also gave people the sense that they were not alone, even if they sometimes felt that way, as such courses offered a connection to those who were in isolation or going through a difficult time.

“Mental ill health continues to be a huge challenge for our society. Too many people struggle to get the help and support they need when they need it which has a hugely detrimental impact on their quality of life, and of those around them. This new virtual initiative will help more people access the resources they need wherever and whenever they need them.”

ROBIN SWANN, MINISTER OF HEALTH, DEPARTMENT OF HEALTH, NORTHERN IRELAND

An additional major 2021 milestone was the launch of Ireland's first Online Recovery College, inspiring the concept of 'health and hope in your hands'. Through its partnership and co-production approach, the Innovation Recovery project team successfully led the development and build of an online recovery college that provides e-learning modules on mental health and well-being. All modules have been co-produced by staff with lived experience of mental health illness and health professionals.

The online college was jointly launched in June 2021 by Minister of Health for Northern Ireland, Robin Swann, and Ireland's Minister of State for Mental Health and Older

People, Mary Butler. The online platform complements existing Zoom sessions and face-to-face courses currently delivered through the project.

The Innovation Recovery project recognised it was more important than ever that people had access to the tools and resources to support their mental health and well-being during their COVID-19 recovery journey. The online platform – mymentalhealthrecovery.com – brings digital enabled mental health services to a wider audience living within Northern Ireland and the border counties of the Republic of Ireland.

The online recovery tool adopts a modern, flexible learning experience and provides a range of support, training and practical tools to promote hope, optimism and recovery. It has enabled remote online learning for those who do not traditionally engage, due to either personal reasons related to their illness, or geographical inaccessibility such as those living in rural communities. Online learning offers improved ease of access for participants, with courses available on multiple devices meaning they can be experienced at home, avoiding the need for travel. E-learning can also offer cost effective delivery of education due to the reduction in course administration, travel costs and venue hire for facilitators.

“Thanks to the Innovation Recovery project we have had the opportunity to work closely with our colleagues in Northern Ireland, on improving mental health and well-being outcomes of our citizens, both north and south. I am confident the launch of this website will bring us closer to our shared goal of building mental and emotional strength and resilience in our population, through the delivery of a diverse range of education and training programmes across the island of Ireland.”

MARY BUTLER, MINISTER OF STATE FOR MENTAL HEALTH AND OLDER PEOPLE, IRELAND

Alongside the Online Recovery College, the teams across the three hubs delivered a series of educational and support workshops to schools, colleges and community and voluntary organisations across Northern Ireland, Donegal, Cavan, Monaghan, Sligo, Leitrim and Louth. The project teamed up with schools and community/voluntary sector organisations across the border counties and developed workshops designed to address the potential impact that life in lockdown was having on people, and to ensure they had access to essential support during the pandemic.

Another key element of the Innovation Recovery Project is the provision of support and upskilling of health professionals working with the hubs. By December 2021, 644 staff

from the project partner organisations in Northern Ireland and the HSE border counties had received training in mental health and well-being courses. Staff attended training on QQI Level 6 Train the Trainer and Wellness Recovery Action Plan (WRAP) Level 1 and Level 2. Evaluations have been gratifying, with 100% of participants rating the course content and facilitators very highly. Health professionals from the project partner organisations have all agreed to deliver face-to-face WRAP courses when restrictions ease and it is safe to do so.

2022 and Beyond

It is anticipated that the project team will consolidate progress during 2022. A key aspect of this will be ongoing promotion of the Online Recovery College, which will host 24 E-learning courses. The team will continue to develop partnership working with community and voluntary sector organisations across all project areas. Where possible, and when COVID-19 restrictions are sufficiently eased, courses will be delivered face-to-face within local communities. It is also planned to offer *Compassionate Care* training to staff in all partner organisations.

4.4 CHILDREN'S SERVICES: MULTIPLE ADVERSE CHILDHOOD EXPERIENCES (MACE) PROJECT



Commenced: July 2018

Scheduled end date: May 2023

**EU INTERREG VA grant funding:
€5.01m**

Launched in September 2018, the MACE Project continued to make steady progress throughout 2021. The aim of the project is to transform the lives of vulnerable children and their families who are most at risk from a range of challenges and difficulties in their lives, by identifying, intervening early and providing nurturing support within their own homes and communities on a cross border basis. Adverse Childhood Experiences (ACEs) are negative experiences, which may occur in childhood and include:

- domestic violence
- bereavement within the home
- being the victim of abuse (physical, sexual and/or emotional)
- being the victim of neglect (physical and emotional)
- parental alcohol or drug abuse

There are five MACE Project cross border areas as follows:

- Derry/Londonderry and Letterkenny and Inishowen, Co. Donegal
- Strabane and West/South Donegal
- Fermanagh and Sligo and Leitrim
- Armagh and Monaghan and Cavan
- Newry, Co. Down, and Louth

At the outset of the project, each cross border area was supported by a MACE project coordinator. Since late 2020 there has been a gradual reduction in the number of MACE project coordinators in place, with just three of the original five in post at 31 December 2021.

During the year, the MACE project shifted focus away from building cross border networks, awareness raising activities and development of tenders – activities which

had characterised the project from its inception up to 2020. The renewed emphasis in 2021 was on delivery of interventions to vulnerable families.

2021: Key Achievements

- By 31 December 2021, 2,441 families had received a CAWT EU INTERREG VA MACE funded intervention during the year, equating to delivery – during 2021 – of 78% of the total intervention target (3,125).
- The Trauma Informed Practice Assessment Toolkit Training was delivered to 290 practitioners during 2021 (148 Northern Ireland and 142 Republic of Ireland).
- The Trauma Informed Practice Assessment Toolkit 'Train the Trainer' was delivered to 11 practitioners during 2021.
- As per procurement strategy, the re-opening and evaluation of new tender submissions was undertaken in 2021 in both Northern Ireland and the Republic of Ireland. The range of interventions available in both jurisdictions increased as result of this, with the addition of some more Specialist interventions such as equine and nature-based occupational therapy, for children who have experienced trauma in their lives. Additional types of Universal Interventions such as 'liquid therapy' (the physical and therapeutic benefits of the surf and ocean), were offered in late 2021/early 2022.

2021 and Beyond

Key actions for 2022 include:

- Continuing to deliver EU funded MACE Universal/Targeted/Specialist interventions to vulnerable families in the CAWT border region, with a particular focus on delivering more complex interventions which are classified as 'Targeted' and 'Specialist'.
- Creating further opportunities in the coming months for additional providers to apply to deliver programmes via the Republic of Ireland framework.
- Continuing the roll out of training on the Adversity Matrix and Risk Stratification Frameworks i.e. the MACE assessment toolkit to 500 practitioners.
- Appointing additional administration staff to deal with the increasing procurement and contracts work associated with purchasing and delivery of interventions to vulnerable families.
- Advertising a new Family Therapist post to address the lack of therapists available on the NI Framework for the WHSCT area.
- Reviewing, as soon as sufficient administrative staff are in post, all the data collected to demonstrate achievement of beneficiary target numbers.
- Engaging with providers and practitioners alike to ensure completion of MACE EU-funded intervention delivery by the contracted dates in 2022.
- Continuing to share experiences and learning emerging from the project.
- Supporting Project Board members in the plans for the project after the EU funding period concludes.

4.5 PRIMARY CARE AND OLDER PEOPLE: MPOWER PROJECT (LED BY NHS NATIONAL SERVICES SCOTLAND)



Commenced: November
2016

Scheduled end date: July
2022

EU INTERREG VA grant funding:
€10.1m in total (€4.1m for the
NI/ROI border region)

Focused on stimulating transformation in Primary Care and Older People's Services, the mPower project is a cross border service for older people (age 65+years) living with long-term conditions. The project supports people in self-managing their health and well-being more effectively in the community. It operates at seven 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 / Irvinestown/ Southeast Fermanagh
Southern Health and Social Care Trust	Armagh/Newry
HSE Community Health Organisation: Community Health Organisation 1 (CHO1)	Finn Valley/South Leitrim
HSE Community Health Organisation: Community Health Organisation 1 (CHO8)	Carrickmacross/Drogheda
Scottish Deployment Sites: NHS Western Isles, NHS Ayrshire & Arran, NHS Dumfries and Galloway	
Other Scottish Project Partners: NHS National Services Scotland; University of the Highlands and Islands and Scottish Council for Voluntary Services.	

Health policies and strategies from across all three regions served by the mPower project advocate for increased care delivery in people's homes and in their communities. Many people will have one long-term condition (or more) by the age of 65 years. Promoting self-care at home by enabling people to better manage these conditions is therefore a significant step in alleviating the pressure health and social care services face. mPower works with communities to enable people to take the steps needed to live well, safely and independently in their own homes.

Within the project implementation areas, Community Navigators are employed to work with people to develop well-being plans and link them to activities in their community. Implementation Leads are employed to connect services and people to technology, which enhances support for their long-term conditions and overall health and well-being. This year also saw Quality Improvement roles introduced to the project teams for the first time in mPower. With an increased focus on quality assurance and service improvement, these posts allowed QI principles to be applied to the project with a view to embedding elements of mPower into business as usual.

During 2021, the CAWT mPower staff continued to respond to the demands of the project whilst handling the challenges that the COVID-19 pandemic was presenting. The year started with lockdowns in all areas and during this time, the teams were still able to deliver targets and reach the most vulnerable citizens that the project was tasked to support. The focus was very much still on eHealth, particularly video enabled care and the year saw positive results in a number of areas. Once lockdown restrictions started to ease, it was possible to set up many Digital Community Hubs across the island of Ireland so that care could be provided locally, and valuable services could still engage with their patients through the support of mPower. Throughout the year, the team continued to work closely with a number of agencies to support the elderly population. As pandemic restrictions reduced, staff were able to recommence face-to-face visits, something that was greatly welcomed by beneficiaries.

During 2021, all mPower Project Partners delivered 2,169 digital interventions; 794 wellbeing plans and 294 learning & development instances. For CAWT partners, the breakdown within the project wide total is outlined below:

Performance			
2021 only	Digital Interventions	Well-being Plans	Learning & Development
HSE CHO 8	316	85	159
Western Trust	129	121	25
Southern Trust	523	95	20
HSE CHO 1	446	127	33
CAWT Total	1,414	428	237

2021: Key Achievements

General

- By December 2021 the project exceeded its target outputs with strong contributions from all CAWT partners.
- Four Project Board meetings were held in 2021: due to ongoing COVID-19 restrictions, all were held via video conference however, the planning for the resumption of face-to-face meetings in 2022 was progressing at the end of 2021.
- Similarly, in 2021 four Project Assemblies were held virtually, which were well attended by all CAWT partners. Highlight sessions throughout the year included the CAWT partner teams presenting on the impact of beneficiary testimony. The teams' presentation reinforced the impact and strength of beneficiary stories to other partners in order to support the recruitment of volunteers for the mPower legacy film, which will be complete before the end of the project in 2022.
- All CAWT partners also contributed greatly to a number of 'lessons learned sessions' towards the end of the year that will help shape a number of project reports. These sessions proved to be very informative and will help guide and shape future projects under the PEACE PLUS programme.

HSE

- Despite starting 2021 in lockdown, HSE partners achieved positive results in a number of areas. The team was able to engage with a number of services in order to re-establish important referral pathways and also worked on agreed new pathways through various services and partners such as ALONE, Practice Nurses and Dementia Care. This year continued to see the transition to the delivery of more services online and the mPower team provided invaluable support to this. Building on the successful implementation of 'Attend Anywhere' across the Republic of Ireland, the team delivered a number of digital community hubs that allowed people to receive video-enabled care in local locations. These hubs stretched across the area, including the Cottage hospital in Drogheda, Drumsna in Sligo and Clonmany, Pettigo and Cloghan in Donegal. Louth County Council administered the Community Fund in CHO8 and a total of four organisations received grants of €5,000 to welcome people back into community facilities. The team also continued to engage with many services providing critical support to beneficiaries who were still adjusting to the pandemic.

WHSC

- Western Trust staff continued to deliver excellent results across a number of services during 2021. Video-enabled care pathways continued to be introduced in several areas including 'Virtual Pulmonary Rehab' with a local GP practice and 'Tissue Viability Nursing' with district nurses. The 'Helping Older People Engage' (HOPE) programme was supported with five Older People's groups and iPads were distributed to beneficiaries to facilitate participation in Zoom exercise classes and other social activities. The Community Fund also provided video conferencing

suites to enable dementia diagnosis and review appointments to be set up in three community facilities in Omagh, Fermanagh and Dungiven.

SHSCT

- In 2021, the SHSCT team re-established many of its former referral pathways and developed many new ones during the year. Work continued to support the connection of care homes allowing beneficiaries to meet socially with friends and relatives, engage with health professionals and enable staff to seek new alternatives for social, physical and emotional activities. Other areas where SHSCT engaged to provide video-enabled care include speech and language therapy, domiciliary care and community physiotherapy. A notable success during this year was the implementation of the WAVE project which allowed SHSCT to reach vulnerable and isolated citizens through video technology, making a big impact on those most affected by the pandemic. The Community Fund was successfully rolled out via small grants. A total of 10 organisations received grants ranging from £2,500 – £8,000 to actively engage people to meet up again in outdoor settings e.g. allotments and Men's Sheds.

mPower Learning Events in the CAWT Region

- A big success in 2021 was the 'mPower Diversity of Social Prescribing to Empower Person Centred Support' virtual event held in October. The event was held over three half days and featured a wide range of subjects all relating to social prescribing. Key sessions were hosted by the HSE Social Prescribing Lead, the Primary care Development Manager for North Ayrshire Health & Social Care Partnership and the team from UHI who are leading the evaluation for mPower. The event was extremely well received with over 160 attendees during the event and feedback gathered was very positive with the event being rated 4.3/5 overall.
- We also continued to offer our shared learning sessions through the Project ECHO® platform in 2021 and covered the breadth of the mPower project including 'The very simple things that will make a difference to a Beneficiary through Well-being Mental Health and eHealth' and 'How mPower can support hospital discharge'. All sessions were well attended and received.

2021 and Beyond

- Ensure the extended project, to July 2022, is successful and mPower exceeds its deliverables, outputs and outcomes.
- The completion of the mPower legacy website making available material, lessons and collateral from the project to support future similar activity.
- Planning for the filming and production of the mPower legacy film which will aim to capture beneficiary voices and the stories of mPower's impact.
- Delivery of the mPower Festival in Belfast, a two-day in person event that will highlight the outcomes of mPower and consider future opportunities for partnership.

- Delivery of the mPower Celebration Closure event in Edinburgh involving senior health stakeholders from all jurisdictions.
- All partners on the island of Ireland will be supported by CAWT and the Lead Partner to exploit all the possibilities available from mPower – financial, resources, and shared learning.
- Provide guidance and support for all project team members looking to apply for substantive roles in their organisations. The experiences and skills gained by all project staff in INTERREG VA projects provide significant benefit to the workforce of all CAWT partners.
- The re-commencement of in person Project Board and Assemblies in 2022 for the remainder of the project.
- Ensure the project is closed successfully with all objectives recorded and reports submitted to the relevant parties.

5.0 GOVERNANCE OF THE CAWT PARTNERSHIP



During 2021, the CAWT partners remained committed to good governance in the operation of the partnership and to making improvements as necessary. As a result of the independent external review of the CAWT Partnership's governance arrangements in July 2019, a Governance Sub Group was established, chaired by the Deputy Director General and comprising Management Board representatives from both jurisdictions. This Group has taken forward recommendations from the review, across CAWT's operating structures including Management Board, Secretariat and the Development Centre.

A primary function of the CAWT Management Board is to set the strategic direction for the CAWT Partnership and to oversee the delivery of the CAWT Strategic Plan. The current CAWT Strategic Plan (2014 to 2022) states CAWT's purpose, vision and goals and details the actions required to support achievement of its strategic goals.

CAWT is responsible for identifying and maximising opportunities for joint working which seeks to improve access to health and social care services and reduce health inequalities in the border region. The CAWT partnership has benefitted from securing financial assistance from the European Union to bring added value and extra resources to the health and social care sector in the border region and beyond. In managing the current INTERREG VA funding, the CAWT partners have agreed to a shared liability arrangement in the management of this funding. Consequently, risks and responsibilities are shared equally among the CAWT partner organisations, embedding the principle that anything progressed by one CAWT partner on behalf of others becomes the shared responsibility of all.

The governance structures for the CAWT Partnership are:

- CAWT Management Board
- CAWT Secretariat
- CAWT Development Centre
- Corporate Support Groups
- EU Interreg VA Project Boards

CAWT Management Board

The CAWT Management Board is the policy and decision-making forum responsible for providing strategic direction to the Partnership. All CAWT partner organisations share equal status on the Management Board with respective CEOs/Senior Personnel responsible jointly and equally for all CAWT partnership activity.

Current CAWT Management Board Members (as at December 2021)		
Damien McCallion	National Director and Director General of CAWT	HSE
John Hayes	Chief Officer, Community Healthcare Organisation 1	HSE
Angela Fitzgerald (last meeting December 2021)	Deputy National Director, Acute Hospitals	HSE
Tony Canavan (first meeting December 2021)	Chief Executive Officer, Saolta	HSE
Shane Devlin	Chief Executive	SHSCT
Paula Keon	Acting Assistant National Director	HSE
Sharon Gallagher	Chief Executive	HSCB
Neil Guckian	Chief Executive	WHST
Aidan Dawson	Chief Executive	PHA

CAWT Director General

The Director General is nominated by the CAWT partner organisations to directly manage the work of the CAWT Partnership on behalf of all partners and works closely with the CAWT Development Centre in all aspects of its work. The Director General chairs the CAWT Management Board meetings ensuring members make an effective contribution to the governance of the Partnership. During 2021 the Management Board met four times, the CAWT Annual General Meeting was held in December 2021.

CAWT Secretariat

The CAWT Secretariat has oversight responsibility for the performance and delivery of the Project Boards and reports directly to the Management Board. The Secretariat is delegated to provide detailed oversight, review progress and resolve operational issues and challenges in developing and delivering cross border activity. During 2021, the Secretariat provided consistent support to the CAWT Chief Officer on the delivery and performance of INTERREG VA Projects maximising potential for cross border co-operation across all programmes of care in both jurisdictions. Additionally, Secretariat members provided support within their respective partner organisations, to their Management Board representative, facilitating the implementation of the decisions of the Management Board in their partner organisations. Secretariat members met four times throughout 2021.

CAWT Development Centre

The CAWT Development Centre undertakes the administrative functions underpinning cross border co-operation in health and social care. The Development Centre is responsible, on behalf of the CAWT Management Board, for ensuring that European Union funded and other cross border projects are administered in accordance with the standards, conditions and procedures set out by the EU funders, CAWT partner organisations and other funders such as the Departments of Health. The Development Centre is centrally involved in facilitating, developing and supporting cross border health and social care activity, including applying for and successfully implementing EU funded and other cross border projects. Throughout 2021, the Development Centre's small, specialised staff team provided support in the areas of cross border strategic development and operational guidance. Practical support was provided in the areas of project management, procurement, HR, finance, communications and publicity and eHealth. Team members provided expert information, engaged in consultations and research studies, developed and delivered presentations and participated in and organised stakeholder and funder events as appropriate.

CAWT EU INTERREG VA Project Boards

Cross border Project Boards, established for the individual EU INTERREG VA funded projects, are responsible for ensuring that projects deliver their objectives within the agreed time and budget and to a predefined quality standard. On an ongoing basis, the Project Boards report to the CAWT Secretariat, via the CAWT Development Centre, on progress made within the projects.

6.0 CORPORATE SUPPORT GROUPS

CAWT Finance Forum

The CAWT Finance Forum comprises senior finance representatives of the partner organisations.

It is the responsibility of the CAWT partnership 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 the CAWT partnership and in specific CAWT 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 outlined above are being met.

CAWT Human Resource Strategy Group

The CAWT Human Resource (HR) Strategy group met twice during 2021 despite ongoing frontline organisational pressures during the COVID-19 pandemic. The strategy group members provided HR leadership and guidance, as required, throughout the year to ensure effective delivery of INTERREG VA projects.

The HR Strategy Group members have discussed the importance of maintaining effective management of cross border HR issues through collaboration and working together, particularly in relation to staffing and arrangements required to facilitate staff to be employed and work in a cross border/cross organisational context. The members are committed to engaging with cross border Strategy Groups in preparation for PEACE PLUS funding applications to ensure the HR strategy submitted is achievable and deliverable within the governance of their respective organisations and to also meet funding requirements. The Directors of HR in Northern Ireland and Assistant National Directors of Recruitment in the Republic of Ireland, working with the CAWT HR Manager, have continued to review the existing CAWT HR Policy and bespoke arrangements for posts appointed to CAWT projects to ensure they satisfy the requirements of each partner organisation and that appropriate HR governance arrangements are in place.

CAWT Communications Group

Throughout 2021 the CAWT Communications Group coordinated cross border communications activity ensuring the processes and protocols of the CAWT partner organisations were followed. Given the challenges imposed by the pandemic, face-to-face meetings weren't possible, but communications representatives from all CAWT partner organisations collaborated to share information and receive regular updates on both internal and external cross border communications matters.

CAWT's Communications and Governance Manager, as designated lead on promoting and raising awareness of EU INTERREG VA funded health and social care cross border projects, ensured that the appropriate communication and information regulations in both jurisdictions, and of the EU funders, were met. Where necessary, advice and guidance was sought from the SEUPB Communications and Marketing team to ensure adherence to good practice in the execution of events and delivery of printed and digital material.

CAWT Procurement and Contracts Group

Procurement departments were focused on dealing with COVID-19 related matters during the year. Despite this, a small number of key procurements for CAWT projects were progressed in 2021, which was greatly appreciated, considering the huge pressures procurement colleagues were experiencing.

The group, which is co-chaired by the Assistant Director of Procurement and Logistics Service (PaLS) NI and the Head of Procurement at the HSE, is comprised of senior representatives from the CAWT partner organisations who provide procurement/contract services. Whilst meetings of the Group were stood down due to COVID-19, during the year, the members regularly provided advice to Project Boards on procurement matters and updated the CAWT Finance Forum, Secretariat and Management Board on procurement and contract work undertaken.

CAWT eHealth Steering Group

The eHealth Steering Group is comprised of senior eHealth representatives from the CAWT partner organisations who provide strategic leadership and co-ordination of eHealth initiatives within the CAWT EU INTERREG VA funded projects. Co-chaired by senior eHealth specialists from the HSCB/PHA and the HSE, the eHealth Group ensures that all eHealth systems and products are aligned with CAWT partner organisations ICT and eHealth strategic objectives.

Throughout 2021, the eHealth Steering Group supported the INTERREG VA Project Boards in planning and implementing relevant eHealth initiatives identifying opportunities for shared approaches and efficiencies across the projects. Initiatives included solutions to enable interoperability for sharing of patient records, home and mobile health monitoring, virtual clinics and videoconferencing and the online Recovery College.

CAWT Governance Sub Group

Established in 2021, the CAWT Governance Sub Group provides advice and assurance to the CAWT Management Board on its governance responsibilities ensuring compliance with CAWT's governance framework which has been developed to implement and safeguard decision-making processes.

In line with the existing statutory governance and accountability frameworks of the CAWT partner organisations, the Governance Sub Group oversees CAWT governance practices which have been designed to complement and support each partner

organisation's individual responsibilities. Reflecting the standards established in the partner organisations the Sub Group monitors the implementation of governance policies and procedures that are documented and accessible ensuring these are observed by staff at all levels of involvement in the work of the CAWT partnership.

Chaired by the Deputy Director General, Sub Group membership comprises senior representatives from the CAWT partner organisations. Meetings take place two times per year.

7.0 FINANCIAL OVERVIEW

EU INTERREG VA Projects

Total EU INTERREG VA funding allocated to each project and total project expenditure claimed by the end of 2021 is summarised in the table below.

Project	Total Project Budget (€)	Total Expenditure claimed on eMS ² by Dec 2021 (€)
Acute Hospital Services Project	10,485,220	4,852,547
Mental Health: Innovation Recovery Project	7,614,751	3,501,410
Population Health: CoH-Sync Project	5,010,371	4,604,040
Children's Services: MACE Project	5,010,240	1,752,578
Primary Care Older and People's Services: mPower Project	4,116,544	2,459,285
TOTAL	32,237,126	17,169,860

² eMS is the SEUPB's monitoring/verification/project management system for EU funded projects

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 2021.

CAWT Development Expenditure up to 31 March 2021

CAPITAL COSTS	Budget for year ending 31/3/21 (£)	Actual for year ending 31/3/21 (£)
Plant and equipment	4,000	2,649
	£4,000	£2,649

STAFF COSTS	Budget for year ending 31/3/21 (£)	Actual for year ending 31/3/21 (£)
Senior Management	413,862	408,810
Functional support and administration	209,252	191,505
	£623,114	£600,315

RUNNING COSTS	Budget for year ending 31/3/21 (£)	Actual for year ending 31/3/21 (£)
General Administration	3,232	2,202
Travel and subsistence	8,182	4,274
Training and development	3,178	0
Printing and stationery	3,693	3,266
Conferences and events (organised by the CAWT Development Centre)	3,022	37,272
Rent and rates	3,176	3,155
Management Board meetings	1,500	0
Cross border project development activities	19,357	19,321
	£45,340	£69,490
TOTAL	£672,454	£672,454

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**