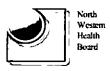
## **PARTNERSHIP IN ACTION**



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

# CAWT BUSINESS PLAN 2002-2006















### TABLE OF CONTENTS

EXECUTIVE SUMMARY			
Сн	APTER 1 - INTRODUCTION		
1.	Introduction	1	
1.1	CAWT REGION	1	
1.2	CAWT ORGANISATIONAL PROFILE	3	
1.3	MAJOR SERVICE DEVELOPMENT ACHIEVEMENTS 1996 - 2000	4	
	1.3.1 CAWT RESOURCE UNIT	4	
	1.3.2 Acute Services	5	
	1.3.3 AMBULANCE SERVICES	5 5	
	1.3.4 Primary Care	5	
	1.3.5 Mental Health	6	
	1.3.6 FAMILY AND CHILD CARE	6	
	1.3.7 FLEXI WORKER FAMILY SUPPORT PROJECT	6	
	1.3.8 HEALTH PROMOTION	6	
	1.3.9 PUBLIC HEALTH	7	
	1.3.10 Communications	7	
	1.3.11 CORPORATE SERVICES	7	
1.4	EVALUATION OF CAWT: FROM CONCEPT TO REALISATION	7	
	1.4.1 THE FINAL REPORT	8	
	1.4.2 RECOMMENDATIONS	8	
Сн	APTER 2 - THE WIDER CONTEXT		
2.1	THE POLITICAL CONTEXT	11	
2.2	COMMON CHAPTER	12	
2.3	European Structural Funds 2000 - 2004	12	
2.4	STRATEGIC POLICY	13	
2.5	RELEVANT PLAYERS	14	
2.6	European Agenda	14	
Сн	APTER 3 - THE PLANNING PROCESS		
3.1	MAKING CONNECTIONS	16	
3.2	OUTPUTS FROM THE MAKING CONNECTIONS SEMINAR	16	
	3.2.1 KEY CRITERIA FOR THE SELECTION OF PROJECTS	17	
	3.2.2 KEY THEMES	17	
3.3	CAWT WORKSHOP: IDENTIFYING KEY PROJECTS - JULY 2000	17	
3.4	DISCUSSION PAPER LEADING UP THE DEVELOPMENT OF THE	18	
	SECOND STRATEGIC PLAN		
3.5	THE STRATEGIC PLAN	19	
3.6	OPERATIONALISING THE STRATEGIC PLAN	19	

CHA	PTER 4 - CA	AWT RESOURCE UNIT	
4.1	CAWT RES	OURCE UNIT	21
	4.1.1 PH	ASE I (1992 - 1995)	21
	4.1.2 PH	ASE II (1995 - 1999)	22
	4.1.3 PH	ASE III (1999 - 2002)	23
	4.1.4 PH	ASE IV (2002 - 2006)	23
4.2	Conclusion	ОИ	25
Сна	APTER 5 - SU	JMMARY WORK PROGRAMME 2001 - 2006	26
5.1	HEALTH PROMOTION		
	5.1.1 Sti	EERING TO SAFETY	28
	5.1.2 SM	OKING CESSATION INTERVENTIONS IN PREGNANCY	30
5.2	Older People		
	5.2.1 Ac	TIVE RETIREMENT GROUPS FOR OLDER PEOPLE	32
	5.2.2 AD	DITIONAL PROJECT TO BE ADDED	33
5.3	SOCIAL A	ND COMMUNITY CARE	34
	5.3.1 Bil	ateral Community Care Feasibility Studies	34
		sk Assessment And Interventions For Non-Convicted Sex Offenders	36
	5.3.3 Ed	ucation and Training for those who work with Adult Survivors of Sexual Abuse	38
	5.3.4 Ho	ome Support Worker Training	40
5.4	PRIMARY CARE		
		re of Type 11 Diabetes; Role of Community Pharmacist	42
	5.4.2 Cro	oss Border Out of Hours Service	44
	5.4.3 Ca	rdiovascular Nursing	47
	5.4.4 Ep	idemiological Study of Oral Health	50
5.5	Learning Disability		
		otection of Vulnerable Adults	52
	5.5.2 Vo	ocational Assessment and Training	53
5.6			
		ajor Incident Planning and Response	56
		obile Catheterisation Services	58
		nt In-service Education Programme for partial leading of the control of the contr	60
	5.6.4 Me	edical Technical Officer Training	62

5.7	PUBLIC HEALTH	64
	5.7.1 Cross Border Policies on Health Protection	64
	5.7.2 Health Impact Assessment	66
5.8	FAMILY AND CHILD CARE	68
	5.8.1 A New Chance: Fostering Initiative	68
	5.8.2 Needs Assessment and Planning Frameworks	71
	for Services for Children and Young People	
	5.8.3 Inside Out	73
5.9	MENTAL HEALTH	75
	5.9.1 Needs Assessment of Carers	75
	5.9.2 Awareness Training in Cognitive Therapy	77
	5.9.3 Investigation of Suicide and Attempted Suicide	79
	5.9.4 Positive Mental Health and Young People	81
5.10	SUPPORT SERVICES	83
	5.10.1 Cross Border Mobility Study	83
	5.10.2 CAWT ICT Strategy Implementation	85
	5.10.3 Connecting With Europe	86
5.11	MANAGEMENT DEVELOPMENT	87
	5.11.1 Partnership Training and Education	88
	5.11.2 Training the Trainers	88
	5.11.3 Women In Management	89
	5.11.4 Action Learning	89
	5.11.5 Public Health Leadership Nursing Programme	90
	5.11.6 Personal Development Planning Initiative	90
	5.11.7 Service Development and Organisational Education, Training and Development	91
Сна	PTER 6 - FINANCE	93
6.1	FINANCIAL PLAN	93
6.2	FINANCIAL MANAGEMENT	93
6.3	FINANCIAL TABLES	96
Сна	PTER 7 - QUALITY ASSURANCE AND EVALUATION	106
7.1	ESTABLISHING THE PROJECT ORGANISATIONAL STRUCTURE	106
7.2	PROJECT INITIATION	107
7.3	COMMUNICATIONS PLAN	107
7.4	CONFIGURATION AND PROJECT FILES MANAGEMENT	108
7.5	PROJECT PLAN AND QUALITY ASSURANCE	108

CHAPTER 8 - HUMAN RESOURCES		110
8.1	RECRUITMENT	110
8.2	MANAGEMENT DEVELOPMENT AND TRAINING	111
8.3	CONSTRAINTS TO CROSS BORDER MOBILITY	111
Снар	TER 9 - INFORMATION, COMMUNICATIONS AND ICT	112
9.1	Information	112
9.2	COMMUNICATIONS	116
9.3	INFORMATION COMMUNICATION TECHNOLOGY	116
9.4	Training	120
APPE	NDICES	
APPE	NDIX 1 - DISCUSSION PAPER LEADING UP THE DEVELOPMENT OF	
	THE SECOND STRATEGIC PLAN	
APPE	NDIX 2 - CAWT SERVICE DEVELOPMENT PROPOSAL	
	Application Form	•
APPE	NDIX 3 - CAWT SERVICE DEVELOPMENT PROPOSALS RATIFIED BY	,
	THE CAWT MANAGEMENT BOARD - SEPTEMBER 2002	*
APPE	NDIX 4 - ORGANISATION CHART	
APPE	NDIX 5 - FINANCIAL INFORMATION FOR PROJECTS DETAILED IN	
	Chapter 5	
APPE	NDIX 6 - CONSTRAINTS TO CROSS BORDER WORKING	

## PARTNERSHIP IN ACTION



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

## **EXECUTIVE SUMMARY**



#### EXECUTIVE SUMMARY

#### 1. INTRODUCTION

By July 2002, the CAWT Organisation had been in existence for ten years. In December 2002, the Chief Executives and Chairmen of the participant Health Boards and Trusts re-signed the Ballyconnell Agreement and reaffirmed their commitment to the concept of cooperating and working together for the good of the resident population of the Border Area.

An independent evaluation of CAWT, which was carried out by the Centre for Cross Border Studies and was published in 2001, reported that CAWT had made good progress towards achieving all of its key objectives. It highlighted the need for a clear strategic direction for CAWT, the development of a population needs assessment and improving staffing levels in the CAWT Resource Unit.

This objective analysis of CAWT's structures, processes and outcomes had a major influence on the shape of the CAWT Strategic Plan 2001- 2004. The plan identifies the key themes and specific service areas within each programme of care where CAWT has identified that cooperative working and research would be of benefit. It includes a number of action points in relation to the development of effective management arrangements to support CAWT business including the optimum involvement of the provider system.

Also in 2002, the CAWT Public Health Subgroup undertook to develop and produce a population health profile of the border region. This is one of the most important pieces of work produced by CAWT and the information contained in this profile will be used to inform further in-depth health and social care needs assessment work as well as providing the direction for future service development and project work.

CAWT also seeks to establish wider European links, both to test the value of CAWT as a model of cross border public body cooperation within other areas of Europe and to learn from models developed in similar European border areas. This process began in 2001 with a very successful conference with the theme "Connecting with Europe". It is planned to continue this process of making links with Europe by utilising and extending the many contacts and networks that the conference enabled.

#### 2. THE WAY FORWARD

Since the signing of the Good Friday Agreement, cross border health and social care cooperation and working together have become politically practicable. It is included in the Common Chapter in both the N.I. Structural Funds Plan (2000-2006) and the National Plan for the Republic of Ireland (2000-2006), and in a number of recent strategy documents produced in both jurisdictions.

Both Ministers for Health and the Departments of Health in Northern Ireland and the Republic of Ireland have given official endorsement of the CAWT process. More recently the work of CAWT has been acknowledged and commended by the North/South Ministerial Council and CAWT is formally represented on three of the North/South Groups working on the designated cross border health issues. It is also proposed that CAWT will take a project management role in respect of the implementation of the recommendations of these North/South Groups.

CAWT has been nominated by both Departments of Health as the vehicle by which the Interreg 111A Health & Well Being / Priority 3 Measure 2 will be implemented. Eighteen to twenty projects/service developments will be implemented across the programmes of care. This will include significant health promotion programmes in the areas of road safety and smoking cessation; primary care projects in the areas of diabetes management in the community, cardiovascular nursing, cross border out of hours pilots and an oral health study; family and child care projects around fostering services and needs assessment and planning; major incident planning and response and emergency planning for other cross border public health issues, as well as health impact assessment studies. Work will also be undertaken in the elderly, mental health and learning disability programmes of care. Full details are included in Chapter 5.

CAWT has already been successful in attracting funding under Peace 11 Measure 5.2 for a number of pieces of work relating to community services and mental health services. These are detailed in Chapter 5

CAWT places significant emphasis on developing the skills and competencies of staff so that they will be able to respond to the challenges that will arise as the CAWT Strategic plan is implemented. An ambitious training programme has been developed by the CAWT Management and Learning Development Managers which includes in service training for nurses, home support workers, medical technical officers and all professionals working with adult survivors of sexual abuse, as well as a

comprehensive development programme for managers in all disciplines. Again full details are included in Chapter 5.

#### 3. CONCLUSION

This Business Plan has been produced in order to give life to CAWT's Strategic Plan, by setting out in detail the specific pieces of work and projects that will be undertaken. It identifies sources of funding and it will be apparent that there is significant reliance on the provision of EU Funding from both the Interreg 111A and Peace 11 Programmes.

Chapter 4 reviews the work of the CAWT Central Resource Unit and introduces the concept of satellite offices, Executive Officers for NWHB/WHSSB and NEHB/SHSSB as well as the need for dedicated staffing in ICT and Communications.

Chapter 5 provides full details of the thirty-six projects/service developments that have been approved by the Management Board and which CAWT will seek to implement subject to the necessary funding being acquired. A significant amount of work has already been done in relation to sourcing funds, which is subject the final ratification by funders. More work is needed and this will require significant input from CAWT Officers over the next two to three years.

Chapter 6 gives a summary of the Financial Plan which totals approximately £11m/€17m and discusses Financial Management issues, whilst Chapter 7 details CAWT's project management arrangements including quality assurance and evaluation mechanisms. The identification of opportunities for mainstreaming the work undertaken by the projects is also highlighted.

Chapter 8 looks at the Human Resources implications of implementing the CAWT Strategy, including the need to find ways of removing the barriers to cross border cooperation, and Chapter 9 identifies the necessary developments in Information, Communications and ICT that are required for the success of the work of CAWT.

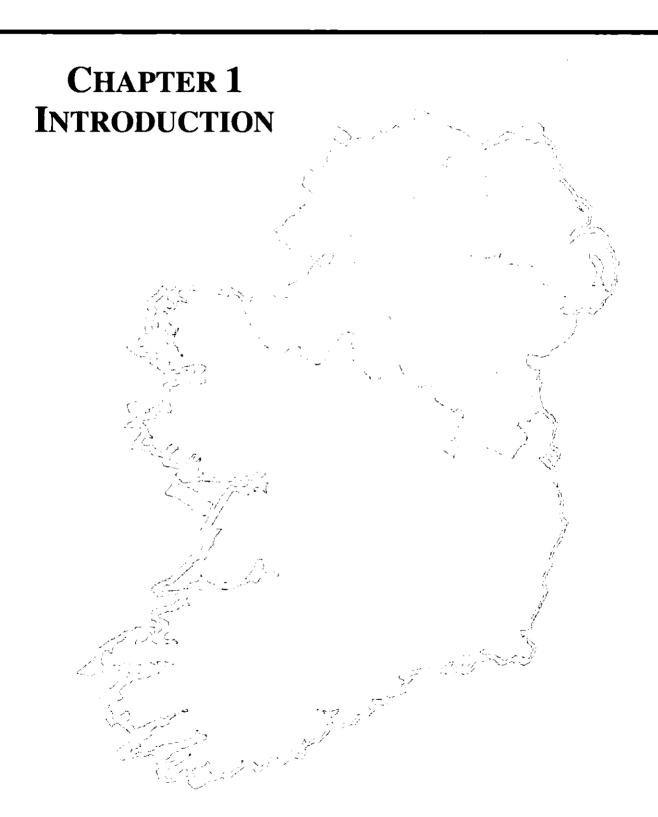
The development and production of this Business Plan is just the beginning of a process which, over the next four to five years, will see the successful implementation of many cross border developments which will contribute to the achievement of CAWT's underlying objective of improving the health and social well being of its resident population.



## **PARTNERSHIP IN ACTION**



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



#### 1. Introduction

The Co-operation and Working Together (CAWT) initiative was officially started in 1992 when the North Eastern Health Board (NEHB) and North Western Health Board (NWHB) from the Republic of Ireland and the Western Health and Social Services Board (WHSSB) and Southern Health and Social Services Board (SHSSB) from Northern Ireland signed the Ballyconnell Agreement committing them to co-operation to improve the health and social well being of their resident populations. It is reviewed and revised as necessary at each CAWT Annual General Meeting. The review in October 1998 took account of the seven newly formed Northern Ireland Trusts in the border region; Altnagelvin Hospitals HSS Trust, Armagh and Dungannon HSS Trust, Craigavon Area Hospital Group HSS Trust, Craigavon and Banbridge Community HSS Trust, Foyle HSS Community Trust, Newry and Mourne HSS Community Trust, Sperrin Lakeland HSC Trust. Subsequently, the review in September 2002 took account of relevant changes to the CAWT organisation.

Spontaneous cross-border work did exist during the 1980s. However, the Chief Executive Officers' (CEOs) of the border boards were aware that relationships needed to be formalised in order to exploit all opportunities for joint working and to harness the potential of the opportunities presented by the European Union. Official endorsement for the CAWT process has subsequently been given at a national level by both Ministers for Health and Departments of Health in Northern Ireland and the Republic of Ireland.

#### 1.1 CAWT REGION

The four CAWT Boards embrace the whole of the land boundary between the Republic of Ireland and Northern Ireland, serve a population of over one million people and account for 25% of the total land area of the island of Ireland.

Figure 1 shows the Board boundaries of the CAWT region.

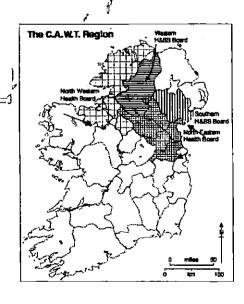


Figure 1

More specifically, the CAWT region comprises:

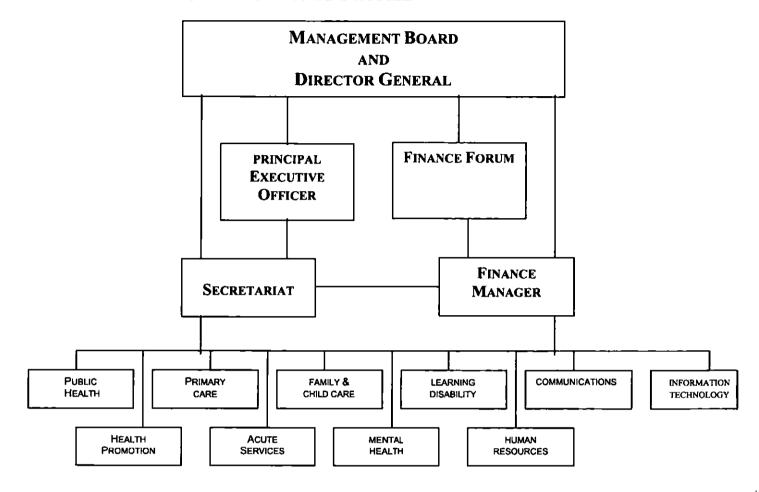
- The Western Health and Social Services Board, covering the District Council areas of Limavady, Strabane, Omagh and Fermanagh;
- The Southern Health and Social Services Board, covering the District Council areas of Newry and Mourne, Armagh, Dungannon, Banbridge and Craigavon;
- The North Western Health Board, encompassing counties Donegal, Sligo and Leitrim;
- The North Eastern Health Board, covering counties Cavan, Louth, Meath and Monaghan.

The border between Northern Ireland and the Republic of Ireland was established eighty years ago, creating a frontier of 450km. Like many internal EU borders, the Irish border region exhibits most of the problems and disadvantages associated with peripherality from political and economic decision-making (unequal and poorly integrated development, and mismatches in organisational responsibility and competencies). When combined with the associated problems of rurality (poverty, deprivation, weak infrastructure, an ageing population) and intensified by the consequences of 30 years of violence, the Irish border region shows most of the characteristics of economic and social deprivation. It is virtually certain that the existence of the border has aggravated many of the general problems associated with the region or has at least prevented the optimal solution to these problems being pursued. It is considered that significant unrealised potential has been linked to the pattern of 'back to back' development in both jurisdictions.

The primary objectives of CAWT are:

- To improve the health and social well being of their resident population;
- To identify opportunities for cooperation in the planning and provision of services;
- To assist border areas in overcoming the special development problems arising from their relative isolation in national economies and within the European Union as a whole;
- To involve other public sector bodies in joint initiatives where this would help fulfil common primary objectives;
- To exploit opportunities for joint working or sharing where these would be of mutual advantage.

#### 1.2 CAWT ORGANISATIONAL PROFILE



Projects, Training Events, Conferences, Information Exchanges

The CAWT Management Board comprises the four Board Chief Executives, the four Board Chairpersons, and a representative Trust Chief Executive and Chairperson. The two key linkage mechanisms are the Secretariat - nominated people from the four Boards and also the Central Resource Unit, who support and co-ordinate the work of CAWT.

CAWT primarily functions through eleven sub-groups:

public health
health promotion
primary care
acute services
family and child care
mental health

learning disability human resources communications information technology finance It is intended that two more sub-groups will be established, physical/sensory disability and older people. Service developments and projects undertaken by the sub-groups can often be on a bilateral basis while others may involve three or four Boards. To date, funding for the work of the sub-groups has come from internal resources and from EU Peace and Reconciliation Funds.

#### 1.3 Major Service Development Achievements 1996-2000

#### 1.3.1 CAWT Resource Unit

CAWT succeeded in 1996 in securing funding under Measure 3.3a and 3.3b, Co-operation between Public Bodies from the EU Special Support Programme for Peace and Reconciliation. Phase I funding, together with Boards' own resources allowed CAWT to formalise its organisational structure, appoint a full time co-ordinator, procure financial monitoring support and establish the CAWT Resource Unit.

#### Phase II SSPRR funding enabled CAWT to:

- Continue to develop its expertise as a cross border public body in the health and social care area, in order to combat discrimination and disadvantage.
- Co-ordinate and monitor a total of nineteen SSPPR funded cross border health and social services projects and develop from them common cross border policies for mainstreaming.
- Identify and develop cross border feasibility studies on priority areas across programmes of care.
- Identify operational linkages to fully engage the seven Trusts within the CAWT region.
- Establish links with other cross-border bodies including the North South Ministerial Council, the All Ireland Institute of Public Health, the Centre for Cross Border Studies and the Special European Union Programmes Body.
- Develop and support projects aimed at increasing health and social gain for specific marginalised groups including children, young people at risk, persons with mental illness and with learning disabilities.
- Complete an independent evaluation of the CAWT process.

#### 1.3.2 Acute Services

All of the Acute Trusts in Northern Ireland areas which border the Irish Republic, have had active projects working with either the NWHB and/or the NEHB to improve the levels, quality and accessibility of services for their respective populations. Specific examples of this include the development of dermatology services in Monaghan, Dundalk, Newry and Armagh and the provision of nephrology services to patients in the NEHB from Daisy Hill Hospital. These particular developments highlighted the willingness of patients to avail of services at their nearest point of delivery irrespective of the border.

Important outputs from the feasibility studies in the acute sector have been the identification of current constraints to cross border partnership working as well as highlighting further opportunities for collaboration. Important examples include the agreement between Altnagelvin Hospital and NWHB to explore the possibility of sharing services in the areas of cardiac catheterisation, neo-natal care, oral and maxillo facial surgery services and breast screening services. In addition, the outcome of the Triangle Feasibility Study identified emergency planning and nurse training as areas to be taken forward.

#### 1.3.3 Ambulance Services

Joint training has been provided for ambulance personnel at both control and operational level. This included the development of joint protocols and a coordinated approach to the response to major incidents. The project engaged the border communities in safety and information programmes. This work was of significance in informing the recently established North South Ministerial Council's Pre Hospital Emergency Care Working Group.

#### 4.3.4 Primary Care

The outcome from work in the primary care sectors was to improve primary care services for people resident in border areas by enhancing the quality of care provided, through improved levels of communication and team-working and upgrading the standard of facilities available to deliver services. The identification of health and social care needs of cross-border isolated communities together with an examination of ways in which Boards can work together to improve care, for example, in the provision of out-of-hours services, were major achievements from the project.

#### 1.3.5 Mental Health

The development of a centre of excellence for cognitive therapy treatment and training for mental health professionals from both sides of the border was facilitated. This project also established the framework for cross border cooperation in the treatment of patients and the support of professionals providing cognitive therapy treatment.

A comprehensive outreach support and training programme for people with mental health problems was established in the Melvin area. The Melvin Mental Health Partnership Programme supported and trained people from both sides of the border, helping them to gain new skills or regain old ones, so that they could play as full a part as possible in the life and economy of their communities.

#### 1.3.6 Family and Child Care

Three projects were undertaken within Family and Child Care, all of which were targeted at children and young people with specific difficulties and needs. The projects spanned all four Board areas and actively involved parents, teachers and communities often coming together in cross-border groups to examine their common needs and identify ways of working together to meet these needs. Publications have included teaching resources and information books for teachers, parents and carers.

#### 1.3.7 Flexi Worker Family Support Project

The Flexi Worker Family Support Project which was implemented by the Learning Disability Group and was completed in 1998 highlighted once again the challenge for cross-border working in the context of markedly different infrastructures and legislative frameworks. The sub-group also continued to take an interest in the area of the protection of vulnerable adults from abuse and wish to progress this further.

#### 1.3.8 Health Promotion

A particularly co-ordinated approach was taken to cooperation and working together in the area of Health Promotion, with specific goals having been set and detailed in the Sub-group's Service Plan. Work was completed in the areas of Childhood Accident Prevention, Mental Health Promotion, Drugs Awareness and Smoking Cessation and a range of methodologies applied.

#### 1.3.9 Public Health

The main piece of work undertaken by the Public Health Sub-group was the development of a population health profile of the border region. This involved drawing on the Boards' existing sources of data including Directors of Public Health Annual Reports, the Inequalities in Mortality Study produced by The Institute of Public Health in Ireland and information from statistical organisations in both jurisdictions. The Population Health Profile, one of the most important pieces of work produced by CAWT, will be used to inform further in-depth health and social care needs assessment work as well as future service developments.

#### 1.3.10 Communications

CAWT has recognised the need to improve internal and external communications. The Communications Sub-group developed a communications strategy which together with an action plan will structure and plan communications within CAWT and ultimately enhance awareness and understanding of the organisation and its role.

#### 1.3.11 Corporate Services

Human Resources, ICT and finance professionals have worked together to support the various cross-border projects and initiatives and have helped to develop and sustain important networks and relationships resulting in strategic and longer term co-operation across a wide range of areas. Details of all these activities can be found within the CAWT Annual Reports.

#### 1.4 EVALUATION OF CAWT: FROM CONCEPT TO REALISATION

In June 2001, the Centre for Cross-Border Studies was commissioned to undertake an independent evaluation of the CAWT organisation. The evaluation, which was prepared at a time when CAWT was actively considering its future role, aimed to serve three main functions:

- The need for accountability to the border population, stakeholder organisations and funders;
- The need to assess the extent to which the co-operation process has been fully embedded into mainstream health and social care structures of the four health boards;
- The need to identify ways in which the experiences of CAWT could be used to inform future cross-border working/projects.

#### 1.4.1 The Final Report

The evaluation report, which was published in February 2001, began by setting out the context of cross-border cooperation in Ireland and introducing the main players. While the work of each CAWT sub-group was briefly reported the main focus was on examining the working structures of CAWT in relation to how the organisation was both led and supported by its member Boards and Trusts. The report recognised that CAWT offered a vehicle for health and social care professionals to continue to work together and that networks of contacts had now been established throughout the CAWT region.

Overall CAWT was found to have made progress in reaching all of its key objectives over the evaluation period from 1992-2000.

A number of issues were identified including the need for:

- Improved communication /dissemination of information about CAWT and its progress;
- Engagement of Trusts beyond those professionals actively involved in CAWT projects;
- Time-intensive hidden commitment of personnel from the four health Boards and how this could be eased through the use of new technology, e.g. video conferencing;
- The "added-value" of CAWT projects and the need to move from building relationships between professionals on both sides of the border to performance indicators in terms of looking for clear and tangible benefits for patient and their communities;
- Mainstreaming of projects in the embedding of cross-border work into individual Boards' and Trusts' Strategic and Service Delivery Plans;
- Alignment of cross-border working with the strategic policy of both jurisdictions.

#### 1.4.2 Recommendations

A series of recommendations were outlined to help CAWT develop in the future including the need for:

A revised CAWT Strategic Strategy which should include clear statements on:

- CAWT's objective of improving co-operation and the obstacles to be overcome in achieving that improvement.

- Existing cross-border problems and how they can be ameliorated through closer cross-border working.
- How CAWT's work fits into the broader peace and reconciliation agenda of the European Union and the two governments.
- Evaluation and monitoring should be standardised across all CAWT sub-groups through the development of an evaluation template which should contain guidelines on the expected standard and format.
- Consideration should be given to assigning a quality assurance team to all projects to help maintain the focus on the cross border aspects of the work and to ensure that the development is aligned to the policies of both jurisdictions.
- In order to take full advantage of the opportunities afforded by North/South arrangements and to meet enhanced expectations, it was recommended that the staffing of the central executive be reviewed to provide both greater support for the existing Secretariat members and to facilitate the move towards developing an on-line communications culture:
- The report also noted the need to proactively support the more inclusive involvement of Trusts and ensure that the ICT, Human Resources and Public Health sub-groups are more involved.
- CAWT, the report highlighted, has the potential to become an exemplar of good practice, for example, in relation to the assessment of health care needs and opportunity costs and it was recommended that a range of studies be commissioned in conjunction with academic and policy institutes.

With regard to the development of services which would lead to sustainable, mutual benefits in improving health, it was felt that:

Care-needs to be taken that restrictions intended-to protect existing services do not impede the possibility of future cooperation which could lead to benefits for the overall health of the population.

There needs to be open discussion around acceptable development criteria and documentation of these criteria needs to take place.

In relation to improving communications with individuals within and without the CAWT region there were two very specific recommendations.

 An on-line repository of CAWT documentation and other relevant documentation should be held at the CAWT Resource Unit.

• It was also recommended that the current practice of promoting the use of teleconferencing and videoconferencing should be encouraged to ease the time intensive commitment of personnel from the four Boards and Trusts.

The evaluation report noted that there is a major opportunity for CAWT to influence the developing all-Ireland agenda by:

- Having joint CAWT/Health Department meetings to discuss how cross border and all-Ireland agendas can symbiotically develop.
- Establishing a strong relationship with the North South Ministerial Council and other relevant bodies and undertaking work on their behalf either directly or in partnership with academic units.
- Highlighting any staffing, structural and accreditation difficulties encountered in pursing the CAWT agenda.

Finally, there is a section in the report which deals with the European context. It examines European Law, looks at the free movement of people, patients and services throughout Europe, as well as ways of establishing the position of CAWT within the Euro regions. It recommends that:

 CAWT proactively develops links with its cross border neighbours within Europe in order to exchange information on practices and policies.

This report carried out by independent consultants has not only supported/verified the work of CAWT but has highlighted the need for continued investment. It sets a clear direction for CAWT's future. One of its recommendations was that there should be a greater emphasis on population needs assessment. As a result the four Public Health Departments in the CAWT region collaborated on the CAWT Population Health Profile and now for the first time comprehensive health and social care information is available on the CAWT area as a discrete region.

## PARTNERSHIP IN ACTION



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

**CHAPTER 2** THE WIDER CONTEXT



#### 2. THE WIDER CONTEXT

#### 2.1 THE POLITICAL CONTEXT

The Good Friday Agreement represented a watershed in co-operation between North and South at the highest political and administrative levels. Following the identification of health in the Agreement as one of the areas for North South cooperation, the mandate that was entrusted to the Departments, South and North, was to seek opportunities for joint cooperation in five health areas. These are:

- Accident and Emergency Planning
- Planning for Major Emergencies
- High Technology Equipment
- Cancer Research
- Health Promotion

The establishment, under the Agreement, of the North/South Ministerial Council (NSMC) has provided a significantly greater focus, momentum and authority for developing mutual interests in the field of health through cooperative and joint action. Work in the cooperation areas is being taken forward on a structured basis by designated officials in the two Departments and in conjunction with local agencies including CAWT.

CAWT is formally represented on three of these North/South Groups

- (a) Pre-Hospital Emergency Care
- (b) Hospital and Community Related Emergency Planning
- (c) Regional Hospital Services

These groups are currently developing specific cross border projects and CAWT will play a major role in co-ordinating and supporting this work.

In Priorities for Action 2002/2003 which were set by DHSSPS in the context of the Programme for Government, specific reference is made to CAWT's partnership role in taking these initiatives forward.

#### 2.2 COMMON CHAPTER

Reference is also made to cross-border health and social care working in the Common Chapter which is contained within the Northern Ireland Structural Funds Plan (2000-2006) and the National Development Plan for the Republic of Ireland (2000-2006). Explicit reference is made to the need to co-operate in the provision of required services on a partnership basis. The Chapter also identifies the opportunity for continued and increased co-operation, particularly in relation to ambulance cover and joint training.

#### 2.3 EUROPEAN STRUCTURAL FUNDS 2000-2004

The Special European Programmes Body set up under the Good Friday Agreement will advance the Interreg III and Peace II Programmes as well as monitoring the implementation of the Common Chapter.

The Interreg Programme was established to strengthen economic and social cohesion in the European Union by promoting cross border, transactional and interregional co-operation and balanced development of the European Union territory.

More specifically, the objectives of Priority Three - Civic and Community Networking, Measure II Health and Well Being, are to improve the health and social well being of people by encouraging a more integrated and rational approach to the planning and commissioning of health and social care services. This will strengthen opportunities for people to access quality services and minimise the barriers which people face when seeking to use these services in their local communities. The complement for this Measure also states that CAWT under the direction of its Management Board is uniquely placed to oversee the range of activities required to address more effectively the challenges to people's health and well being as presented by the peripheral nature of the region.

Within Peace II, Priority Five - Cross Border Cooperation - specific mention is made of cross-border cooperation within health and social care. Measure 5.1 Increasing Cross-Border Development Opportunities says that there should be joint planning and development of strategies, policies and actions for sectoral service developments in areas such as health and social services, while Measure 5.2 Improving Cross Border Public Sector Co-operation states that support will be given to sectoral service developments in areas such as health and social services, equality and education.

#### 2.4 STRATEGIC POLICY

Reference is made to cross-border working and to CAWT in a number of recent strategic documents produced in both jurisdictions.

In the Republic's Health Strategy, "Quality and Fairness: A Health System For You", it states that the scope for co-operation at a North/South and international level will be utilised to the full.

The strategy stresses the need to explore and pursue the potential for cross-border cooperation in hospital services and states that "The Department is committed to exploring and developing opportunities for co-operation which:

- Safeguard or improve public health;
- Provide greater access to services for patients;
- Make good economic sense;
- Are sustainable:
- Involve significant mutual benefit."

The Northern Ireland's Investing for Health Strategy highlights the fact that the region has some of the worst health outcomes in Europe in terms of premature mortality and chronic pain and suffering. When comparisons are made between the Republic and the North of Ireland it states the three top causes of premature mortality – cardiovascular disease, cancer and accidents are the same. Suicide is also a particular issue for both jurisdictions.

In the recently published 'Review of Acute Hospitals in Northern Ireland', chaired by Dr Maurice Hayes, there is again specific mention of the work initiated by CAWT and a range of opportunities for future cross-border cooperation at a local level are highlighted. This includes the recommendation that encouragement and assistance should be given to the projects that are exploring existing potential levels of cooperation in the border area (Altnagelvin/Letterkenny, Sligo/Monaghan/Enniskillen and Craigavon/Newry/Dundalk). The scope for managed clinical networks to be established which would transcend the border is highlighted as well as the need for an immediate assessment of the ways in which emergency services close to the border can be enhanced.

The review also stresses the need for a cross-border element in all service reviews in either jurisdiction and suggests that health authorities/systems along the border should develop joint planning systems.

CAWT was also highlighted in the All Ireland Study 'Cross-Border Co-operation in Health Services', carried out by Dr Jim Jamison et al, who noted that "a great deal has also been achieved by CAWT in terms of improved relationships... Attitudes to CAWT are generally very positive and there is optimism about future potential".

#### 2.5 RELEVANT PLAYERS

CAWT has established links and is in many cases engaging proactively with a number of cross-border and All Ireland bodies. These include:

- (a) The Centre for Cross-Border Studies based in Armagh. This was established in September 1999 to research and develop co-operation in a range of practical areas including education, public administration and communications.
- (b) The All Ireland Institute of Public Health which was established to support and strengthen the direction and content of public health policies.
- (c) The three local authority networks The North West Regional Cross-border Group (NWRCBG), the East Border Region Committee (EBRC) and the Irish Central Border Area Network (ICBAN). These networks have developed cross-border integrated area plans for their region as well as developing an overall border corridor strategy for the new Interreg III Programme.

#### 2.6 EUROPEAN AGENDA

CAWT has also sought to establish wider European links to test both the value of CAWT as a model of cross-border public body cooperation for other areas within Europe and to learn from other models of good practice.

The need to establish these links was highlighted in the evaluation of CAWT referred to earlier. It stated that there are very positive benefits to looking at issues within a wider European Programme.

- It goes beyond the constraints of Ireland, North and South, to a common agenda.
- It expands the mutual learning from other European countries.
- It demands a search for solutions that have been adopted across borders elsewhere in Europe.

CAWT last year held a very successful conference with the theme 'Connecting with Europe' which was attended by both Ministers of Health.

As a result it has made significant connections with the Meuse-Rhine area, and was invited to make a presentation to HOPE, the Standing Committee of the Hospitals of the European Union at a meeting they held in Kilkenny late last year. HOPE is made up of national hospital associations and representatives from the national health systems of the member states of the European Union. The feeling at the meeting was that CAWT had much to offer as well as to learn from other parts of Europe. As a result CAWT has now been invited to become a member of a working party which is currently drawing up an inventory of cross-border cooperation involving hospitals across borders all over Europe. CAWT will also contribute to a major HOPE conference to be held in Luxembourg in June 2003.



## **PARTNERSHIP IN ACTION**



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

## CHAPTER 3 THE PLANNING PROCESS





#### 3. THE PLANNING PROCESS

As was stated earlier the independent evaluation report "From Concept to Realisation" carried out by the Centre for Cross Border Studies, has set a clear path for the future development of CAWT in the next few years. The experience of this objective analysis of CAWT's structures, processes and outcomes has been challenging. It has required the organisation to evaluate where it is, what it has achieved to date and what the objectives should be for the future. It has had a major influence in shaping CAWT's second Strategic Plan which was developed through a consultative process which included Sub-groups, Secretariat and Management Board members as well as Senior Managers, Planners and Health Service Professionals. The plan takes account of the establishment of the North/South Ministerial Council and the work of the North/South Implementation Bodies including the Special European Programmes Body as well as the wider European Agenda.

#### 3.1 Making Connections - June 2000

The process of developing the Strategic Plan was both top down and bottom up. At a seminar in Carrickmacross in June 2000, Senior Managers from the CAWT Boards and Trusts came together to shape the future direction and also consolidate the work that had been carried out since CAWT's first plan "Bridge to the Future".

The objectives of the seminar were to:

- (a) Devise a list for themes for projects which could be submitted for the next tranche of European funding.
- (b) Identify other areas for joint working to be funded from within internal resources.
- (c) Design the process by which proposals might be submitted and selected.
- (d) Build relationships and create further networks within CAWT.

#### 3.2 OUTPUTS FROM THE SEMINAR

The outputs from the seminar included:

- (i) The development of key criteria for the selection of projects.
- (ii) The identification of key themes.

#### 3.2.1 Key Criteria For The Selection Of Projects

Sub-groups felt that future developments should:

- Contribute to cross border core services in line with partner Boards' and Trusts' Strategic and Service Plans, and CAWT's Services Priorities
- Be based on common and identified cross-border needs.
- Demonstrate health and/or social gain.
- Reduce inequalities and disadvantage, facilitate access and equity for users and ensure social inclusion.
- Show true partnership.
- Have impact, bring added value and lead to an improvement in the quality and range of services.
- Be sustainable with a clear exit strategy and an option to mainstream.
- Be able to deliver time-scale, focused, achievable, specified outcomes which are clearly evaluated.
- Ensure consumer involvement and be people centred.
- Facilitate human resource development/have an education and training element.

#### 3.2.2 Key Themes

Groups were then asked to brainstorm key themes or areas which had potential for development. Examples of these included Fostering Services, Family Support Initiatives, Emergency Planning, Medical and Nurse Training, the Implementation of the Cardio Vascular Strategy, Out-of-hours Services, Carer Support initiatives and joint training across all programmes of care.

The seminar was seen as a spring board for further work. It was agreed that in addition to the Secretariat drawing together the main ideas from the workshop within a report, a future meeting of key personnel from Boards, Trusts and Sub-groups would be held in order to consolidate the work.

#### 3.3 CAWT Workshop: Identifying Key Projects - July 2000

The follow up to workshop was held in Omagh on July 28th. The objectives of the session were:

- (a) To consolidate the work from Making Connections;
- (b) To continue to build relationships with CAWT;
- (c) To identify specific proposals for accessing European funding;
- (d) To examine areas for joint working from within existing resources.

The main output from the workshop was a list of seventy themes/initiatives details of which can be found in the full report available from the CAWT Resource Unit.

The CAWT Secretariat then took the work from both these events back into their Boards for further detailed discussions and agreement. These discussions resulted in the third step in the planning process, the formulation of a discussion paper which became the bedrock for the Strategic Plan.

## 3.4 DISCUSSION PAPER LEADING UP THE DEVELOPMENT OF THE SECOND STRATEGIC PLAN

The discussion paper is included as Appendix 1. It sought to pull together key themes emerging from the events in June and July as well as the discussions that Secretariat members had with key players within each of their Board areas.

For the North Eastern Health Board the issues were Primary Care, Acute Services and Emergency Planning. It was stressed that Primary Care should be seen in its broadest sense and should include community, district and psychiatric nursing.

For the Southern Health and Social Services Board the key issues were Outof-hours Service, Primary Care and Emergency Planning. The Western Health and Social Services and the North Western Health Boards agreed but also included First Responder Schemes.

Within each theme it was possible to identify the areas that CAWT should focus on and these are detailed on pages 4-6 of the discussion paper.

These areas were then taken to each of the Chief Executives of the four Health and Social Care Boards for further discussion and distillation and the plan was then presented to the CAWT Sub-groups, Trust Chief Executives and Senior Managers within the CAWT region for their formal comments.

Their comments and the recommendations were incorporated into the final Strategic Plan which was endorsed by the CAWT Management Board at their meeting in May 2001.

#### 3.5 THE STRATEGIC PLAN

The Strategic Plan was developed to equip CAWT to face the key challenges and opportunities in cross-border cooperation in health and social care over the period 2001-2004. It also tries to consolidate the management arrangements and structures which had been put in place over the first ten years of CAWT's life.

It further develops and expands the joint Vision and Values which informed the original Ballyconnell Agreement of July 1992 and seeks to build on the strategic imperatives and goals addressed in the first CAWT Strategic Plan 'A Bridge To The Future'.

The Plan reviews the changes in the internal and external contexts which have taken place since the inception of CAWT, particularly the signing of the Belfast Agreement on 10 April 1998.

Having identified some of the major achievements over the life span of CAWT, it goes on to examine the opportunities for the development of further and more effective cooperation in health and social care within the CAWT region with its catchment population of one million. It continues to contribute to the peace and reconciliation agenda by supporting the creation of inclusive innovative bottom-up and cross border structures, which bring together people from both sides of the border and from different communities in an attempt to remove barriers to reconciliation.

The Plan includes a number of goals and related action points which describe the specific challenges to be addressed in areas such as the development of effective management arrangements to support CAWT business, the optimum involvement of the provider system, joint research and development opportunities and the challenge of securing maximum involvement in the ownership of CAWT and its cross-border work.

The first steps to be taken in giving life to the Strategic Plan are outlined and a commitment is given to operationalising it.

#### 3.6 OPERATIONALISING THE STRATEGIC PLAN

Following the endorsement of the Strategic Plan by the CAWT Management Board in May 2001, a Service Development Proposal application form was devised by the CAWT Resource Unit (Appendix 2). This was sent to sub-groups and they were asked to work up their proposals.

Over 50 proposals were received and considered in detail by individual CAWT Secretariat members using the agreed CAWT criteria. At two meetings on the 14<sup>th</sup> November and 5<sup>th</sup> December the Secretariat then collectively considered the aims and objectives, outputs/deliverables and value for money for each proposal.

A shortlist of proposals agreed by the Secretariat was brought to the five Chief Executives during December 2001/January 2002 and the following further areas for development were identified by the CEOs.

- The need for protocols to be developed in relation to maternity services between Daisy Hill Hospital and North Eastern Health Board.
- Work on smoking prevention and cessation, drug and alcohol misuse and sexual health.
- Development of cross-border family and child care services, particularly in relation to the placement of children in care, high support units and family support services.
- Establishment of a CAWT Ambulance/Pre-hospital Emergency Care Group to develop cross-border protocols for pre-hospital care and ambulance deployment.
- Strengthening of the staffing of the CAWT Resource Unit and support for the Secretariat.
- Significant investment into management and development and other joint training programmes including training for home care workers and telemedicine linkages.

These issues were shared with the Sub-groups and proposals were then worked up around the gaps. Each proposal was subjected to scrutiny by the Finance Manager in relation to costs. The final list (Appendix 3) was then taken to the CEOs for their comments at a meeting on August 29<sup>th</sup> and to the CAWT Management Board in September 2002 for the final ratification.

The CAWT work plan for the period 2002-2006 incorporating these proposals is detailed in Chapter 4 (CAWT Resource Unit) and Chapter 5 (Summary Work Programme 2001 - 2006). The resource requirements and cost of each project/piece of work is identified and full details are provided in the appendices to Chapter 5. Chapter 6 details the overall financial plan and discusses financial management issues.



# **PARTNERSHIP IN ACTION**



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

# CHAPTER 4 CAWT RESOURCE UNIT





### 4. CAWT RESOURCE UNIT

#### 4.1 CAWT RESOURCE UNIT

The continuation of the work of CAWT over the period 2001-2006 will be taken forward and driven by the CAWT Resource Unit. A brief summary of the work of CAWT to date which has been supported by the CAWT Resource Unit was detailed in Chapter 1.

# 4.1.1 Phase I (1992-1995)

Following the commitment of the four Boards (NEHB, NWHB, SHSSB and WHSSB) to work cooperatively to improve the health and social well being of their resident populations a Steering Committee was established to develop an agenda for action. This Committee included the four CEOs from the respective Boards and a nominated part-time Secretariat member from each Board. The role of the Secretariat was to support CAWT activity.

The initial period was concerned with building an architectural platform for the future. Four Sub-groups were established with representation from each of the four partner boards:

- Information Technology (IT) Sub-group
- Human Resources (HR) Sub-group
- · Health Promotion Sub-group, and
- Social Deprivation Sub-group

The Secretariat kept in contact with each of the Sub-groups and reported on progress to the Steering Committee.

The main focus was on establishing relations and trust between the different partners at senior level. However, applying for EU money also became a great focus of energy. This was at a time when Boards were operating within tight financial circumstances, so being able to apply for and attract EU money was very welcome.

The third focus was to bring the corporate groups of IT and HR together, through project working, to develop common themes.

# 4.1.2 Phase II (1995-1999)

With the securing of EU funding in 1996 organisational structures and processes were put in place to support the work of CAWT. The Steering Committee was reformed as the Management Board to include the Chairmen of the respective Boards as well as representation from the newly formed Trusts in Northern Ireland (a CEO and Chairman). The original Secretariat was re-formed to include one representative from each Board (part-time).

The CAWT Resource Unit was established and set up an office base. This was staffed by an Executive Officer (full-time) a Finance/Project Support post (part-time) and an Administrator (full-time). By formalising its organisational structure and establishing the office base as detailed earlier CAWT was able to

- Continue to develop its expertise as a cross-border public body in the health and social services area, in order to combat discrimination and disadvantage.
- Establish a Finance Forum and detailed financial procedures.
- Support and monitor a total of 19 SSPPR funded cross-border health and social services projects and to develop from them, common cross-border policies.
- Identify and develop cross-border feasibility projects/studies on priority areas.
- Identify operational linkages to fully engage with the seven Trusts within the CAWT Health and Social Services region.
- Establish links with other cross-border bodies and with organisations whose work was relevant to CAWT.
- Develop and support projects aimed at increasing health and social gain for specific marginalised groups including children, young people at risk, families, persons with mental illness and with learning disabilities.
- Begin to address the areas of acute and primary care. These areas were felt to have the greatest potential for cross-border co operation but also the greatest potential for political reaction.

During this time the Resource Unit became a central information point through which advice and support could be obtained by both health and social care professionals, community and voluntary organisations and agencies involved in the promotion of cross border health and social care working.

#### 4.1.3 Phase III (1999-2002)

Phases I and II established the identity of CAWT but changes in the North South political structure brought about by the Good Friday Agreement offered CAWT a platform from which to contribute even more to the cross-border health agenda.

Again the CAWT Resource Unit played a key role ensuring that presentations and representations in respect of CAWT and its objectives were made to both Ministers of Health, as well as Permanent Secretaries and senior staff at both Departments of Health.

Links were also made through the CAWT Resource Unit with other crossborder bodies including the North South Ministerial Council, the All Ireland Institute of Public Health, The Centre for Cross Border Studies and the three local authority cross border networks. These links are detailed in Section 2.5.

The links were also extended to Europe (Section 2.6) and the CAWT Resource Unit organised the CAWT Connecting with Europe conference and became involved with HOPE in compiling an inventory of cross border cooperation involving hospitals across borders throughout Europe.

The CAWT Resource Unit was also responsible for co-ordinating the process of ensuring that CAWT was independently evaluated by an outside body and of overseeing the implementation of its recommendations.

It introduced a new concept of giving small grants to stimulate cross border pilot initiatives. Under the Creative Cross Border Scheme ten small cross border projects were funded.

The CAWT Resource Unit also co-ordinated the planning process for the development and operationalisation of the Strategic Plan. It became involved in detailed discussions with the Special European Union Programmes Body and the two Departments of Health in regard to accessing Interreg III and Peace II funds.

# 4.1.4 Phase IV (2002-2006)

In order to support the continuing work of CAWT, the Resource Unit will play a central role in maintaining the balance between the partners and maintaining the momentum of the sub-groups. In addition as was earlier mentioned the new North/South political arrangements provide an exciting

opportunity to build on the valuable foundations created by CAWT. The evaluation report 'From Concept to Realisation' stated that "in order to take full advantage of the opportunities and meet enhanced expectations, careful thought is required as to structures and processes. The staffing of the Central Executive Resource Unit/Secretariat may need to be strengthened."

It suggests the appointment of two bilateral positions to support the existing Secretariat members. It highlights the need for ICT and Communication Officers within the Central Resource Unit to facilitate the move towards greater communications (both external and internal) and particularly to facilitate a culture of online communications.

CAWT proposes therefore to appoint two CAWT Executive Officers, one to represent and work for the NWHB/WHSSB and the other to represent the NEHB/SHSSB, together with appropriate clerical support. A Communications Co-ordinator will also be appointed.

ICT support and finance support will be secured and charged out as an oncost to all projects, including the CAWT Resource Unit.

The Secretariat have also proposed that during Phase IV two satellite offices will be established along the border, which will be the base for the newly appointed Executive Officers, to further enable the ongoing work of CAWT within the four Boards and Trusts. The creation of these offices with the above additional staff (Appendix 4) will allow the CAWT Resource Unit to:

- Operationalise the Strategic Plan.
- Support and monitor and evaluate Peace II and Interreg III funded cross-border health and social care projects.
- Drive forward and support the implementation and mainstreaming of areas of cross border co-operation across the Boards and Trusts.
- · Develop and mainstream common cross-border policies.
- Develop the communications agenda for the CAWT region through the implementation of the communications strategy.
- Develop an ICT strategy which would include the establishment of a sophisticated and dynamic web page, usage of video conferencing and information technology facilities.
- Identify and develop feasibility projects/studies on priority areas for cooperation.

- Continue to develop the CAWT Creative Cross Border Scheme.
- Identify further research and development opportunities on a cross-border basis.
- Enhance linkages with the North-South Ministerial Council in relation to project management of initiatives around emergency planning.
- Increase contacts with other cross-border bodies, particularly where this would lead to an improvement in health and social well being.
- Develop further linkages with other areas within Europe in order to test the value of CAWT as a model of cross border working.
- Ensure full implementation of the recommendations as contained within the From Concept to Realisation: An Evaluation of CAWT.
- Develop quality assurance and evaluation templates for cross border working.

#### 4.2 CONCLUSION

In conclusion, a dedicated CAWT Resource Unit is essential for the development and maintenance of cross border working and brings added value by providing a focus to support work on the ground.

It is a point of contact for the North-South Ministerial Council, both Departments of Health, health and social care professionals and community and voluntary agencies.

It gathers and disseminates lessons learnt from cross-border work throughout the CAWT region and beyond and monitors the progress and financial performance of CAWT projects funded from Europe and other sources.

The CAWT Resource Unit provides according to the recent evaluation "an opportunity to observe the attitudes and behaviours of people from both sides of the border working together to achieve a common goal. With the changing attitude towards cross-border (and indeed cross board) working practices the Resource Unit has a wealth of experience to contribute to the agenda."



# **PARTNERSHIP IN ACTION**



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

CHAPTER 5
SUMMARY WORK
PROGRAMME
2001- 2006



# 5. SUMMARY WORK PROGRAMME 2001 - 2006

5.1	HEALTH PROMOTION				
	5.1.1	Steering to Safety	Interreg III		
	5.1.2	Smoking Cessation Interventions in Pregnancy	Interreg III		
5.2	OLDER PEOPLE				
	5.2.1	Active Retirement Groups for Older People	Interreg III		
	5.2.2	Additional Project to be developed	Interreg III		
5.3	SOCIAL & COMMUNITY CARE				
	5.3.1	Bilateral Community Care Feasibility Studies	Peace II (5.2)		
	5.3.2	Risk Assessment and Interventions			
		for Non-convicted Sex Offenders	Interreg III		
	5.3.3	Education and Training for those who work with Adult Survivors of Sexual Abuse	Peace II (5.4)		
	5.3.4	Home Support Worker Training	Peace II (5.4)		
5.4	PRIMARY CARE				
	5.4.1	Care of Type 11 Diabetes; Role of Community			
		Pharmacist	Interreg III		
	5.4.2	Cross Border Out of Hours Service	Interreg III		
	5.4.3	Cardiovascular Nursing	Interreg III		
	5.4.4	Epidemiological Study of Oral Health	Interreg III		
5.5	LEARNING DISABILITY				
	5.5.1	Protection of Vulnerable Adults	Interreg III		
	5.5.2	Vocational Assessment and Training	Peace II (5.4)		
5.6	ACUTE SERVICES				
	5.6.1	Major Incident Planning and Response	Interreg III		
	5.6.2	Mobile Catheterisation Services	Interreg III		
	5.6.3	Joint In-service Education Programme for Qualified Nurses	Peace II (5.4)		
	5.6.4	Medical Technical Officer Training	Peace II (5.4)		
5.7	PUBLIC HEALTH				
	5.7.1	Cross Border Policies on Health Protection	Interreg III		
	5.7.2	Health Impact Assessments	Interreg III		

5.8	FAMILY AND CHILD CARE				
	5.8.1		Interreg 111		
		Needs Assessment and Planning Frameworks			
		for Services for Children and Young Poeple	Interreg III		
	5.8.3	Inside Out	Peace II (5.2)		
5.9	MENTAL HEALTH				
	5.9.1	Needs Assessment of Carers	Peace II (5.2)		
	5.9.2	Awareness Training in Cognitive Therapy	Peace II (5.2)		
	5.9.3		Peace II (5.2)		
	5.9.4	Positive Mental Health and Young People	Peace II (5.2)		
5.10	SUPPORT SERVICES				
	5.10.1	Cross Border Mobility Study	Query Source		
	5.10.2	CAWT ICT Strategy Implementation	Interreg III		
	5.10.3	Connecting With Europe	Peace II		
5.11	MANAGEMENT DEVELOPMENT				
	5.11.1	Partnership Training and Education	Peace II (5.4)		
	5.11.2	Training the Trainers	Peace II (5.4)		
	5.11.3	Women In Management	Peace II (5.4)		
	5.11.4	Action Learning	Peace II (5.4)		
	5.11.5	Public Health Leadership Nursing Programme	Peace II (5.4)		
	5.11.6	Personal Development Planning Initiative	Peace II (5.4)		
	5.11.7	Service Development and Organisational			
		Education, Training and Development	Peace II (5.4)		

The detail of the work to be carried on by the CAWT Resource Unit has been presented in Chapter 4 and the following provides an outline of the aims, objectives, outputs, results, impacts and resource implications of each of the pieces of work/projects to be undertaken as listed above.

The ongoing work of the eleven, now to be thirteen, sub-groups, together with the support provided by the Secretariat, CEOs and Management Board will continue to be funded from the Boards own resources.

In addition to the above, projects listed in Table 7, Chapter 6, are being given further consideration. Funding sources will then be sought to implement those which are approved by the Management Board.

# 5.1 HEALTH PROMOTION

# 5.1.1 STEERING TO SAFETY\_

The recently published CAWT Health Profile states that CAWT has a 33% higher death rate from transport accidents than the rest of Ireland. Road traffic accidents make up the majority of transport accidents and in addition to high levels of mortality they cause non-fatal injuries. The resulting traumatic brain injury combined with physical injury and disability can lead to a lifetime of reduced educational, occupational and social opportunities and the need for a range of costly support services.

As this is a major preventable area the Health Promotion Sub-group aim to develop a project which will embrace workers in both jurisdictions and which will reflect indigenous factors and mutual use of roads by drivers from both areas, for social domestic and economic reasons.

The main beneficiaries will be the road users within the CAWT area and beyond, particularly employees, families and friends.

#### Aims and objectives

To reduce the number of Road Traffic Accidents (RTAs) and injuries resulting from same by:

- Collating and analysing available data on RTA's.
- Analysing existing levels and rules governing the use of roads.
- Consulting with and informing the major employers, for example, Health Boards, Local Authorities, major industries on how to minimise RTA's involving their staff.
- · Lobbying and advocating for necessary change.

# Outputs

- Documented analysis of available data on RTAs and existing laws governing the use of roads on both sides of the border.
- Consultations with 12 major employers and the provision of information on how to minimise RTAs involving their staff.
- Lobby and advocate for change.

#### Results

- A range of materials and resources to promote safer driving habits.
- A sustained and consistent structure within a wide range of workplaces to promote safer road use.
- Greater sense of self-esteem and self-efficiency around driving.
- · Policy changes within and outside workplaces.

#### **Impact**

- Greater skills and potential to reduce RTAs.
- Raised awareness amongst targeted workers of their own and colleagues' role in reducing risk.
- Capacity to persuade individuals and groups to make informed choices about their road behaviour.

### **Project Duration**

3 Years

#### Resources

- 3 WTE Staff
- Travel & Subsistence
- Office Set up
- Rental Accommodation and venue hire
- H&L, Tel, Postage, Stationery
- Training Materials
- Audit/ Accountancy/I.C.T.
- Evaluation and Research
- · Publicity and Marketing

#### Cost

• £481,000/ €741,000 - Detail Appendix 5.1.1/5.1.1(a)

# 5.1.2 SMOKING CESSATION INTERVENTIONS IN PREGNANCY WITH A FOCUS ON DISADVANTAGE AND YOUNG WOMEN

Smoking has been identified as a primary reason for the gap in life expectancy between rich and poor. Departments of Health in both jurisdictions have set targets to reduce social inequalities in smoking prevalence. High rates of smoking are found amongst expectant mothers less than 20 years of age and amongst women with little educational qualifications. In addition, tobacco smoking during pregnancy has deleterious effects on the baby at birth and throughout the early development of the child. Smoking cessation services in the community can be used as a key strategy in tackling health inequalities and are more likely to reach the poorer smokers.

# Aims and objectives

The project aims to acquire baseline information on current multi practitioner behaviour and knowledge in relation to smoking cessation interventions in pregnancy. It intends to develop and pilot a range of approaches which will influence practice on the development and delivery of a smoking cessation service which is responsive to the needs of those who may be exposed to disadvantage by:

- Actively engaging with multi-practitioners, members of the community and researchers from both sides of the border on a cross-border basis in addressing the common public health problem of tobacco in pregnancy.
- Increasing understanding of tobacco smoking in pregnancy amongst all sectors allowing cross community input to the development of a Smoking Cessation Service to meet local needs.
- Developing and piloting approaches to Smoking Cessation interventions in Pregnancy which are sensitive to the needs of those living in or exposed to disadvantage and which build on resources already in place in the community.
- Leaving in place a tried and tested approach which will usefully inform the future development of a community based Smoking Cessation Service.

#### Outputs:

- Documented-research in relation to current practices in the provision of smoking cessation systems appropriate to pregnant women.
- Identification of resources required to develop and sustain a service in the long term in the cross border area.
- Implementation of a range of models of intervention including training of 40 health care professionals.
- Evaluation of results of interventions.

#### Results

- Identification of evidenced based smoking cessation systems.
- Identification of effective smoking cessation services for pregnant women.
- More trained health professionals.
- Available information to inform local, regional and national practice concerning models of smoking cessation interventions in pregnancy.

# **Impact**

- More effective smoking cessation interventions provided.
- Greater uptake by pregnant women of smoking cessation services.
- Increased numbers of smoke free families.

#### **Project Duration**

2 Years

#### Resources

- 2 WTE Staff
- Travel & Subsistence
- Office Set up
- Rental Accommodation and venue hire
- · H&L, Tel, Postage, Stationery
- Training Materials
- Evaluation and Research
- Audit/ Accountancy/I.C.T.
- · Publicity and Marketing

#### Cost

• £268,000/€412,000 approximately

# 5.2 OLDER PEOPLE

#### 5.2.1 ACTIVE RETIREMENT GROUPS FOR OLDER PEOPLE

Over the last 50 years in Ireland the number of persons aged 75 years and over has more than doubled. In addition, the effects of smaller families, more women working and a more mobile population has resulted in a greater number of older people living on their own. At the same time, rates of reported long steady sickness amongst adults rise with increasing age.

The recently published CAWT Health Profile shows that the number of older people in the border region is predicated to increase by 17% by 2011 when compared with 1999. This will have major implications for health and social care in the border area. There is a need therefore to assist older people in utilising and reviving their skills and ensure there is active participation by them in the planning and implementing process.

### Aims and objectives

This development aims to establish twelve active retirement groups with older people in the Derg Finn Area by appointing a community development worker who will:

- Support the formation and development of these groups.
- Enable the groups to have the confidence and skills to work together.
- Enable older people to lobby for the effective provision of comprehensive healthy living services for older people in the Derg Finn area.
- Develop and promote support strategies in the area.

# Outputs

• 10 active retirement groups established in Ballybofey, Castlefin, Glenfin, Killygordon, Raphoe, Lifford, Spamount, Castlederg, Kinletter and Strabane.

#### Results

• Older people facilitated to revive and utilise their skills, to have a voice in the identification and planning of services relative to their needs.

#### **Impact**

• Established partnerships between statutory and voluntary cross border agencies, leading to sharing of resources and increased capacity to deliver effective services for older people.

# **Project Duration**

• 1 Year

#### Resources

- 1.5 WTE Staff
- Travel & Subsistence
- Laptop
- Venue hire
- H&L, Tel, Postage, Stationery
- Q.A. and evaluation
- Audit, Accountancy, I.C.T.
- · Publicity and Marketing

# Cost

• £60,000/€92,000 - Detail Appendix 5.2.1/5.2.1(a)

# 5.2.2 ADDITIONAL PROJECT TO BE DEVELOPED

# 5.3 SOCIAL AND COMMUNITY CARE

# 5.3.1 BILATERAL FEASIBILITY STUDIES TO EXAMINE THE DEVELOPMENT OF CROSS BORDER COMMUNITY CARE SERVICES

Community Care by its nature works within localities and across communities. Those living in the border area experience high levels of social deprivation and social exclusion in the region. This is detailed within the Operational Programmes of Peace II and Interreg III. They state that communities often have better geographical access to services on the other side of the Border but may not be able to avail of all those services.

Cross border cooperation could extend the provision of those community services which may require a more substantial population than exists in one community either side of the border. Furthermore, many of the border areas have a well-developed community infrastructure at local level. Support and development of this infrastructure could provide opportunities for inter regional and cross border solutions for the difficulties faced by communities in the eligible area.

These bilateral studies will seek to identify opportunities for joint developments for the provision of Community Services within the border region. The studies will look at services for those suffering trauma, mental health problems and those who have a disability particularly as a result of or living with someone who has experienced the effects of the conflict

# Aims and objectives /

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- Create and sustain positive communication channels between the partnership members at both organisational and individual practitioner level.
- Review the existing range of services in the partner organisations to determine mutually beneficial areas of collaborative work, particularly for those who have suffered as a result of the conflict.
- Explore the potential for joint training and education programmes.
- Share-good practice between partners and with other areas of Europe who have suffered conflict.
- Create the conditions for collaboration between agencies working in the community (i.e. other statutory, voluntary and private organisations and GP's.)

- Propose ways of sourcing funds for developments identified within the project.
- Explore technological solutions to support and sustain effective communications.

#### **Outputs**

- Documented analysis of relevant community services on both sides of the order.
- · Specific areas identified for joint working and sharing of resources.
- Joint training programmes identified and agreed.
- Established networks and communication channels between partnership members.

#### Results

- Information available to inform planning process for all partners.
- Platform for joint working and development of services established.
- Provision of more accessible services for border populations facilitated.
- Good practice shared and critical mass for developing community services identified.
- Opportunities to promote reconciliation and mutual understanding provided.

# **Impact**

- Enhanced community service provision on a cross border basis.
- Decrease in the disadvantage of community populations by improving access to services.

# **Project Duration**

• 15 Months

#### Resources

- 1.0 WTE Staff
- Travel & Subsistence
- Laptop
- Workshops
- H&L, Tel, Postage, Stationery
- Q.A. and evaluation
- Audit, Accountancy, I.C.T.
- · Publicity and Marketing

#### Cost

• £65,000/€99,000 - Detail Appendix 5.3.1/5.3.1(a)

# 5.3.2 RISK ASSESSMENT AND INTERVENTIONS FOR NON-CONVICTED SEX OFFENDERS LIVING IN THE COMMUNITY

Sexually abusive behaviour is linked to the emotional and physical abuse of others and each of these elements must be tackled in order to reduce levels of victimisation.

The WHSSB and NWHB are the only two Health Boards on the island of Ireland to provide community based sex offenders assessment and treatment programmes as part of their child protection strategies. The co-ordination of such work is now regarded as an essential prerequisite to effective intervention in the prevention of sexual abuse.

#### Aims and objectives

The main aims of this proposal will be to evaluate current services on both sides of the border, develop a standardised risk assessment and treatment approach and pilot three additional assessment and treatment programmes in the North West region. It will include:

- Analysing demographic and clinical data compiled by COSC and PPSA services. Such local analysis will provide indicators of those treatment interventions which are most effective in reducing risk to children in the North West region.
- Refining assessment and community treatment approaches from other parts of the world to meet demands of North West Ireland.
- Harmonising such approaches between NWHB and WHSSB.
- Utilising local expertise, clinical knowledge and skills developed within COSC and PPSA treatment programmes since the early 1990's and adding identified resources.

# Outputs

- A scientific analysis of a substantial body of demographic and clinical data in respect of sexual abuse.
- Development of a standardised and coordinated risk assessment and treatment approach for perpetrators of sexual abuse throughout the North West of Ireland.
- Development of 3 additional treatment programmes in the border corridor.

#### Results

- Identified effective treatment interventions in reducing risk to children.
- Harmonised assessment and community treatment approaches developed to meet local demands.
- Increased provision of appropriate services.
- Increased exchange of information and professional expertise.
- Increased monitoring of identified sex offenders and their movements on each side of the border.

#### **Impact**

- Improved clinical effectiveness and more efficient use of resources.
- Improvement in protective abilities of non-offending partners, a key element in reducing offending.
- Enhancement of child protection services resulting in a reduction of child sexual abuse.

# **Project Duration**

3 years

#### Resources

- 2.5 WTE Staff
- Travel & Subsistence
- Laptop and database development
- Training Resources
- H&L, Tel, Postage, Stationery
- Q.A. and evaluation
- Audit, Accountancy, I.C.T.
- · Research and University links
- · Publicity and Marketing

#### Cost

• £325,000/€500,000 - Detail Appendix 5.3.2/5.3.2(a)

# 5.3.3 EDUCATION AND TRAINING FOR THOSE WHO WORK WITH ADULT SURVIVORS OF SEXUAL ABUSE

This activity complements the previous one. The previous proposal aims to identify and work with those who have committed abuse while this one aims to help those who have actually suffered abuse by providing staff with the opportunity to not only recognise but also understand the specific needs of those traumatised by childhood sexual abuse.

#### Aim and Objectives

To ensure all stakeholders identified have a level of knowledge and skills consistent with their responsibility to deliver quality services by:

- Carrying out training needs assessment which will include the skills, knowledge and aptitudes required by the voluntary and statutory sectors who encounter adults who have been sexually abused.
- Developing training plans and priorities.
- Implementing priority training in a co-ordinated multi-disciplinary way to enable all stakeholders to recognise and deal with sexual abuse.
- Developing appropriate training courses with further education sector.
- Developing protocols for training and interagency referrals etc.
- Developing professional guidelines.
- · Creating active user involvement.
- Training trainers to cascade training throughout participating organisations.
- Ensuring best practice is mirrored on both sides of the Border and reflects the needs of each locality.

# **Outputs**

- Completed training needs assessment, training plan and training courses delivered.
- Development of cross border protocols and professional guidelines.
- User involvement secured and links established.
- Cadre of trainers established.
- Training materials developed.

#### Results

- 5000 staff trained within voluntary and statutory agencies.
- Staff on the ground trained to identify and deal with those presenting with problems arising from childhood sexual abuse.
- Further training facilitated through availability of trainers.

# **Impact**

- More confident and able staff.
- Better identification of client need.
- More consistent approach and more helpful responses to client need.
- Reduction in duplication of services.

# **Project Duration**

2 years

#### Resources

- 2.00 WTE Staff
- Travel & Subsistence
- Laptop
- Training Resources
- H&L, Tel, Postage, Stationery
- Q.A. and evaluation
- Audit, Accountancy, I.C.T.
- · Publicity and Marketing

#### Cost

• £231,000/€355,000 - Detail Appendix 5.3.3/5.3.3(a)

#### 5.3.4 HOME SUPPORT WORKER TRAINING

The nature of the Home Support Services requires primarily lone workers to support service users in their own homes. The service users along the border area include older people, those who are terminally ill people who have mental health problems or who have a disability. In order to keep people in their homes rather than in residential care, it is assumed that greater and not fewer demands will be placed on the home help service in the future. It is therefore important to develop existing policies, procedures and systems and ensure that home support workers are trained and supported by the procedural framework.

#### Aims and Objectives

This project aims to professionalise the current home help scheme into a more service orientated Home Support Worker initiative by:

- Creating and sustaining communication channels between the partnership members at both organisational and individual practitioner level in relation to home support services.
- Reviewing the existing range of training programmes for home support workers in the partner organisations.
- Developing a cross border home support training package.
- Implementing a training programme
- Piloting a NVQ qualification for home support workers.

# Outputs

- Documented analysis of training programmes for home support workers on both sides of the border.
- Development of a training programme and training materials.
- Implementation of a training for trainers programme for 16 facilitators from both sides of the border.
- · Cadre of trainers established.
- Piloting of NVQ course.

#### Resources

- 2000 training days delivered to 200 participants in 20 sites.
- Cultural understanding developed amongst clients through the contact principle.
- Stronger links with voluntary organisations.
- NVQ course established.

# **Impacts**

- Better identification of client need.
- More consistent approach and more helpful response to client need.
- More confident, more able staff.

# **Project Duration**

3 years

#### Resources

- Development of programme, materials and packs
- Venue and catering costs
- · Facilitators costs
- NVQ Training Supervisory
- Audit/Accountancy/ICT
- · Q.A and Evaluation

#### Cost

• £325,000/€500,000 - Detail Appendix 5.3.4/5.3.4(a)

### 5.4 PRIMARY CARE

# 5.4.1 CARE OF TYPE II DIABETES IN PRIMARY CARE; ROLE OF THE COMMUNITY PHARMACIST

Compliance with health care is crucial for the control of Type II Diabetes. Increased co-operation amongst health care professionals who treat these patients should lead to higher quality of care and an increase in patient confidence in the health services. As the majority of patients in the CAWT region are some distance from a diabetes clinic it is possible that some patients are not seeking regular care.

This development proposes to train community pharmacists who are readily accessible, knowledgeable professionals in the recognition of Type II diabetes and in the organisation and delivery of a health promotion programme.

# Aims and objectives

To improve the management and quality of Type II Diabetic patients, to increase public awareness and identify undiagnosed patients and these at risk by:

- Identifying and training a group of pharmacists in the CAWT region to assist patients with the management of Type 11 Diabetes.
- Developing and delivering a health promotion programme about Type II diabetes.
- Co-ordinating subsequent health promotion activity in pharmacies.

#### **Outputs**

- Training of 20 community pharmacists to assist patients with the management of Type 11 Diabetes.
- Training of approximately 150 pharmacists to deliver a Health Promotion Programme on Type 11 Diabetes.
- Pharmaceutical care records generated for patients.
- Training materials and programmes.

#### Results

- Pharmacists and patients empowered to manage diabetes in the Primary Care setting.
- Health Promotion Programme delivered on a cross border basis.
- Improved communications between health care professionals in the primary care interface.

# **Impact**

- Improved disease control among diabetic patients.
- · Reduction in need to access secondary care.
- Improved public awareness of Type 11 Diabetes leading to identification and treatment of those at risk.

# **Project Duration**

2 years

#### Resources

- O.75 WTE Staff
- Travel & Subsistence
- · P.C. and software
- Training costs
- Pharmacists fees
- Needle Disposal costs
- H&L, Tel, Postage, Stationery
- Q.A. and evaluation
- Audit, Accountancy, I.C.T.
- · Publicity and Marketing

#### Cost

• £188,000/€289,000 - Detail Appendix 5.4.1/5.4.1(a)

#### 5.4.2 PILOTING OF CROSS BORDER OUT-OF-HOURS SERVICE

Both Departments of Health have emphasised that primary care needs to become the central focus of the health system. The development of a properly integrated primary care service can lead to better outcomes, improved health status and increased cost effectiveness. These views are outlined in the DHSSPS's 'Building the Way Forward in Primary Care' and the DOHC's 'Primary Care: A New Direction'.

This, one of four CAWT primary care projects seeks to reflect the views of both documents. It seeks to put in place integrated, inter disciplinary, high quality, team based user-friendly services for the border population.

In June 2001, CAWT commissioned a study to be carried out by the University of Ulster and the National University of Ireland, Galway, which examined the issues necessary for consideration before cross border out-of-hours arrangements could be put in place. The study found that:

- Approximately 70,000 people across the length of the border are closer to out-of-hours services in the opposite jurisdiction.
- Over 70% of this population in the isolated regions of the border area can be classed as socially deprived.
- If the patient were free to travel across the border to see a GP, the travel distance, depending on location, could be considerably reduced.

The proposal wishes to improve access to health services, specifically GP out-of-hours services, for inhabitants of the border region. Due to the geographical isolation of the population the provision of this service will also target social need.

# Aims and objectives

To implement a Cross Border Out-of-Hours operational plan to be tested on a pilot level. The pilot will centre on two identified population areas, each of approximately 13,000, in the border region. In one population area, patients will travel from North (SHSSB) to South (NEHB) to gain closer access to services. In the other area patients will travel from South (NWHB) to North (WHSSB). The pilot will:

- Implement and test the integration of OOH networking and information systems for the effective management of the service.
- Monitor and evaluate the system in operation with respect to total number of patients; percentage of patients accepting offer; triage arrangement; financial management; impact on workload; professional issues; follow up impact of the service on home visits, pharmacy and the admission of patients of secondary care.

#### **Outputs**

- Two networked Out-of-Hours information systems across the two jurisdictions.
- Documented information in respect of numbers of patients accessing a cross border service.
- Documented information in respect of workload implications and the financial implications for practitioners related to changes in patient flows.
  - Documented information in respect of other relevant issues including home visits, pharmacy, ambulance and admission to secondary care.

#### Results

- Effective removal of the border as a barrier to the provision of G.P. Out-of-Hours services as patients access services closer to where they live.
- Cultural understanding developed among communities/ patients through the "contact " principle.
- Improved patient choice.
- Stronger links between Boards.

# **Impact**

- Improved access for patients on the border.
- Reduced inequality and disadvantage.
- Social need targeted.

# **Project Duration**

2 years

#### Resources

- 1.00 WTE Staff
- Travel & Subsistence
- Hardware and Software development
- Indemnity and fees
- Locum Resources
- Ambulance Resource
- H&L, Tel, Postage, Stationery
- Q.A. and evaluation
- Audit, Accountancy, I.C.T.
- · Publicity and Marketing

#### Cost

• £440,000/€678,000 - Detail Appendix 5.4.2/5.4.2(a)



#### 5.4.3 CARDIOVASCULAR NURSING INITIATIVE

This proposal is designed to address the needs of patients suffering from cardiovascular disease. It fits within a number of strategic developments on both sides of the Border. In the Republic it fits within the ongoing Cardiovascular Strategy work arising from the document Building Healthier Hearts. In the North, the issue of cardiac disease has been raised through the recent Investing for Health document and while the National Service Framework for Coronary Health Disease has not been implemented in Northern Ireland, the document has been influential in practice within the North.

The CAWT Population Health Profile has highlighted the fact that deaths from circulatory disease is the leading cause of death in Ireland and accounts for 45% of deaths in Ireland as a whole. Within the CAWT area this figure is 4% higher than that again.

#### Aims and objectives

To improve and standardise the quality and accessibility of services delivered to patients suffering from cardiovascular disease and in particular those having experienced cardiac events including myocardial infarction and surgery, while also addressing the needs of those left debilitated having developed heart failure.

- To examine current practice in relation to the 4 stage model of Cardiac Rehabilitation and group/individual work across the region.
- To determine and set standards of care in Cardiac Rehabilitation including that of training and education of staff.
- To describe the level of demand for Cardiac Rehabilitation services and issues surrounding accessibility of services provided.
- To formulate, through the synthesis of this work, a plan for best practice in this area.
- To evaluate the impact of the role of the Specialist Heart Failure Nurse on Primary Care in the NEHB and the effectiveness of the role in patient/client outcomes.
- To assess the level of need for specialist Heart Failure Nursing Services across the CAWT region.
- To establish and pilot 2 Specialist Heart Failure posts, one of which will be based in the NWHB (in the Primary/Community Care area) and one in the SHSSB area.
- To recommend pilots for the placement of Heart Failure nurses within Northern Ireland comparing and contrasting hospital and community based provision.

#### **Outputs**

- Development of cross border professional networks in the area of cardiovascular care provision.
- A research paper examining current practice in relation to the 4-stage model of Cardiac Rehabilitation and group/ individual work across the border region.
- A paper outlining agreed standards of care in Cardiac Rehabilitation including that of training and education of staff.
- A paper outlining the level of demand for Cardiac Rehab services and issues around accessibility of services.
- A best practice plan.
- An evaluation of the impact of the role and the effectiveness of the Specialist Heart Failure Nurse on Primary Care in the NEHB.
- Two pilot Specialist Heart Failure Nursing posts, one in the NWHB and one in the SHSSB areas

#### Results

- A better understanding of the level of need, current provision and quality of Cardiac Rehabilitation across the CAWT region.
- The application of standards and guidelines in relation to best practice for Cardiac Rehabilitation.
- A better understanding of the level of need for specialist heart failure nursing services.
- An understanding of the impact of and the effectiveness of the Specialist Heart Failure Nurse role.

# **Impact**

- Improved service planning.
- Improved Cardiac Rehabilitation Services for patients.
- A reduction in the risk factors of those who undergo cardiac rehab.
- A reduction in the number of people being admitted as a result of an acute episode of heart failure.

# **Project Duration**

• 3 years

#### Resources

- 3.50 WTE Staff
- Travel & Subsistence
- Office set-up
- · P.C. and software
- Training costs
- H&L, Tel, Postage, Stationery
- Q.A. and evaluation
- Audit, Accountancy, I.C.T.
- Publicity and Marketing

# Cost

• £344,000/€530,000 - Detail Appendix 5.4.3/5.4.3(a)



## 5.4.4 EPIDEMIOLOGICAL STUDY OF ORAL HEALTH

The WHSSB and NWHB are in a unique position to study the oral health of their populations. The NWHB has had the benefits of fluoridated water for about 30 years. The WHSSB has never had water fluoridation nor has there been preparation of products made in the RoI to the North (Halo effect). Service Delivery is also different in both populations. However, these populations have been shown to have very different oral health in 5-14 year old children. A small movement of people on both sides of the border gives a unique opportunity to consider these two populations and apply the findings to a wider audience. No other study to date has looked at oral health issues other than dental decay, and neither have they looked at the reasons that may be behind the differences in children.

# Aims and Objectives

To develop baseline information on oral health and general health of a fluoridated and non-fluoridated population with different service delivery mechanisms i.e. WHSSB and NWHB.

# By carrying out:

- Epidemiological study of 16 year olds on both sides of the border looking at:
  - Oral health, knowledge, behaviour, attitudes.
- Ecological study on general population to look at: Cancers, hip fractures, Downs Syndrome.

# **Outputs**

- Documented information on the oral health of both populations.
- Documented information on the effects of different service delivery methods on oral health.
- Documented information on health issues related to water fluoridation.

#### Results

- Identification of evidence on the effects of fluoride.
- Comparable data on the oral health of two population.
- Improved networks and information sharing/communication with other departments e.g. public health, education and health promotion.
- Demonstration of the positive or otherwise effects of fluoride.

# **Impact**

 Enablement of better informed decision making in relation to use / non-use of fluoride.

# **Project duration**

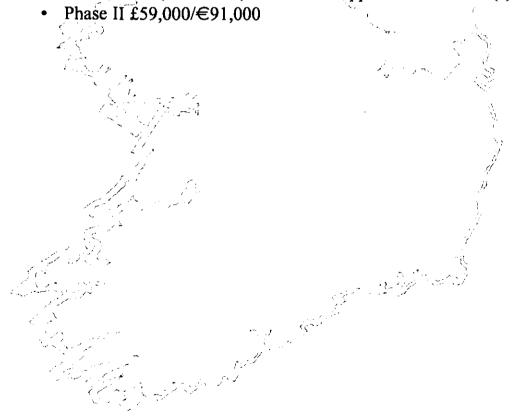
• 1 year - Phase 1

#### Resources

- 3.0 WTE staff
- Travel and Subsistence
- Rental Accommodation
- Survey Development and Data Analysis
- Q & A Evaluation
- Audit, Accounting, I.C.T.
- H&L, Tel/, Postage, Stationery

# Cost <

• Phase 1 £150,000/€231,000 - Detail Appendix 5.4.4/5.4.4(a) - Phase 1



# 5.5 LEARNING DISABILITY

## 5.5.1 Protection of Vulnerable Adults from Abuse

This Service Development Proposal has two very distinct elements. The first element is to develop common approaches to the areas of personal relationships, sexuality, self-protection for vulnerable adults. Such issues are of paramount importance to people with a learning disability whether within a residential setting or living independently.

The second element of this initiative is to examine the health status and support service requirements of carers of people with a learning disability in four interface sites along the border.

This approach, allowing for a clear cohesive focus on carers' needs, will ensure scope for cross-border learning and cohesion in planning. It will provide CAWT with appropriate research material to target specific support services for carers on a cross border needs-led basis in the future.

# Aims and Objectives

The first element aims to develop approaches to the areas of personal relationships, sexuality and self-protection by:

- Developing guidelines for staff, carers and service users on personal relationships.
- Examining a set of vulnerable adults' protocols.
- Comparing the relevant legislation across both jurisdictions.
- Developing a self-protection strategy and training materials which can be used proactively in day care and fieldwork settings.

The second element will examine the health status and support requirements of carers by:

- Carrying out a demographic profile of carers in identified border areas between the Boards/Trusts.
- Examining the current level of service provision and support available to carers.
- Auditing the health status of carers.
- Examining carers' satisfaction with the quality of Learning Disability support services provided, using a variety of research methodologies.

# 5.5.2 VOCATIONAL ASSESSMENT/TRAINING RESOURCES FOR THOSE WITH A LEARNING DISABILITY

This Service Development Proposal also has two very distinct elements. The first element is to promote social inclusion through meeting the employment needs of those people with a learning disability by providing accurate assessment of their skills and abilities and matching these with suitable employment opportunities.

The second element of this Service Development Proposal is to develop training resources for those with a learning disability in order to equip them with work and life skills in the areas of independent travel and catering.

## Aims and Objectives

The first element aims to ensure employment opportunities for those with a learning disability by:

- Establishing effective assessments for people with a learning disability whose needs cannot be easily identified through traditional employment led occupational assessments.
- Preparing clients to secure successful supported employment placements thus maximising their financial potential to improve their economic status.

The second element aims to equip those with a learning disability to travel independently to and from work and access opportunities in their local communities by:

- Completing a detailed analysis of any existing independent travel packages with a view to identifying differences with regard to transport infrastructure.
- Seeking technical advice from appropriate parties in relation to road signs, road structures and public telephones

It will also provide a vocational route for individuals aged 16+ within the catering field by:

- · Analysing the Vocational Access Certificate in catering
- Preparing a detailed specification of developed requirements
- Formulating a first draft for approval by all parties including testing pilot with trainees.

## **Outputs**

- Development of accurate vocational assessments for those with a learning disability.
- Improved preparation of clients for employment opportunities.
- Review of current travel, training and vocational programmes in catering.
- Development of high quality training materials for independent travel and for equipping clients to undertake Certificate in Catering Skills.
- Piloting of new materials.

#### Results

- Development of alternatives to traditional day care.
- Validated assessment procedures for clients on both sides of the border.
- Raised profile of employment needs of people with a learning disability.
- Up to date piloted materials.
- Increased linkages between voluntary and statutory organisations.

## **Impact**

- Greater employment opportunities.
- More effective standards of practice and equality for service users.
- Enhanced opportunities for training and employment activities for clients.
- Increased number of trainees undertaking Certificate in Catering.
- Safer and increased freedom for those with a learning disability.

# **Project Duration -**

•  $1^{1}/_{2}/2$  years

#### Resources - 5.5.1

- 5 WTE staff
- Travel and Subsistence
- Office Accommodation
- Training/Research
- H&L, Tel, Postage, Stationery
- QA and Evaluation
- Audit, Accountancy, ICT
- · Publicity and Marketing

#### Cost

• £225,000/€346,000 - Detail Appendix 5.5.1/5.5.1(a)

## Resources 5.5.2

- 3 WTE staff
- Travel and Subsistence
- Office Accommodation
- Development of Assessment Tools
- Travel Resources
- Catering Resources
- H&L, Tel, Postage, Stationery
- QA and Evaluation
- Audit, Accountancy, ICT
- Publicity and Marketing

# Cost

• £271,000/€418,000 - Detail Appendix 5.5.2/5.5.2(a)

## 5.6 ACUTE SERVICES

## 5.6.1 Major Incident Planning and Response

This project aims to develop a strategic approach to support the implementation of a Cross-Border Emergency Plan in Sligo/Leitrim/ Tyrone/Fermanagh and Cavan/Monaghan Areas. The work will act as a pilot and will be extended beyond the completion of the pilot to develop integrated emergency response arrangements for the entire Border Region.

# Aims and Objectives

- Establish a central co-ordinator
- Identify existing shortfalls within current planning process
- Bring about the improvement of emergency planning links with other agencies and organisations.
- Examine legal issues, registration issues etc of health care professionals potentially working in two jurisdictions.
- Examine issues around the appropriate destination of patients requiring hospital treatment

# **Outputs**

- Integrated Emergency Plan for the Sligo/Leitrim/Tyrone/ Fermanagh and Cavan/Monaghan Areas
- Timetable for the comprehensive development of integrated plans across the CAWT Region
- Identified skills/knowledge gaps
- · Training tools to address the skills/knowledge gaps
- · Assessment of capital investment requirements

## **Results**

- Improved liaison and coordination between agencies involved in emergency planning and response in the cross border area
- Coordination of ambulance services on a cross border basis where sensible to do so

# **Impact**

• Improved response to cross border emergency situations with resultant health gain to victims

# **Project Duration**

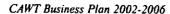
2 years

## Resources

- 3.00 WTE Staff
- Travel & Subsistence
- Office setup
- Training costs
- H&L, Tel, Postage, Stationery
- Q.A. and evaluation
- Audit/ Accountancy/I.C.T.
- Publicity and Marketing

# Cost

• £242,000/€373,000 - Detail Appendix 5.6.1/5.6.1(a)



## 5.6.2 Mobile Catheterisation Services

Research has shown that 45% of all deaths in the border region are due to cardiovascular disease. In its Service and Financial Framework 2001/02 the Southern Health and Social Services Board (SHSSB), recommends that the secondary prevention of coronary heart disease be targeted. By 2011 the population over the age of 64 for the combined health board regions, the North Eastern Health Board (NEHB) and SHSSB will have increased by 18%. This in turn will intensify demands on local health services including locally based cardiology services.

Both Boards feel that there is a need for local cardiac networks and that issues such as waiting lists, clinical effectiveness and increased workload in relation to locally based cardiology service must be addressed. In addition both the Cardiovascular Strategy published by the Department of Health and Children and the Review of Cardiac Services in the North identify a deficit and poor access to provision of this kind.

The main aim of this project is to identify the most effective way to deliver cardiac catheterisation services to the residents of the border region.

# Aims and Objectives

- To develop a pilot cross border mobile catheterisation at Craigavon Area Hospital for patients in both jurisdictions.
- To address the increase in demand in line with demographic changes.
- To reduce the need for patients either to travel to Belfast or Dublin to access services.
- To provide appropriate treatment for 10-12 patients per fortnight.
- To reduce the number of residents on waiting lists for cardiac catheterisation.
- To support the further development and retention of cardiology services for the benefit of residents.
- To deliver the service safely, with regard to nursing and medical protocol.

# Outputs

- The mobile catheterisation laboratory (cath lab) visiting the Craigavon Area Hospital site (CAH) once a fortnight.
- Patients from both SHSSB and NEHB being seen at the CAH site by the cardiologist.
- Provision of a cross border mobile cardiac catheterisation service for 120 patients

#### Results

- Needs of Cavan/Monaghan population met locally.
- Sharing of resources and expertise for the benefit of the older population.
- Educational benefits for the training and continued professional development of technical and nursing staff.
- Release of pressure on inpatient beds.
- · Reduction in Board/Trusts waiting lists.
- Professional development exchange of ideas.
- The retention of cardiology services at a local level for both populations.
- Strengthening of linkages within and between two of the Boards within the CAWT region

## **Impact**

- Improved accessibility for patients
- Improved clinical effectiveness

# **Project Duration**

6 Months

#### Resources

- · Cardiology Sessions
- Nursing Input
- H&L, Tel, Postage, Stationery
- · Q.A. and evaluation
- Audit/ Accountancy/I.C.T.
- Mobile Cath Lab Rental
- Catheterisation Consumables
- Radiological Contrast Agents
- Pharmacy

#### Cost

• £95,000/€146,000 - Detail Appendix 5.6.2/5.6.2(a)

# **5.6.3** Joint In-service Education Programme For Qualified Nurses

Following on from the Fermanagh and Omagh bombs when nurses from the South of Ireland came to assist it was agreed that senior nurses would meet to examine how best to promote the integration of nursing on both sides of the border.

Joint In-Service Education was selected as a key for development because firstly, it was appropriate from a CAWT perspective, but secondly, there was also recognition of the current professional development needs within nursing. The programme outlined below is appropriate for nurses across the full spectrum.

## Aims and Objectives

The project aims to promote equality of opportunity by identifying and providing needs assessment and in-service education locally across the spectrum of nursing by:

- Establishing an in-service development programme focusing on the following areas clinical issues, leadership and education.
- Establishing a Nursing Development Forum that will provide an opportunity for nurses on both sides of the border who have responsibility for co-ordinating in-service education to meet regularly.
- Taking opportunities arising from peace by developing further established links with key people on both sides of the border.

# **Outputs**

- Establishment of a nursing development forum.
- · Audit of current in-service training.
- Development of in-service programme for nurses.

#### Results

- Identification of training needs for nurses.
- More highly trained nurses.
- Exploitation of economies of scale.
- · Sharing of good practice.
- Cultural understanding between professionals further enhanced.
- Increased inter-changeability of skills across border boundaries.

#### Results

- Improved nursing standards and health care for patients.
- Raised awareness amongst targeted workers.

# **Project Duration**

• 3 years

#### Resources

- 2.5 WTE Staff
- Travel and Subsistence
- Office Set-up
- Training materials
- Venue hire
- Evaluation and research
- Professional and consulting fees
- Audit, Accountancy, ICT
- Publicity and Marketing

#### Cost

• £385,000/€593,000 - Detail Appendix 5.6.3/5.6.3(a)

## 5.6.4 MEDICAL TECHNICAL TRAINING OFFICER

As already outlined in the opening paragraphs of the Cross Border Mobile Catheterisation Proposal, forty-five percent of all deaths in the border region are due to cardiovascular disease.

This was also highlighted within the CAWT Health Profile and as with the Catheterisation Proposal both Boards are keen to address the whole area of secondary care. There is a shortage of trained staff to provide ECG services in the Monaghan area.

## Aims and Objectives

This proposal aims to provide an interim service to develop training and expertise for those employed in cardiology services by:

- Addressing current skills deficits in medical training officer grades.
- Providing training on a cross border basis.

## **Outputs**

- More trained technical officers.
- Shared experience for Craigavon and Monaghan Hospitals.
- Agreed programme of training.
- Strengthened linkages within and between the two Boards in the CAWT region.

#### Results

- Reduction in Boards' Waiting Lists.
- Sharing of experience and resources for the benefit of the border population.
- Retention of cardiology services at a local level for both populations.

# Impact

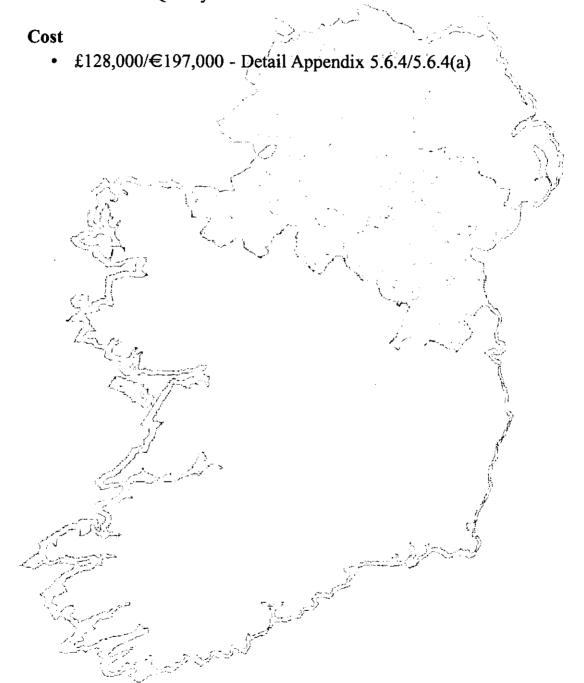
- Improved access to cardiac services for patients.
- Freeing up of physician time.

# **Project Duration**

2 years

# **Resources**

- 2.33 WTE staff
- Travel and subsistence
- Audit, Accountancy, ICT
- Administration
- Audit and Quality Assurance



# 5.7 Public Health

## 5.7.1 Cross Border Policies on Health Protection

This project will develop cross border plans and policies for a variety of infectious diseases and other related health protection issues. Microorganisms do not recognise borders, as a result outbreaks and other incidents can affect people both sides of the border. When such an incident occurs a co-ordinated response involving relevant professionals from both sides of the border is required. Health protection, particularly infection control, is not only an important part of the Boards' strategic plans but also a statutory responsibility.

Consultation has taken place with those with responsibility for infection control issues including public health medicine and environmental health in the four Boards. They feel it is very important to develop cross border policies and have proposed to undertake a piece of work to develop cross border plans and policies for a variety of infectious diseases and related issues in order to ensure a co-ordinated response involving the relevant professionals. Once developed the principles will apply to other Health Boards throughout the North and South of Ireland. With the movement of food and the mobility of people a problem arising in Belfast for example could affect people who have subsequently travelled to anywhere on the island.

# Aims and Objectives

- Establish a Steering Group to oversee the development of cross border plans
- Provide an overall cross border plan for infectious disease control
- Train professional staff
- Carry out two major cross border exercises or training events each year
- Develop cross border plans for specific conditions and situations

# **Outputs**

- Written cross border policies and protocols covering food poisoning, water contamination, meningitis, TB, chemical incidents and biochemical terrorism.
- Provision of information and good practice exchange.
- Involvement of staff from both sides of the border in mock exercises and training events.

#### Results

- Harmonisation of plans, policies and protocols for a variety of infectious diseases
- Sharing of resources and expertise for the benefit of the border population
- Improved approach to the overall planning and commissioning of health services for the CAWT Region
- Provision of a critical mass to justify a number of training events, thus exploiting economies of scale
- Professionals better able to deal with outbreaks of infectious disease

## **Impact**

 Public better protected from the effects of outbreaks of infectious disease etc on each side of the border

## **Project Duration**

2 years

#### Resources

- 1.5 WTE Staff
- Travel & Subsistence
- Office setup
- Training costs
- H&L, Tel, Postage, Stationery
- Q.A. and evaluation
- Audit/ Accountancy/I.C.T.
- · Publicity and Marketing

#### Cost

• £164,000/€252,000 - Detail Appendix 5.7.1/5.7.1(a)

## 5.7.2 HEALTH IMPACT ASSESSMENTS

Health Impact Assessments of health and non-health policies are increasingly seen as a key tool to facilitate cross-sectoral action as well as being extremely important as a means to promote health and reduce inequalities. Currently health impact assessment methodologies are being developed to enable all Departments and their agencies to identify and evaluate the health implications of significant new policy developments as they emerge in order to maximise health gain and minimise health loss.

The four CAWT Directors of Public Health see this as an important area for CAWT to develop.

## Aims and Objectives

To develop the area of cross border health impact assessment by:

- Establishing links with the All Ireland Institute of Public Health.
- Reviewing existing policy assessment processes.
- Carrying out multisectoral capacity building/training in relation to Health Impact Assessment.
- Initiation of a central cross border "bank" of Health Impact Assessments.
- Development of guidelines for future CAWT projects to undergo Health Impact Assessment.

# Outputs

- Steering Group established with linkages to the All Ireland Institute of Public Health.
- Documented analysis of existing policy assessment processes.
- Development of an inter sectoral capacity building programme.
- Established network of cross border Health Impact Assessment practitioners.
- Good practice guidelines in the use of Health Impact Assessments for CAWT developed.

#### Results

- Capacity training programme in Health Impact Assessments developed and established.
- Staff trained in carrying out Health Impact Assessments.
- Central cross border bank of Health Impact Assessments initiated.
- Protocols/guidelines drawn up.
- Good practice shared and links with the All Ireland Institute established.

# **Impact**

 Increased awareness of the health implications of new policies in order to maximise health gain and minimise health loss for the border population.

# **Project duration**

• 2 years

#### Resources

- I.5 WTE staff
- Travel and Subsistence Laptop
- Workshops/Training Resources
- H+L, Tel, Postage, Stationery
- Q.A + Evaluation
- Audit/Accountancy/ICT

#### **Estimated Cost**

• £158,000/€244,000

# 5.8 FAMILY AND CHILD CARE

#### **5.8.1** A New Chance: Fostering Initiative

Care and support to children and families in need has two main strands – in home support, including day care home support, social work support etc.; and out-of-home care, including residential and foster care. Developments in all areas are necessary and are underway in both jurisdictions. Both RoI and NI have begun to improve care planning and assessment systems to ensure that the right intervention is chosen. The introduction of the 'Looking After Children' system as part of the Children's Order in NI, and government pilots of care planning and assessment systems in RoI have moved this forward. In both RoI and NI, the need to cater more effectively for children in out-of-home care has been recognised. Both governments have introduced regulation and finance to engender improvement in high support residential childcare. For example, in NI significant investment has been ploughed into training for staff. In RoI, national standards have been introduced, and there has been very significant investment into the creation of high support units. Further improvements in both areas are planned.

However, the main hindrance to improvement has been lack of real placement alternatives for children with high levels of emotional and behavioural difficult. These children challenge residential services by their inability to interact constructively with their peer group, and high levels of disturbance can result. In standard foster care situations, placements of these children tend to disrupt owing to the demands they place on their carers. They can experience multiple short placements and the damage so caused has been well researched. Foster carers also often withdraw from further service after such traumatic experiences.

Key changes have been recommended in a series of legislative and strategic documents and policy recommendations in both jurisdictions with regard to childcare, fostering and adoption services and child protection. These documents are guiding the efforts of the Family and Childcare Sub-group within CAWT who are working together to ensure that children in the border region have the opportunity to realise their full potential in terms of good health, well being and development. Their project aims to explore innovative approaches in foster care to meet the challenges presented by children with high levels of need.

## Aims and Objectives

- To research the issues and history surrounding specialist foster care in Ireland and in other countries in Europe and Scandinavia.
- To develop a consultation process which will draw together experience and opinion to feed into the work of the Group.
- To develop a cross border specialist foster care service for the area.
- To organise and hold training seminars for the benefit of stakeholders and others to outline the scheme.

## Outputs

- A well researched paper, identifying the history and issues surrounding specialist foster care in Ireland and within certain other European countries, and including a literature review
- A consultative process that will draw together experience and opinion •
  to feed into the work of the Task Group, as well as beginning the
  process of creating a constructive environment within which the
  project will be developed
- Exploration of methods for developing innovative projects which may be used in other areas of need in social care.
- Development of tools, procedural guides, assessment tools and support mechanisms which will also be of benefit to the existing foster care services already offered by the CAWT partners.

#### Results

- A carefully designed and costed proposal for the development of a cross-border scheme or twinned schemes, providing a pilot for the development of specialist foster care service for the area.
- Materials for seminars to be run by the CAWT partners, for the benefit
  of stakeholders and others to explain the scheme and the thinking on
  which it is based.
- Shared learning between the staff in the various Boards and Trusts.

# **Impact**

- Improved understanding of the benefits or otherwise of providing specific models of specialist fostering services in both jurisdictions
- Reduction in the inconsistency of children being placed in the other jurisdiction.

# **Project Duration**

• 1 year

## Resources

- 3.0 WTE Staff
- Travel & Subsistence
- Office setup
- Training costs
- H&L, Tel, Postage, Stationery
- Q.A. and evaluation
- Audit/ Accountancy/I.C.T.
- · Publicity and Marketing

## Cost

• £135,000/€208,000 - Detail Appendix 5.8.1/5.8.1(a)



# 5.8.2 NEEDS ASSESSMENT AND PLANNING FRAMEWORKS FOR SERVICES FOR CHILDREN AND YOUNG PEOPLE.

In Northern Ireland, planning for services for children and young people is taken forward through the multi-agency strategic planning process - Children's Services Planning. In the Republic of Ireland, the National Childcare Strategy sets a clear overall context for this work.

In all Boards there is a need to ensure that planning is based on clear indicators of need, which are measurable and can be used to evaluate the effectiveness of services delivered. In each of the four Boards, a lot of work is taking place on the assessment of need and the development and the use of performance indicators.

The idea for this project developed out of the CAWT Creative Projects Workshop 'Towards a Cross-Border Partnership for Needs Assessment, Developing Planning Frameworks and Information Exchange in Family and Childcare Services'. This workshop, which was held on 23<sup>rd</sup> August 2001 brought together planners and information experts from all four cross-border Boards.

This exchange of practice and information was very successful and innovative, and much learning was generated on the day. It became clear that continuing contact and exchange would be extremely fruitful, in order for best practice in the use of planning models and in particular the use of information sets and performance indicators to be shared. The ultimate aim of such exchange is to improve planning of services for children and young people in each Board and develop common services where it makes sense to do so.

The overall aim of this proposed project is to explore the potential for assessing need and planning services for children and young people at a cross-border level.

# Aims and Objectives

- Create an ongoing multi-agency cross border exchange forum to share information on policy, practice and planning of services for children and young people.
- Document best practice in information sharing.
- Document and analyse current information systems on both sides of the border.
- Facilitate cross-border training initiatives on planning and use of information for children and young people's services

• Develop and pilot cross-border staff exchange programmes in the areas of planning, information and strategy development

## **Outputs**

- Established multi-agency cross border exchange forum
- Cross border networks of information and planning officers established including links to CAWT and Boards' websites
- Documented best practice on information sharing and current information systems including performance indicators
- Workshops and training events for staff
- Major conference on outcome
- Cross border children and young people's profile

## **Results**

- Joint working and needs assessment at a cross-border level facilitated using shared resources
- Joint working and planning services at a cross-border level facilitated using shared resources
- · Capacity to develop common core datasets facilitated
- Better informed information and planning staff
- · Duplication of effort avoided

# **Impact**

 Increased capacity for rational planning of cross border services, leading to more cost effective use of resources

# **Project Duration**

3 years

#### Resources

- 2.0 WTE Staff
- Travel & Subsistence
- Office setup
- Training costs
- Workshops
- H&L, Tel, Postage, Stationery
- Q.A. and evaluation
- Audit/ Accountancy/I.C.T.
- · Publicity and Marketing

#### Cost

• £216,000/€332,000 - Detail Appendix 5.8.2/5.8.2(a)

## 5.8.3 Inside Out – Personal Development Through Art

Art therapy is a method of treatment which employs art to help clients cope more effectively with their lives and their difficulties. It gives clients the freedom to express feelings and release tension through engaging with art materials in exploring their lives. It is a therapy for children and young people who are emotionally disturbed and for whom other more conventional interventions have been unsuccessful. Psychologists, teachers and social workers recognise its contribution to empowering children to be in charge of their own healing and consequently reducing the need for other long term financial expenditure.

# Aims and Objectives

Aimed at children and young people aged 2-18 years from disadvantaged border/cross border areas, art therapy as a form of intervention can assist with a child's psychological, emotional, educational, social and physical development. This project aims to establish art therapy for young people and their families in the border areas by:

- Offering weekly individual art therapy session to children/young people who are emotionally traumatised.
- Liaising with referral agencies when appropriate to offer therapy services.
- Offering group sessions to parents, clients and young people.
- Offering short experiential courses to parents and those working with young people which further enhance creative and emotional development.
- Working in partnership with other agencies.

# **Outputs**

- Development of training programmes for community workers/leaders in art therapy.
- Training sessions for children and young people who have been traumatised.
- Awareness sessions for parents and those working with young people.
- Partnerships established with other agencies.

#### Results

- Children and young people facilitated to undergo art therapy.
- Increased awareness of the powerful impact art therapy can have.
- · Empowered families and community workers.

# **Impacts**

- More emotionally developed children.
- More skilled adults who can relate to children who are traumatised.
- Potential created for breaking the cycle of physical and sexual abuse in families.

# **Project Duration**

• 2 years

#### Resources

- 1 WTE staff
- Training and art materials
- Venue hire
- H&L, Tel, Postage, Stationary
- Publicity and Marketing
- Evaluation and Research Professional fees
- Audit, Accountancy, I.C.T.
- External Supervision

## Cost 5

• £61,000/€94,000 - Detail Appendix 5.8.3/5.8.3(a)

# 5.9 MENTAL HEALTH

## **5.9.1** Needs Assessment of Carers

In recent years there has been increasing recognition of the crucial role that informal family carers play in the provision of community care for people with severe mental illness. This illness may have arisen as a result of people having been exposed to the conflict either directly themselves, by being part of a community devastated by tragedy, such as Omagh/Enniskillen, or by suffering the death of a close friend/relative or indeed through personal injury.

The burden that caring for those with a mental illness can put on a family has been recognised by policy makers. It is acknowledged that carers have a valuable contribution to make in the care process and should be equipped with the knowledge, skills and confidence to deal effectively with their role.

# Aims and Objectives

To identify and establish the needs of carers of persons suffering from mental health problems along the border and to encourage the development of working partnerships between users, carers and mental health professionals by:

- Reviewing the needs of carers of those who suffer from mental health problems using questionnaires, focus groups etc.
- Reviewing the existing range of services in the partner organisations for those who care for those with a mental health problem and identify gaps.
- Identifying training and education requirements of carers.

# **Outputs**

- Documented evidence of the needs of carers of those with a mental health problem on both sides of the border.
- Specific areas identified for joint working and sharing of resources.
- Joint training programmes identified and agreed.
- Established networks and communication channels between partnership members.

#### Results

- Information available to inform planning process.
- Platform for joint working and development of services for those who care for those with mental health problems.
- Identified critical mass for developing services for carers.
- Opportunities to promote reconciliation and understanding provided.

## **Impact**

- Enhanced service provision for carers on a cross border basis.
- · Better identification of client need.
- Reduction in duplication of services.

# **Project Duration**

• 1 year

#### Resources

- 3.0 WTE staff
- · Travel and subsistence
- Laptop
- Workshops
- H&L, Tel, Postage, Stationary
- Q.A. and Evaluation
- Audit, Accountancy, I.C.T.
- · Publicity and Marketing

#### Cost

• £65,000/€99,000 - Detail Appendix 5.9.1/5.9.1(a)

#### 5.9.2 Awareness Training in Cognitive Therapy

A common need is emerging for the development of alternatives to physical methods of treatment for mental health problems. This demand for psychological therapies is coming from patients, general practitioners and mental health professionals. This deficit has become much more apparent as services have moved from an institutional to a community base. It is now accepted that psychological therapies must form an integral part of a modern mental health service.

Cognitive Therapy is a structured, time-limited approach with proven outcomes and emphasis on patient/therapist collaboration and is found to be worthwhile by mental health practitioners on both sides of the border.

## Aims and Objectives

Cognitive Therapy has been established as an effective short term treatment for a range of mental health disorders and this activity aims to offer awareness training to front line mental health staff by:

- · Liasing with partners and identifying staff for training.
- Ensuring training delivered is relevant to staff needs.
- Planning a system to deliver training.
- Developing an ongoing evaluation process.

# Outputs

- Completed training needs assessment, training plan and training courses delivered.
- Cadre of trainers established.

#### Results

- One hundred and sixty people trained.
- Stronger links between mental health professionals in the Boards.
- Cognitive Therapy Programmes delivered on a cross border basis.

# **Impact**

- · More highly trained and skilled staff.
- · Greater sharing of knowledge and building relationships.
- Shared understanding of the adverse influences of the conflict.
- Reduced inequality and disadvantage.
- Improved access to cognitive therapy for patients in the border area.
- Reduction in need to access secondary care.

# **Project duration**

2 years.

#### Resources

- 1.0 WTE Staff
- Travel and subsistence
- Heat, Light, Tel, Postage, Stationery
- Audit/Accountancy/ICT
- Workshop Venues
- Nurse Replacement Costs
- Graduation
- Q.A and Evaluation
- Laptop

# Cost

• £292,000/€449,000 - Detail Appendix 5.9.2/5.9.2(a)

## 5.9.3 Investigation of Suicide and Attempted Suicide

Investigation of Suicide and Attempted Suicide in At Risk Patients with Psychiatric disorders.

Suicidal behaviour is one of the major challenges in Ireland both north and south. Suicidal behaviour has increased substantially over the last decade particularly among young people and suicide is now the main cause of death among young people aged 18-24. Particular concerns have been raised by the trends in suicide identified among young people in border areas. While this affects both urban and rural communities the limited available evidence suggests that a different balance of push and pull factors may be influencing these trends. Community mental health programmes seeking to address this major mental health challenge must be grounded on a sound evidence base.

## Aims and Objectives

This activity is part of a collaborative north-south initiative which is trying to identify all relevant risk factors including health and social factors which may be placing individuals at particular risk of serious self harm or suicide.

The longitudinal investigation aims to provide new information about predictors of risk and protective factors for suicidal acts including suicide. It will involve:

- The follow up evaluation of a group of high-risk subjects.
- Collation and analysis of data including the use of survival analysis.

# Outputs

- Follow up of 800 high-risk subjects in two areas in Northern Ireland and in one border area.
- Analysis of data in order to identify important clinical insights into suicide attempts.
- Evidence of the impact of the civil conflict on those who attempt suicide.

#### Results

- Improved information regarding predictors of risk.
- Model developed for stratifying risk from suicidal behaviour.

## **Impact**

- Better targeting of health promotion and suicide prevention programmes.
- Improved sensitivity and specificity of suicide prevention strategies.

# **Project Duration**

2 years

#### Resources

- 3.0 WTE Staff
- Travel and Subsistence
- University Costs
- H &L Tel, Postage and Stationery
- Audit, Accountancy, ICT
- Marketing, Printing, Stationery

## Cost

• £230,000/€354,000 - Detail Appendix 5.9.3/5.9.3(a)

## 5.9.4 Positive Mental Health and Young People

Mental disorders in adolescence are common and can cause disability. They affect young people's functioning in several areas of their lives, personal, social, behavioural, academic and vocational and they interfere with their ability to undertake the developmental tasks of adolescence. The cost of such disorders in relation to suffering for the young person and his/her family, the effects on community resources, the loss of productivity and unfulfilled potential is enormous.

## Aims and Objectives

The proposal addresses the need to proactively promote positive mental health among the general population of the CAWT area. It aims to focus especially on young people and will examine and utilise existing conclusions and recommendations relevant to mental health promotion by appointing two mental health officers who will:

- Examine the conclusions and recommendations from existing mental health studies and strategies from both jurisdictions.
- Consult with mental health services and health promotion departments to identify strengths and differences in existing mental health promotion activities.
- Draft mental health promotion action plans.
- Implement the mental health promotion plans on a cross border basis.

# Outputs

- Documented analysis of the conclusions and recommendations from existing mental health studies, reports and strategies.
- Bilateral cross border mental health promotion plans drawn up.
- Specific areas identified for joint working and sharing of resources.
- Implementation of the plans commenced.
- Established networks and communication channels between partnership members.

#### Results

- Improved understanding and sharing of good practice in mental health promotion.
- Sharing of resources and expertise for the benefit of the border population.
- Exploitation of economies of scale.
- Better co-ordinated mental health promotion services.

## **Impact**

- Greater skills and potential to reduce mental illness.
- Established partnership between statutory and voluntary cross border agencies.
- Capacity to persuade young people to make informed choices about their life-style.

# **Project duration**

• 2 years

#### Resources

- 3.4 WTE staff
- Travel and Subsistence
- Workshops / Training
- Office Accommodation and Set-up
- H&L, Tel, Postage, Stationary
- Evaluation and Research
- Information Systems

#### Cost

• £191,000/€295,000 - Detail Appendix 5.9.4/5.9.4(a)

## 5.10 SUPPORT SERVICES

#### 5.10.1 Cross Border Mobility Support

Fundamental to the successful implementation of the CAWT Service Developments is Human Resource Support. CAWT needs to ensure that it has the right people, with the right competencies, in the right numbers, organised and managed in the right way in order to deliver the goals and objectives of its strategy.

A Human Resources plan which will invest in training and education, devise and implement best practice employment policies and procedures, improve the quality of human life, develop performance management and develop the partnership approach further needs to be developed.

## Improving Cross border Mobility within Health and Social Care

The Altnagelvin/Letterkenny Partnership Project identified a number of constraints to cross border working. These included constraints such as

- Registration of nursing, medical and professions allied to medicine are carried out in both jurisdictions by separate bodies who have different sets off requirements.
- Administrative differences in terms of pay scales, conditions of employment, job descriptions which make it difficult to have joint recruitment drives, staff placements/rotations and joint appointments.

# Aims and Objectives

To prepare a Human Resources strategy for the approval of the Management Board which examines:

- Economic barriers in relation to free movement of staff.
- Qualifications and entry requirements across the range of professionals in health and social care provision.
- Issues surrounding professional registration and indemnity.

#### **Outputs**

- Develop initiatives that support cross border exchanges of staff.
- Create awareness and working knowledge of differences between the professionals in both jurisdictions.
- Establish a joint programme for the development of key staff on a cross border basis.
- Overcome cross border obstacles relating to training qualifications, registration and indemnity.

#### Results

- The recommendations of the NSMC's Report on Obstacles to Cross Border Mobility in relation to health will be addressed.
  - A joint approach will be taken in order to address issues of common concern.
- Provision of learning opportunities for staff which will enhance their skill base and lead to an improved service.
- Enhanced opportunities to allow the exchange of information and professional expertise.

#### **Impact**

- The work of CAWT will be mainstreamed into day to day activities.
- Reduction in barriers to cross border working.

#### **Project Duration**

• 2 years

#### Resources

- 2.0 WTE
- Travel and Staff Subsistence
- H&L, Tel, Postage, Stationary
- Training workshops
- Publicity and Marketing
- Office Set-up
- · Research and Evaluation
- Audit, Accountancy, ICT

#### Cost

• £141,000/€217,000 - Detail Appendix 5.10.1/5.10.1(a)

#### 5.10.2 CAWT ICT STRATEGY IMPLEMENTATION

Information and Communications Technology (ICT) will play a pivotal role in achieving the objectives of CAWT. It will act as an enabling infrastructure to support CAWT's strategic plan, strengthen communications and enhance individual initiatives undertaken. The recently developed CAWT ICT Strategy offers the blueprint for a way forward and describes the strategic direction for the development of ICT in the CAWT organisation for the period 2002-2005.

#### Aims and Objectives

- The overriding aim of the strategy is to build a solid foundation for useful cross-border ICT developments and initiatives and includes the following objectives:
- Promote the use of ICT within the CAWT organisation and raise awareness of the potential of ICT for the work of CAWT.
- To establish a foundation for ICT within CAWT that can be built on and developed through projects such as the establishment of the CAWT website.
- Increase awareness of the need for ICT development within CAWT and the associated resources that will be required.
- Create models of best practice for the use of ICT in the region.
- To concentrate on the following priority areas: Communications; Resource Unit Support; Project Support; Standards for ICT; Training.

#### **Outputs**

- CAWT Website.
- CAWT ICT Security Policy (including use of internet and email).
- CAWT Data Confidentiality Policy.
- CAWT Data Protection/Freedom of Information Registration.
- Guidelines for the use of ICT in CAWT projects.
- Guidelines on adherence to ICT international standards
- Video conferencing, teleconferencing and email documentation and training materials

#### Results

- A simple, flexible, user-friendly website, which also provides accessibility to people with disabilities, such as visual impairment.
- Documentation & training materials to support the use of videoconferencing, teleconferencing and e-mail.
- Innovation in ICT will be encouraged in CAWT developments and presented as a model of best practice.

• A range of policies and protocols to promote confidentiality of information and adherence to relevant legislation.

#### **Impact**

- The CAWT website will become an effective communication tool for the whole organisation. It will encompass all aspects of CAWT's work, take account of the complexity of the organisation, its internal and external networks and will act as a "One Stop Shop" for information on CAWT.
- Improved awareness and compliance with legal and ethical frameworks in both jurisdictions.
- Increased confidence of Health Service staff in the use of communications technologies to overcome problems of isolation, peripherality and rurality, endemic in the CAWT region.
- The use of ICT will encourage mutual understanding among professional groups, communities and organisations.
- The confidentiality of information relating to residents of the CAWT area will be respected and protected.

#### **Project Duration**

3 Years

#### Resources

- 1 WTE Staff
- Website Development
- Travel & Subsistence
- Office Set up
- 2 laptops
- H&L, Tel, Postage, Stationery
- Training Materials
- Audit, Accountancy, ICT
- QA and Evaluation
- · Publicity and Marketing

#### Cost

• £107,000/€165,000 - Detail Appendix 5.10.2/5.10.2(a)

#### 5.10.3 Connecting with Europe

#### Cost

• £161,500/€248,710 - Detail Appendix 5.10.3/5.10.3(a)

#### 5.11 Management Development and Learning

One of the key issues for any organisation is to develop the skills and competencies required to meet the priorities as detailed within their Strategic and Business Plans.

CAWT's activities to date have concentrated on service developments across a wide range of areas such as learning disability, mental health, acute services, health promotion, but CAWT has not had the opportunity to consider the cross border training and development needs of almost 30,000 employees within the four Health boards.

As a result the Management and Learning Development Managers from the four border Health Boards came together and identified the following initiatives to give a structure to cross border training and development thereby developing staff and ultimately enhancing the health and social well being of the population.

This co-ordinated approach to training and development activities for health and social care staff across a range of services will respond to the deficits and common issues identified by health care professionals themselves.

Such training in the past would have been sparse and informal because of conflict issues such as road check points, security alerts, threats of sectarian violence and fear of actually crossing the border.

There are seven training initiatives proposed.

#### 5.11.1 Partnership Training and Education

#### Aims and Objectives

This project will train facilitators from both sides of the border who will:

- Identify with and understand partnership as a working model particularly within the context of their respective organisations and on a cross border basis.
- Explore what is meant by partnership in the context of Peace i.e., people from Northern Ireland who have been through The Troubles will interact with colleagues from the South in relation to building a healthier society.
- Deliver skills workshops for teams / groups in improvement activities through partnership working.
- Support Training and Development Units to implement partnership.

#### Cost

• £74,000/€113,000- Detail Appendix 5.11.1/5.11.1(a)

#### 5.11.2 Training the Trainers

#### Aims and Objectives

This initiative will develop a cadre of cross border trainers capable of designing and delivering top quality training and development to staff by:

- Delivering training up to and including Level 4 NVQ.
- Delivering workshops for groups in training skills.
- Supporting trainers in identifying and addressing the training required by people in order to perform effectively.

#### Cost

• £122,000/€188,000- Detail Appendix 5.11.2/5.11.2(a)

#### 5.11.3 WOMEN IN MANAGEMENT

#### Aims and Objectives

This initiative aims to remove the glass ceiling by enabling a group of women to become empowered to take on greater responsibility within their workplace and to increase participants skills in relation to management.

The overall objectives of the programme are as follows:

- To improve interpersonal skills.
- To enhance their ability to think and act strategically.
- To promote ownership of personal learning and development.
- · To clarify work and career goals.
- To explore issues around women in the workplace aspiring to senior positions.
- To demonstrate increased personal effectiveness in the workplace through completion of a work-based project.
- To extend networking within and outside.
- To improve understanding of political and social agendae.

#### Cost

• £78,000/€121,000- Detail Appendix 5.11.3/5.11.3(a)

#### 5.11.4 ACTION LEARNING

#### Aims and Objectives

The initiative aims to train key managers in cross border learning programmes who will embrace management skills development, multidisciplinary working, systems thinking, networking and cross border service integration / transformation.

#### It will result in:

- The development of personal development plans.
- The development of management skills.
- Increased multidisciplinary working.
- Networking.
- Closer cross border services integration.
- Pathway to an M.S.C in Change Management.

#### Cost

£435,000/€670,000- Detail Appendix 5.11.4/5.11.4(a)

#### 5.11.5 Public Health Leadership Nursing Programme

#### Aims and Objectives

This programme aims to train those involved in public health leadership in order to:

- Provide the underpinning knowledge and skills/competencies to enable nurses to progress the public health agenda.
- Develop a cadre of nurse leaders to take forward the public health agenda on 3 levels.
  - Level 1 General Public Health Awareness recognition of the role of all nurses and midwives.
  - Level 2 General Involvement in Public Health initiatives development of personal effectiveness, participating in shared objectives etc.
  - Level 3 Specialist Public Health participation or promotion this role incorporates strategy development.

#### Cost

• £83,000/€128,000- Detail Appendix 5.11.5/5.11.5(a)

#### 5.11.6 Personal Development Planning Initiative

#### Aims and Objectives

This initiative aims to ensure that a planned and structured process exists within the respective organisations which will allow all employees to identify, discuss, prioritise and agree training and personal development needs which support the individual and the organisation. It will:

- Develop a process that encourages communication between line managers and staff regarding staff and personal development needs.
- Develop employee Personal Development Plans which will be owned and retained by the employee with continual inputs and support from the line manager.

#### Cost

• £214,000/€330,000- Detail Appendix 5.11.6/5.11.6(a)

## 5.11.7 SERVICE DELIVERY AND ORGANISATIONAL EDUCATION, TRAINING AND DEVELOPMENT

#### Aims and Objectives

The initiative aims to strategically review existing education / training services within the CAWT region, identify where such resources can be shared and jointly developed on a cross border basis by:

- Carrying out a scoping exercise to explore the potential for the further development of synergies between the education sector and health and social care providers within the CAWT region.
- Identify joint service development projects such as further organisational and management development initiatives.
- Examine the feasibility of piloting the concept of locality management.
- Develop joint initiatives such as management of change which would lead to a validated masters degree in change management.

#### Cost

• £88,000/€135,000- Detail Appendix 5.11.7/5.11.7(a)

#### Outputs

- · Increased number of facilitators trained.
- More qualified members of staff.
- Increased input from women to take on more responsibility within their workplace.
- Enhanced networking and multidisciplinary working.
- Personal Development Plans formulated.
- More public health leadership within nursing.
- Identification of existing education / training services.
- Delivery of training programmes / workshops on a range of issues.

#### Results

- Exploitation of economies of scale.
- More integrated approach to training and development.
- Sharing of experience and resources for the benefit of the border population.
- Closer working relationship between training and development units.

#### **Impacts**

- Greater employment opportunities.
- More effective standards and protocols in relation to training.
- Improved service planning.
- More integrated approach to work



## **PARTNERSHIP IN ACTION**



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

**CHAPTER 6 FINANCE** 



#### 6. FINANCE

#### 6.1 FINANCIAL PLAN

The summary financial plan detailed in Section 6.3, highlights the various sources that have been identified to fund the work that CAWT wishes to carry out over the period of this business plan. Interreg funding for the CAWT Resource Unit detailed in Tables 1 and 1(a), and the approved projects listed in Tables 2 and 2(a), has already been secured, subject to final approval of individual projects by the DHSS&PS and the DOHC and the Interreg Steering Committee.

Peace 11 funding has also been secured under Measure 5.2 for the projects listed in Table 3. Applications have been made to the Peace 11, 5.4 Measure for the training projects listed in Tables 4 and 5. A further application has been made to the Peace 11, 5.2 Measure in respect of the projects listed in Table 6. A number of other sources of funding continue to be explored in relation to the "Connecting With Europe "project, the Human Resources Project and the projects listed in Table 7.

The ongoing work of the eleven, soon to be, thirteen subgroups, together with the support provided by the Secretariat members, the Finance Forum and Boards' Finance Departments, the Chief Executives and the Management Board will continue to be funded from the Boards' own resources.

#### 6.2 FINANCIAL MANAGEMENT

#### **BACKGROUND**

Following the success of CAWT in attracting almost £6.0 million from the EU Peace 1 initiative, CAWT established comprehensive financial management arrangements, including the appointment of a part-time dedicated Finance Manager, to ensure that the financial transactions relating to CAWT projects are properly managed.

The CAWT Finance Forum was established comprising the Directors of Finance or Assistant Directors of Finance of the four Boards to oversee the financial management arrangements and to report to the CAWT Management Board. The Terms of Reference of the Finance Forum are specific in respect of the responsibilities of the individual members and the Finance Forum as a body reporting to the CAWT Management Board. These responsibilities they discharge through their own finance personnel and through the CAWT Finance Manager reporting to them in detail on a quarterly basis.

All expenditure on projects is passed through the financial systems of one or more of the four Boards or seven HSS Trusts involved in each particular project. Boards' and Trusts' finance departments and finance personnel are heavily involved in and committed to providing a finance service to support the work of CAWT.

Nominated finance personnel within Boards and Trusts have also provided finance support to specific projects as nominated Project Accountants. Again there will be a need to continue to provide this service and discussions are ongoing with Directors of Finance in respect of the resource implications of this.

All financial transactions are therefore subject to the internal financial controls of the participating CAWT partners, and these controls and their accounts are subject to audit by auditors appointed by the respective Departments of Health, in the course of work to form an opinion on their systems of internal control. In addition there have been several specific examinations of expenditure on CAWT projects by auditors from the NIAO, DHSS&PS Internal Audit and the two governments' EU Verification Teams. Each Board has also commissioned its own independent examination of expenditure as directed by the CAWT Management Board.

#### CAWT BUSINESS PLAN

CAWT is now preparing to implement its Strategic Plan through the development and funding of a detailed operational plan for the next five years. This will be funded to a significant degree from the European Union's Interreg 111 and Peace 11 programmes. Other sources of funding including the Boards' own resources are also being sought.

A review of the financial accounting and management arrangements which will be required has identified the need to appoint a dedicated full time Finance Officer to support the part-time Finance Manager. The Finance Officer role will provide support for both the CAWT Resource Unit and for a specified number of cross border projects. A summary of the financial management arrangements is given below.

#### FINANCE SUPPORT FROM BOARDS AND TRUSTS

- Identified dedicated project "accountant" with responsibility for supporting the project manager and putting together timely claims to the CAWT Finance Manager for reimbursement of expenditure incurred by all project participant organisations.
- Identified and named finance personnel in each participating organisation, other than the project accountant, to provide full details, including copies of source documents to the "project accountant" to enable timely claims to be made.
- The Banker Board role established under Peace 1 will continue, but it
  is still unclear whether there will be a need for one or two Boards. If
  as imagined the SEUPB will be the paying authority for all funds, then
  only one Banker Board may be required.

#### CAWT FINANCIAL MANAGEMENT ROLE

- Ensuring that CAWT meets all of the requirements as laid down by the EU, SEUPB, relevant government departments, internal and external auditors, CAWT Finance Forum and CAWT Management Board
- Liaising effectively between funders, auditors, relevant government departments, project management personnel and project accountants.
- Provision of advice and support to the CAWT Principal Executive Officer in relation to funding.
- Provision of advice and support to project accountant and project manager with the establishment and management of the project budget.
- Provision of advice and support to project accountant and project manager in respect of EU funding regulations.
- Ensuring that claims for all project expenditure are received and are such that adequate audit trails are in place and the monitoring requirements of the SEUPB are met.
- Ensuring that project files are accessible for audit at all times.
- Ensuring that all monies due are received from the SEUPB and other funding sources as relevant and disbursed to Boards and Trusts in line with expenditure.
- Reporting to the CAWT Finance Forum and on their behalf the CAWT Management Board on all matters pertaining to the financial management of funds allocated to CAWT projects.

The cost of the part-time Finance Manager post will continue to be a direct cost of the Resource Unit. The cost of the CAWT Finance Officer post will be apportioned across all projects as a project on-cost.



#### 6.3 FINANCIAL TABLES

## SUMMARY FINANCIAL PLAN STERLING AND EURO

		£	€
Resource Unit Costs (April 2001 - Dec. 2006)	Tables 1/1(a)	1499010	2308476
Approved Projects	Tables 2/2(a)	4139194	6374359
Priorities to be decided - Balance of	funds	561796	865166
TOTAL FUNDED FROM INTERREG		6200000	9548000
APPROVED PEACE 11 PROJECTS	Table 3	650817	1002258
PEACE 11 (5.4) APPLICATIONS			
Training Service Provision	Table 4	1339270	2062476
Training Management Deve	lopment Table 5	1094283	1685196
PROJECTS SEEKING FUNDING			
Mental Health Projects	Table 6	252065	388180
Connecting With Europe	App 5.10.3	161500	248710
Human Resources Project	App 5.10.1	140983	217114
Other proposals	Table 7	1179029	1815705
TOTAL FINANCIAL RESOURCES RE	QUIRED	11017947	16967639

# TABLE 1 CAWT RESOURCE UNIT 2001 - 2006 STERLING

	Apr-Dec	£	£	£	£	£	Total £
	2001	2002	2003	2004	2005	2006	2001-6
Central Support							
Principal Executive Officer	21793	50484	52865	55683	58878	61822	301526
Office Manager Grade IV		15386	16792	17724	18529	19088	98559
Clerical Officer x 2	O	9141	29880	30920	31848	32803	134593
Communications Co-ordinator	<u> </u>	0	28227	29782	31271	32834	126789
Travel & Subsistence	6448	11173	14929	15376	15838	16313	80076
Finance Mgr	11535	15985	12960	12270	12638	13017	78405
Travel Fin Mgr	742	350	1432	1474	1519	1564	7081
							0
Annual Report/P. R.	0	2500	4105	4228	4355	4486	19674
Courses/Conferences	5969	2404	7098	7311	7530	7756	38068
Mgt Board Meeting Expenses		1063	4090	4213	4339	4469	16172
Printing/Stationery	1137	335	1636	1685	1736	1788	8316
Telephones/postage	1466	1924	2045	2106	2170	2235	11946
Rent/HLP/Cleaning	1375	2200	2250	2317	2386	2458	12986
Website Hosting/AOL	0	250	1472	1517	1562	1609	6410
AUDIT	0	0	3090	3183	3278	3376	12928
Miscellaneous	0	6175	4090	4213	4339	4469	23286
Webpage	0	4375	10625	0	0	0	15000
Equipment/Computers	0	3000	26000	5000	5000	5000	44000
Information Systems	0	0	3000	5000	5000	5000	18000
Creative Projects	0	0	15000	15000	15000	30000	75000
Total	64176	126745	241585	219003	227216	250088	1128813
NWHB/WHSSB	_						
CAWT Support Officer	0	5202	32404	34138	35846	37693	145283
Travel & Subsistence	ō	1000	6135	6319	6509	6704	26667
Other Expenditure	Ö	150	614	632	651	670	2717
Total	0	6352	39153	41089	43005	45067	174666
NEHB/SHSSB							
CAWT Support Officer	9579	26203	32404	34138	35846	37693	175863
Travel & Subsistence							31713
	2000	4046 0	6135 614	6319 632	6509 651	6704 670	31713 2567
Other Expenditure	11579	30249	39153	41089	43005	45067	210142
Total	11379	30249	39133	41005	43003	+3007	210142
	75755	460046	240004	204404	242000	240222	4540000
Total Running Costs	75755	163346	319891	301181	313226	340222	1513622
Finance Support	L.	0	9757	9186	9553	10377	38873
ICT Support	ļ	0	5502	5180	5387	5852	21922
HR Support		3300	4287	4036	4197	4559	20379
Sub Total	0	3300	19545	18402	19138	20788	81173
Less Gap Funded	-64176	-31609					-95785
Total Running Costs	11579	135037	339436	319584	332364	361010	1499010

TABLE 1 (A)
CAWT RESOURCE UNIT 2001 - 2006 EURO

	Apr-Dec	€	€	€	€	€	Total €
	2001	2002	2003	2004	2005	2006	2001-6
Central Support	1						
Principal Executive Officer	33561	77745	81412	85752	90673	95207	464350
Office Manager Grade IV		23695	25860	27295	28534	29395	151780
Clerical Officer x 2	T 0	14077	46015	47617	49046	50517	207273
Communications Co-ordinator	<u> </u>	14077	43470	45865	48158	50565	195255
Travel & Subsistence	9930	17206	22990	23680	24390	25122	123317
Finance Mgr	17764		19958	18896	19463	20047	120744
Travel Fin Mgr	1143		2205	2271	2339	2409	10905
, and the same of	0	0	0	0	0.	0	0
Annual Report/P. R.	Ö	3850	6322	6511	6706	6908	30298
Courses/Conferences	9192	3702	10931	11259	11596	11944	58624
Mgt Board Meeting Expenses	<u> </u>	1637	6299	6488	6682	6883	24905
Printing/Stationery	1751	516	2519	2595	2673	2753	12807
Telephones/postage	2258	2963	3149	3244	3341	3441	18396
Rent/HLP/Cleaning	2118		3464	3568	3675	3785	19999
Website Hosting/AOL	0	385	2267	2336	2406	2478	9871
AUDIT	0	0	4759	4901	5049	5200	19908
Miscellaneous	0	9510	6299	6488	6682	6883	35860
Webpage	0	6738	16363	0	0	o	23100
Equipment/Computers	0	4620	40040	7700	7700	7700	67760
Information Systems	0	0	4620	7700	7700	7700	27720
Creative Projects	0	0	23100	23100	23100	46200	115500
Total	98831	195188	372041	337264	349913	385136	1738372
NWHB/WHSSB	-						
CAWT Support Officer	0	8011	49903	52573	55202	58047	223736
Travel & Subsistence	ŏ	1540	9448	9731	10023	10324	41066
Other Expenditure	Ö	231	945	973	1002	1032	4184
Total	0	9782	60295	63278	66228	69403	268986
NETID/OHOOD						-	-
NEHB/SHSSB		40000	4000				
CAWT Support Officer	14752	40353	49903	52573	55202	58047	270829
Travel & Subsistence	3080		9448	9731	10023	10324	48837
Other Expenditure	0	0	945	973	1002	1032	3953
Total	17832	46583	60295	63278	66228	69403	323619
Total Running Costs	116663	251553	492632	463819	482368	523942	2330978
Finance Support		0	15025	14146	14712	15980	59864
ICT Support		0	8473	7978	8297	9012	33760
HR Support		5082	6601	6215	6464	7021	31383
Sub Total	0	5082	30100	28339	29473	32013	125007
l						t	4.4554
Less Gap Funded	-98831	-48678			[		-147509

# TABLE 2 INTERREG PROJECTS STERLING

APPROVED	Y.E.	Ý.E.	Y.E.	Y.E.	Y.E.	Y.E.	TOTAL
PROJECTS STERLING	Dec 03	Dec 04	Dec 05	Dec 06	Dec 07	Dec 08	.0
	£	£	£	£	£	£	£
Steering to Safety	118368	157824	157824	47024			481040
Community Development	3500	56360					59860
Worker Derg Finn							
Risk Assessment etc		107690	107690	109390			324770
sex offenders							
- '' B'	70.400	-	20.100				407040
Community Pharmacy	70480	93970	23490		-		187940
Diabetes	<del>-</del>						
Protection of Vulnerable							
Adults and needs							
assessment	84180	112240	28060				224480
Emergency Planning &							
Response x 4 Boards	20000	117800	104300				242100
Cross Border Out of Hours	67000	220000	153410	<del>-</del>			440410
Cross Border Out of Hours	67000	220000	153410		_		440410
Mobile Catheterisation							
Services	94740						94740
ICT Project grade 5	35775	31700	31700	7918			107093
F&CC Planning Project	35000	70000	70000	40831			215831
F&CC Fostering Project			134760		_		134760
Communicable Diseases	61860	81860	20000		-		163720
Smoking Cessation			133875	133875			267750
				1,54414			
Cardiovascular Nursing	_		50000	112000	112000	69950	343950
Elderly Project				110000	110000		220000
Liderly Floject				110000	110000		220000
Oral Health	50000	75000	25000				150000
Training initiatives			161250	161250			322500
Transing made 4400			101230	,31230			
Health Impact Assessment	25000	80000	53250				158250
			<del> </del>				
TOTAL	665903	1204444	1254609	722288	222000	69950	4139194
TOTAL	665903	1204444	1254609	722288	222000	69950	41

# TABLE 2(A) INTERREG PROJECTS EURO

APPROVED	Y.E.	Y.E.	Y.E.	Y.E.	Y.E.	Y.E.	TOTAL
PROJECTS EURO	Dec 03	Dec 04	Dec 05	Dec 06	Dec 07	Dec 08	
	€	€	€	€	€	€	€
Stooring to Safety	182287	243049	243049	72417			740802
Steering to Safety	102201	243049	243049	12417	<del></del>		740802
Community Development	5390	86794					92184
Worker Derg Finn			-				
Risk Assessment etc	_	165843	165843	168461			500146
sex offenders		_					
Community Pharmacy	108539	144714	36175	_		-	289428
Diabetes							
Protection of Vulnerable	-				. <u>-</u>		
Adults and needs							
assessment	129637	172850	43212				345699
Emergency Planning &							
Response x 4 Boards	30800	181412	160622				372834
Cross Border Out of Hours	103180	338800	236251				678231
Mobile Catherterisation							
Services	145900			_			145900
ICT Project grade 5	55094	48818	48818	12194			164923
F&CC Planning Project	53900	107800	107800	62880			332380
F&CC Fostering Project			207530	-			207530
Communicable Diseases	95264	126064	30800				252129
Smoking Cessation	_		206168	206168	_		412335
Cardiovascular Nursing			77000	172480	172480	107723	529683
Elderly Project				169400	169400		338800
Oral Health	77000	115500	38500				231000
Training initiatives			248325	248325			496650
Health Impact Assessment	38500	123200	82005				243705
TOTAL	1025490.6	1854843.8	1932097.9	1112324	341880	107723	6374359

# TABLE 3 PEACE II APPROVED PROJECTS STERLING AND EURO

APPROVED	7			
PROJECTS STERLING	Y.E.Dec02	Y.E.Dec03	Y.E.Dec04	TOTAL
	£	£	£	£
Community Feasibility Study	0	52748	11812	_64560
Mental Health Carers	0	52748	11812	64560
Cognitive Therapy Training	11450	143673	136724	291847
Suicide Study	0	113575	116275	229850
TOTAL	11450	362745	276623	650817
PROJECTS EURO	Y.E.Dec02	Y.E.Dec03	Y.E.Dec04	TOTAL
	€	€	€	€
Community Feasibility Study	0	81232	18191	99423
Mental Health Carers	0	81232	18191	99423
Cognitive Therapy Training	17633	221256	210555	449444
Suicide Study	0	174906	179064	353969
TOTAL	17633	558627	426000	1002258

# TABLE 4 IN-SERVICE TRAINING PEACE II (5.4) STERLING AND EURO

TRAINING PROJECTS				
PEACE 11 (5.4) STERLING	Y.E.Dec03	Y.E.Dec04	Y.E.Dec05	TOTAL
	£	£	£	£
Adult Survivors	120760	107900	2000	230660
Nurse Training	129500	125400	129872	384772
Cross Border MTO Training	63750	61988	2000	127738
Learning Disability				
Vocational Assessment				
and Training Resources	135492	133848	2000	271340
Home Support Worker Training	144380	153380	27000	324760
TOTAL	593882	582516	162872	1339270
TRAINING PROJECTS	<del> </del>			
PEACE 11 (5.4) EURO	Y.E.Dec03	Y.E.Dec04	Y.E.Dec05	TOTAL
	€	€	€	€
Adult Survivors	185970	166166	3080	355216
Nurse Training	199430	193116	200003	592549
Cross Border MTO Training	98175	95461	3080	196716
Learning Disability	<del> </del>	_		
Vocational Assessment	<u> </u>			
and Training Resources	208658	206126	3080	417864
Home Support Worker Training	222345	236205	41580	500130
TOTAL	914578	897074	250823	2062476

TABLE 5
MANAGEMENT DEVELOPMENT PEACE II (5.4)
STERLING AND EURO

TRAINING PROJECTS	$\neg$		O LEKELIN	O . III . D 22 C
PEACE 11 (5.4) STERLING	Y.E.Dec03	Y.E.Dec04	Y.E.Dec05	TOTAL
	£	£	£	£
NWHB Action Learning				
Programme for Managers	221050	214250	0	435300
NEHB Personal Development				
Planning Initiative	119560	94860	0	214420
NEHB Working together			-	
in partnership	73513	0	0	73513
Westcare Business Svs				
Training trainers	60900	60900	0	121800
Westcare Business Svs.				
Women in Management	39125	39125	0	78250
Westcare Business Svs	-			
Public Health Nursing Leadership Prog.	83000	Ō	0	83000
NWHB Service Delivery and Organisation			<u> </u>	
of Education Training and Development				
Research Project	88000		_	88000
TOTAL	685148	409135	0	1094283
TRAINING PROJECTS				<u> </u>
PEACE 11 (5.4) EURO	Y.E.Dec03	Y.E.Dec04	Y.E.Dec05	TOTAL
	€	€	€	€
NWHB Action Learning		_		
Programme for Managers	340417	32994 <u>5</u>	. 0	670362
NEHB Personal Development				
Planning Initiative	184122	146084	0	330207
NEHB Working together				
in partnership	113209	0	0	113209
Westcare Business Svs				
Training trainers	93786	93786	0	187572
Westcare Business Svs.	<u> </u>			
Women in Management	60253	60253	0	120505
Westcare Business Svs				
Public Health Nursing Leadership Prog.	127820	0	_ 0	127820
NWHB Service Delivery and Organisation	<b> </b>			·
of Education Training and Development				
Research Project	135520			135520
TOTAL	1055127	630068	0	1685195

# TABLE 6 PEACE II (5.2) APPLICATIONS STERLING AND EURO

APPLIED FOR				
PROJECTS STERLING	Y.E.Dec02	Y.E.Dec03	Y.E.Dec04	TOTAL
	£	£	£	£
Inside Out	1000	30312	29453	60765
Mental Health Promotion	95887	87325	8087	191299
TOTAL	96887	117637	37540	252065
APPLIED FOR				
PROJECTS EURO	Y.E.Dec02 €	Y.E.Dec03	Y.E.Dec04 €	TOTAL €
	45.6			
Inside Out	1540	46680	45357	93580
Mental Health Promotion	147666	134481	12454	294600
TOTAL	149206	181161	57811	388180

## TABLE 7 OTHER PROJECTS STERLING AND EURO

#### OTHER PROJECTS SEEKING FUNDING

	£	€
Oral Health Phase 11	59000	90860
Community Pharmacy Drugs	178629	275089
Business Manager AGH/NWHB	100000	154000
Public Health Access Study	91196	140442
Networked Health Services Feasibility Study*	100000	154000
Renal Services Quality Project*	252000	388080
SHO Anaesthetics*	60000	92400
Teenage Pregnancy*	200000	308000
Cross Border Nurse Led Dermatology*	100000	154000
HIV/AIDS Project*	200000	308000
Rare Disabilities*	200000	308000
Brain Injury*	200000	308000
TOTAL	1740825	2680871
LESS INTERREG BALANCE	-561796	-865166
NET FUNDING REQUIREMENT	1179029	1815705

### **PARTNERSHIP IN ACTION**



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# CHAPTER 7 QUALITY ASSURANCE AND EVALUATION



#### 7. QUALITY ASSURANCE AND EVALUATION

CAWT regards quality assurance and evaluation as key elements of successful project management and ones that must be addressed from the outset. Structured project management methodology provides benefits through the controllable use of resources, the ability to plan business and minimise project risk more effectively.

Prince2, (PRojects IN Controlled Environments) is such a methodology, covering the organisation, management and quality control of projects. It is a de facto standard, widely used in the public sector, including the four Health and Social Services Boards in the CAWT region. CAWT will use this methodology and templates based on its suggested management documents, as a basis for quality assurance and evaluation of all of its projects contained within Chapter 5.

#### BENEFITS:

- Established terms of reference as a prerequisite to the start of a project
- Agreement on the required quality at the outset and continuous monitoring against those requirements
- · Division of project into manageable stages for more accurate planning
- Established communications channels between the project management team and the rest of the organisation
- Defined structure for delegation, authority and communication
- Ensure that resource commitment from management is part of any approval to proceed
- · Provide regular, but brief, management reports

#### FUNDAMENTAL PRINCIPLES

#### 7.1 Establishing the Project Organisational Structure

Every project has need for direction, management, control and communication. Establishing an effective organisational structure for the project is crucial to its success.

 A Project Executive or project "champion" will be identified from the project's stakeholders, usually one of the subgroup members. He/she will be a member of the Project Board.

- The Project Board will comprise the members of the subgroup, CAWT representatives and other individuals whose contribution is valuable to the success of the project. The Project Board are the decision makers and are responsible for the commitment of resources to the project such as personnel, cash and equipment.
- A Project Manager will be appointed to oversee the day-to-day implementation of the project. The project manager has responsibility for the delivery of all project products.

#### 7.2 Project Initiation

A key success factor of any project is that the outcome of the project conforms to the customer or user's quality expectations. This will only happen if these expectations are both stated and agreed at the beginning of the project, together with the means of assessing achievement of these within the final product.

In the CAWT projects this will be achieved through the assembly of a **Project Initiation Document (PID)**, which will act as a focal point at which all information relating to the 'what, why, who, how and when' of the project is gathered for agreement by the key stakeholders and then for guidance and information for those involved in the project.

In addition the PID provides the following:

- A benchmark for all the other management decisions that need to be made during the life of the project
- An information base for everyone who needs to know about the project
- A plan for the next stage for Project Board approval.

#### 7.3 COMMUNICATIONS PLAN

For senior management of the project, PRINCE 2 uses the 'management by exception' concept, i.e. the Project Board agrees a plan, and then lets the Project Manager proceed unless something is forecast to go wrong. Senior managers are kept fully informed of the project status without having to attend frequent, time-consuming meetings.

To enable this process:

• **Highlight Reports** will be completed and forwarded to the Project Board by the Project Manager at regular agreed intervals.

 A Risk Log will be initiated as part of the PID and will be updated by the Project Manager on a regular basis. It is essential that any risks or issues be brought to the attention of the Project Board as soon as possible for assessment and resolution. Agreed tolerance levels for deviations from plan will be agreed and documented.

#### 7.4 Configuration and Project Files Management

The project manager will have responsibility for the following. He/she will:

- Institute a system of storing and retrieving all information relevant to the management of the project, the quality checking work done with the products themselves.
- Establish what information will be produced throughout the project and will need filing.
- Establish what products will be produced throughout the project and the need for associated storage.
- Establish filing systems that are appropriate for the identified filing and retrieval needs.
- Forward copies of relevant monitoring reports to the CAWT Resource Unit during the life of the project.
- Return the complete project master file to the CAWT Resource Unit for retention once the project has been completed.

#### 7.5 Project Plan and Quality Assurance

Overall responsibility for internal project assurance rests with the Project Board.

#### **Project Stage Level**

- Projects will be divided into stages. These stages will be determined by a) how far ahead it is sensible to plan. b) Decision points within the project when agreement must be reached about the best way forward.
- Before the start of each stage a **Stage Plan** will be completed by the Project Manager, which will identify the deliverables/products for the stage.
- Methods to measure the quality of each product will be decided.
- The Project Board will select appropriate personnel and in conjunction with the Project Manager, develop a schedule to test the quality of each product.
- The Project Board will formally sign off products meeting the required standard.
- At the close of each stage an **End Stage Report** will be completed by the Project Manager and signed off by the Project Board.

#### **Exception Process**

• If a situation arises where it can be forecast that there will be a deviation beyond the tolerance levels agreed between the Project Manager and Project Board, an exception meeting will take place. At this meeting viable options will be discussed and an Exception Plan agreed. This will be written up by the Project Manager and signed by the Project Board for approval. Significant deviations from plan must be approved by the funding body where appropriate.

#### **End Project Report**

 The End Project Report documents the effectiveness of the project management processes, and how well the project has performed against its Project Initiation Documentation, including the original planned cost, schedule and tolerances.

#### **External Evaluation**

• The appropriateness of external evaluation will be assessed jointly by the Project Board and the CAWT Secretariat. This may involve academic institutions, other health board personnel and user groups, where appropriate. It is considered that in the majority of cases an internal evaluation report produced by the project manager and approved by the Project Board will be sufficient. This internal evaluation report will be based on the information produced throughout the project management process which will include an appropriate quality assurance mechanism. The extent to which the work each project has undertaken can/should be mainstreamed and how this can be done will be an important part of the evaluation of projects. All CAWT projects will be subject to some degree of external evaluation as part of the overall external evaluation of CAWT.

## **PARTNERSHIP IN ACTION**



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# CHAPTER 8 HUMAN RESOURCES





#### 8. HUMAN RESOURCES

Fundamental to the successful implementation of the CAWT Service Developments is Human Resources support. CAWT if it is to successfully deliver its Strategic and Business Plans must ensure that it has the right people, with the right competencies in the right numbers, organised and managed in the right way in order to deliver the goals and objectives of its strategy.

A Human Resources plan which will invest in training and education, devise and implement best practice employment policies and procedures, look at the balance between work-home life, establish performance management and encourages a partnership approach needs to be developed in order to ensure the sustainability and viability of CAWT as an organisation.

The CAWT Directors of Human Resources have begun to look at these issues. They have worked up service development proposals in order to initiate further work on issues of cross border mobility of the work force, management development and training for service providers.

#### 8.1 RECRUITMENT

The implementation of the CAWT Strategic Plan will mean that up to thirty posts may be created to work in projects supported with European funding.

In order to facilitate the recruitment of staff the Directors of Human Resources met to consider

- (a) Fundamental principles around recruitment.
- (b) A mechanism which would allow posts to be recruited on behalf of CAWT.

They established a number of fundamental principles to support the recruitment process.

- New posts would be trawled internally within the CAWT Boards and Trusts.
- Appointees would be seconded and their contracts would be held with their current employer.
- When appointed, underlying terms and conditions would remain the same.

The directors of Human Resources also suggested that a contract be established between CAWT and Westcare Business Services, a support agency based at WHSSB, who would evaluate jobs, support sub-groups in drawing up job descriptions, personnel specifications, advertise posts, organise interview panels, and generally facilitate a co-ordinated approach to the recruitment of staff. This arrangement has now been secured for a period of nine months in the first instance.

#### 8.2 Management Development Training

The Directors of Human Resources also realised that a key issue for any organisation is to look at the training and development needs of its employees in order to develop the skills and competencies required to meet the priorities as detailed within Strategic and Business Plans.

The Management and Learning Development Managers from the border Health Boards therefore came together to identify training initiatives which would give a structure to cross border training and development for CAWT. They subsequently had a number of meetings and planned a series of developments which respond to the deficits and common issues identified by health and social care professionals themselves. These developments are detailed in Section 5.11 (pages 87 - 92).

#### 8.3 Constraints to Cross Border Mobility

An important area which has been of concern to the Directors of Human Resources has been the constraints to cross border working which were identified in the Altnagelvin/Letterkenny Partnership Project. These are outlined in Appendix 7.

The Directors were supportive of the CAWT response to the North South Ministerial Councils Study of Obstacles of Mobility Report which amongst other things drew attention to the inability of professionally trained staff to move easily between the North and South. This has seriously inhibited joint appointments, staff rotations, placements and cross cover. The need for maximum co-operation with regard to the recognition of professional qualification and administrative issues around the comparable gradings of staff, conditions of employment, job descriptions and pay scales were also highlighted.

A method for dealing with these constraints together with a framework for looking at all Human Resources cross border issues is proposed in the Service Development Proposal detailed in Chapter 5.10 (pages 83-84).

## **PARTNERSHIP IN ACTION**



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CHAPTER 9 ICT





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## 9. Information, Communications and ICT

#### 9.1 Information

The CAWT Resource Unit aspires to act as a central information point on matters relating to cross border cooperation on the ground, especially within the CAWT region, but also in the whole island of Ireland when relevant to the achievement of the underlying objectives of CAWT.

A reference library of all CAWT documentation, including project documentation and sub-group minutes, and all relevant cross-border health matters will be established in the CAWT Resource Unit. Where possible this will be made available over the Internet so that the chain of information does not depend on the availability of a limited number of staff.

Information is the lifeblood of any organisation and this is particularly true of CAWT. The need to have ready access to relevant information to support the work of CAWT is recognised and the CAWT Resource Unit throughout the life of this business plan will pursue the objective of ensuring that the necessary information is readily available and accessible. CAWT's Communication and ICT Strategies will support this goal.

As documented in Chapter 4, CAWT is becoming increasingly complex with a wide network of partner organisations, funders and links with other cross border organisations within the island of Ireland and beyond. There is increasing public and political focus on cross border working and on the work of CAWT. For these reasons there is a need for a co-ordinated approach to the effective gathering and dissemination of relevant information to support the work of CAWT and to ensure consistency in key messages coming from everyone involved in CAWT.

### 9.2 COMMUNICATIONS

Effective communication is central to the achievement of CAWT's Strategic Objectives

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CAWT's Service Priorities Document 'Moving to the Millennium' recognised the need to improve internal and external communications. Improved communication was also one of the main issues arising from the independent evaluation of CAWT undertaken by the Centre for Cross Border Studies. Their report, "From Concept to Realisation: an Evaluation of CAWT", made a number of recommendations which require action from both the individuals

involved in CAWT and from CAWT as an organisation. In addition, communications is one of seven business areas identified within CAWT's Strategic Plan 2001-2004.

#### STRATEGY CONTEXT

In October 2000, CAWT appointed a Communications Co-ordinator on a temporary basis, with the specific remit of improving internal and external communications. The need for a CAWT communications strategy was identified, and early in 2001, a Communications Sub-group was established comprising communications and public relations personnel from the eleven organisations involved in CAWT. The primary objective of the sub-group was to develop a communications strategy for CAWT.

#### **GUIDING PRINCIPLES**

- To secure communication and dissemination of information about CAWT and its progress.
- To establish links with and raise awareness of CAWT within Boards, Trusts and health care organisations, north and south of the border, beyond those already actively involved in CAWT.
- To exploit new technology (e.g. video conferencing) to enhance communication for the benefit of those people involved in CAWT.
- To develop protocols and procedures for communicating effectively with CAWT's key target groups.
- To explore best practice and share expertise on communications issues.
- To enhance CAWT's intrinsic influencing role in securing support from relevant target groups.

The strategy also seeks to ensure that communication within CAWT is open and honest, shows respect for diversity and is clear, comprehensive, unambiguous, jargon free and timely. By underpinning communication with these principles, and at all times, respecting the confidentiality of individuals and groups, as appropriate, the strategy encourages mutual understanding among all the target groups so as to achieve the overall aim.

#### TARGET GROUPS

There is a range of existing and potential target audiences for the CAWT message. The following list gives an indication of the diversity of these groups.

#### INTERNAL

- · Four CAWT Boards
- Seven CAWT Trusts
- CAWT Sub-groups
- CAWT Management Board
- CAWT Secretariat

#### Individual organisations involved in CAWT

- Management
- Staff Organisations
- · Professional Bodies

#### EXTERNAL

- General public, service users and public sector bodies
- DHSSPS
- DOHC
- SEUPB
- NSMC
- Other North South Networks e.g. Border Corridor Groups
- · Other Boards and Trusts outside CAWT Region
- Community/Voluntary Groups
- Health support groups, e.g. Action Cancer, Irish Heart Foundation
- GPs
- · Funders and potential funders
- Media
- MLAs
- TDs
- Local Councillors
- Health & Social Service Councils
- Other Public Sector Bodies e.g. Education, Housing, Local Councils etc.
- Research bodies and institutions

#### **EXTERNAL COMMUNICATIONS**

As an organisation, CAWT has developed significantly in recent years and the need to increase the understanding and awareness of CAWT and cross border working to a wider audience, local, regional, national and international has been identified.

CAWT currently produces an annual report and a quarterly newsletter and meets with and makes presentations to key agencies. In addition, some Boards and several Trusts include a section or article on CAWT in their annual reports.

#### PRIORITY AREAS

The following are the agreed priority areas for development: -

- The process for forwarding and sharing media information must be clearly communicated throughout the CAWT organisation, with local and regional media advised of key events and a list of CAWT information, including the annual report.
- In addition, the distribution of information leaflets, its newsletter "CAWT in Action" and other promotional material, will be extended to include target groups given in the previous section. The development of a new website (see I.C.T Section) will also greatly assist in promoting CAWT and its work.
- Promotional material for external audiences, for example the media, general public, local representatives, should be accessible and written in a clear, unambiguous language. Guidelines on the production and dissemination of written information will be developed to ensure accessibility to all and to assist sub-groups for example, event checklists, media briefs, media relationships and contacts.

This method of promoting the work of CAWT will be further explored with other partner organisations who also produce information / communication material for their staff and local community, i.e. annual reports, staff newsletters.

#### Internal Communications

Action is being taken to improve communications between the various elements of the CAWT organisations. Currently Sub-groups meet on a regular basis, and in some cases, notes of these meetings are taken and forwarded to the CAWT Resource Unit. In addition, Boards organise regular update meetings of people involved in CAWT. Conference/Seminars are also held to promote the work of CAWT sub-groups and projects. CAWT produces an annual report and a quarterly newsletter. There is input to some group meetings from a member of the Secretariat and / or the Principal

Executive Officer. These practices will be developed further to secure maximum benefit from internal communications. Some of the actions being taken are detailed below.

- There needs to be a clear understanding within sub-groups and project development staff of the importance of communication and the PR function, and of the benefits of information creating and sharing. The Communications Sub-group therefore, will provide written and/or oral briefs to sub-groups and project development staff on the role and importance of the PR element when organising events and promoting the work of CAWT.
- Guidelines for the sub-groups and project development staff should be shared and updates on their operational plans provided. These guidelines will be drawn up on how, when and to whom information is to be forwarded. It is also intended that CAWT and Sub-groups will develop a calendar/timetable of events linked to their operational/project plans, and that information will be made available in advance of these events.

The CAWT directory, providing contact details of the CAWT Management Board, Secretariat and Sub-groups will be updated and distributed within CAWT on an annual basis. Future publications of the CAWT Directory will include contact details of project development staff as new projects come on stream.

A full action plan for implementing the communications strategy is detailed in the Strategy. This includes the appointment of a Communications Coordinator to take the work forward.

## 9.3 Information Communications Technology (ICT)

Information & Communications Technology (ICT) will play a pivotal role in achieving the objectives of CAWT by providing an infrastructure to support CAWT's strategic plan, strengthen communications and enhance individual initiatives undertaken.

The recently developed CAWT ICT Strategy offers the blueprint for a way forward and describes the strategic direction for the development of ICT in the CAWT organisation for the period 2002 - 2005. The overriding aim of the strategy is to build a solid foundation for useful cross-border ICT developments and initiatives.

#### STRATEGY CONTEXT

The Strategy takes into account the current ICT environment in health care within CAWT's own organisations and nationally. This environment includes the Northern Ireland ICT Strategy for Health and Personal Social Services and the RoI National Health Informatics Strategy, both due to be published in the near future. The strategy also acknowledges that whilst E-Health is viewed as a valuable future vehicle in the delivery of healthcare, the foundation stones upon which initiatives need to be constructed do not as yet exist. The absence of such foundations clearly limits current opportunities to embrace the full potential of E-Health.

#### **GUIDING PRINCIPLES**

- The CAWT ICT Strategy will complement the ICT Strategies of participating organisations.
- It takes cognisance of existing legal and ethical frameworks in both jurisdictions.
- The strategy will be equitable to all participating partners.
- Through the use of ICT, cooperation, sharing of information and communication will be promoted among members, sub-groups and project development staff.
- The use of ICT will encourage mutual understanding amongst professional groups, communities and organisations.
- The confidentiality of information relating to residents of the CAWT area will be respected and protected.

#### **PRIORITY AREAS**

Following discussions with participating Health Board and Trust ICT representatives, five themes were agreed as priority areas:

- Communications
- Resource Unit Support
- Project Support
- Standards
- Training

#### Communications

The impact of the Internet and e-health on communications and health-related information offers tremendous opportunities to CAWT to extend both its local and its global reach. As an organisation, CAWT has developed significantly in recent years and the need to improve internal and external communication has led to the decision to design a comprehensive CAWT website to include all aspects of its work.

#### CAWT WEBSITE

It has been agreed that a simple, flexible, user-friendly website will be designed which will be accessible by all including people with disabilities, such as visual impairment. The website will take account of the complexity of the CAWT organisation and its internal and external networks and will act as a "One Stop Shop" for information on CAWT.

#### • Communications Infrastructure

The interface between sub-groups and the central ICT resource, provided by the ICT Sub-group, needs to be strengthened. This is particularly true of the essential relationship between all Sub-groups and the Human Resources and Communications Sub-groups. To intervene with greatest effect, co-ordinated action is also needed to develop partnerships and alliances with associated agencies both within CAWT, its region and elsewhere.

#### Video Conferencing, Teleconferencing and Email

Problems of isolation, peripherality and rurality are endemic in the CAWT region. Videoconferencing, teleconferencing and e-mail are technologies now widely available, which can often provide a solution to such issues. Documentation & training materials to support the use of these technologies will be developed and made available to members of the CAWT organisation.

#### RESOURCE UNIT SUPPORT

The Resource Unit has the central role in co-ordinating the work of CAWT. However, its staffing resources are limited and dedicated ICT staff need to be appointed to enable the implementation of the ICT strategy and to assist in operationalising CAWT's second Strategic Plan (2001-2005).

An ICT Officer will be appointed to support the CAWT Executive Officer who has a regional remit for ICT in conjunction with the ICT Sub-group. In the first instance the ICT Officer will work closely with the website providers to initiate and develop the website. In addition an ICT Support Officer will be appointed to support the ICT Officer and provide technical expertise for

the CAWT Resource Unit and proposed satellite offices. Both officers will be involved in policy/guideline production, training of CAWT staff and support of projects.

#### PROJECT SUPPORT

Within CAWT, as in other organisations, projects are a means to move a specific area of interest forward with identified resources. A large number of proposed CAWT initiatives include an ICT element, either as a research tool or as an actual product.

ICT opportunities/issues will be considered at the initiation of projects and become an integral part of all CAWT Project Definition documents. Innovation in ICT will be encouraged in CAWT developments and presented as a model of best practice.

The newly developed CAWT website will be designed so that it will provide a useful and important tool for project management and support.

#### STANDARDS FOR ICT

It is important that the people and organisations that make up CAWT are aware of relevant standards and policies whilst working in CAWT's interests. Part of the role of the ICT Officer will be to ensure that staff involved in such work will be made aware of standards for data collection and ensure that they are legally able to exchange and share information for the benefit of clients.

In relation to standards the following cross-border policies and guidelines will be developed and promoted:

- CAWT ICT Security Policy (including use of Internet and Email).
- CAWT Data Confidentiality Policy.
- CAWT Data Protection/Freedom of Information Registration.
- Guidelines for Use of ICT in CAWT Projects.
- Guidelines on Adherence to ICT International Standards

#### 9.4 TRAINING

The geographical spread of the CAWT region has already been identified as a barrier to effective communication. Training in technologies that help surmount such barriers is essential.

#### Website Management

Familiarity with the Internet as a communication tool will be key to the maintenance of the CAWT website. Training for content management will be provided to key members of each CAWT sub-group, to the CAWT secretariat and to the CAWT project managers to enable the CAWT website to become an effective communication tool for the whole organisation. Issues such as data protection awareness also need to be incorporated into this training to ensure CAWT's compliance with data protection and freedom of information legislation.

#### VIDEOCONFERENCING AND TELECONFERENCING

Both these technologies are available in all of the CAWT areas. To date, however, they have been under-utilised and this is due in part, to staff being unfamiliar and therefore lacking confidence in their use. Documentation and training materials to support the use of these technologies will be developed and made available to members of the CAWT organisation to ensure more widespread and appropriate use and to enhance communication in the CAWT region.

# • ICT Skills Development and E-learning for Professional and Non-Administrative Staff\_

Such training has the power to contribute positively to developing conditions for future E-Health initiatives and was an area recommended for cross-border collaboration in the CAWT/Ernact 'Digital Economy Strategy and Action Plan — HealthCare' commissioned from Capita. This is particularly true in the use of the Internet for communication and research purposes. However, in order to be effective, training in ICT must be combined with opportunity to use relevant technologies.

The ICT Sub-group will review current Board and Trust strategies on Internet access and will encourage the training of staff in the use of relevant applications. The group will also promote an increased allocation of computers for Internet access at key locations throughout the Boards and Trusts.

The development and implementation of CAWT's Communications and ICT Strategies are essential to support the work of CAWT. A supporting infrastructure is essential if the objectives of the CAWT strategy and operational/business plan are to be achieved. There is a clear need to provide the additional communications and ICT staffing and other resources as outlined above.

## PARTNERSHIP IN ACTION



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## **APPENDIX 1**





## cooperation and working together

for health gain and social well being in border areas

# DISCUSSION PAPER LEADING UP THE DEVELOPMENT OF THE NEXT CAWT STRATEGIC PLAN

#### 1.0 **INTRODUCTION**

- 1.1 Ireland, both North and South, is undergoing a period of quite extraordinary transition political, economic, social and cultural. New opportunities are constantly opening up and old certainties and poor structures and infrastructures are no longer being tolerated. This is the overall context within which Co-operation and Working Together is operating. It means that CAWT as an organisation has to face the question as to how it needs to develop to meet these challenges over the next five years.
- 1.2 These challenges include the development of Regional Strategies such as Cardio Vascular and Cancer Services and the National of Review of Ambulance Services in the Republic and Public Health Strategy Development and the Reviews of Acute Hospital and Ambulance Services in Northern Ireland. Board specific reviews include the forthcoming Review of Acute Services in the North Western Health Board and the Review of Consultant Manpower and Specialist Services in the North Eastern Health Board.

The Belfast Agreement has also identified very clear areas for cross border working in the areas of accident and emergency services, planning for major emergencies, cancer research, health promotion and co-operation in the purchase of high tech equipment.

/CAWT Corporate Plan/2001

In addition, we have the establishment of two North/South Implementation Bodies – the Special EU Programmes Body and the Food Safety Promotion Board as well as the setting up of the All Ireland Institute of Public Health.

#### 2.0 <u>CAWT's ACTIVITIES IN 2000 WITHIN THIS FRAMEWORK</u>

- 2.1 CAWT has achieved much during the Millennium year. The highlight was a presentation to the North/South Bilateral Ministerial Meeting in November when the Ministers for Health, Social Services and Public Safety, Bairbre de Brun, and the Minister for Health and Children, Michéal Martin, paid tribute to the important contribution made to North South co-operation by CAWT since its inauguration.
- 2.2 Other significant initiatives that have been undertaken in 2000 include:
  - Developing a Corporate Priority Document Meeting the Millennium.
  - Commissioning the Centre for Cross Border Studies to carry out an evaluation of CAWT.
  - Hosting a major seminar "Making Connections" for senior staff in CAWT.
  - Organising a workshop for Board and Trust representatives to identify key projects.
  - Being audited successfully by the EU Regulations Unit, Dublin and the Northern Ireland Audit Office.
  - Developing Public Health and IT Agendae.
  - Appointing a Communications Co-ordinator.
  - Initiating the development of seventeen Creative Cross Border Projects.
  - Producing submissions for the Northern Ireland Hayes Review of Acute Services and the Northern Ireland Public Health Strategy.
  - Engaging with political parties regarding the work of CAWT.
  - Fostering links with cross border bodies such as Ernact.
  - Meeting and liaising with the Special EU Programmes Body, DHSSPS and DOHC in relation to Peace II and Interreg III monies.

/CAWT Corporate Plan/2001

2.3 The last meeting with the Special EU Programmes Body shaped the internal discussions within the CAWT Secretariat as to the future direction and organisational structure of CAWT, as it continues to strive to embed its aims and objectives within the existing work of the Boards and Trusts. This direction will be influenced by the wider health and social care agenda, the work done by CAWT to date and also to some extent by the amount of and the way funding is allocated in the next phase of the EU Special Support Programme for Peace and Reconciliation.

### 3.0 <u>DEVELOPMENT OF CAWT STRATEGIC PLAN</u>

3.1 There have been a number of planning initiatives during the year including the CAWT Seminar in June and follow-up Workshop in July. The CAWT Secretariat met to consider the outcomes of these together with a review of the strategic plan-Bridge to the Future 1997-2001 - and the corporate priority document - Moving to the Millennium. The purpose of the meeting was to agree major themes, specific projects and ongoing co-operation work areas which could then be discussed with the Chief Executives and inform the development of the next strategic and operational plan.

## 4.0 MAJOR THEMES – BOARDS' PERSPECTIVES

The Secretariat members identified main themes around each Board's priority development areas for discussion.

## 4.1 North Eastern Health Board

Primary Care, Acute Services (bilateral basis eg. nephrology, teleradiology), Emergency Planning. Primary Care to be seen in its broadest sense and to include community district and psychiatric nurses.

## 4.2 Southern Health and Social Services Board

Out of Hours Service, Primary Care, Emergency Planning.

### 4.3 North Western Health Board

Emergency Response/Accident and Emergency Services, Acute Services, Primary Care.

#### 4.4 Western Health and Social Services Board

Acute Reviews, Primary Care, First Responder Services.

- 4.5 In addition, it was suggested that Public Health/Health Promotion could be included as a main theme as it crosses all areas and also is identified within the Belfast Agreement. There would also be linkages with both the Food Safety Board and the All Ireland Institute of Public Health.
- 4.6 Within each main theme it is possible to identify areas that CAWT will focus on:
  - (a) Primary Care main areas will be:
    - Development of cross border Out of Hours service/feasibility study.
    - Implementing the findings of the Belcoo/Blacklion needs assessment.
    - Developing the IT agenda through the process of data mining in general practices and pharmacies.
    - Further training for primary care staff, eg. NVQ's, disease management, health promotion etc.
    - First Responder Services.
  - (b) Acute Services main areas will be:
    - Discussion of and agreement on which areas of the Triangle feasibility study should be implemented
    - Development of a process to implement the Altnagelvin/Letterkenny feasibility study

- Consideration of the recommendations from the Hayes Review of Acute
   Services and the North Western and North Eastern Health Board's Reviews.
- Managed Clinical Networks.

#### (c) <u>Health Promotion</u> – main areas will be:

- Design and implementation of a Road Safety Project using educational programmes, environmental changes and enforcement issues.
- Implementation of the CAWT Clearing the Air Smoking Project.
- Development of a model for health promotion work to allow the development of a database for good practice and information sharing in order to integrate health promotion into the mainstream of health and social care.

#### (d) Public Health - main areas will be:

- Research Project into equity and access issues around cardiology services.
- Consideration of the recommendations for Investing for Health.

### (e) Accident and Emergency Services

 Production of a paper on cross border Accident & Emergency Services for the North/South Ministerial Council.

## (f) Emergency Planning

- Liaison with the recently established North/South Emergency Planning Group.
- Consideration of the two Reviews of Ambulance Services.

## 5.0 **CAWT PROJECTS**

5.1 In addition to the areas highlighted under 4.0, the following projects will be developed:

- (a) Feasibility studies in the areas of community care and mental health.
- (b) Training programmes in a number of areas including:
  - prevention of sexual abuse
  - sterilisation/risk management
  - multidisciplinary training for professions working in the area of cancer
- (c) Family and Child Care Project
  - feasibility study into residential facilities for young people with challenging behaviour
  - development of family support services
  - development of diversionary schemes
- (d) Older People Projects
  - development of a framework for the involvement of statutory, independent and voluntary sectors
  - implementation of findings from the Derg Finn Elderly Needs Project
- (e) Mental Health
- (f) Learning Disability

## 6.0 ONGOING COOPERATION WORK

6.1 Work would continue across the range of sub-groups. This would include the development of resources, organisation of seminars, conferences, and joint training initiatives.

6.2 It will be necessary to review the range and function of the sub-groups and to ensure the establishment of Mental Health, Older People, PR and Physical Disability sub-groups.

#### 7.0 <u>CAWT ORGANISATIONAL STRUCTURE</u>

7.1 The Secretariat discussed the options, which would allow CAWT to develop but would not create a top-heavy structure, which could not be maintained. This is outlined in Appendix 2. The main development would be that the Boards would absorb the cost of their own Secretariat officer and that two support officers would be appointed for (a) North Eastern Health Board/Southern Health and Social Services Board, and (b) North Western Health Board/Western Health and Social Services Board.

The role of these officers would be to work closely with and support the Secretariat members in maintaining and developing the bilateral links already established with Boards and Trusts, link closely with the sub-groups and have a CAWT wide remit for either information technology or communications.

## PARTNERSHIP IN ACTION



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

## APPENDIX 2



# CO-OPERATION AND WORKING TOGETHER SERVICE DEVELOPMENT PROPOSAL



Details of Sub-Group	
Sub-Group Title	
mail addresses of two	ames, job titles, work location, telephone number and endemembers of the sub-group — one from each side of the owledge of the proposed service development.
Name:	
Telephone No:	
E-Mail Address:	· · · · · · · · · · · · · · · · · · ·
·	
Name:	
Telephone No:	

<u> </u>		
SERVIO	CE NEED	
What sp	pecific service need is this proposal designed to address and how in Boards and CAWT's Strategic Plan?	v doe
-		
	ther options for addressing the service need/issue were ident	tified
consider	red	

Why	nas the proposed a	pproach been s	selected above	the others consider	red?
			<del></del>		
object		rder dimensio	ns, main activ	nent giving the ai	

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help pron	iote reco ies in the	horder r	egion						
communit	ies in the	border re	egion.						
communit	ies in the	border re	egion.						
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communit	ies in the	border	egion.						

8.	What are the identified benefits/value added to Boards and Trusts arising from the cross-border collaborative nature of this development?					
9.	Please indicate how and by whom this service development will be managed.  NB: Any additional resource requirements in relation to the management, administration and finance support for the development should be included in Resource Requirement (Section 13).					
10.	Please indicate what support if any is needed from other sub-groups, in particular Human Resources and ICT and indicate how you would intend involving them.					

the project (please tick the appropriate bo	x).	
Have any effect on the environment  If yes please give details:	Yes	N
Take account of targeting social need/	Yes	N
If yes please give details:		
Take account of equality legislation  If yes please give details:	Yes	N
	Have any effect on the environment  If yes please give details:  Take account of targeting social need/ anti poverty agenda.  If yes please give details:  Take account of equality legislation	Have any effect on the environment  If yes please give details:  Yes  Take account of targeting social need/ anti poverty agenda.  If yes please give details:  Yes  Take account of equality legislation  Yes

	(iv)	Take account of the Freedom of Information legislation.	Yes	No
		If yes please give details:		
13.	RES	SOURCE REOUIREMENTS		
13.1		se indicate the period of time for which funding is an asservice development.	initially being	g sought
	Start	Date:		
	End l	Date:		
	Dura	tion Months:		
13.2		the main activities associated with the developmen irces/funding.	it which requi	ire
13.3	Detai	il the staffing requirements of the development (fu	ll-time/part-t	ime etc.).
		<u> </u>		

## 13.4 Detail the revenue costs of the development. Costs to be expressed sterling/ sterling equivalents. ROI costs should be converted to sterling at a rate of 1.30:1.00

Description	Euro	NI £	Total £
Salaries (detail under 13.5)			
Travel			<del></del>
Training costs		-	
Rent			
Heat, Electricity, Power			
Telephone			
Stationery/Postage			
Administration (detail under 13.6)			
Management (detail under 13.7)			
Consultancy fees			
Land costs			
Information Systems			
Research			
Other (Specify)			
TOTAL			

### 13.5 Salaries

Salary	ign (	Euro	NI £	Total £
	<del>-</del>	<del></del>		
				<del> </del>
TOTAL				

## 13.6 Admin. Costs

Admin Cost	Euro	NI £	Total £
	_		
		_	
	ı		
TOTAL			

## 13.7 Management Costs

Admin Cost	Euro	NI £	Total £
TOTAL			

## 13.8 Detail any non-recurring/capital costs associated with the development.

Description	Euro	NI £	Total £
Total			_

13.9	If you need any assistance/clarification when completing this section of the proposal please contact: Frances McLaughlin, CAWT Finance Manager Tel./Fax number: 028/048 7131 1868 e-mail: macks@iol.ie
14.	Please indicate how the service development might be mainstreamed and what would be the investment required from Boards for this mainstreaming.
15.	If the service development is not to be mainstreamed what would be the exit strategy and what would be the resource implications (if any) for Boards of this exit strategy?

Please applicat	add ar	ny a	additional	information	which	you	feel	will	support	you
						_				
return th	is form	to:	Admin Gransh	Resource Unistration Office a Park, Cloon BT47 6TF	es ey Roa	d				

Thank you.

## **PARTNERSHIP IN ACTION**



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

## **APPENDIX 3**





# CAWT SERVICE DEVELOPMENT PROPOSALS 3 Star

Sub-group		Proposal	Boards/ Trusts	Comments
Health Promotion	1		4 Boards	Aims to reduce the number of RTA s and injuries resulting from them. Focus on workplaces and the need for changes in policy. Three years.
Older People	1	Establishment of Active Retirement Groups for older people in Derg Finn area  Approved*	NWHB SLT	Aims to appoint a Community Development worker to set up active retirement groups with older people on both sides of the border. One year.
	上			
Social Care/Community	1	Risk Assessment and intervention for non-convicted sex offenders living in the community  Approved*	WHSSB NWHB initially	Aims to evaluate current services, develop a standardised risk assessment and provide three pilot assessment and treatment programmes in the North West. Three years.
	2	Feasibility Study to examine the development of Cross-border Community Care Services	Two bilaterals	Aims to review existing range of community care services to determine mutually beneficial areas of collaborative work especially for those who have suffered as a result of the conflict. 1_years.
	3	Education and Training Programme for those who work with adult survivors of sexual abuse	NWHB WHSSB	Aims to develop a training programme for those who work with adult survivors of sexual abuse. Three years.

1

Sub-group		Proposal	Boards/ Trusts	Comments
Primary Care	1	Care of Type II Diabetes in Primary Care/Role of the Community Pharmacist  Approved*	4 Boards	Aims to improve the quality of life of type II diabetes by training pharmacists to identify undiagnosed patients and raise public awareness. Two years.
	2	Piloting of Cross-border 24 Out-of-Hours Service  Approved*	4 Boards	Aims to implement, monitor and evaluate a pilot cross border Out of Hours Service in two areas. Two years.
	3	Cardiovascular Nursing Initiative  Approved*	NWHB SHSSB	Aims to improve the service delivered to patients suffering cardiovascular disease especially those who have cardio events/developed heart failure. Two years.
Learning Disability	1	Protection of Vulnerable Adults from abuse and needs assessment of carers of people with a learning disability  Approved*	4 Boards	Aims to do two pieces of work  (a) Guidelines and training materials for staff, carers, clients to be produced for the protection of vulnerable adults from abuse and  (b) Needs assessment of carers of those with a learning disability.  Two years
	2	Development of training resources for those with a learning disability	NWHB Foyle Trust	New Horizons aim to develop independent travel training resources and pictorial based aids for use within catering training programmes. One year.
	3	Vocational Assessment for those with a learning disability	NEHB Armagh/ Dungannon Trust	Aims to develop effective vocational assessment and rehabilitation programmes for those with a learning disability. Clarification being sought on whether these can be amalgamated. Two years.

0		<b>D</b>	Boards/	Comments
Sub-group	ļ.,	Proposal	Trusts	
Acute Services	1	Major Incident Planning  Approved*	4 Boards	Aims to develop a strategic approach to support the implementation of crossborder Emergency Planning in Sligo/Leitrim/Tyrone/Ferm anagh/Cavan/Monaghan. Needs to be widened to include Derry/Donegal. Two years.
	2	Mobile Catherisation Services  Approved*	SHSSB NEHB	Aims to have a mobile cath lab at Craigavon Hospital which will see patients from NEHB thus retaining cardiology services locally. Six months
3.000 (2010)	3		Altnagelvin NWHB	Aims to enable development of joint business case for acute clinical developments in Altnagelvin/Letterkenny Hospital. Two years.
est, in the second				-
Public Health	1	Access to Specialist Cardiac Services		Aims to research access to cardiac services experienced by border populations and identify barriers in the use of services. One year.
	2	Cross-border Policies for Health Protection  Approved*	4 Boards	Aims to develop cross- border plans and policies for a variety of infectious diseases and other related. Three years.
	3	Health Impact Assessment  Approved*	4 Boards Institute of Public Health	Aims to carry out a health impact assessment and co-ordinate a training programme. Two years
<del></del>	П		- Jan 1974	ń
Family and Child Care	1			Aims to carry out a cross- border study, consultation and project design on the development of high support foster care for young people with challenging behaviours and complex needs. Two years.

Sub graup		Drongood	Boards/	Comments
Sub-group Family and Child Care Continued	3	Needs Assessment and Planning Frameworks for Services for Children and Young People  Approved*	14 15	Aims to assess need and plan services for children and young people at a cross-border level. Three years.  Aims to establish art therapy for children,
				young people and those affected by stress, traumatised by violence through a partnership approach. Two years.
Mental Health	1	Carers Needs Assessment	NWHB SLT	Aims to identify and establish the needs of carers of persons suffering from Mental Illness particularly those who may have suffered as a result of the conflict. One year.
	2	A Longitudinal Investigation of Suicide and Attempted Suicide in At Risk Patients with Psychiatric Disorder	NWHB SLT	Aims to examine clinical, demographic and social predictions of past suicidal activity including the impact of the civil conflict on Omagh and Donegal. Two years.
Human Resources	1	Improving Cross Border Mobility within Health and Social Care (overcoming barriers to workplace mobility)	4 Boards	Aims to develop strategies to overcome barriers to workplace mobility through the creation and implementation of a Human Resources plan which is in line with the NSMC s recommendation for Obstacles to Mobility. Two years.

Sub-group	Proposal	Boards/ Trusts	Comments
I.C.T.	1 Developing I.C.T. Infrastructure  Approved*	4 Boards	Aims to appoint an I.C.T. Support Officer who will work to develop, implement and maximise the use of information and communication systems. Three years.
Management Development	1 Co-working for Peace : Partnership Approach Training and Developing	A 4 Boards	Aims to develop a range of training including, Action Learning, Home Support, Partnership Working, Personal Development Plans. Women in Management, Training for Trainers, Public Health nursing, Leadership, Anti-bullying. Three years.

<sup>\*</sup> Ratification by the Management Board on 22 September 2002

### **CAWT SERVICE DEVELOPMENT PROPOSALS**

#### Two star

Sub-group		Proposal	Boards/ Trusts	Comments
Mental Health	1	Awareness Training in Cognitive Therapy	4 Boards	Aims to deliver cognitive therapy awareness training to a range of staff across services who may be in turn dealing with those who have suffered as a result of the conflict. Two years.
Primary Care	1	Epidemiological study to look at oral health	WH&SSB NWHB	Aims to look at oral health and compare a fluoridated with a non fluoridated area as well as examine the different service delivery systems. Two years.

Sub-group		Proposal	Boards/ Trusts	Comments
	2	Improving Drug Awareness through the provision of advice by community pharmacists.	4 Boards	Aims to train community pharmacists to involve communities in discussion groups on dangers of drug misuse. Two years.
Acute	1	Feasibility Study into Networked Health Service Education and Training	4 Boards	Aims to consider the feasibility of establishing a network of education, research and training in five hospital units using videoconferencing, telelinking, distance learning and other technologies. One year.
	2	Renal Service Quality Project	4 Boards	Aims to establish networks of dialysis services to allow comparison of outcome measures. Two years.
	3	In-service Training Programme for Qualified Nurses	4 Boards	Aims to provide integration of nursing of the border through an inservice which will incorporate clinical practice, education and research. Two years.
	4	Medical Technical Officer Training Development	NEHB Craigavon Hospital	Aims to develop a cross- border training and development opportunity for medical technical staff leading to an improvement in the quality and range of cardiac services. Two years.
	5	SHO in Anaesthetics Secretariat to revisit	NWHB Altnagelvin	Aims to develop cross- border anaesthetist service.

# CAWT SERVICE DEVELOPMENT PROPOSALS RECENTLY DISCUSSED BY THE SECRETARIAT

Sub mann		Property	Boards/	Comments
Sub-group Mental Health	1	Proposal Promotion of Positive Mental Health with Special focus on young people	Trusts 4 Boards	Aims to appoint health promotion officers to carry out literature review, develop a mental health promotion plan and begin implementation. Needs refining. Two years.
Acute	1	Cross Border Nurse led Dermatology Services	NEHB SHSSB	Aims to build on work initiated under CBAP with the further development of dermatology services including a nurse led service and telemedicine links between Dublin and Dundalk. Has potential.
			at s	Control of the state of the sta
Health Promotion	1	Cross Border Voluntary HIV/AIDS Project — AIDS Help North West/Rainbow	NWHB WHSSB	Aims to develop counselling services, community out reach programme media campaigns and respite care in relation to HIV. Three years. Referred to Health Promotion.
	2	Smoking Cessation Interventions in Pregnancy  Approved in principle*	4 Boards	Aims to acquire information on multi-practitioner behaviour and develop a range of approaches in relation to cessation. Three years. Still awaiting final application.
Disability	1	All Ireland Service/Centre for Rare Disabilities Withdrawn	4 Boards	Aims to establish an All Ireland centre which through the provision of information education and training would assist in the integration of people with rare disabilities. Not supported.

#### NORTH-SOUTH MINISTERIAL COUNCIL

Sub-group	-	Proposal	Boards/ Trusts	Comments
North-South Ministerial Council	1	Development of First Responder Scheme North-South Bodies	4 Boards	Aims to develop a cross- border First Responder Scheme with ambulance services, voluntary organisations. Three years
	2	Community Emergency Plans for the border area  North-South Bodies	4 Boards	Aims to assist Community Forums in drawing up plans of action in order to ensure the integration of emergency planning. Three years.
	3	Helicopter Emergency Medical Services  North-South Bodies	4 Boards	Aims to participate in the process as determined by the outcome of the option appraisal in Helicopter Medical Services.

#### **CONNECTING WITH OTHER PARTS OF EUROPE**

Sub-group		Proposal	Boards/ Trusts	Comments
Building links with other parts of Europe	1	CAWT: Connecting With Other Parts Of Europe/Internationally	4 Boards	Aims to establish wider European links to test the value of CAWT as a model of cross-border public body co- operation.

#### Other areas

- The establishment of two more sub-groups physical and sensory disability and older people could lead to further service developments.
- Teenage pregnancy was an area identified within the Population Health Profile which needs to be addressed.
- Centre for Cross-Border Studies wish to work in collaboration on an initiative looking at whether patients wish to avail of services on either side of the border.
- Proposal from Sperrin Lakeland to develop a cross-border socio-vocational programme for people with traumatic brain injury.

### **PARTNERSHIP IN ACTION**



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### **APPENDIX 4**



<u>KEY</u> **CAWT STRUCTURE CAWT Resource Unit CAWT Satellite Offices Management Board** Secretariat Finance Manager **Principal Executive** Secretariat NWHB/WHSSB Officer **NEHB/SHSSB Executive Officer Executive Officer** Communications Co-ordinator Office Manager CO CO

## **PARTNERSHIP IN ACTION**



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

### **APPENDIX 5**



#### **STEERING TO SAFETY**

CAPITAL COSTS	£ 2001	£ 2002	£ 2003	£ 2004	£ 2005	£ £ 2006 TOTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Software Packages etc re building costs Other			17600 4000	500 500	500 500	0 0 18600 5000 0 0
TOTAL CAPITAL COSTS A	0	0	21600	1000	1000	0 23600
REVENUE COSTS						
Total Salary costs			69892	71988	74148	216028
Recruitment Costs			4500	0		4500
Travel & Sub			8240	8487	8742	25469
Heat&Light Phone etc			14832	15277	15735	45844
Rent & Rates			8240	8487	8742	25469
Audit/Accountancy/ICT			7600	7600	7600	22800
Q.A and Evaluation Fees			13360	13761	14174	41294
Marketing/Printing/Stationery			4120 4120	4244 4244	4371 4371	12735 12735
Publicity Materials  OTHER			4120	4244	4371	0
Research			4120	4244	4371	12735
			•			0
						0
						0
	_	_				0
TOTAL REVENUE COSTS B	0	0	139024	138331	142253	0 419608
	£	£	£	£	£	£ £
PROGRAMME COSTS	2001	2002	2003	2004	2005	2006 TOTAL
Training Materials			8240	8487	8495	25222
			4400	4044	40.47	0
Venue Hire			4120	4244	4247	12611
TOTAL PROGRAMME C	0	0	12360	12731	12742	0 <b>0 37833</b>
TOTAL PROJECT A+B+C	0	0	172984	152062	155995	0 481041
	J	•		·		÷

#### STEERING TO SAFETY

CAPITAL COSTS	€ 2001	€ 2002	€ 2003	€ 2004	€ 2005	<b>€</b>	€ TOTAL
CAPITAL COSTS	2001	2002	2003	2004	2005	2000	IOIAL
Construction/Refurbishment	0	0	0	0	0	0	0
Plant & Equipment	0	0	0	0	0	0	0
Fixtures & Fittings	0	0	27104	770	770	0	28644
Software Packages etc	Ō	0	6160	770	770	0	7700
re building costs	0	0	0	0	0	0	0
Other .	0	0	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	33264	1540	1540	0	36344
REVENUE COSTS							
Total Salary costs	0	0	107633	110862	114188	0	332683
Recruitment Costs	0	6930	0	0	0	0	6930
Travel & Sub	0	0	126 <del>9</del> 0	13070	13462	0	39222
Heat&Light Phone etc	0	0	22841	23527	24232	0	70600
Rent & Rates	0	0	12690	13070	13462	0	39222
Audit/Accountancy/ICT	0	0	11704	11704	11704	0	35112
Q.A and Evaluation Fees	0	0	20574	21192	21827	0	63593
Marketing/Printing/Stationery	0	0	6345	6535	6731	0	19611
Publicity Materials	0	0	6345	6535	6731	0	19611
OTHER	0	0	0	0	0	0	0
Research	0	0	6345	6535	6731	0	19611
							0
							0
							0
TOTAL REVENUE COSTS B	0	6930	207166	213030	219070	0	646197
	€	€	€	€	€	€	£
PROGRAMME COSTS	2001	2002	2003	2004	2005	2006	TOTAL
Training Materials	0	4107	12690	13070	8975	0	38842
_	0	0	0	0	0	0	0
Venue Hire	0	2053	6345	6535	4487	0	19420 0
TOTAL PROGRAMME C	0	6160	19034.4	19605	13462	0	58262
TOTAL PROJECT A+B+C	0	13090	259465	234176	234073	0	740803

#### **ACTIVE RETIREMENT GROUPS FOR OLDER PEOPLE**

CAPITAL COSTS	£ 2001	£ 2002	£ 2003	£ 2004	£ 2005	£ 2005	£ TOTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs							0 0 0 0
Other			2200				2200
TOTAL CAPITAL COSTS A	0	0	2200	0	0	0	2200
REVENUE COSTS							
Total Salary costs				38110			38110
Recruitment Costs			1500				1500
Travel & Sub				3000			3000
Heat&Light Phone etc				1550			1550
Rent & Rates				2000			2000
Audit/Accountancy/ICT				3000			3000
CAWT Q.A and Evaluation				1500			1500
Marketing/Printing/Stationery Publicity Materials				2000			2000
OTHER							0
OTTEN							0 0
							0
							Õ
							0
							0
TOTAL REVENUE COSTS B	0	0	1500	51160	0	0	52660
	£	£	£	£	£	£	£
PROGRAMME COSTS	2001	2002	2003	2004	2005	2005	TOTAL
Training Sections				2000			2000
Speakers Research				2000 1000			2000
research				1000			1000 0
TOTAL PROGRAMME C	0	0	0	5000	0	0	5000
TOTAL PROJECT A+B+C	0	0	3700	56160	0	0	59860

#### ACTIVE RETIREMENT GROUPS FOR OLDER PEOPLE

CAPITAL COSTS	€ 2001	€ 2002	€ 2003	€ 2004	€ 2005	€ 2005	€ TOTAL
Construction/Refurbishment	0	Ò	0	0	0	0	0
Plant & Equipment	0	0	0	0	0	0	0
Fixtures & Fittings	0	0	0	0	0	0	0
Professional, Legal etc	Ō	0	0	0	0	0	0
re building costs	Ō	Ō	0	0	Ō	0	0
Other	Ó	0	3388	0	Ó	0	3388
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	3388	0	0	0	3388
REVENUE COSTS							
Total Salary costs	0	0	0	5868 <del>9</del>	0	0	58689
Recruitment Costs	0	0	2310	0	0	0	2310
Travel & Sub	0	0	0	4620	0	0	4620
Heat&Light Phone etc	0	0	0	2387	0	0	2387
Rent & Rates	0	. 0	0	3080	0	0	3080
Audit/Accountancy/ICT	0	0	0	4620	0	0	4620
CAWT Q:A and Evaluation	0	0	0	2310	0	0	2310
Marketing/Printing/Stationery	0	0	0	3080	0	0	3080
Publicity Materials	0	0	0	0	0	0	. 0
OTHER	0	0	0	0	0	0	0
	0	0	Q	Ó	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL REVENUE COSTS B	0	0	2310	78786	0	0	81096
	€	€	€	€	€	€	€
PROGRAMME COSTS	2001	2002	2003	2004	2005	2005	TOTAL
	0	0	0	3080	0	0	3080
	0	0	0	3080	0	0	3080
	0	0	0	1540	0	0	1540
	0	0	0	0	0	0	0
TOTAL PROGRAMME C	0	0	0	7700	0	0	7700
TOTAL PROJECT A+B+C	0	0	5698	86486	0	0	92184

#### **BILATERAL COMMUNITY CARE FEASIBILITY STUDIES**

CAPITAL COSTS	£ 2001	£ 2002	£ 2003	£ 2004	£ 2005	£ 2005 TO	£ DTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other			3000				3000 0 0 0 0
TOTAL CAPITAL COSTS A	0	0	3000	0	0	0	3000
REVENUE COSTS							
Total Salary costs			32282	8071			40353
Recruitment Costs		0	0	0			0
Travel & Sub			4000	1000			5000
Heat&Light Phone etc			2000	500			2500
Rent & Rates			3000	750			3750
Audit/Accountancy/ICT			966	242			1208
Professional Fees incl Eval Marketing/Printing/Stationery			500 500	125			625
Publicity Materials			อบบ	125			625 0
OTHER							0
							ő
							0
							0
							0
TOTAL REVENUE COSTS B	0	0	43248	10812	0	0.	0 <b>54060</b>
COMMUNITY FEASIBILITY STUE PROGRAMME COSTS	£ 2001	£ 2002	£ 2003	£ 2004	£ 2005	£ 2005 TO	£
THOUSE SOUTH	2001	2002	2003	2004	2005	2005 10	JIAL
Rapid Strategy Workshop			1500				1500
Other Workshops			5000	1000			6000
							0
TOTAL PROGRAMME C	0	0	6500	1000	0	0	7500
TOTAL PROJECT A+B+C	0	0	52748	11812	0	0	64560

#### **BILATERAL COMMUNITY CARE FEASIBILITY STUDIES**

CAPITAL COSTS	€ 2001	€ 2002	€ 2003	€ 2004	€ 2005	€ 2005 T	€ OTAL
Construction/Refurbishment	0	0	0	0	0	0	0
Plant & Equipment	0	0	4620	0	0	0	4620
Fixtures & Fittings	0	0	0	0	0	0	0
Professional, Legal etc	0	0	0	0	0	0	0
re building costs	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL CARITAL COOTS 4	0	0	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	4620	0	0	0	4620
REVENUE COSTS							
Total Salary costs	0	0	49715	12429	0	0	62143
Recruitment Costs	0	0	0	0	0	0	0
Travel & Sub	0	0	6160	1540	0	0	7700
Heat&Light Phone etc	0	0	3080	770	0	0	3850
Rent & Rates	0	0	4620	1155	0	0	5775
Audit/Accountancy/ICT	0	0	1488	372	0	0	1860
Professional Fees incl Eval	0	0	770	192.5	0	0	963
Marketing/Printing/Stationery	0	0	770	192.5	0	0	963
Publicity Materials  OTHER	0	0	0	0	0	0	0
UINER	0	0	0	0	0	0	0
	0	0	0	0	. 0	0	0
	Ö	0	0	0	. 0	0	0
	ŏ	Ö	0	0	Õ	ŏ	0
	ŏ	Ö	0	Ö	Ö	Ö	0
TOTAL REVENUE COSTS B	Ō	Ō	66602	16651	Ŏ	Ŏ	83253
PROGRAMME COSTS							, <b>z</b> .
	0	0	0	0	0	0	0
Rapid Strategy Workshop	0	0	2310	0	0	0	2310
Other Workshops	0	0	7700	1540	0	0	9240
_	0	0	0	0	0	0	0
TOTAL PROGRAMME C	0	0	10010	1540	0	0	11550
TOTAL PROJECT A+B+C	0	0	81232	18191	0	0	99423
TOTAL COST OF PROJECT	0	0	81232	18191	0	0	99423

#### RISK ASSESSMENT AND INTERVENTIONS FOR NON CONVICTED SEX OFFENDERS

CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ 2005	£ 2006	£ 2007	£ TOTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other			3000				0 0 3000 0 0
TOTAL CAPITAL COSTS A	0	0	3000	0	0	0	3000
REVENUE COSTS							
Total Salary costs			52500	72100	74263	18566	217429
Recruitment Costs			4501	0	0		4501
Travel & Sub			6000	8000	8000	2000	24000
Heat&Light Phone etc			1500	2000	2000	500	6000
Rent & Rates			4500	6000	6000	1500	18000
Audit/Accountancy/ICT			3885	5180	5180	1295	15540
CAWT Q.A./Evalaution			1000	1000	1000	2500	5500
Marketing/Printing/Stationery Publicity Materials			500	500 500	500	300 500	1800 1000
OTHER				500		500	0
							0
							Ō
							0
							0
TOTAL REVENUE COSTS B	0	0	74386	95280	96943	27160.75	0 <b>293770</b>
	£	£	£	£	£	£	£
PROGRAMME COSTS	2001	2002	2003	2004	2005	-	TOTAL
				2001			0
Database Development			1500	1500			3000
Training			3333	3333	3334		10000
Research University Links	_	1250	5000	5000	3750	_	15000
TOTAL PROGRAMME C	0	1250	9833	9833	7084	0	28000
TOTAL PROJECT A+B+C	0	1250	87219	105113	104027	27161	324770

#### RISK ASSESSMENT AND INTERVENTIONS FOR NON CONVICTED SEX OFFENDERS

	€	€	€	€	€	€
CAPITAL COSTS	2002	2003	2004	2005	2006	2007
Construction/Refurbishment	0	0	0	0	0	0
Plant & Equipment	0	0	0	0	0	0
Fixtures & Fittings	0	0	4620	0	0	0
Professional, Legal etc	Ō	0	0	0	0	0
re building costs	0	0	0	0	0	0
Other	0	0	0	0	0	0
	0	0	0	0	0	0
	0 0	0 0	0 0	0 0	0	0 0
TOTAL CAPITAL COSTS A	0	0	<b>4620</b>	0	0	0
REVENUE COSTS						
Total Salary costs	0	0	80850	111034	114365.02	28591
Recruitment Costs	0	0	6932	0	0	0
Travel & Sub	Ö	0	9240	12320	12320	3080
Heat&Light Phone etc	0	0	2310	3080	3080	770
Rent & Rates	Ō	0	6930	9240	9240	2310
Audit/Accountancy/ICT	Ō	Ō	5983	7977	7977	1994
CAWT Q.A./Evalaution	0	0	1540	1540	1540	3850
Marketing/Printing/Stationery	0	0	770	770	770	462
Publicity Materials	0	0	0	770	0	770
OTHER	0	0	0	0	0	0
	0	0	0	0	0	0
	0	0	0	0	0	0
	0	0	0	0	0	0
	0	0	0	0	0	0
TOTAL REVENUE COSTS B	0 <b>0</b>	0 <b>0</b>	0 <b>114554</b>	0 <b>146731</b>	0 <b>149292</b>	0 <b>41828</b>
	€	€	€	€	€	•
PROGRAMME COSTS	€ 2001	€ 2002	_	€ 2004	_	€
PROGRAMIME COSTS	2001	2002	<b>2003</b> 0	<b>2004</b> 0	<b>2005</b> 0	<b>2005</b> 0
	0	0	2310	2310	0	0
	0	0	5133	5133	5134	0
	Ö	1925	7700	7700	5775	0
TOTAL PROGRAMME C	ŏ	1925	15143	15143	10909	Ŏ
TOTAL PROJECT A+B+C	0	1925	134317	161874	160202	41828

### EDUCATION AND TRAINING FOR THOSE WHO WORK WITH ADULT SURVIVORS

EDUCATION AND TRAINING FOR THOSE WHO WORK WITH ADULT SURVIVORS OF SEXUAL ABUSE									
CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ 2005 To	£ OTAL				
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other		1000			0 0 1000 0 0				
TOTAL CAPITAL COSTS	0	1000	0	0	1000				
REVENUE COSTS									
Total Salary costs		43260	43900		87160				
Recruitment Costs		3000	0		3000				
Travel & Sub		1500	1500		3000				
Running Costs ( heat, light,									
phone, maintenance &									
gen. Admin expenses etc)		5000	5000		10000				
Rent & Rates		3500	3500		7000				
Audit/Accountancy/Legal/ICT		5500	5500		11000				
Professional & consultancy		500 500	3000 500	2000	3500 3000				
Q.A/Evaluation Costs(CAWT) Marketing/Printing		500 500	500 500	, 2000	1000				
Publicity Materials		500	500		1000				
Programme Costs					0				
Trainers costs		60000	40000		100000				
					0				
					0 0				
					0				
					Ö				
OTHER					0				
	_				0				
TOTAL OPERATING COSTS	0	123760	103900	2000	229660				
TOTAL COST OF PROJECT	0	124760	103900	2000	230660				

## EDUCATION AND TRAINING FOR THOSE WHO WORK WITH ADULT SURVIVORS OF SEXUAL ABUSE

€	€	€	€	€
2002	2003	2004	2005 1	OTAL
0	0	0	0	0
0	0	0	0	0
0	1540	0	0	1540
_	0		_	0
-	-	-	-	0
-	_	-		0
	<del>-</del>		<del>-</del>	0
			= -	0
_	_	=	_	0
U	1540	U	U	1540
0	66620	67606	0	134226
0	4620	0	0	4620
0	2310	2310	0	4620
0	7700	7700	0	15400
0	5390	5390	0	10780
0	8470	8470	0	16940
0	770	4620	0	5390
0	770	770	3080	4620
-			0	1540
_	<del>-</del>		-	1540
_	_	_	_	0
_			_	154000
	_	_		0
			-	0
			_	0 0
=	=	=	=	0
_	-	-	-	0
	_	-	_	0
0	190590	160006	3080	353676
0	192130	160006	3080	355216
	2002 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	2002 2003  0 0 0 0 0 1540 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 1540  0 66620 0 4620 0 2310  0 7700 0 770 0 770 0 770 0 770 0 770 0 770 0 770 0 770 0 770 0 770 0 770 0 770 0 770 0 770 0 770 0 0 0 0 0	2002         2003         2004           0         0         0           0         0	2002         2003         2004         2005 T           0         0         0         0           0

#### HOME SUPPORT WORKER TRAINING

CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ 2005	£ TOTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other					0 0 0 0 0
TOTAL CAPITAL COSTS	0	0	0	0	0
REVENUE COSTS					
Total Salary costs					0
Recruitment Costs					0
Travel & Sub					0
Running Costs ( heat, light,					
phone, maintenance &					
gen. Admin expenses etc)					0
Rent & Rates					0
Audit/Accountancy/Legal/ICT		7880	7880		15760
Professional & consultancy					0
Q.A./Evaluation Costs(CAWT)		500	500	2000	3000
Marketing/Printing Publicity Materials					0
Programme Costs					0
Development of Programme					0
and Materials and review		16000		Ē	16000
Venue & Catering Costs		36000	36000		72000
Facilitators Costs		40000	40000		80000
Training of Trainers		24000	24000		48000
Learning Packs OTHER		20000	20000		40000
Related NVQ Training			25000	25000	50000
TOTAL OPERATING COSTS	0	144380	25000 <b>153380</b>	25000 <b>27000</b>	50000 <b>324760</b>
TOTAL COST OF PROJECT	0	144380	153380	27000	324760

#### **HOME SUPPORT WORKER TRAINING**

CARITAL COOTS	€	€	€	€	€
CAPITAL COSTS	2002	2003	2004	2005	TOTAL
Construction/Refurbishment	0	0	0	0	0
Plant & Equipment	Ò	0	0	0	0
Fixtures & Fittings	0	0	0	0	0
Professional, Legal etc	0	0	0	0	0
re building costs	0	0	0	0	0
Other	0	0	0	0	0
	0	0	0	0	0
	0	0	0	0	0
	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	0	0	0
REVENUE COSTS					
Total Salary costs	0	0	0	0	0
Recruitment Costs	0	0	Ō	0	0
Travel & Sub	Ö	ō	Ö	Ō	Ö
Running Costs ( heat, light,					
phone, maintenance &					
gen. Admin expenses etc)	0	0	0	0	0
Rent & Rates	Ō	Ŏ	Ŏ	0	Ŏ
Audit/Accountancy/Legal/ICT	Ö	12135	12135	Õ	24270
Professional & consultancy	ō	0	0	0	0
Q.A./Evaluation Costs(CAWT)	0	770	770	3080	4620
Marketing/Printing	0	0	0	0	0
Publicity Materials	0	Ö	0	0	0
Programme Costs	0	0	0	0	0
Development of Programme	0	0	0	0	0
and Materials and review	0	24640	0	0	24640
Venue & Catering Costs	0	55440	55440	0	110880
Facilitators Costs	0	61600	61600	0	123200
Training of Trainers	0	36960	36960	0	73920
Learning Packs	0	30800	30800	0	61600
OTHER	0	0	0	0	0
Related NVQ Training	0	0	38500	38500	77000
TOTAL OPERATING COSTS	0	222345	236205	41580	500130
TOTAL COST OF PROJECT	0	222345	236205	41580	500130

#### CARE OF TYPE 11 DIABETES: ROLE OF COMMUNITY PHARMACIST

CAPITAL COSTS	£ 2001	£ 2002	£ 2003	£ 2004	£ 2005	£ 2005 T	£ OTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other P.C			500 1500				0 500 0 0 0 1500
Systems			2500				2500
TOTAL CAPITAL COSTS A	0	0	4500	0	0	0	0 <b>4500</b>
REVENUE COSTS							
Total Salary costs Recruitment Costs			23239	23936			<b>4</b> 71 <b>7</b> 5 1500
Travel & Sub			1500 4600	4600			9200
Heat&Light Phone etc			1000	1000			2000
Rent & Rates			1500	1500			3000
Audit/Accountancy/ICT			4782	4783			9565
Q.A.and Evaluation			500	2500			3000
Marketing/Printing/Stationery Publicity Materials				10000			10000
OTHER Professional Fees			3000	3000			0 6000
r rolessional rees			3000	3000			0000
							0
							0
TOTAL REVENUE COSTS B	0	0	40121	51319	0	0	0 <b>91440</b>
	•	•		0.0.0	•	•	
PROGRAMME COSTS							
Training Costs			5000	5000			10000
Pharmacists re services			25000	25000			50000
Pharmacists re Health Prom				27000			27000
Needle Disposal			2500	2500	•	•	5000
TOTAL PROGRAMME C	0	0	32500	59500	0	0	92000
TOTAL PROJECT A+B+C	0	0	77121	110819	0	0	187940

#### CARE OF TYPE 11 DIABETES: ROLE OF COMMUNITY PHARMACIST

	€	€	€	€	€	€	€
CAPITAL COSTS	2001	2002	2003	2004	2005	2005	TOTAL
Construction/Refurbishment	0	0	0	0	0	0	0
Plant & Equipment	0	0	0	0	0	0	0
Fixtures & Fittings	0	0	770	0	0	0	770
Professional, Legal etc	0	0	0	0	0	0	0
re building costs	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0
P.C.	0	0	2310	0	0	0	2310
	0	0	3850	0	0	0	3850
	0	0	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	6930	0	0	0	6930
REVENUE COSTS							
Total Salary costs	0	0	35788	36861	0	0	72649
Recruitment Costs	0	0	2310	Ô	0	0	2310
Travel & Sub	0	0	7084	7084	Ó	0	14168
Heat&Light Phone etc	0	0	1540	1540	0	0	3080
Rent & Rates	0	0	2310	2310	0	0	4620
Audit	Ō	Ö	7364	7366	0	Ō	14730
Q.A.and Evaluation			770	3850	0	0	4620
Marketing/Printing/Stationery	0	O	0	15400	0	0	15400
Publicity Materials	0	0	0	0	0	0	0
OTHER	0	0	0	0	0	0	0
Professional Fees	0	0	4620	4620	0	0	9240
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TATAL BE (51115 AAATA B	0	0	0	0	0	0	0
TOTAL REVENUE COSTS B	0	0	61786	79031	0	0	140817
PROGRAMME COSTS							
PROGRAMME COSTS	0	0	7700	7700	0	0	15400
	0	ŏ	38500	38500	0	ő	77000
	ő	0	0	41580	0	Ö	41580
	ő	Ö	3850	3850	Ö	Ö	7700
TOTAL PROGRAMME C	. 0	Ŏ	50050	91630	Ŏ	Ŏ	141680
TOTAL PROJECT A+B+C	0	0	118766	170661	0	0	289427

#### **CROSS BORDER OUT OF HOURS SERVICE**

CAPITAL COSTS	£ 2001	£ 2002	£ 2003	£ 2004	£ 2005	£ 2005	£ TOTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other							0 0 0 0 0
Hardware Networking			10000	45000	15000		10000
Software Development				45000	45000		90000
TOTAL CAPITAL COSTS A	0	0	10000	45000	45000	0	100000
REVENUE COSTS							
Total Salary costs			35000	36050			71050
Recruitment Costs			3000				3000
Travel & Sub			5000	5000			10000
Heat&Light Phone etc							0
Rent & Rates							0
Audit/Accountancy/ICT			11430	11430			22860
Q.A. only			2000	2000			4000
Marketing/Printing/Stationery Publicity Materials			500 5000	500 5000			1000 10000
OTHER			2000	5000			0000
Indemnity				25000	25000		50000
Doctors Fees			13750	13750			27500
Additional resource Foyledoc				28000	28000		56000
							0
TOTAL DEVENUE COSTS D	•	•	75000	400700	F2000	•	0
TOTAL REVENUE COSTS B	0	0	75680	126730	53000	0	255410
PROGRAMME COSTS							
Baseline modelling &							0
evaluation				37000	38000	_	75000
Ambulance Services				5000	5000		10000
TOTAL PROGRAMME C	0	0	0	42000	43000	0	0 <b>85000</b>
TOTAL PROJECT A+B+C					4.44000		
IVIAL PROJECT ATETC	0	0	85680	213730	141000	0	440410

#### CROSS BORDER OUT OF HOURS SERVICE

	€	€	€	€	€	€	€
CAPITAL COSTS	2001	2002	2003	2004	2005	2005	TOTAL
Construction/Refurbishment	0	0	0	0	0	0	0
Plant & Equipment	0	0	0	0	0	0	0
Fixtures & Fittings	0	0	0	0	0	0	0
Professional, Legal etc	0	0	0	0	0	0	0
re building costs	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0
	0	0	15400	0	0	0	15400
	0	0	0	69300	69300	0	138600
	0	0	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	15400	69300	69300	0	154000
REVENUE COSTS							
Total Salary costs	0	0	53900	55517	0	0	109417
Recruitment Costs	0	0	4620	0	0	0	4620
Travel & Sub	0	0	7700	7700	0	0	15400
Heat&Light-Phone etc	0	0	0	0	0	0	0
Rent & Rates	0	0	Õ	Ō	0	Ö	Ō
Audit	ō	Ŏ	17602	17602	ő	Ö	35204
Q.A. only	0	0	3080	3080	Ö	Ō	6160
Marketing/Printing/Stationery	0	0	770	770	Ö	ō	1540
Publicity Materials	0	0	7700	7700	0	0	15400
OTHER	0	0	0	0	0	0	0
Indemnity	0	0	0	38500	38500	0	77000
Doctors Fees	0	0	21175	21175	0	0	42350
Additional resource Foyledoc	0	0	0	43120	43120	0	86240
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL REVENUE COSTS B	0	0	116547	195164	81620	0	393331
PROGRAMME COSTS							
Baseline modelling &	0	0	0	0	0	0	^
evaluation	0	0	0 0	56980	0 58520	0	0 115500
Ambulance Services	0	0	0	7700	7700	0	
Ambuidite Services	0	0	0	7700	7700	0	15400
TOTAL PROGRAMME C	0	0	0	64680	<b>66220</b>	0 <b>0</b>	0 <b>130900</b>
TOTAL PROJECT A+B+C	0	0	131947	329144	217140	0	678231

#### **CARDIOVASCULAR NURSING INITIATIVE**

CAPITAL COSTS	£ 2003	£ 2004	£ 2005	£ 2006	£ 2007	£ 2008 T	£ OTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings PCs etc Professional, Legal etc re building costs Other			10300				0 0 10300 0 0
TOTAL CAPITAL COSTS A	0	0	10300	0	0	0	10300
REVENUE COSTS Total Salary costs Recruitment Costs Travel & Sub Heat&Light Phone etc Rent & Rates Audit/Accountancy/ICT Cawt Q.A. and evaluation Marketing/Printing/Stationery Publicity Materials OTHER			37500 6000 3600 1800 1200 5786 2000 1200	107000 11000 3100 2500 5786 2000 2500	110500 11000 3200 2600 5778 4000 2600		255000 6000 25600 8100 6300 17350 8000 6300 0 0
TOTAL REVENUE COSTS B	0	0	59086	133886	139678	0	0 <b>332650</b>
PROGRAMME COSTS Training				1000			1000 0 0
TOTAL PROGRAMME C	0	0	0	1000	0	0	0 <b>1000</b>
TOTAL PROJECT A+B+C	0	0	69386	134886	139678	0	343950

10

#### **CARDIOVASCULAR NURSING INITIATIVE**

	€	€	€	€	€	€	€
CAPITAL COSTS	2003	2004	2005	2006	2007	2008	TOTAL
Construction/Refurbishment	0	0	0	0	0	0	0
Plant & Equipment	Ó	0	0	0	0	0	0
Fixtures & Fittings	0	0	15862	0	0	0	15862
Professional, Legal etc	0	0	0	0	0	0	0
re building costs	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL CARITAL CORTS A	0 <b>0</b>	0 <b>0</b>	0 <b>15862</b>	0 <b>0</b>	0 <b>0</b>	0	0 <b>15862</b>
TOTAL CAPITAL COSTS A	U	U	15002	U	U	U	13002
REVENUE COSTS							
Total Salary costs	0	0	57750	164780	170170	0	392700
Recruitment Costs	0	0	9240	0	0	0	9240
Travel & Sub	0	0	5544	16940	16940	0	39424
Heat&Light Phone etc	0	0	2772	4774	4928	0	12474
Rent & Rates	0	0	1848	3850	4004	0	9702
Audit/Accountancy/ICT	0	0	8910	8910	8898	0	26719
Cawt Q.A. and evaluation	0	0	3080	3080	6160	0	12320
Marketing/Printing/Stationery	0	0	1848	3850	4004	0	9702
Publicity Materials	0	0	0	0	0	0	0
OTHER	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0 0	0 0	0	0	0
TOTAL REVENUE COSTS B	0 <b>0</b>	0 <b>0</b>	90992	206184	215104	0	<b>512281</b>
TOTAL REVENUE COSTS B	U	U	90992	200104	213104	U	312201
PROGRAMME COSTS							
	0	0	0	1540	0	0	1540
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL PROGRAMME C	0	0	0	1540	0	0	1540
TOTAL PROJECT A+B+C	0	0	106854	207724	215104	0	529683

#### **EPIDEMIOLOGICAL STUDY OF ORAL HEALTH**

CAPITAL COSTS	£ 2001	£ 2002	£ 2003	£ 2004	£ 2005	£ 2006 1	£ TOTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other P.Cs			6000				0 0 0 0 0 0 6000
INFORMATION SYSTEM			6000				6000 0
TOTAL CAPITAL COSTS A	0	0	12000	0	0	0	12000
REVENUE COSTS							
Total Salary costs			85000				85000
Recruitment Costs			2300				2300
Travel & Sub			7000				7000
Heat&Light Phone etc			1000				1000
Rent & Rates							0
Audit/Accountancy/ICT Professional Fees/Data Anal			7700	20200			7700
Marketing/Printing/Stationery			1000	30000			30000 1000
Publicity Materials			1000				1000
OTHER							0
Steering Group/QA etc			3000				3000
							0
							0
							0
TOTAL REVENUE COSTS B	0	0	108000	30000	0	0	138000
PROGRAMME COSTS							
							0
							0
							0
TOTAL PROGRAMME C	0	0	,0	0	0	0	0
TOTAL PROJECT A+B+C	0	0	120000	30000	0	0	150000

#### **EPIDEMIOLOGICAL STUDY OF ORAL HEALTH**

04PF44 000T0	€	€ 2002	€ 2003	€ 2004	€ 2005	€	€
CAPITAL COSTS	2001	2002	2003	2004	2005	2006	IUIAL
Construction/Refurbishment	0	0	0	0	0	0	0
Plant & Equipment	0	0	0	0	0	0	0
Fixtures & Fittings	0	0	0	0	0	0	0
Professional, Legal etc	0	O	0	0	0	0	0
re building costs	0	0	0	o	0	0	0
Other	0	0	0	0	0	0	0
	0	0	9240	0	0	0	9240
	0	0	9240	0	0	0	9240
	0	0	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	18480	0	0	0	18480
REVENUE COSTS							
Total Salary costs	0	0	130900	0	0	0	130900
Recruitment Costs	0	0	3542	0	0	0	3542
Travel & Sub	0	0	10780	0	0	0	10780
Heat&Light Phone etc	0	0	1540	0	0	0	1540
Rent & Rates	0	0	0	0	0	0	0
Audit	0	0	11858	0	0	0	11858
Professional Fees incl Eval	0	0	0	46200	0	0	46200
Marketing/Printing/Stationery	0	0	1540	0	0	0	1540
Publicity Materials	0	0	1540	0	0	0	1540
OTHER	0	0	0	0	0	0	0
	0	0	4620	0	0	0	4620
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL REVENUE COSTS B	0	0	166320	46200	0	0	212520
PROGRAMME COSTS							
I NOOMARKE COSTS	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL PROGRAMME C	Ŏ	ŏ	ŏ	Ŏ	Ŏ	ŏ	ŏ
TOTAL PROJECT A+B+C	0	0	184800	46200	0	0	231000

#### **PROTECTION OF VULNERABLE ADULTS**

CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ 2005	£ 2006	£ 2007	£ TOTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other		2000					0 0 2000 0 0
Information Systems P.C		2000 4000	2000				4000 4000 0
TOTAL CAPITAL COSTS A	0	8000	2000	0	0	0	10000
REVENUE COSTS							
Total Salary costs Recruitment Costs Travel & Sub Heat&Light Phone etc Rent & Rates Audit/Accountancy/ICT Q.A. and evaluation Marketing/Printing/Stationery Publicity Materials OTHER  Project Board Costs		40000 7500 5000 1250 1500 3710 500 500 1200	106000 15000 2500 3000 7420 1000 500	2000			146000 7500 20000 3750 4500 11130 3500 1000 1200 0 0 2400 0
TOTAL REVENUE COSTS B	0	62160	136820	2000	0	0	0 <b>200980</b>
PROGRAMME COSTS Training Research Costs		3000 2500	3000 2500	2500			6000 7500 0
TOTAL PROGRAMME C	0	5500	5500	2500	0	0	0 <b>13500</b>
TOTAL PROJECT A+B+C	0	75660	144320	4500	0	0	224480

#### PROTECTION OF VULNERABLE ADULTS

	€	€	€	€	€	€	€
CAPITAL COSTS	2002	2003	2004	2005	2006	2007	TOTAL
Construction/Refurbishment	0	0	0 .	0	0	0	0
Plant & Equipment	0	0	0	0	0	0	0
Fixtures & Fittings	0	3080	0	0	0	0	3080
Professional, Legal etc	0	0	0	0	0	0	0
re building costs	0	0	Ō	0	0	0	0
Other	0	0	0	0	0	0	0
	0	3080	3080	0	0	0	6160
	0	6160	0	0	0	0	6160
	0	0	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	12320	3080	0	0	0	15400
REVENUE COSTS							
Total Salary costs	0	61600	163240	0	0	0	224840
Recruitment Costs	0	11550	0	0	0	0	11550
Travel & Sub	0	7700	23100	0	0	0	30800
Heat&Light Phone etc	0	1925	3850	0	0	0	5775
Rent & Rates	0	2310	4620	0	0	0	6930
Audit	0	5713.4	11426.8	0	0	0	17140
Q.A. and evaluation	0	770	1540	3080	0	0	5390
Marketing/Printing/Stationery	0	770	770	0	0	0	. 1540
Publicity Materials	0	1848	0	0	0	0	1848
OTHER .	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
Project Board Costs	0	1540	2156	0	0	0	3696
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL REVENUE COSTS B	0	95726	210703	3080	0	0	309509
PROGRAMME COSTS							
Training	0	4620	4620	0	0	0	9240
Research Costs	0	3850	3850	3850	0	0	11550
research costs	0	0	0	0	0	0	0
	0	ŏ	Ö	Ö	Ö	0	0
TOTAL PROGRAMME C	Ö	8470	8470	3850	ŏ	Ö	20790
TOTAL PROJECT A+B+C	0	116516	222253	6930	0	0	345699

### LEARNING DISABILITY VOCATIONAL ASSESSMENT & TRAINING (including New Horizons)

CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ 2005	£ TOTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other					0 0 0 0 0
TOTAL CAPITAL COSTS	0	0	0	0	0
REVENUE COSTS					
Total Salary costs		86300	88889		175189
Recruitment Costs		4500			4500
Travel & Sub		2950	2950		5900
Running Costs ( heat, light,					
phone, maintenance &					
gen. Admin expenses etc)		2850	2850		5700
Rent & Rates					0
Audit/Accountancy/Legal/ICT		6400	6400		12800
Professional & consultancy					0
Q.A./Evaluation Costs(CAWT)		500	500	2000	3000
Marketing/Printing		1080	1080		2160
Publicity Materials Programme Costs					0
Travel Resources		11125	11125		22250
Catering Resources		9875	9875		19750
Assessment Materials		1000	1000		2000
					0
					0
					0
OTHER					0
Management Costs		8912	9179	2000	18091 <b>271340</b>
TOTAL OPERATING COSTS	0	135492	133848	2000	Z1 1340
TOTAL COST OF PROJECT	0	135492	133848	2000	271340

### LEARNING DISABILITY VOCATIONAL ASSESSMENT & TRAINING (Including New Horizons)

,,,,,,,	€	€	€	€	€
CAPITAL COSTS	2002	2003	2004	2005	TOTAL
Construction/Refurbishment	0	0	0	0	0
Plant & Equipment	0	0	0	0	0
Fixtures & Fittings	0	0	0	0	0
Professional, Legal etc	0	0	0	0	0
re building costs	0	0	0	0	0
Other	0	0	0	0	0
	0	0	0	0	0
	0	0	0	0	0
	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	0	0	0
REVENUE COSTS					
Total Salary costs	0	132902	136889	0	269791
Recruitment Costs	0	6930	0	0	6930
Travel & Sub	0	4543	4543	0	9086
Running Costs (heat, light,					
phone, maintenance &					
gen. Admin expenses etc)	0	4389	4389	0	8778
Rent & Rates	0	0	0	0	0
Audit/Accountancy/Legal/ICT	0	9856	9856	Ó	19712
Professional & consultancy	0	0	0	0	0
Q.A./Evaluation Costs(CAWT)	0	770	770	3080	4620
Marketing/Printing	0	1663	1663	0	3326
Publicity Materials	0	0	0	0	0
Programme Costs	0	0	0	0	0
Travel Resources	0	17133	17133	0	34265
Catering Resources	0	15208	15208	0	30415
Assessment Materials	0	1540	1540	0	3080
	0	0	0	0	0
	0	0	0	0	0
	0	0	0	0	0
OTHER	0	0	0	0	0
	0	13724	14136	0	27861
TOTAL OPERATING COSTS	0	208658	206126	3080	417864
TOTAL COST OF PROJECT	0	208658	206126	3080	417864

#### **MAJOR INCIDENT PLANNING AND RESPONSE**

CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ 2005	£ 2006	£ 2007	£ TOTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other		10000					0 0 10000 0 0
TOTAL CAPITAL COSTS A	0	10000	0	0	0	0	10000
REVENUE COSTS							
Total Salary costs			80000	82400			162400
Recruitment Costs	•	4500					4500
Travel & Sub			8000	8000			16000
Heat&Light Phone etc			2000	2000			4000
Rent & Rates cleaning etc			5000	5000			10000
Audit/Accountancy/ICT			6100	6100			12200
Q.A. and Evaluation Marketing/Printing/Stationery			2000 1000	4000 1000			6000 2000
Publicity Materials			1000	1000			1000
OTHER			,.000				0
				•			0
							0
							0
							0
TOTAL REVENUE COSTS B	0	4500	105100	108500	0	0	218100
PROGRAMME COSTS							
Training			5000	5000			10000
Professional fees			2000	2000			4000
							0
TOTAL PROGRAMME C	0	0	7000	7000	0	0	0 <b>14000</b>
TOTAL PROJECT A+B+C	0	14500	112100	115500	0	0	242100

#### MAJOR INCIDENT PLANNING AND RESPONSE

	€	€	€	€	€	€	€
CAPITAL COSTS	2002	2003	2004	2005	2006	2007	TOTAL
Construction/Refurbishment	0	0	0	0	0	0	0
Plant & Equipment	0	0	0	0	0	0	0
Fixtures & Fittings	0	15400	0	0	0	0	15 <del>4</del> 00
Professional, Legal etc	0	0	0	0	0	0	0
re building costs	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
7074 04574 00070	0	0	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	15400	0	0	0	0	15400
REVENUE COSTS							
Total Salary costs	0	0	123200	126896	0	0	250096
Recruitment Costs	0	6930	0	0	0	0	6930
Travel & Sub	0	0	12320	12320	0	0	24640
Heat&Light Phone etc	0	0	3080	3080	0	0	6160
Rent & Rates	0	0	7700	7700	0	0	15400
Audit	Ō	Ō	9394	9394	0	0	18788
Q.A. and Evaluation	0	0	3080	6160	0	0	9240
Marketing/Printing/Stationery	0	0	1540	1540	0	0	3080
Publicity Materials	0	0	1540	0	0	0	1540
OTHER	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL REVENUE COSTS B	0	6930	161854	167090	0	0	335874
PROGRAMME COSTS							
Training	0	0	7700	7700	0	0	15400
Professional fees	0	0	3080	3080	0	0	6160
1 101033101101 1003	0	0	3000	0	0	0	0100
	0	0	0	0	0	Ö	0
TOTAL PROGRAMME C	ŏ	Ŏ	10780	10780	ŏ	ŏ	21560
TOTAL PROJECT A+B+C	0	22330	172634	177870	0	0	372834

#### MOBILE CARDIAC CATHETERISATION SERVICE

CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ 2005	£ 2006	£ 2007 TO	£
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other							0 0 0 0 0
TOTAL CAPITAL COSTS A	0	0	0	0	0	0	0
REVENUE COSTS Total Salary costs Recruitment Costs Travel & Sub Heat&Light Phone etc Rent & Rates Audit/Accountancy/ICT CAWT Q.A./Evalaution Marketing/Printing/Stationery Publicity Materials OTHER Cardinal Consumables Radiological Contrast Agents Pharmacy		13368 631 52875 4856 2000 15510 5288 212					13368 0 0 631 52875 4856 2000 0 0 15510 5288 212 0
TOTAL REVENUE COSTS B	0	94740	0	O	0	0	9 <b>4740</b>
PROGRAMME COSTS							0 0 0
TOTAL PROGRAMME C	0	0	0	0	0	0	0 <b>0</b>
TOTAL PROJECT A+B+C	0	94740	0	0	0	0	94740

	€	€	€	€	€	€	€
CAPITAL COSTS	2002	2003	2004	2005	2006	2007	TOTAL
Construction/Refurbishment	0	0	0	0	0	0	0
Plant & Equipment	0	0	0	0	0	0	0
Fixtures & Fittings	0	0	0	0	0	0	0
Professional, Legal etc	0	0	0	0	0	0	0
re building costs	0	0	Ō	0	0	0	0
Other	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL CAPITAL COSTS A	0 <b>0</b>						
REVENUE COSTS							
Total Salary costs	0	20587	0	0	0	0	20587
Recruitment Costs	0	0	0	Ö	0	Õ	0
Travel & Sub	ŏ	ŏ	ő	Ŏ	Ö	Ŏ	Ö
Heat&Light Phone etc	0	972	0	0	0	0	972
Rent & Rates	0	81428	0	Ó	0	0	81428
Audit/Accountancy/ICT	0	7478	Ō	0	Ö	Ō	7478
CAWT Q.A./Evalaution	0	3080	0	Ó	Ò	Ó	3080
Marketing/Printing/Stationery	0	0	0	0	0	0	0
Publicity Materials	0	0	0	0	0	0	0
OTHER	0	0	0	0	0	0	0
Cardinal Consumables	0	23885	0	0	0	0	23885
Radiological Contrast Agents	0	8144	0	0	0	0	8144
Pharmacy	0	326	0	0	0	0	326
	0	0	0	0	0	0	0
TATAL DESERVE ARRESTS	0	0	0	0	0	0	0
TOTAL REVENUE COSTS B	0	145900	0	0	0	0	145900
PROGRAMME COSTS							
	0	0	0	0	0	0	0
	ō	ō	Ö	Ö	ŏ	Ŏ	Ö
	Ö	Õ	Ö	Ö	Ö	Ö	Ō
	0	0	0	0	0	0	0
TOTAL PROGRAMME C	0	0	0	0	0	0	0
TOTAL PROJECT A+B+C	0	145900	0	0	0	0	145900

#### JOINT IN-SERVICE EDUCATION PROGRAMME FOR QUALIFIED NURSES

CAPITAL COSTS	£ 2003	£ 2004	£ 2005	£ 2006	£ TOTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other	1000				0 0 1000 0 0
TOTAL CAPITAL COSTS	1000	0	0	0	1000
REVENUE COSTS					
Total Salary costs	80000	82400	84872		247272
Recruitment Costs	4500				4500
Travel & Sub	8000	7000	7000		22000
Running Costs ( heat, light,					
phone, maintenance &					
gen. Admin expenses etc)	2000	2000	2000		6000
Rent & Rates					0
Audit/Accountancy/Legal/ICT	6000	6000	6000		18000
Professional & consultancy	5000	5000	5000		15000
Q.A./Evaluation Costs(CAWT)	1000	1000	3000		5000
Marketing/Printing	1000	1000	1000		3000
Publicity Materials	1000	1000	1000		3000
Programme Costs					0
Training Materials	15000	15000	15000		45000
Venue Hire	5000	5000	5000		15000
					0
					0
					0
OTHER					0
_ · · · · <u>_ · · ·</u>					0
TOTAL OPERATING COSTS	128500	125400	129872	0	383772
TOTAL COST OF PROJECT	129500	125400	129872	0	384772

#### JOINT IN-SERVICE EDUCATION PROGRAMME FOR QUALIFIED NURSES

	€	€	€	€	€
CAPITAL COSTS	2003	2004	2005	2006	TOTAL
Construction/Refurbishment	0	0	0	0	0
Plant & Equipment	0	0	0	0	0
Fixtures & Fittings	1540	0	0	0	1540
Professional, Legal etc	0	0	0	0	0
re building costs	0	0	0	0	0
Other	0	0	0	0	0
	0	0	0	0	0
	0	0	0	0	0
	0	0	0	0	0
TOTAL CAPITAL COSTS A	1540	0	0	0	1540
REVENUE COSTS					
Total Salary costs	123200	126896	130702.9	0	380799
Recruitment Costs	6930	0	0	0	6930
Travel & Sub	12320	10780	10780	0	33880
Running Costs ( heat, light,	0	0	0	0	
phone, maintenance &	0	0	0	0	
gen. Admin expenses etc)	3080	3080	3080	0	9240
Rent & Rates	0	0	0	0	0
Audit/Accountancy/Legal/ICT	9240	9240	9240	0	27720
Professional & consultancy	7700	7700	7700	0	23100
Q.A./Evaluation Costs(CAWT)	1540	1540	4620	0	7700
Marketing/Printing	1540	1540	1540	0	4620
Publicity Materials	1540	1540	1540	0	4620
Programme Costs	0	0	0	0	0
Training Materials	23100	23100	23100	0	69300
Venue Hire	7700	7700	7700	0	23100
	0	0	0	0	0
	0	0	0	0	0
	0	0	0	0	0
	0	0	0	0	0
OTHER	0	0	0	0	0
TOTAL OPERATING COCTO	0	0	0	0	0
TOTAL OPERATING COSTS	197890	193116	200003	0	591009
TOTAL COST OF PROJECT	199430	193116	200003	0	592549

# CROSS BORDER MEDICAL TECHNICAL OFFICER TRAINING

CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ 2005 1	£ TOTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other					0 0 0 0 0
TOTAL CAPITAL COSTS	0	o	0	0	0
REVENUE COSTS					
Total Salary costs		41250	42488		83738
Recruitment Costs		3000			3000
Travel & Sub		16000	16000		32000
Running Costs (heat,light,					
phone, maintenance &					_
gen. Admin expenses etc)					0
Rent & Rates Audit/Accountancy/Legal/ICT		3000	3000	•	6000
Professional & consultancy		5000	3000		0
Q.A./Evaluation Costs(CAWT)		500	500	2000	3000
Marketing/Printing					0
Publicity Materials Programme Costs					0
<b>3</b>					ő
				•	0
					0
					0
					ő
OTHER					0
TOTAL OPERATING COSTS	0	63750	61988	2000	0 <b>127738</b>
TOTAL COST OF PROJECT	0	63750	61988	2000	127738
	•	00.00	0.000		

#### CROSS BORDER MEDICAL TECHNICAL OFFICER TRAINING

	€	€	€	€	€
CAPITAL COSTS	2002	2003	2004	2005	TOTAL
Construction/Refurbishment	0	0	0	0	0
Plant & Equipment	0	0	0	0	0
Fixtures & Fittings	0	0	0	0	0
Professional, Legal etc	0	0	0	0	0
re building costs	0	0	0	0	0
Other	0	0	0	0	0
	0	0	0	0	0
	0	0 0	0 0	0	0
TOTAL CAPITAL COSTS A	0	0	0	0	0
REVENUE COSTS					
Total Salary costs	0	63525	65431	0	128956
Recruitment Costs	0	4620	0	Ō	4620
Travel & Sub	0	24640	24640	Ō	49280
Running Costs ( heat, light,					
phone, maintenance &					
gen. Admin expenses etc)	0	0	0	0	0
Rent & Rates	0	0	0	0	0
Audit/Accountancy/Legal/ICT	Ō	4620	4620	0	9240
Professional & consultancy	0	0	0	Ó	0
Q.A./Evaluation Costs(CAWT)	0	770	770	3080	4620
Marketing/Printing	0	0	0	0	0
Publicity Materials	0	0	0	0	0
Programme Costs	0	0	0	0	0
	0 0	0 0	0 0	0	0
	0	0	0	0	0
	0	0	0.	0	0
OTHER	0	0	0	0	0
	ő	0	ñ	Ö	0
TOTAL OPERATING COSTS	Ō	98175	95461	3080	196716
TOTAL COST OF PROJECT	0	98175	95461	3080	196716

#### **CROSS BORDER POLICIES ON HEALTH PROTECTION**

CAPITAL COSTS	£ 2001	£ 2002	£ 2003	£ 2004	£ 2005	£ 2006 T	£ OTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other			3750				0 0 3750 0 0
PCs and Software			5000				5000 0 0
TOTAL CAPITAL COSTS A	0	0	8750	0	0	0	8750
REVENUE COSTS							
Total Salary costs Recruitment Costs Travel & Sub Heat&Light Phone etc Rent & Rates Audit/Accountancy/ICT Cawt Q.A. and Evaluation Marketing/Printing/Stationery Publicity Materials OTHER			42000 3000 6200 1800 1200 4030 2000 900	43260 6400 1900 1300 4030 4000 950			85260 3000 12600 3700 2500 8060 6000 1850 0 0
TOTAL REVENUE COSTS B	0	0	61130	61840	0	0	0 <b>122970</b>
PROGRAMME COSTS Training Costs				16000	16000		32000 0 0
TOTAL PROGRAMME C	0	0	0	16000	16000	0	0 <b>32000</b>
TOTAL PROJECT A+B+C	0	0	69880	77840	16000	0	163720

#### CROSS BORDER POLICIES ON HEALTH PROTECTION

	€	€	€	€	€	€	€
CAPITAL COSTS	2001	2002	2003	2004	2005	2006	TOTAL
Construction/Refurbishment	0	0	0	0	0	0	0
Plant & Equipment	0	0	0	0	0	0	0
Fixtures & Fittings	0	0	5775	0	0	0	5775
Professional, Legal etc	0	0	0	0	0	0	0
re building costs	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0
	0	0	7700	0	0	0	7700
	0	0	0.	0	0	0	0
	0	0	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	13475	0	0	0	13475
REVENUE COSTS							
Total Salary costs	0	0	64680	66620	0	0	131300
Recruitment Costs	0	0	4620	0	0	0	4620
Travel & Sub	0	0	9548	9856	0	0	19404
Heat&Light Phone etc	0	0	2772	2926	0	0	5698
Rent & Rates	0	0	1848	2002	0	0	3850
Audit/Accountancy/ICT	0	0	6206	6206	0	0	12412
Cawt Q.A. and Evaluation	0	0	3080	6160	0	0	. 9240
Marketing/Printing/Stationery	0	0	1386	1463	0	Ó	. 2849
Publicity Materials	0	0	0	0	0	0	0
OTHER	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL REVENUE COSTS B	0	0	94140	95234	0	0	189374
PROGRAMME COSTS							
1 NOOTO AIRINE COOTO	0	0	0	24640	24640	0	49280
	ő	Õ	0	0	0	0	0
	ŏ	0	Ö	0	0	Ö	ő
	ō	ō	Ö	Ŏ	Ö	Ö	ō
TOTAL PROGRAMME C	ŏ	Ŏ	Ŏ	24640	24640	Ō	49280
TOTAL PROJECT A+B+C	0	0	107615	119874	24640	0	252129

#### A NEW CHANCE: FOSTERING INITIATIVE

CAPITAL COSTS	£ 2001	£ 2002	£ 2003	£ 2004	£ 2005	£ 2006 T	£ OTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other					12000		0 0 12000 0 0
TOTAL CAPITAL COSTS A	0	0	0	0	12000	0	12000
REVENUE COSTS							
Total Salary costs					91375		91375
Recruitment Costs				4500			4500
Travel & Sub					3250		3250
Heat&Light Phone etc Rent & Rates					3000		3000
Audit/Accountancy/ICT					5000 6685		5000 6685
CAWT Q:A./Evalaution					3000		3000
Marketing/Printing/Stationery					4000		4000
Publicity Materials  OTHER							0
Training					1950		0 1950
· <b>3</b>					1000		0
							0
							0
TOTAL REVENUE COSTS B	0	0	0	4500	118260	0	122760
PROGRAMME COSTS							
							0
							0
•							ő
TOTAL PROGRAMME C	0	0	0	0	0	0	0
TOTAL PROJECT A+B+C	0	0	0	4500	130260	0	134760

3

## A NEW CHANCE: FOSTERING INITIATIVE

	€	€	€	€	€	€	€
CAPITAL COSTS	2001	2002	2003	2004	2005	2006 1	TOTAL
Construction/Refurbishment	0	0	0	0	0	0	0
Plant & Equipment	0	0	0	0	Ó	0	0
Fixtures & Fittings	0	0	0	0	18480	0	18480
Professional, Legal etc	0	0	0	0	0	0	0
re building costs	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	0	0	18480	0	18480
REVENUE COSTS							
Total Salary costs	0	0	0	0	140718	0	140718
Recruitment Costs	0	0	0	6930	0	0	6930
Travel & Sub	0	0	0	0	5005	0	5005
Heat&Light Phone etc	0	0	0	0	4620	0	4620
Rent & Rates	0	0	0	0	7700	0	7700
Audit/Accountancy/ICT	0	0	0	0	10295	0	10295
CAWT Q.A./Evalaution	0	0	0	0	4620	0	4620
Marketing/Printing/Stationery	0	0	0	0	6160	0	6160
Publicity Materials	0	0	0	0	0	0	0
OTHER	0	0	0	0	. 0	0	0
	0	0	0	0	3003	0	3003
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL REVENUE COSTS B	0	0	0	6930	182120	0	189050
PROGRAMME COSTS	0	0	0	0	0	^	0
	0	0 0	0 0	_	0 0	0	0
	0	0	0	0, 0	0	0 0	0 0
	0	0	0	0	0	0	0
TOTAL PROGRAMME C	0	0	0	0	0	0	0
	v	•	· ·	•	•	v	•
TOTAL PROJECT A+B+C	0	0	0	6930	200600	0	207530

# NEEDS ASSESSMENT AND PLANNING FRAMEWORKS

CAPITAL COSTS	£ 2001	£ 2002	£ 2003	£ 2004	£ 2005	£ 2006	£ TOTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other			7475				0 0 7475 0 0 0
TOTAL CAPITAL COSTS A	0	0	7475	0	0	0	7475
REVENUE COSTS Total Salary costs Recruitment Costs Travel & Sub Heat&Light Phone etc Rent & Rates Audit/Accountancy/ICT CAWT Q.A./Evalaution Marketing/Printing/Stationery Publicity Materials OTHER			3000	44620 6500 4000 3646 2000	45959 6500 4000 3646 2000	47337 6500 4000 3647 4000	137916 3000 19500 12000 0 10939 8000 0 0 0
TOTAL REVENUE COSTS B	0	0	3000	60766	62105	65484	0 0 <b>191355</b>
PROGRAMME COSTS Workshops etc Production Report etc Other				2000 2000	2000 2000	2000 5000 2000	6000 5000 6000
TOTAL PROGRAMME C	0	0	0	4000	4000	9000	0 <b>17000</b>
TOTAL PROJECT A+B+C	0	0	10475	64766	66105	74484	215830

#### NEEDS ASSESSMENT AND PLANNING FRAMEWORKS

	€	€	€	€	€	€	€
CAPITAL COSTS	2001	2002	2003	2004	2005	2006 7	TOTAL
Construction/Refurbishment	0	0	0	0	0	0	0
Plant & Equipment	0	0	0	0	0	0	0
Fixtures & Fittings	0	0	11512	0	0	0	11512
Professional, Legal etc	0	0	0	0	0	0	0
re building costs	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	11512	0	0	0	11512
REVENUE COSTS							
Total Salary costs	0	0	0	68715	70776	72900	212391
Recruitment Costs	0	0	4620	0	0	0	4620
Travel & Sub	0	0	0	10010	10010	10010	30030
Heat&Light Phone etc	0	0	0	6160	6160	6160	18480
Rent & Rates	0	0	0	0	0	0	0
Audit	0	0	0	5615	5615	5616	16846
CAWT Q.A./Evalaution	0	0	0	3080	3080	6160	12320
Marketing/Printing/Stationery	0	0	0	0	0	0	<u> </u>
Publicity Materials	0	0	0	0	0	0	0
OTHER	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL REVENUE COSTS B	0	0	4620	93580	95641	100846	294687
PROGRAMME COSTS							
Workshops etc	0	0	0	3080	3080	3080	9240
Production Report etc	0	0	0	0	3080	7700	7700
Other	0	0	0	3080	3080	3080	9240
Culoi	ő	0	0	0	0	0	0240
TOTAL PROGRAMME C	ŏ	Ö	ő	6160	6160	13860	26180
TOTAL PROJECT A+B+C	0	0	16132	99740	101801	114706	332378

#### "INSIDE OUT"

CAPITAL COSTS	£ 2001	£ 2002	£ 2003	£ 2004	£ 2005	£ 2006 To	£ OTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other							0 0 0 0 0
Information System			1500				1500
TOTAL CAPITAL COSTS A	0	0	1500	0	0	0	1500
REVENUE COSTS							
Total Salary costs			21150	21785			42935
Recruitment Costs			1000				1000
Travel & Sub			1015	1015			2030
Heat&Light Phone etc Rent & Rates			800	800			1600 0
Audit/Accountancy/ICT			1557	1563			3120
Professional Fees incl Eval			1750	1750			3500
Marketing/Printing/Stationery Publicity Materials			250 250	250 250			500 500
OTHER			230	250			300
External Supervision			720	720			1440
Assoc. Fees/Insurance			220	220			440
							0
							0
TOTAL REVENUE COSTS B	0	0	28712	28353	0	0	0 <b>57065</b>
TOTAL NEVEROL COSTS B	U	U	20/12	20333	U	U	37003
PROGRAMME COSTS			000	000			4000
Training Art Materials			600 500	600 500			1200 1000
Ait Waterials			500	300			0
							ŏ
TOTAL PROGRAMME C	0	0	1100	1100	0	0	2200
TOTAL PROJECT A+B+C	0	0	31312	29453	0	0	60765

CAPITAL COSTS	€ 2001	€ 2002	€ 2003	€ 2004	€ 2005	€ 2006 T	€ OTAL
Construction/Refurbishment	0	0	0	0	0	0	0
Plant & Equipment	Ŏ	Õ	ō	Ö	0	ŏ	ŏ
Fixtures & Fittings	0	0	0	0	0	0	Ō
Professional, Legal etc	0	0	0	0	0	0	0
re building costs	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0
	0	0	2310	0	0	0	2310
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	2310	0	0	0	2310
REVENUE COSTS							
Total Salary costs	0	0	32571	33548	0	0	66119
Recruitment Costs	0	0	1540	0	0	0	1540
Travel & Sub	0	0	1563	1563	0	0	3126
Heat&Light Phone etc	0	0	1232	1232	0	0	2464
Rent & Rates	0	0	0	0	0	0	0
Audit	0	0	2398	2407	0	0	4805
Professional Fees incl Eval	0	0	2695	2695	0	0	5390
Marketing/Printing/Stationery	0	0	385	385	0	0	770
Publicity Materials	0	0	385	385	0	0	770
OTHER	0	0	0	0	0	0	0
	0	0	1109	1109	0	0	2218
	0	0	339	339	0	0	678
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL REVENUE COSTS B	0	0	44216	43663	0	0	87879
PROGRAMME COSTS							
· ····································	0	0	924	924	0	0	1848
	Ö	ŏ	770	770	Ö	Ö	1540
	Ō	ō	0	0	Ö	ŏ	0
	Ō	Ō	Ŏ	Ō	Ō	Ō	Ō
TOTAL PROGRAMME C	0	0	1694	1694	0	0	3388
TOTAL PROJECT A+B+C	0	0	48220	45357	0	0	93577

#### **NEEDS ASSESSMENT OF CARERS**

CAPITAL COSTS	£ 2001	£ 2002	£ 2003	£ 2004	£ 2005	£ 2005 T	£ TOTAL
Construction/Refurbishment	0	0	0	0	0	0	0
Plant & Equipment	ŏ	ŏ	3000	Ŏ	Ö	Ö	3000
Fixtures & Fittings	Ō	Ŏ	0	Ö	Ŏ	Ŏ	0
Professional, Legal etc	0	0	0	0	0	0	0
re building costs	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0
	0	0	0	0	0	0	
	0	0	0	0	0	0	
	0	0	0	0	0	0	
TOTAL CAPITAL COSTS A	0	0	3000	0	0	0	3000
REVENUE COSTS							
Total Salary costs	0	0	32282	8071	0	0	40353
Recruitment Costs	0	0	0	0	0	0	0
Travel & Sub	0	0	4000	1000	0	0	5000
Heat&Light Phone etc	0	0	2000	500	0	0	2500
Rent & Rates	0	0	3000	750	0	0	3750
Audit	0	0	966	242	0	0	1208
Professional Fees incl Eval	0	0	500	125	0	0	625
Marketing/Printing/Stationery	0	0	500	125	0	0	625
Publicity Materials	0	0	0	0	0	0	0
OTHER	0	0	0	0	0	0	0
	0	0	0	- 0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0 0	0 0	0 0	0 0	0 0	0 0	0 0
TOTAL REVENUE COSTS B	0	0	43248	10812	0	0	54060
TOTAL REVENUE COSTS B	U	U	43240	10012	U	U	3400U
PROGRAMME COSTS							
	0	0	0	0	0	0	0
Strategy	0	0	1500	0	0	0	1500
Workshops	0	0	5000	1000	0	0	6000
	0	0	0	0	0	0	0
TOTAL PROGRAMME C	0	0	6500	1000	0	0	7500
TOTAL PROJECT A+B+C	0	0	52748	11812	0	0	64560

#### NEEDS ASSESSMENT OF CARERS

	€	€	€	€	€	€	€
CAPITAL COSTS	2001	2002	2003	2004	2005	2005	TOTAL
Construction/Refurbishment	0	0	0	0	0	0	0
Plant & Equipment	0	0	4620	0	0	0	4620
Fixtures & Fittings	0	0	0	0	0	0	0
Professional, Legal etc	0	0	0	0	0	0	0
re building costs	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL CARITAL COCTO A	0	0	0 <b>4620</b>	0	0 <b>0</b>	0 <b>0</b>	0 <b>4620</b>
TOTAL CAPITAL COSTS A	0	0	4620	0	U	U	4620
REVENUE COSTS							
Total Salary costs	0	0	49714.68	12428.67	0	0	62143
Recruitment Costs	0	0	0	0	0	0	0
Travel & Sub	0	0	6160	1540	0	0	7700
Heat&Light Phone etc	0	0	3080	770	0	0	3850
Rent & Rates	0	0	4620	1155	0	0	5775
Audit	0	0	1487.64	371.91	0	0	1860
Professional Fees incl Eval	0	0	770	192.5	0	0	962.5
Marketing/Printing/Stationery	0	0	770	192.5	0	0	962.5
Publicity Materials	0	0	0	0	0	0	0
OTHER	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL DEVENUE COCTOR	0	0	0	0	0	0 <b>0</b>	0
TOTAL REVENUE COSTS B	.0	0	66602	16651	0	U	83253
PROGRAMME COSTS							
	0	0	0	0	0	0	0
	0	0	2310	0	0	0	2310
	0	0	7700	1540	0	0	9240
	0	0	0	0	0	0	0
TOTAL PROGRAMME C	0	0	10010	1540	0	0	11550
TOTAL PROJECT A+B+C	0	0	81232	18191	0	0	99423

#### **AWARENESS TRAINING COGNITIVE THERAPY**

CAPITAL COSTS	£ 2001	£ 2002	£ 2003	£ 2004	£ 2005	£ 2005 T	£ OTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other			3000				0 3000 0 0 0
TOTAL CAPITAL COSTS A	0	0	3000	0	0	0	3000
REVENUE COSTS							
Total Salary costs			22000	22000			44000
Recruitment Costs		0	0	0			0
Travel & Sub			4000	4000			8000
Heat&Light Phone etc			1500	1500			3000
Rent & Rates			4000	4000			0
Audit/Accountancy/ICT Professional Fees incl Eval			4302 500	4303 2500			8605 3000
Marketing/Printing/Stationery			1500	1500			3000
Publicity Materials			500				500
OTHER							0
							0
							0
							0
							0
TOTAL REVENUE COSTS B	0	0	34302	358Ô3	0	0	70105
PROGRAMME COSTS							
Nurse Replacement Costs			80976	80976			161952
Trainers			26895	26895			53790
Board Reps and Links			0	0			0
Graduation		_	1500	1500			3000
TOTAL PROGRAMME C	0	0	109371	109371	0	0	218742
TOTAL PROJECT A+B+C	0	0	146673	145174	0	0	291847

#### AWARENESS TRAINING COGNITIVE THERAPY

	€	€	€	€	€	€	€
CAPITAL COSTS	2001	2002	2003	2004	2005	2005	TOTAL
Construction/Refurbishment	0	0	0	0	0	0	0
Plant & Equipment	0	0	0	0	0	0	0
Fixtures & Fittings	0	0	4620	0	0	0	4620
Professional, Legal etc	0	0	0	0	0	0	0
re building costs	0	Ō	0	0	0	0	0
Other	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL CARITAL COOTS A	0	0	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	4620	0	0	0	4620
REVENUE COSTS							
Total Salary costs	0	0	33880	33880	0	0	67760
Recruitment Costs	0	0	0	0	0	0	0
Travel & Sub	0	0	6160	6160	0	0	12320
Heat&Light Phone etc	0	.0	2310	2310	0	0	4620
Rent & Rates	0	0	0	0	0	0	0
Audit/Accountancy/ICT	0	0	6625	6627	0	0	13252
Professional Fees incl Eval	0	0	770	3850	0	0	4620
Marketing/Printing/Stationery	0	0	2310	2310	0	0	. 4620
Publicity Materials	0	0	770	0	0	0	770
OTHER	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL DEVENUE COSTS D	0	0	0 53935	0	0	0	407000
TOTAL REVENUE COSTS B	0	0	52825	55137	0	0	107962
PROGRAMME COSTS							
	0	0	124703	124703	0	0	249406
	ō	Ŏ	41418	41418	Ö	Ō	82837
	Ō	Ō	0	0	Ō	Ō	0
	0	0	2310	2310	0	0	4620
TOTAL PROGRAMME C	0	0	168431	168431	0	0	336863
TOTAL PROJECT A+B+C	0	0	225876	223568	0	0	449444

# INVESTIGATION OF SUICIDE AND ATTEMPTED SUICIDE

CAPITAL COSTS	£ 2001	£ 2002	£ 2003	£ 2004	£ 2005	£ 2005 T	£ OTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other							0 0 0 0 0
TOTAL CAPITAL COSTS A	0	0	0	0	0	0	0
REVENUE COSTS							
Total Salary costs			90000	92700	0	0	182700
Recruitment Costs		0	0	0	0	0	0
Travel & Sub			9000	9000	0	0	18000
Heat&Light Phone etc			2000	2000			4000
Rent & Rates Audit/Accountancy/ICT			ÖDEE	0055		-	0 4510
Professional Fees incl Eval			2255	2255			4510
Marketing/Printing/Stationery			1000	1000			2000
Publicity Materials							0
OTHER							. 0
				•			0
							0
							Ö
							0
TOTAL REVENUE COSTS B	0	0	104255	106955	0	0	211210
PROGRAMME COSTS	_						
University Costs			9320	9320			18640
			JOLO	5020			0
							0
TOTAL PROGRAMME C	0	0	9320	9320	0	0	18640
TOTAL PROJECT A+B+C	0	0	113575	116275	0	0	229850

#### INVESTIGATION OF SUICIDE AND ATTEMPTED SUICIDE

	€	€	€	€	€	€	€
CAPITAL COSTS	2001	2002	2003	2004	2005	2005	TOTAL
Construction/Refurbishment	0	0	0	0	0	0	0
Plant & Equipment	0	0	0	0	0	0	0
Fixtures & Fittings	0	0	0	0	0	0	0
Professional, Legal etc	0	0	0	0	Ó	0	0
re building costs	0	0	0	0	. 0	0	0
Other	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	0	0	0	0	0
REVENUE COSTS							
Total Salary costs	0	0	138600	142758	0	0	281358
Recruitment Costs	0	0	0	0	0	Ó	0
Travel & Sub	: O	0	13860	13860	0	0	27720
Heat&Light Phone etc	0	0	3080	3080	0	0	6160
Rent & Rates	0	0	0	0	0	0	0
Audit	0	0	3473	3473	0	0	6945
Professional Fees incl Eval	0	0	0	0	0	0	0
Marketing/Printing/Stationery	0	0	1540	1540	0	0	3080
Publicity Materials	0	0	0	0	0	0	0
OTHER	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL DESERVE COOTS D	0	0	0	0	0	0	0
TOTAL REVENUE COSTS B	0	0	160553	164711	0	0	325263
PROGRAMME COSTS							
	0	0	0	0	0	0	0
University Costs	Ö	ŏ	14353	14353	Ö	Ö	28706
	0	Ō	0	0	Ō	Ō	0
	Ō	Ö	Ō	Ō	ō	Ō	ō
TOTAL PROGRAMME C	0	0	14353	14353	0	0	28706
TOTAL PROJECT A+B+C	0	0	174906	179064	0	0	353969

## POSITIVE MENTAL HEALTH AND YOUNG PEOPLE

CAPITAL COSTS	£ 2001	£ 2002	£ 2003	£ 2004	£ 2005	£ 2005 T	£ OTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other			8000				0 8000 0 0 0
TOTAL CAPITAL COSTS A	0	0	8000	0	0	0	8000
REVENUE COSTS							
Total Salary costs			62221	71325	6253		139799
Recruitment Costs Travel & Sub			6000	0000	667		6000
Heat&Light Phone etc			7333 1833	8000 2000	167		16000 4000
Rent & Rates			1033	2000	101		000
Audit/Accountancy/ICT			5000	5000			10000
Professional Fees incl Eval			500	500	1000		2000
Marketing/Printing/Stationery			500	500			1000
Publicity Materials  OTHER							0 0
							ő
							0
							0
							0
TOTAL REVENUE COSTS B	0	0	83387	873 <b>2</b> 5	8087	0	178799
PROGRAMME COSTS							0
							0
Research			1500				1500
Other Workshops	_	_	3000	•	•		3000
TOTAL PROGRAMME C	0	0	4500	0	0	0	4500
TOTAL PROJECT A+B+C	0	0	95887	87325	8087	0	191299

## POSITIVE MENTAL HEALTH AND YOUNG PEOPLE

CAPITAL COSTS	€ 2001	€ 2002	€ 2003	€ 2004	€	€	€
CAPITAL COSTS	2001	2002	2003	2004	2005	2005	IUIAL
Construction/Refurbishment	0	0	0	0	0	0	0
Plant & Equipment	0	0	12320	0	0	0	12320
Fixtures & Fittings	0	0	0	0	0	0	0
Professional, Legal etc	0	0	0	0	0	0	0
re building costs	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL CARITAL COOTS A	0	0	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	12320	0	0	0	12320
REVENUE COSTS							
Total Salary costs	0	0	95820	109841	9630	0	215290
Recruitment Costs	0	0	9240	0	0	0	9240
Travel & Sub	0	0	11293	12320	1027	0	24640
Heat&Light Phone etc	0	0	2823	3080	257	0	6160
Rent & Rates	0	0	0	0	0	0	0
Audit	0	0	7700	7700	0	0	15400
Professional Fees incl Eval	0	0	770	770	1540	0	3080
Marketing/Printing/Stationery	0	0	770	770	0	0	, 1540
Publicity Materials	0	0	0	0	0	0	0
OTHER	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0 0	0	0 0	0	0 0	0	0
TOTAL REVENUE COSTS B	0	0 <b>0</b>	<b>128416</b>	1 <b>34481</b>	12454	0 <b>0</b>	0 <b>275350</b>
TOTAL REVENUE COSTS B	v	U	120410	134401	12434	,U	2/3330
PROGRAMME COSTS							
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	2310	0	0	0	2310
	0	0	4620	0	0	0	4620
TOTAL PROGRAMME C	0	0	6930	0	0	O	6930
TOTAL PROJECT A+B+C	0	0	147666	134481	12454	0	294600

#### **CROSS BORDER MOBILITY STUDY**

CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ 2005	£ 2006	£ 2007 T	£ OTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other		3000					0 3000 0 0 0
TOTAL CAPITAL COSTS A	0	3000	0	0	0	0	3000
REVENUE COSTS							
Total Salary costs		11838	48771	37675			98283
Recruitment Costs		2000					2000
Travel & Sub		1000	4000	3000			8000
Heat&Light Phone etc		500	2000	1500			4000
Rent & Rates		750	3000	2250			6000
Audit/Accountancy/ICT		1125	4500	3375			9000
Professional Fees incl Eval Marketing/Printing/Stationery		1000 250	500 500	500 3000			2000 3750
Publicity Materials		500 500	500	1000			1500
OTHER		000		1000			0
							Ö
							0
							0
							0
TOTAL REVENUE COSTS B	0	18963	63271	52300	0	0	134533
220224447							
PROGRAMME COSTS Rapid Strategy Workshop		1050					1050
Other Workshops		1030	1200	1200			2400
outer Workshops			1200	1200			2400
							Ö
TOTAL PROGRAMME C	0	1050	1200	1200	0	0	3450
TOTAL PROJECT A+B+C	0	23013	64471	53500	0	0	140983

#### **CROSS BORDER MOBILITY STUDY**

	€	€	€	€	€	€	€
CAPITAL COSTS	2002	2003	2004	2005	2006	2007	IUIAL
Construction/Refurbishment	0	0	0	0	0	0	0
Plant & Equipment	0	4620	0	0	0	0	4620
Fixtures & Fittings	0	0	0	0	0	0	0
Professional, Legal etc	0	0	0	0	0	0	0
re building costs	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	4620	0	0	0	0	4620
REVENUE COSTS							
Total Salary costs	0	18230	75107	58020	0	0	151356
Recruitment Costs	0	3080	0	0	0	0	3080
Travel & Sub	0	1540	6160	4620	0	0	12320
Heat&Light Phone etc	0	770	3080	2310	0	0	6160
Rent & Rates	0	1155	4620	3465	0	0	9240
Audit	0	1733	6930	5198	0	0	13860
Professional Fees incl Eval	0	1540	770	770	0	0	3080
Marketing/Printing/Stationery	0	385	770	4620	0	0	. 5775
Publicity Materials	0	770	0	1540	0	0	2310
OTHER	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL DEVENUE COOTS D	0	0	0	0	0	0	0
TOTAL REVENUE COSTS B	0	29202	97437	80542	0	0	207181
PROGRAMME COSTS							
Rapid Strategy Workshop	0	1617	0	0	0	0	1617
Other Workshops	ŏ	0	1848	1848	Ő	Ö	3696
Calci Workshops	ŏ	Ö	0	0	Õ	ő	0
	ő	ő	õ	ő	ő	Ŏ	ő
TOTAL PROGRAMME C	ő	1617	1848	1848	Ŏ	Ŏ	5313
TOTAL PROJECT A+B+C	0	35439	99285	82390	0	0	217114

#### **DEVELOPING ICT INFRASTRUCTURE**

CAPITAL COSTS	£ 2001	£ 2002	£ 2003	£ 2004	£ 2005	£ 2006	£ TOTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other							0 0 0 0
P.C ETC Web Site Development			2000 10000				2000 10000 0
TOTAL CAPITAL COSTS A	0	0	12000	0	0	0	12000
REVENUE COSTS							
Total Salary costs			22040	22701	23382		68123
Recruitment Costs			1500				1500
Travel & Sub			4500	4500	4500		13500
Heat&Light Phone etc Rent & Rates			500	500	500		1500
Audit/Accountancy/ict			1790	1790	1790		0 5370
CAWT Q.A./Evalaution			500	500	2500		3500
Marketing/Printing/Stationery Publicity Materials			200	200	200		600
OTHER							0
							ő
							0
				•			0 0
							0
TOTAL REVENUE COSTS B	0	0	31030	30191	32872	0	94093
DDOODAWU OCCO							
PROGRAMME COSTS Training			500	500			1000
			000	555			0
							0
TOTAL PROGRAMME C	0	0	500	500	0	0	0 <b>1000</b>
TOTAL PROJECT A+B+C	0	0	43530	30691	32872	0	107093

#### **DEVELOPING ICT INFRASTRUCTURE**

	€	€	€	€	€	€	€
CAPITAL COSTS	2001	2002	2003	2004	2005	2006	TOTAL
Construction/Refurbishment	0	0	0	0	0	0	0
Plant & Equipment	0	0	0	0	0	0	0
Fixtures & Fittings	0	0	0	0	0	0	0
Professional, Legal etc	0	0	0	0	0	0	0
re building costs	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0
	0	0	3080	0	0	0	3080
	0	0	15400	0	0	0	15400
	0	0	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	18480	0	0	0	18480
REVENUE COSTS							
Total Salary costs	0	0	33942	34960	36009	0	104910
Recruitment Costs	0	0	2310	0	0	0	2310
Travel & Sub	0	0	6930	6930	6930	0	20790
Heat&Light Phone etc	0	0	770	770	770	0	2310
Rent & Rates	0	0	0	0	0	0	0
Audit	0	0	2757	2757	2757	0	8270
CAWT Q.A./Evalaution	0	0	770	770	3850	0	5390
Marketing/Printing/Stationery	0	0	308	308	308	0	924
Publicity Materials	0	0	0	0	0	0	0
OTHER	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
7074, D7161115 00070 D	0	0	0	0	0	0	0
TOTAL REVENUE COSTS B	0	0	47786	46494	50623	0	144904
PROGRAMME COSTS							
1 NOOIGAIIIIE GOOTG	0	0	770	770	0	0	1540
	ŏ	0	0	0	Ŏ	0	0
	Ö	ő	Õ	Ŏ	Õ	Ö	Ö
	ő	Õ	ŏ	Õ	Ö	ŏ	Ö
TOTAL PROGRAMME C	ŏ	ŏ	77 <b>0</b>	770	Ŏ	ŏ	1540
TOTAL PROJECT A+B+C	0	0	67036	47264	50623	0	164924

#### **CONNECTING WITH EUROPE**

CAPITAL COSTS	£ 2001	£ 2002	£ 2003	£ 2004	£ 2005	£ 2006 T	£
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other P.C ETC			2522				0 0 0 0
Data Base,Web Page Links			3500 5000				3500 5000 0
TOTAL CAPITAL COSTS A	0	0	8500	0	0	0	8500
REVENUE COSTS							
Total Salary costs			40000	40000			80000
Recruitment Costs			2000				2000
Travel & Sub			2500	2500			5000
Heat&Light Phone etc Rent & Rates			500	500			1000 0
Audit/Accountancy/ict			2000	2000			4000
CAWT Q.A./Evalaution			500	500	2500		3500
Marketing/Printing/Stationery			200	200	100		500
Publicity Materials  OTHER							0
OTHER							0
				•			0 0
							0
							Ö
							0
TOTAL REVENUE COSTS B	0	0	47700	45700	2600	0	96000
PROGRAMME COSTS							
European Conference	-			10000			10000
Presentations Luxemburg				5000			5000
Study Tours/Presentations			4000	10000	10000	10000	34000
Networks			2000	2000	2000	2000	8000
TOTAL PROGRAMME C	0	0	6000	27000	12000	12000	57000
TOTAL PROJECT A+B+C	0	0	62200	72700	14600	12000	161500

#### **CONNECTING WITH EUROPE**

CAPITAL COSTS	€ 2001	€ 2002	€ 2003	€ 2004	€ 2005	€ 2006 1	€ OTAL
							VIAL.
Construction/Refurbishment	0	0	0	0	0	0	0
Plant & Equipment	0	0	0	0	0	0	0
Fixtures & Fittings	0	0	0	0	0	0	0
Professional, Legal etc	O	0	0	0	0	0	0
re building costs	Ó	0	0	0	0	0	0
Other	0	0	0	0	0	0	0
P.C ETC	0	0	5390	0	0	0	5390
Data Base, Web Page Links	0	0	7700	0	0	0	7700
TOTAL CARITAL COOTS A	0	0	0	0	0	0	42000
TOTAL CAPITAL COSTS A	0	0	13090	0	0	0	13090
REVENUE COSTS							
Total Salary costs	0	0	61600	61600	0	0	123200
Recruitment Costs	0	0	3080	0	0	0	3080
Travel & Sub	0	0	3850	3850	0	0	7700
Heat&Light Phone etc	0	0	770	770	0	0	1540
Rent & Rates	0	0	0	0	0	0	0
Audit	Ō	Ö	3080	3080	Ö	Ô	6160
CAWT Q.A./Evalaution	0	0	770	770	3850	0	5390
Marketing/Printing/Stationery	0	0	308	308	154	0	770
Publicity Materials	0	0	0	0	0	0	Ö
OTHER	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
TOTAL REVENUE COSTS B	0	0	73458	70378	4004	0	147840
DDOODANNE COSTS							
PROGRAMME COSTS	•	•	^	45400	0	^	45400
European Conference	0 0	0 0	0 0	15400 7700	0 0	0 0	15400 7700
Presentations Luxemburg Study Tours/Presentations	0	0	6160	7700 15400	15400	15400	52360
Networks	0	0	3080	3080	3080	3080	12320
TOTAL PROGRAMME C	0	0	9240	41580	1 <b>8480</b>	18480	87780
TOTAL PROGRAMME C	U	U	3240	41300	10400	10400	01100
TOTAL PROJECT A+B+C	0	0	95788	111958	22484	18480	248710

# PARTNERSHIP TRAINING AND EDUCATION

CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ 2005 To	£ OTAL	
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other					0 0 0 0	
TOTAL CAPITAL COSTS	0	0	0	0	0	
REVENUE COSTS						
Total Salary costs					O <sub>.</sub>	
Recruitment Costs					0	
Travel & Sub		9750			9750	
Running Costs (heat,light,						
phone, maintenance &						
gen. Admin expenses etc)					0	į
Rent & Rates		2420			0	
Audit/Accountancy/Legal/ICT Professional & consultancy		2130			2130 0	
Q.A./Evaluation Costs(CAWT)		500			500	
Marketing/Printing					0	
Publicity Materials					0	
Programme Costs					^	
Process design & Development 34 Supplier & Training Mgr Days		20995			0 20995	
Facilitator training 40 days		24700		•	24700	
Awareness training 5 days		3088			3088	
Follow up and evaluation 20 days		12350			12350	
					0	
OTHER					0	
OHEK					0	
TOTAL OPERATING COSTS	0	73513	0	0	73513	
TOTAL COST OF PROJECT	0	73513	0	0	73513	

#### PARTNERSHIP TRAINING AND EDUCATION

	€	€	€	€	€
CAPITAL COSTS	2002	2003	2004	2005 1	TOTAL
Construction/Refurbishment	0	0	0	0	0
Plant & Equipment	0	0	0	0	0
Fixtures & Fittings	0	0	0	0	0
Professional, Legal etc	0	0	0	0	0
re building costs	0	0	0	0	0
Other	0	0	0	0	0
	0	0	0	0	0
	0	0	0	0	0
	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	0	0	0
REVENUE COSTS					
Total Salary costs	0	0	0	0	0
Recruitment Costs	0	0	0	0	0
Travel & Sub	0	15000	0	0	15000
Running Costs ( heat, light,					
phone, maintenance &					
gen. Admin expenses etc)	Ò	0	0	0	0
Rent & Rates	0	0	0	0	0
Audit/Accountancy/Legal/ICT	0	3277	0	0	3277
Professional & consultancy	0	0	0	0	0
Q.A./Evaluation Costs(CAWT)	0	769	0	0	769
Marketing/Printing	0	0	0	0	0
Publicity Materials	0	0	0	0	0
Programme Costs	0	0	0	0	0
Process design & Development	0	0	0	Ō	0
34 Supplier & Training Mgr Days	0	32300	0	0	32300
Facilitator training 40 days	0	38000	0	0	38000
Awareness training 5 days	0	4750	0	0	4750
Follow up and evaluation 20 days	0	19000	0	0	19000
	0	0	0	0	0
OTHER	0	0	0	0	0
· · · · · · · · · · · · · · · · · · ·	0	0	0	0	0
TOTAL OPERATING COSTS	Ŏ	113096	Ŏ	Ŏ	113096
TOTAL COST OF PROJECT	0	113096	0	0	113096

#### TRAINING THE TRAINERS

CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ 2005	£ TOTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other					0 0 0 0 0
TOTAL CAPITAL COSTS	0	0	0	0	0
REVENUE COSTS  Total Salary costs  Recruitment Costs  Travel & Sub  Running Costs ( heat, light, phone, maintenance &		12000	12000		0 0 24000
gen. Admin expenses etc) Rent & Rates Audit/Accountancy/Legal/ICT		1800	1800		0 0 3600
Professional & consultancy Q.A./Evaluation Costs(CAWT) Marketing/Printing Publicity Materials		500	500		0 1000 0 0
Programme Costs for 20 Participants  Modules 12 x 1 Day each Support 12 x 1/2 days Administration Venue Costs Assessment Verification OTHER		8400 4200 4000 6000 20000 4000	8400 4200 4000 6000 20000 4000		0 16800 8400 8000 12000 40000 8000
TOTAL OPERATING COSTS	0	60900	60900	0	0 <b>121800</b>
TOTAL COST OF PROJECT	0	60900	60900	0	121800

#### TRAINING THE TRAINERS

	€	€	€	€	€
CAPITAL COSTS	2002	2003	2004	2005	TOTAL
Construction/Refurbishment	0	0	0	0	0
Plant & Equipment	0	0	0	0	0
Fixtures & Fittings	0	0	0	0	0
Professional, Legal etc	0	0	0	0	0
re building costs	0	0	0	0	0
Other	0	0	0	0	0
	0	0	0	0	0
	0	0	0	0	0
T0T11 010F11 000F0 1	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	0	0	0
REVENUE COSTS					
Total Salary costs	· 0	0	0	0	0
Recruitment Costs	0	0	0	0	0
Travel & Sub	0	18461	18461	0	36922
Running Costs ( heat, light,					
phone, maintenance &					
gen. Admin expenses etc)	0	0	0	0	0
Rent & Rates	0	0	0	0	0
Audit/Accountancy/Legal/ICT	0	2769	2769	0	5538
Professional & consultancy	0	0	0	0	0
Q.A./Evaluation Costs(CAWT)	0	769	769	0	1538
Marketing/Printing	0	0	0	0	0
Publicity Materials	0	0	0	0	0
Programme Costs	0	0	0	0	0
20 Participants	0	0	0	0	0
Modules 12 x 1 Day each	0	12923 6461	12923 6461	0	25845 12923
Support 12 x 1/2 days Administration	0	6154	6154	0	12923
Venue Costs	0	9230	9230	0	18461
Assessment	0	30768	30768	0	61536
Verification	0	6154	6154	0	12307
OTHER	U	0104	0134	U	12301
OHER	0	0	0	0	0
TOTAL OPERATING COSTS	Ö	93689	93689	ŏ	187377
TOTAL COST OF PROJECT	0	93689	93689	0	187377

#### **WOMEN IN MANAGEMENT TRAINING**

CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ £ 2005 TOTAL	
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other					0 0 0 0 0
TOTAL CAPITAL COSTS	0	0	0	0	0
REVENUE COSTS					
Total Salary costs					0
Recruitment Costs					0
Travel & Sub		13000	13000	2600	Ю
Running Costs (heat, light,					
phone, maintenance &					
gen. Admin expenses etc)					0
Rent & Rates Audit/Accountancy/Legal/ICT		1125	1125		0
Professional & consultancy		1125	1125	225	0
Q.A./Evaluation Costs(CAWT)		500	500	100	_
Marketing/Printing					0
Publicity Materials					0
Programme Costs for 20 Participants					0
20 / 2110.pa.i.o					0
20 Trainer Days		8000	8000	1600	Ю
Accommodation/Venues		7500	7500	1500	_
Administration		2000	2000	400	-
Accreditation External Spekers		2000 5000	2000 5000	400 1000	
OTHER		3000	5000		0
					0
TOTAL OPERATING COSTS	0	39125	39125	0 7825	0
TOTAL COST OF PROJECT	0	39125	39125	0 7825	i <b>O</b>

#### **WOMEN IN MANAGEMENT TRAINING**

	€	€	€	€	€
CAPITAL COSTS	2002	2003	2004	2005 1	TOTAL
Construction/Refurbishment	0	0	0	0	0
Plant & Equipment	0	0	0	0	0
Fixtures & Fittings	0	0	0	0	0
Professional, Legal etc	0	0	0	0	0
re building costs	0	0	0	0	0
Other	0	0	0	0	0
	0	0	0	0	0
	0	0	0	0	0
	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	0	0	0
REVENUE COSTS					
Total Salary costs	0	0	0	0	0
Recruitment Costs	0	0	0	0	0
Travel & Sub	0	20000	20000	0	40000
Running Costs ( heat, light,					
phone, maintenance &					
gen. Admin expenses etc)	0	0	0	0	0
Rent & Rates	0	0	0	0	0
Audit/Accountancy/Legal/ICT	0	1731	1731	0	3461
Professional & consultancy	0	0	0	0	0
Q.A./Evaluation Costs(CAWT)	0	770	770	0	1540
Marketing/Printing	0	Ó	0	0	0
Publicity Materials	0	0	0	0	0
Programme Costs	0	0	0	0	0
20 Participants	0	0	0	0	0
00 T' D	0	0	0	0	0
20 Trainer Days	0	12307	12307	0	24614
Accommodation/Venues	0	11538 3077	11538 3077	0	23076 6154
Administration Accreditation	0	3077 3077	3077 3077	0 0	6154 6154
	0			0	
External Spekers OTHER	U	7692	7692	U	15384
	0	0	0	0	0
TOTAL OPERATING COSTS	0	60192	60192	Ō	120384
TOTAL COST OF PROJECT	0	60192	60192	0	120384

# ACTION LEARNING PROGRAMME (3 COHORTS OF 48)

CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ 2005	£ TOTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other					0 0 0 0 0
TOTAL CAPITAL COSTS	0	0	0	0	0
REVENUE COSTS					
Total Salary costs		40000	41200		81200
Recruitment Costs					0
Travel & Sub		79500	79500		159000
Running Costs (heat, light,					
phone, maintenance &					
gen. Admin expenses etc)		4500	4500		9000
Rent & Rates Audit/Accountancy/Legal/ICT		6300	6300		0 12600
Professional & consultancy		0300	0300		12000
Q.A./Evaluation Costs(CAWT)		500	2500		3000
Marketing/Printing		- 1500	1500		3000
Publicity Materials Programme Costs					0
Development Costs		10000			10000
Residential Week Costs		30000	30000		60000
University Costs		22500	22500		45000
Facilitator Costs		22500	22500		45000
Meeting Rooms		1500	1500		3000
Set Process Adviser		2250	2250		4500
OTHER					0
TOTAL OPERATING COSTS	0	221050	214250	0	0 <b>435300</b>
TOTAL COST OF PROJECT	0	221050	214250	0	435300

# ACTION LEARNING PROGRAMME (3 COHORTS OF 48)

(000:10:1100: 40)	€	€	€	€	€
CAPITAL COSTS	2002	2003	2004	2005	TOTAL
Construction/Refurbishment	0	0	0	0	0
Plant & Equipment	0	0	0	0	0
Fixtures & Fittings	0	0	0	0	0
Professional, Legal etc	0	0	0	0	0
re building costs	0	0	0	0	0
Other	0	0	0	0	0
	0	0	0	0	0
	0	0	0 0	0	0
TOTAL CAPITAL COSTS A	0	0 <b>0</b>	0	0 <b>0</b>	0 <b>0</b>
REVENUE COSTS					
Total Salary costs	0	61536	63382	0	124918
Recruitment Costs	Ō	0	0	0	0
Travel & Sub	ō	122303	122302.8	0	244606
Running Costs ( heat, light,				_	
phone, maintenance &					
gen. Admin expenses etc)	0	6923	6923	0	13846
Rent & Rates	0	0	0	0	0
Audit/Accountancy/Legal/ICT	0	9692	9692	0	19384
Professional & consultancy	0	0	0	0	0
Q.A./Evaluation Costs(CAWT)	0	769	3846	0	4615
Marketing/Printing	0	2307.6	2307.6	0	4615.2
Publicity Materials	0 0	0	0	0	0
Programme Costs	0	15384	0	0	15384
	0	46152	46152	0	92304
	ŏ	34614	34614	0	69228
	ō	34614	34614	Ō	69228
	Ō	2308	2308	Ö	4615
	0	3461	3461	0	6923
	0	0	0	0	0
OTHER					
	0	0	0	0	0
TOTAL OPERATING COSTS	0	340063	329602	0	669666
TOTAL COST OF PROJECT	0	340063	329602	0	669666

#### PUBLIC HEALTH LEADERSHIP NURSING PROGRAMME

CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ £ 2005 TOTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other				0 0 0 0 0
TOTAL CAPITAL COSTS	0	0	0	0 0
REVENUE COSTS Total Salary costs Recruitment Costs Travel & Sub Running Costs (heat,light, phone, maintenance & gen. Admin expenses etc) Rent & Rates Audit/Accountancy/Legal/ICT Professional & consultancy Q.A./Evaluation Costs(CAWT) Marketing/Printing Publicity Materials Programme Costs for			2500 500	0 0 0 0 2500 0 500 0
40 Participants			80000	. 0 0 0 0 0 0
OTHER				0
TOTAL OPERATING COSTS	0	0	83000	0 83000
TOTAL COST OF PROJECT	0	0	83000	0 83000

## PUBLIC HEALTH LEADERSHIP NURSING PROGRAMME

Construction/Refurbishment         0         0         0           Plant & Equipment         0         0         0           Fixtures & Fittings         0         0         0           Professional, Legal etc         0         0         0	0 0 0 0 0	TOTAL 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Plant & Equipment         0         0         0           Fixtures & Fittings         0         0         0           Professional, Legal etc         0         0         0	0 0 0 0 0	0 0 0 0
Fixtures & Fittings 0 0 0 0 Professional, Legal etc 0 0 0	0 0 0 0	0 0 0 0
Professional, Legal etc 0 0 0	0 0 0	0 0 0
	0 0 0	0 0
	0	0
re building costs 0 0 0 Other 0 0 0	0	
0 0 0	0	v
0 0 0	_	0
0 0 0	0	Ö
TOTAL CAPITAL COSTS A 0 0 0	0	Ō
REVENUE COSTS		
Total Salary costs 0 0 0	0	0
Recruitment Costs 0 0 0	0	0
Travel & Sub 0 0 0	0	0
Running Costs (heat,light, 0 0 0	0	0
phone, maintenance & 0 0 0	0	0
gen. Admin expenses etc) 0 0 0	0	0
Rent & Rates 0 0 0	0	0
Audit/Accountancy/Legal/ICT 0 0 3846	0	3846
Professional & consultancy 0 0 0	0	0
Q.A./Evaluation Costs(CAWT) 0 0 769	0	769
Marketing/Printing 0 0 0 Publicity Materials 0 0 0	0	0
Programme Costs 0 0 0	0	0
<b>40 Participants</b> 0 0 123072	Ö	123072
0 0 0	Ō	0
0 0 0	0	0
0 0 0	0	0
0 0 0	0	0
0 0 0	0	0
0 0 0	0	0
OTHER 0 0 0 0	0	0
TOTAL OPERATING COSTS 0 0 127687	0	127687
TOTAL COST OF PROJECT 0 0 127687	0	127687

## PARTNERSHIP TRAINING AND EDUCATION

CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ 2005	£ TOTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other					0 0 0 0 0
TOTAL CAPITAL COSTS	0	0	0	0	0
REVENUE COSTS  Total Salary costs Recruitment Costs Travel & Sub Running Costs ( heat,light, phone, maintenance & gen. Admin expenses etc) Rent & Rates Audit/Accountancy/Legal/ICT Professional & consultancy Q.A./Evaluation Costs(CAWT) Marketing/Printing Publicity Materials Programme Costs Process design & Development 34 Supplier & Training Mgr Days Facilitator training 40 days Awareness training 5 days		9750 2130 500 20995 24700 3088	-		0 9750 0 0 2130 0 500 0 0 20995 24700 3088
Follow up and evaluation 20 days		12350			12350 0 0
OTHER TOTAL OPERATING COSTS	0	73513	0	0	0 0 <b>73513</b>
TOTAL COST OF PROJECT	0	73513	0	0	73513

#### PARTNERSHIP TRAINING AND EDUCATION

	€	€	€	€	€
CAPITAL COSTS	2002	2003	2004	2005 T	OTAL
Construction/Refurbishment	0	0	0	0	0
Plant & Equipment	0	0	0	0	0
Fixtures & Fittings	0	0	0	0	0
Professional, Legal etc	0	0	0	0	0
re building costs	0	0	0	0	0
Other	0	0	0	0	0
	0	0	0	0	0
	0	0	0	0	0
TOTAL 040/T41 000/T0 4	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	0	0	0
REVENUE COSTS					
Total Salary costs	0	0	0	0	0
Recruitment Costs	0	0	0	0	0
Travel & Sub	0	15000	0	0	15000
Running Costs (heat,light,					
phone, maintenance &					
gen. Admin expenses etc)	0	0	0	0	0
Rent & Rates	0	0	0	0	0
Audit/Accountancy/Legal/ICT	0	3277	0	0	3277
Professional & consultancy	0	0	0	0	0
Q.A./Evaluation Costs(CAWT)	0	769	0	0	769
Marketing/Printing	0	0	0	0	0
Publicity Materials	0	0	0	0	0
Programme Costs	0	0	0	0	0
Process design & Development	0	0	0	0	0
34 Supplier & Training Mgr Days	0	32300	0	0	32300
Facilitator training 40 days	0	38000	0	0	38000
Awareness training 5 days	0.	4750	0	0	4750
Follow up and evaluation 20 days	0	19000	0	0	19000
	0	0	0	0	0
OTIED	0	0	0	0	0
OTHER	0	0	0	0	0
TOTAL OPERATING COSTS	Ò	113096	0	0	113096
TOTAL COST OF PROJECT	0	113096	0	0	113096

#### TRAINING THE TRAINERS

CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ 2005 TO	£ DTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other					0 0 0 0
TOTAL CAPITAL COSTS	0	0	0	0	0
REVENUE COSTS					
Total Salary costs					0
Recruitment Costs					0
Travel & Sub		12000	12000		24000
Running Costs (heat,light,					
phone, maintenance &					
gen. Admin expenses etc)					0
Rent & Rates					0
Audit/Accountancy/Legal/ICT Professional & consultancy		1800	1800		3600 0
Q.A./Evaluation Costs(CAWT)		500	500		1000
Marketing/Printing		500	000		0
Publicity Materials					0
Programme Costs for					_
20 Participants  Modules 12 x 1 Day each		8400	8400		0 16800
Support 12 x 1/2 days		4200	4200	•	8400
Administration		4000	4000		8000
Venue Costs		6000	6000		12000
Assessment		20000	20000		40000
Verification		4000	4000		8000
OTHER					0
TOTAL OPERATING COSTS	0	60900	60900	0	0 <b>121800</b>
TOTAL COST OF PROJECT	0	60900	60900	0	121800

#### TRAINING THE TRAINERS

	€	€	€	€	€
CAPITAL COSTS	2002	2003	2004	2005	TOTAL
Construction/Refurbishment	0	0	0	0	0
Plant & Equipment	0	0	0	0	0
Fixtures & Fittings	0	0	0	0	0
Professional, Legal etc	0	0	0	0	0
re building costs	0	0	0	0	0
Other	0	0	0	0	0
	0	0	0	0	0
	0	0	0	0	0
TOTAL CARITAL COSTS A	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	0	0	0
REVENUE COSTS					
Total Salary costs	0	0	0	0	0
Recruitment Costs	0	0	0	0	0
Travel & Sub	0	18461	18461	0	36922
Running Costs ( heat, light,					
phone, maintenance &					
gen. Admin expenses etc)	0	0	0	0	0
Rent & Rates	0	0	0	0	0
Audit/Accountancy/Legal/ICT	0	2769	2769	0	5538
Professional & consultancy	0	0	0	0	0
Q.A./Evaluation Costs(CAWT)	0	769	769	0	1538
Marketing/Printing	0	0	0	0	0
Publicity Materials	0	0	0	0	0
Programme Costs	0	0	0	0	0
20 Participants	0	0	0	0	0
Modules 12 x 1 Day each	0	12923	12923	0	25845
Support 12 x 1/2 days	0	6461	6461	0	12923
Administration	0	6154	6154	0	12307
Venue Costs	0	9230 30768	9230	0	18461
Assessment	0	30768 6154	30768 6154	0	61536 12307
Verification OTHER	U	0134	0134	U	12307
OTREK	0	0	0	0	0
TOTAL OPERATING COSTS	0	93689	93689	0	0 <b>187377</b>
TOTAL COST OF PROJECT	0	93689	93689	0	187377

#### **WOMEN IN MANAGEMENT TRAINING**

CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ £ 2005 TOTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other				0 0 0 0 0
TOTAL CAPITAL COSTS	0	0	0	0 0
REVENUE COSTS  Total Salary costs Recruitment Costs Travel & Sub Running Costs (heat,light, phone, maintenance & gen. Admin expenses etc) Rent & Rates Audit/Accountancy/Legal/ICT Professional & consultancy Q.A./Evaluation Costs(CAWT) Marketing/Printing Publicity Materials Programme Costs for		13000 1125 500	13000 1125 500	0 26000 0 0 2250 0 1000 0
20 Participants  20 Trainer Days Accommodation/Venues Administration Accreditation External Spekers OTHER		8000 7500 2000 2000 5000	8000 7500 2000 2000 5000	0 0 16000 15000 4000 4000 10000
TOTAL OPERATING COSTS	0	39125	39125	0 <b>0 78250</b>
TOTAL COST OF PROJECT	0	39125	39125	0 78250

#### **WOMEN IN MANAGEMENT TRAINING**

	€	€	€	€	€
CAPITAL COSTS	2002	2003	2004	2005	TOTAL
Construction/Refurbishment	0	0	0	0	0
Plant & Equipment	0	0	0	0	0
Fixtures & Fittings	0	0	0	0	0
Professional, Legal etc	0	0	0	0	0
re building costs	0	0	0	0	0
Other	0	0	0	0	0
	0	0	0	0	0
	0	0	0	0	0
TOTAL CARITAL COSTO 4	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	0	0	0
REVENUE COSTS					
Total Salary costs	0	0	0	0	0
Recruitment Costs	0	0	0	0	0
Travel & Sub	0	20000	20000	0	40000
Running Costs ( heat, light,					
phone, maintenance &					
gen. Admin expenses etc)	0	0	0	0	0
Rent & Rates	0	0	0	0	0
Audit/Accountancy/Legal/ICT	0	1731	1731	0	3461
Professional & consultancy	0	0	0	0	0
Q.A./Evaluation Costs(CAWT)	0	770	770	0	1540
Marketing/Printing	0	0	0	0	0
Publicity Materials	0	0	0	0	0
Programme Costs	0	0	0	0	0
20 Participants	0	0	0	0	0
00 T' B	0	0	0	0	0
20 Trainer Days	0	12307	12307	0	24614
Accommodation/Venues	0	11538 3077	11538	0	23076
Administration Accreditation	0	3077 3077	3077	0	6154 6154
	0	7692	3077 76 <b>9</b> 2	0	
External Spekers OTHER	U	7092	1092	U	15384
	0	0	0	0	0
TOTAL OPERATING COSTS	0	60192	60192	Ō	120384
TOTAL COST OF PROJECT	0	60192	60192	0	120384

## ACTION LEARNING PROGRAMME (3 COHORTS OF 48)

CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ £ 2005 TOTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other				0 0 0 0 0
TOTAL CAPITAL COSTS	0	0	0	0 0
REVENUE COSTS				
Total Salary costs Recruitment Costs		40000	41200	81200 0
Travel & Sub		79500	79500	159000
Running Costs ( heat, light,				
phone, maintenance &				
gen. Admin expenses etc) Rent & Rates		4500	4500	9000
Audit/Accountancy/Legal/ICT Professional & consultancy		6300	6300	12600 0
Q.A./Evaluation Costs(CAWT)		500	2500	3000
Marketing/Printing Publicity Materials		1500	1500	3000
Programme Costs				U
Development Costs		10000		10000
Residential Week Costs		30000	30000	. 60000
University Costs		22500	22500	45000
Facilitator Costs		22500	22500	45000
Meeting Rooms		1500	1500	3000
Set Process Adviser		2250	2250	4500 0
OTHER				0
TOTAL OPERATING COSTS	0	221050	214250	0 435300
TOTAL COST OF PROJECT	0	221050	214250	0 435300

## ACTION LEARNING PROGRAMME (3 COHORTS OF 48)

	€	€	€	€	€
CAPITAL COSTS	2002	2003	2004	2005	TOTAL
Construction/Refurbishment	0	0	0	0	0
Plant & Equipment	0	0	0	0	0
Fixtures & Fittings	0	0	0	0	0
Professional, Legal etc	0	0	0	0	0
re building costs	0	0	0	0	0
Other	0	0	0	0	0
	0 0	0	0 0	0	0
	0	0	0	0 0	0
TOTAL CAPITAL COSTS A	0	Ŏ	0	0	0
REVENUE COSTS					
Total Salary costs	0	61536	63382	0	124918
Recruitment Costs	0	0	0	0	0
Travel & Sub	0	122303	122302.8	Ō	244606
Running Costs ( heat, light,					
phone, maintenance &					
gen. Admin expenses etc)	0	6923	6923	0	13846
Rent & Rates	0	0	0	0	0
Audit/Accountancy/Legal/ICT	0	9692	9692	0	19384
Professional & consultancy	0	Ó	0	0	0
Q.A./Evaluation Costs(CAWT)	0	769	3846	0	4615
Marketing/Printing	0	2307.6	2307.6	0	4615.2
Publicity Materials	0	0	0	0	0
Programme Costs	0 0	15384	0	0 0	0 15384
	0	46152	46152	0	92304
	0	34614	34614	0	69228
	ő	34614	34614	Ö	69228
	Ō	2308	2308	ŏ	4615
	0	3461	3461	Ö	6923
	0	Ó	0	0	0
OTHER		•			
	0	0	0	0	0
TOTAL OPERATING COSTS	0	340063	329602	0	669666
TOTAL COST OF PROJECT	0	340063	329602	0	669666

### PUBLIC HEALTH LEADERSHIP NURSING PROGRAMME

CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ 2005 TOT	£ AL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other					0 0 0 0 0
TOTAL CAPITAL COSTS	0	0	0	0	0
REVENUE COSTS Total Salary costs Recruitment Costs Travel & Sub Running Costs (heat,light, phone, maintenance & gen. Admin expenses etc) Rent & Rates Audit/Accountancy/Legal/ICT Professional & consultancy Q.A./Evaluation Costs(CAWT) Marketing/Printing Publicity Materials Programme Costs for			2500 500		0 0 0 0 2500 0 500 0
40 Participants			80000		80000 0 0 0 0
OTHER					0 0 0
TOTAL OPERATING COSTS	0	0	83000	0	83000
TOTAL COST OF PROJECT	0	0	83000	0	83000

#### PUBLIC HEALTH LEADERSHIP NURSING PROGRAMME

	€	€	€	€	€
CAPITAL COSTS	2002	2003	2004	2005	TOTAL
Construction/Refurbishment	0	0	0	0	0
Plant & Equipment	0	0	0	0	0
Fixtures & Fittings	0	0	0	0	0
Professional, Legal etc	0	0	0	0	0
re building costs	0	0	0	0	0
Other	0	0	0	0	0
	0	0	0	0	0
	0 <b>0</b>	0	0 0	0	0
TOTAL CAPITAL COSTS A	0	0	0	0	0
REVENUE COSTS					
Total Salary costs	0	0	0	0	0
Recruitment Costs	Ö	0	0	0	Ō
Travel & Sub	ŏ	Ö	Ŏ	Ö	Ö
Running Costs ( heat, light,	0	0	0	0	0
phone, maintenance &	0	0	0	0	0
gen. Admin expenses etc)	0	0	0	0	0
Rent & Rates	0	0	0	0	0
Audit/Accountancy/Legal/ICT	0	0	3846	0	3846
Professional & consultancy	0	0	0	0	0
Q.A./Evaluation Costs(CAWT)	0	0	769	0	769
Marketing/Printing	0	0	0	0	0
Publicity Materials	0	0	0	0	0
Programme Costs 40 Participants	0 0	0	0 123072	0	0 123072
40 Farticipante	ő	Ö	0	0	0
	Ō	Ō	Ō	0	0
	0	0	0	0	0
	0	0	0	0	Ō
	0	0	0	0	0
	0	0	0	0	0
OTHER			0		_
	0	0	0	0	0
TOTAL OPERATING COSTS	0	0	127687	0	127687
TOTAL COST OF PROJECT	0	0	127687	0	127687

#### PERSONAL DEVELOPMENT PLANNING

CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ 2005	£ TOTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other					0 0 0 0 0
TOTAL CAPITAL COSTS	0	0	0	0	0
REVENUE COSTS Total Salary costs Recruitment Costs					0
Travel & Sub Running Costs (heat,light, phone, maintenance &			9750	9750	19500
gen. Admin expenses etc) Rent & Rates					0
Audit/Accountancy/Legal/ICT Professional & consultancy			3100	3100	6200 0
Q.A./Evaluation Costs(CAWT) Marketing/Printing Publicity Materials Programme Costs			500	500	1000 0 0
Process design & Development			40 É 0 5		0
30 Supplier & Training Mgr Days Facilitator training 42 days			18525 25935	25935	18525 51870
Awareness training 40 days			24700	24700	49400
Toolkit Design 10 days Delivery and evaluation 50 days			6175 30875	30875	6175 61750
OTHER					0 0 0
TOTAL OPERATING COSTS	0	0	119560	94860	214420
TOTAL COST OF PROJECT	0	Ó	119560	94860	214420

#### PERSONAL DEVELOPMENT PLANNING

		€	€	€	€
CAPITAL COSTS	2002	2003	2004	2005	TOTAL
Construction/Refurbishment	0	0	0	0	0
Plant & Equipment	0	0	0	0	0
Fixtures & Fittings	0	0	0	0	0
Professional, Legal etc	0	0	0	0	0
re building costs	0	0	0	0	0
Other	0	0	0	0	0
	0	0	0	0	0
	0	0	0	0	0
TOTAL 0495741 00070 4	0	0	0	0	0
TOTAL CAPITAL COSTS A	0	0	0	0	0
REVENUE COSTS					
Total Salary costs	0	0	0	0	0
Recruitment Costs	0	0	0	0	0
Travel & Sub	0	0	14999	14999	29999
Running Costs ( heat, light,	0	0	0	0	0
phone, maintenance &	0	0	0	0	0
gen. Admin expenses etc)	0	0	0	0	0
Rent & Rates	0	0	0	0	0
Audit/Accountancy/Legal/ICT	0	0	4769	4769	9538
Professional & consultancy	0	0	0	0	0
Q.A./Evaluation Costs(CAWT)	0	0	769	769	1538
Marketing/Printing	0	0	0	0	0
Publicity Materials	0	0	0	0	0
Programme Costs	0	0	0	0	0
Process design & Development	0	0	0	0	0
30 Supplier & Training Mgr Days	0	0	28499	0	28499
Facilitator training 42 days	0 0	0 0	39898 37998	39898 37998	79797 75997
Awareness training 40 days	0	0	37998 9500	37998	9500
Toolkit Design 10 days	0	0	47498	47498	94996
Delivery and evaluation 50 days	0	0	47490	47490	94990
OTHER	0	0	0	0	v
OMER	0	0	0	0	0
TOTAL OPERATING COSTS	Ö	Ŏ	183931	145933	329864
TOTAL COST OF PROJECT	0	0	183931	145933	329864

#### SERVICE DELIVERY AND ORGANISATION - EDUCATION, TRAINING AND DEVELOPMENT RESEARCH

CAPITAL COSTS	£ 2002	£ 2003	£ 2004	£ 2005 T	£ OTAL
Construction/Refurbishment Plant & Equipment Fixtures & Fittings Professional, Legal etc re building costs Other		2000			0 0 2000 0 0
TOTAL CAPITAL COSTS	0	2000	0	0	2000
REVENUE COSTS					
Total Salary costs		57750			57750
Recruitment Costs		3000			3000
Travel & Sub		8000			8000
Running Costs (heat,light,					
phone, maintenance &					
gen. Admin expenses etc)		2000			2000
Rent & Rates		4000			4000
Audit/Accountancy/Legal/ICT		2500			2500
Professional & consultancy					0
Q.A./Evaluation Costs(CAWT)		1500			1500
Marketing/Printing Publicity Materials		1250			0 1250
Programme Costs for		1250			1230
Workshops and conference		6000			6000
. •					0
					0
					0
					0
					0
OTHER					ő
					Ō
TOTAL OPERATING COSTS	0	86000	0	0	86000
TOTAL COST OF PROJECT	0	88000	0	0	88000

#### SERVICE DELIVERY AND ORGANISATION - EDUCATION, TRAINING AND DEVELOPMENT RESEARCH

	€	€	€	€	€
CAPITAL COSTS	2002	2003	2004	2005	TOTAL
Construction/Refurbishment	0	0	0	0	0
Plant & Equipment	0	0	0	0	0
Fixtures & Fittings	0	3077	0	0	3077
Professional, Legal etc	0	0	0	0	0
re building costs	0	0	0	0	0
Other	0	0	0	0	0
	0	0	0	0	0
	0	0	0 0	0	0
TOTAL CAPITAL COSTS A	0	<b>3077</b>	0	0	3077
REVENUE COSTS					
Total Salary costs	0	88843	0	0	88843
Recruitment Costs	Ö	4615	Ö	0	4615
Travel & Sub	ŏ	12307	Ö	0	12307
Running Costs ( heat, light,	•	,,	_	_	
phone, maintenance &					
gen. Admin expenses etc)	0	3077	0	0	3077
Rent & Rates	0	6154	0	0	6154
Audit/Accountancy/Legal/ICT	0	3846	0	0	3846
Professional & consultancy	0	0	0	0	0
Q.A./Evaluation Costs(CAWT)	0	2308	0	0	2308
Marketing/Printing	0	0	0	0	0
Publicity Materials	0	1923	0	0	1923
Programme Costs	0	0	0	0	0
	0 0	9230	0 0	0	9230
	0	0	0	0	0
	0	0	0	0	0
	0	0	Ŏ	0	0
	0	ő	0	0	0
	ŏ	ő	Ö	ŏ	Ö
OTHER					
	0	0	0	0	0
TOTAL OPERATING COSTS	0	132302	0	0	132302
TOTAL COST OF PROJECT	0	135379	0	0	135379

# **PARTNERSHIP IN ACTION**



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

# APPENDIX 6



### Constraints to Cross Border Partnership Working

- Hospitals tend to work as self-contained units and are seen to operate, in some instance in competition to one another. Developing services at one site may mean discontinuing/reducing services at another. The latter, within one jurisdiction is difficult, but when it crosses jurisdictions it is even more difficult.
- Legislation differences regarding eligibility for services, the special licensing of products (radioisotopes supplies), the transport and disposal of waste (nuclear) and employment legislation can have serious impact on partnership working.
- Registration of nursing, medical and professionals and allied to medicine are carried out in both jurisdictions by separate bodies who often have different sets of requirements. This can seriously inhibit joint appointments, staff rotations/placements and cross covering.
- Administrative differences in terms of pay scales, of employment, jobs description and tenure of office make it difficult to have joint recruitment drives, sharing of staff pools, staff placements/rotations and joint appointments.
- Medical defence insurance which is operated by private providers in the Republic of Ireland, is operated by Health Authorities in Northern Ireland making it difficult to enter into cross cover arrangements at a senior medical level.
- Under and post-graduate training is organised and accredited by different bodies in both jurisdictions, and in many cases reciprocal recognition does not exist, inhibiting partnership training programmes.
- Funding arrangements in both jurisdictions is quite different and can provide a barrier to partnership working.
- Currency fluctuations (£stg. / euro) can seriously undermine cost proposals.
- Standards, protocols, guidelines and audit procedures vary considerably between both jurisdictions and can inhibit partnership working.



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

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