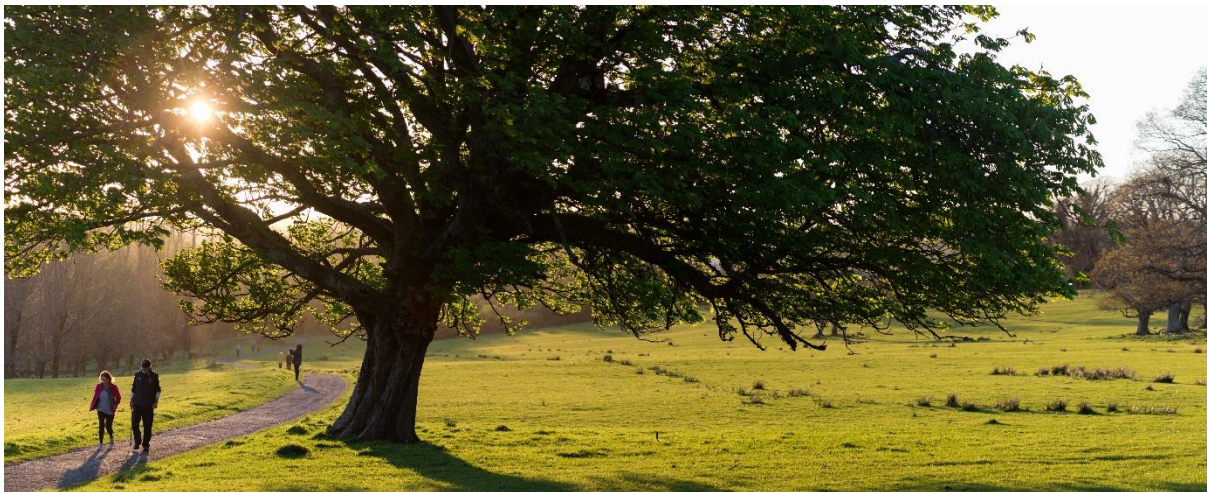


# Healthy Ireland Fund 2023-2025 Local Strategy for Offaly County Council



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SEPTEMBER 2022

**THIS STRATEGY MUST BE COMPLETED AND UPLOADED AS  
PART OF THE ONLINE APPLICATION**

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## 1. Introduction

Local Authorities are required to submit a 3-year strategy as part of the application process under HIF 2023-2025.

The Healthy Ireland Fund Local Strategy (HIFLS) 2023– 2025 will set out the Local Authority (LA) priorities under the Healthy Ireland Fund for the period. The strategy will provide a rationale for the selection of Healthy Ireland outcomes under HIF and identify how work under HIF will be aligned with wider health and wellbeing policy and interventions locally.

The Healthy Ireland City/County Coordinator (HC/CC) will lead the development of the strategy together with colleagues and members of the LCDC. The strategy will be informed by meaningful community consultation, aided by an analysis of local health risk profiles.

**Please increase the size of the text boxes if necessary.** Please also note that this document should **not exceed 20 pages**.

## 2. Methodology

Please outline the approach that was adopted by the Local Authority in developing this Local Strategy.

*Include details on the approach to local planning and application completion with associated local co-design and engagement processes, **including HSE CHO and Health and Wellbeing representatives' early input and feedback** on the prioritisation of outcomes and related activities. Please outline the means of consultation within the area and evidence of cross-sectoral representation of agencies at local levels in the outcome selection process and in the design phase of the HIFLS.*

The planning for the Consultative phase of the HIF Round 4 Local Strategy for Offaly commenced on 13th October 2022 with a presentation to the LCDC outlining the direction, budget, requirements and proposed rollout of Round 4 being given by the recently reappointed Healthy Ireland Coordinator. The LCDC unanimously voted to proceed with the process as outlined to them whereby an independent Facilitator and expert in the area of Health & Wellbeing would be engaged to assist in rolling out of a HIF Round 4 Consultation Day with key agencies and stakeholders with a view to devising a health & wellbeing survey to be distributed to all community groups and agencies via the Public Participation Network and contact lists of all Healthy Offaly Subcommittee members. The questions in the survey would seek to ascertain what the challenges to positive health were in Offaly.

The Healthy Offaly Subcommittee were informed on 26<sup>th</sup> October 2022 that a Health & Wellbeing expert/Facilitator had been procured to assist in the delivery of a comprehensive consultation process. All members of the subcommittee attending the meeting agreed direction of the planning stage and restructured Healthy Offaly Subcommittee and a HIF Round 4 Grant Funding Assessment Subcommittee as outlined to them by the Healthy Ireland Coordinator. The Grant Assessment Subcommittee would be formed as a new group comprised of two key HSE staff from the Health Promotion & Improvement Unit and three elected Members from the LCDC would meet to assess 'expressions of interest' for Round 4 funding from potential implementing partners. These implementing partners would then have a seat at the newly restructured Healthy Offaly Subcommittee to ensure actions were progressed in a timely and cost effective manner.

As a result of the successful consultation day, the Healthy Ireland Coordinator and Facilitator were able to draft a series of survey questions to query where the health challenges were. The questionnaire also outlined the 5 health & wellbeing outcome areas and the 27 outcome indicators while asking for the respondents 'top 3' outcome indicators in order of preference. The information returned would form the basis of the direction of health and wellbeing interventions up to the end of Round 4 of the programme.

Throughout the planning process guidance has been sought from and given by the HSE County Manager for Primary Care in Offaly. This person is also a member of the Offaly LCDC and gave unequivocal backing to the Healthy Ireland Coordinator at the October LCDC meeting. The HSE Manager gave suggestions about useful personnel additions to the Grant Assessment Subcommittee and these have been acted upon by the Healthy Ireland Coordinator. Also the HSE representative on the Healthy Offaly Subcommittee from the Health Promotion & Improvement Unit has endorsed the planning process from start to finish and has been communicating progress back to her Managers to ensure full transparency and maximum collaboration.

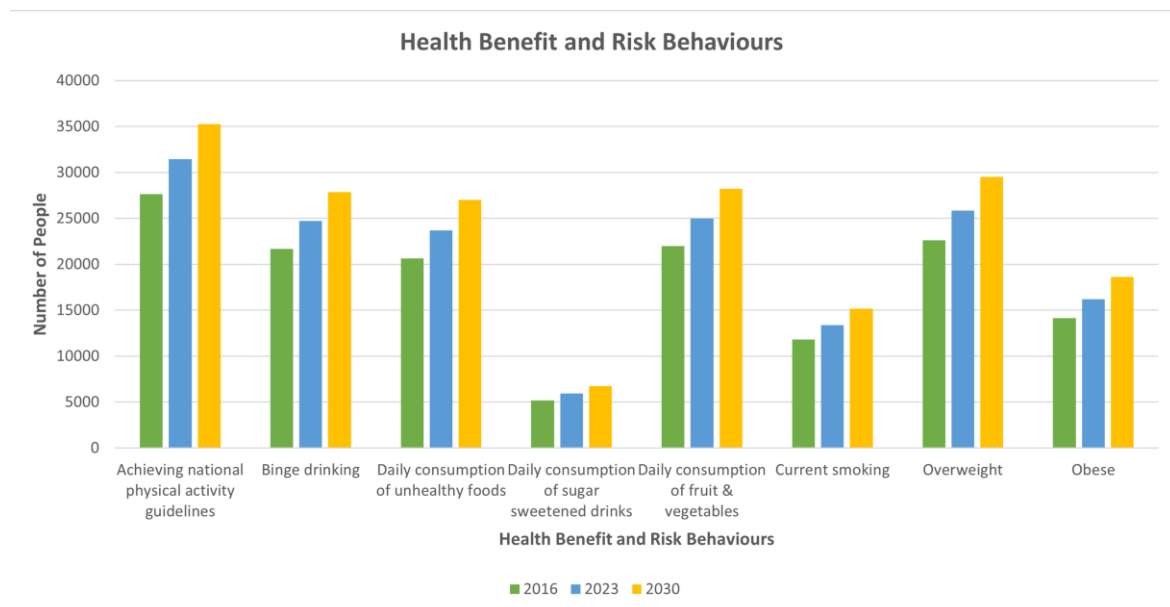
Following on from the Consultation Day, the Facilitator conducted 12 x 'one to one' phone meetings with relevant stakeholders who could not attend on the day to ascertain their input into the process and put forward their suggestions for possible interventions and listed the challenges that currently exist.

## City/County Population Profile

Please outline key socio-economic demographics for your city/county, highlighting in particular health data and disadvantaged or hard to reach groups or communities based on evidence and/or local knowledge.

County Offaly is located strategically within the centre of Ireland and within the province of Leinster and shares boundaries with counties Meath, Kildare, Laois, Tipperary, Galway, Roscommon and Westmeath. Tullamore is the county town and the administrative centre of County Offaly. The county's population was 77,961 in the 2016 census, having increased from 76,687 persons in the 2011 census. There are 35,294 persons residing in urban Offaly, and 42,667 in rural Offaly. This equates to a 45% urban 55% rural split. 79% of the rural population (33,506 persons) reside in the open countryside or a Sráid, whilst the remaining 21% of the rural population reside in a Village of fewer than 1,500 persons<sup>1</sup> (1. Source: Offaly County Council County Development Plan 2021 – 2027).

With regard to health benefit and health risk behaviours, Figure 12 from the **Healthy Offaly Round 4 Consultation Report** shows the actual 2016 CSO data, current data for 2023 (predicted from the 2016 CSO information), and predictions for 2030. The number of people achieving the national physical activity guidelines was predicted to rise in 2023 from 2016 figures and to continue to rise through to 2030. The number of people engaging in binge drinking behaviours is also predicted to rise over the same time period. Daily consumption of unhealthy foods is predicted to rise, as is daily consumption of sugar sweetened drinks. On the other hand, daily consumption of fruit and vegetables is also predicted to rise. The number of people in Offaly who smoke is predicted to rise. The number of people in Offaly who are classified as overweight or obese is also predicted to rise.<sup>2</sup>



<sup>2</sup> (Source: p.17, Healthy Offaly Round 4 Consultation Report referencing HSE Health Atlas Data).

As part of the Consultation process representatives of all disadvantaged/'hard to reach' groups were contacted to complete the Health & Wellbeing survey through the Public Participation Network. In addition to the survey further more detailed meetings were had with representatives from Traveller Groups, Young People, Older Adults, and Persons having a Disability. This cohort of respondents identified outcome areas 1. **Lifestyle & Behaviour Risk** and 3. **Wellbeing Factors** as being the keys areas requiring intervention.

Please include details of target groups representation and participation including qualitative information and lessons gathered via e.g., focus group discussions. This should include evidence of representation and/or participation of target groups in the prioritisation of outcome selection process particularly youth, disadvantaged women, persons living with a disability and target ethnic minority groups.

Please refer to **Appendix 3 Data Sources** in the Guidelines for some suggested data sources that may assist.

### 3. City/County Health Risk Summary.

Please provide an analysis of the health data based on evidence and local knowledge. This should include a profile relating to outcome indicators that are a priority in your area and that are being considered for selection. For example, there may be four priority indicators in your area, and you are trying to select one outcome indicator for the application.

Please outline **key health statistics/metrics** for your city/county, **highlighting in particular health data and at-risk groups/populations** based on evidence and/or local knowledge.

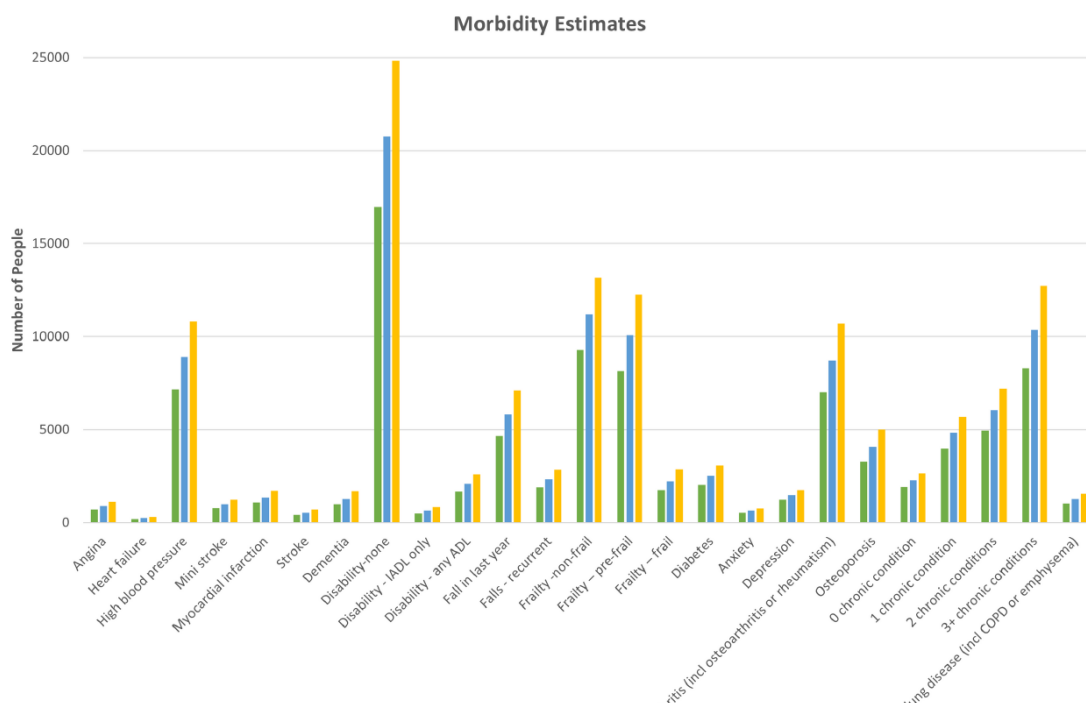
Please refer to **Appendix 3 Data Sources** in the Guidelines for some suggested data sources that may assist.

**Figure 13** from the *Healthy Offaly Round 4 Consultation Report* depicts the predicted prevalence of morbidity in Offaly in the current year and trends towards 2030. Cardiovascular conditions including angina, heart failure, high blood pressure, mini stroke, myocardial infarction (heart attack) and stroke are all predicted to rise in 2023 from 2016 data, and to continue to rise through to 2030. Of those cardiac conditions, high blood pressure is the most prevalent condition. Metabolic conditions such as diabetes are also predicted to increase over this time period.

Bone and joint conditions including arthritis and osteoporosis are predicted with no clinical conditions, one clinical condition, two clinical conditions and three or more clinical conditions is also predicted to increase over this time period. Chronic lung diseases including COPD (chronic obstructive pulmonary disease) and emphysema are predicted to increase. The prevalence of pre frailty, frailty, falls in the last year and recurrent falls is predicted to increase from 2016 to 2023 and again over time to 2030. The prevalence of dementia is predicted to increase over this time frame.<sup>3</sup> (Source: p.18, *Healthy Offaly Round 4 Consultation Report* referencing *HSE Health Atlas Data*). Regular physical activity and a healthy weight are key behaviours to offset the effects of these diseases in later life.

This has implications for the outcome of interventions into the future. The ‘at risk’ groups in the County are disadvantaged men and women, the general population, older adults, travellers and young people.

**Figure 13.**



#### 4. Outcome Selection and Target Group Prioritisation.

**Project Outcomes** are the overall changes the project intends to achieve. These should be related directly to the high-level programme outcomes chosen from the [HI Outcomes Framework Indicator Set](#). Project Outcomes should be measurable and related to baseline data. This will help illustrate the impact of the intervention undertaken.

**Project Outputs** refers to data from activities and helps to show the results of the project.



They are usually described in terms of the percentage change in the behaviour of the chosen target groups, in different areas relating to the intervention undertaken. These outputs help to demonstrate how the project outcomes above are achieved.

Examples of both are shown below for selected Outcomes Indicators:

**Example 1:** Reduce the percentage of people aged 50+ with moderate and severe levels of depression.

**Example of project outcomes:**

- Reduce the proportion of people in the target groups who self-reported their depression as moderate or severe
- Increase the proportion of people in the target groups who are availing of support for their depression.

**Example of project outputs:**

- % of target group who reported seeking formal help/ supports for their mental health
- % of target group receiving counselling supports for depression
- % of target group who self-reported their depression as moderate or severe.

**Example 2:** Decrease in the number of homes above the national Reference Level for Radon Levels.

**Example of project outcomes:**

- Decrease in the number of homes testing above the national reference level for Radon for the selected target group
- Increase in the % of the target group having knowledge of access to methods of radon remediation.

**Example of project outputs:**

- % of target group who have tested and retested levels of radon in their homes
- % of target group who score high/very high on the Radon Awareness Survey
- % of target group who have accessed one or more method of radon mediation.

**Example 3:** Decrease in proportion of people who smoke daily/occasionally.

**Example of project outcomes:**

- Reduce the number of people in the target group who self-report smoking daily/occasionally
- Increase in the number of people in the target group with taking part in smoking cessation groups.

**Example of project outputs:**

- % of target group who have reduced their monthly smoking (e.g., 0-5, 6-10 cigarettes per month reduction)
- % of target group taking part in smoking cessation groups/activities
- % of target group who have ceased smoking.

Project outcomes and target group selection must be evidence based and incorporate local knowledge of the current relevant health issue. Several data sources can be utilised to show the evidence base for the projects undertaking and some examples are shown below.

HI Outcome Indicator	Target Group(s) or Community	Justification	Example of Project Outcomes	Example of Project Outputs
<p>Choose from the High-Level HI Framework. Your project will contribute toward this at a local level.</p>	<p>State which target group(s) to work with. This choice should be underpinned by evidence (next section)</p>	<p>Please explain your choice of thematic area and target groups, based on evidence based, local knowledge of the health area and alignment with existing relevant health strategies. Links to data sources available in Appendix 3 of the guidelines</p>	<p>These are what the project aims to achieve.  These should be clearly defined and easy to measure. This will show the impact of the programme on the target group.</p>	<p>These are what your project produces to show the outcomes.  These should be clearly defined and measurable.</p>
<p>Decrease in no. of adults who are overweight or obese</p>	<p>Disadvantaged men &amp; women in Offaly  Older People  General Population</p>	<p><b>Health Atlas Ireland</b> reports that Body mass index (BMI), cholesterol and blood pressure levels are persistently higher among lower socio-economic groups.  One point to note in the Midlands Louth Meath CHO, three counties, Louth, Longford and Offaly have significantly higher rates of death from respiratory disease than experienced nationally <sup>4</sup> (Source: P.13, Midlands, Louth, Meath CHO Healthy Ireland Implementation Plan 2018 -2022 which itself was taken from the policy document 'A Healthy Weight for Ireland'). In order to tackle and reduce incidences of serious illness, the root causes must be tackled through promotion of positive healthy behaviours.</p>	<p>1. Reduce the proportion of people in the target groups who self-reported as overweight or obese  2. Increase the proportion of people in the target groups who are availing of support in relation to nutrition and exercise</p>	<p>% of target group who reported seeking formal help/ supports for weight management  % of target group undertaking regular exercise</p>
<p>Increase in</p>	<p>Disadvantaged Men</p>	<p>'The National Guidelines on Physical Activity for</p>		<p>To show a % increase in programme participants</p>

<p>percentage of Adults &amp; Children meeting Physical Activity Guidelines</p>	<p>and Women including One Parent Families</p> <p>Older People</p> <p>General Population</p> <p>Adolescents &amp; Young People (15-24)</p> <p>Children (Aged up to 14)</p>	<p>Ireland are based on international expert evidence and describe appropriate levels of health enhancing physical activity for the Irish population.</p> <p>Children and young people (aged 2 - 18) All children and young people should be active, at a moderate to vigorous level, for at least 60 minutes every day. This should include muscle-strengthening, flexibility and bone-strengthening exercises 3 times a week.</p> <p>Adults (aged 18 - 64) Adults should be active for at least 30 minutes a day of moderate activity on 5 days a week (or 150 minutes a week).</p> <p>Older people (aged 65+) Older people should be active for at least 30 minutes a day of moderate intensity activity on 5 days a week, or 150 minutes a week with a focus on aerobic activity, muscle strengthening and balance.</p> <p>Adults with disabilities People with disabilities should be as active as their ability allows. Aim to meet adult guidelines of at least 30 minutes of moderate-intensity activity on 5 days a week'.<sup>5</sup> (Source: P.6, <i>Get Ireland Active! National Physical Activity Plan for Ireland</i>).</p> <p>Further evidence at a local level in Offaly of a need for Physical Activity interventions has come for the Healthy Offaly 'Health &amp; Wellbeing' Survey distributed as part of the Consultation process. Of the 339 completed surveys received back 124 (37% of total respondents) rated increasing the time Adults and Children spent exercising each week as of paramount importance.</p>	<ol style="list-style-type: none"> <li>1. The aim is to increase physical activity levels across the County and reduce sedentary behaviour.</li> <li>2. To remove the barriers to participation which are experienced by those groups/individuals targeted.</li> </ol>	<p>who continue to exercise regularly measured by participation surveys before during and after programmes</p> <p>% of children from target group (General Population in Offaly) who self-report an increase in physical activity</p>
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## 5. Policy & Strategy Alignment.

For each outcome selected, provide information on the [HI Policies](#) and other national policies that will be aligned through use of the Fund. Note here any current policy gap to be addressed through use of the Fund via innovation.

Outline how the HIF Local Strategy aligns with health aspects of the (draft) LECP, the Sláintecare Healthy Communities Programme (if applicable) and other health and wellbeing related programmes delivered in your city/county e.g., the Active Cities Programme.

Please refer to **Sections 6.1.2 and 6.2.4** in the Guidelines for further information.

The 1<sup>st</sup> Outcome Indicator '*Decrease in no. of adults who are overweight or obese*' will align with the goals and objectives of the following:

- A Healthy Weight for Ireland Obesity Policy & Action Plan 2016 - 2025
- The Healthy Ireland Strategic Action Plan 2021 – 2025
- Community Goal 2 of the Offaly Local and Community Development Plan 2016 - 2021
- Objective 5 of the Offaly Local and Community Development Plan 2016 - 2021 to improve the wellbeing and quality of life for children, youth, families and older people (these objectives can be updated and amended when the draft LECP 2023 & 2028 becomes available).

The 2<sup>nd</sup> Outcome Indicator '*Increase in percentage of Adults & Children meeting Physical Activity Guidelines*' will align with the goals and objectives of the following:

- '*Get Ireland Active – National Physical Activity Plan for Ireland*' through Action area 6 interventions
- '*Get Ireland Walking Strategy & Action Plan 2017 – 2020*' through theme 5 '*Communities*'.
- '*Healthy Ireland Strategic Action Plan 2021 – 2025*' through theme 3.4
- objective 5 of the Offaly Local and Community Development Plan 2016 - 2021 to improve the wellbeing and quality of life for children, youth, families and older people (these objectives can be updated and amended when the draft LECP 2023 & 2028 becomes available).

## 6. Implementing Partners

Identify Lead Implementing and other relevant implementing partners at local, regional and/or national level that will be directly involved in work toward the achievement of your selected outcomes including via shared activities with other Local Authorities.

Please refer to **Section 6.1** in the Guidelines for further information.

The following list have been identified as potential implementing partners at a local level for the rollout of actions relating to the two identified outcome indicators:

- Offaly Sports Partnership – Physical Fitness Interventions
- Offaly Local Development Company – Physical Fitness and/or Obesity Interventions
- Offaly County Council – Obesity Interventions
- Clara Arden View Community & Family Resource Centres – Obesity Interventions
- Social Farming Ireland – Physical Fitness Interventions
- South West Offaly Sport & Recreation Centre – Physical Fitness Interventions
- Parents First Tullamore – Obesity Interventions
- Kilcormac Development Association – Physical Fitness and/or Obesity

Other partners assisting with action rollout but not directly funded might include:

- The Health Services Executive
- Laois Offaly Education & Training Board
- The Offaly Public Participation Network
- The Children & Young Persons Services Committee
- Tusla
- Offaly County Childcare Committee
- Irish Men's Shed Association
- Jigsaw
- Sport Ireland
- Inclusion Ireland
- Irish Refugee Council
- Offaly Traveller Movement
- Birr Traveller & Settled People's Group
- TUS Shannon Athlone
- Offaly Comhairle Na Nog
- Offaly LCDC

It is important to note that the Consultation process has only recently concluded and groups have just being notified of the outcome indicators chosen by Healthy Offaly. Therefore, it will be several more weeks before prospective partners can plan, cost and prepare delivery of actions relating to these Obesity and Physical Activity Outcome indicators. There are currently no details of potential actions available for reporting on.

## Other funding sources

Indicate other public/private sources of funding, including philanthropic sources that may leverage selected outcomes and bolster ambitions for the Healthy Ireland Fund in your county.

- Healthy Offaly have included a requirement for all Round 4 implementing Partners to bring forward a match funding element to their proposed project to ensure greatest value for money.
- This might take the form of leveraging funding from other agencies, own funds or providing the nominal programme entry fees to fulfill the match funding requirement.
- There is no set amount of match funding and each application will be taken on a 'case by case' basis.
- There will be a continued emphasis through the partnership model to access additional sources of funding from other agencies to compliment Healthy Ireland funding throughout the lifetime of Round 4.

## 7. Communications Plan

Please provide a broad outline of main communication goals and the means and frequency with which you will promote Healthy Ireland to you target group/s as per examples below. After submission of the application this can be updated and used as a tool to benefit implementation and/or reporting.

<b>Communication Goal</b>	<b>Audience</b>	<b>Frequency</b>	<b>Medium</b>	<b>Responsible/ Chair</b>
<i>Promotion of the Healthy Ireland Agenda through promotion Healthy Offaly Actions through the medium of the printed press</i>	<i>General public</i>	<i>Minimum 4 x notifications per year and contribution to local health and wellbeing supplements</i>	<i>Online, Events, Radio, Social Media</i>	<i>HC/CC</i>
<i>Healthy Offaly Action Progress Report to monitor progress of rollout of Round 4 in Offaly</i>	<i>Healthy Offaly Subcommittee Members, LCDC members and Senior Management Team of Offaly County Council</i>	<i>Every 3 months</i>	<i>Report circulated via email in advance of the quarterly Healthy Offaly Subcommittee Report</i>	<i>HC/CC</i>



## 8. Planning for the end of round 4

Funding for HIF Round 4 activity will come to an end in December 2025. Outline your strategy for the close out of the HIF funded work under round 4 by the end of December 2025.

The strategy for closing out Round 4 of the Healthy Ireland Fund in Offaly will involve:

- Using quarterly Healthy Offaly Subcommittee meetings to constantly monitor progress with regard to the rollout of actions.
- Should an issue arise it will be identified before the end of the programme and the necessary course correction can be made.
- All projects granted funding will be periodically inspected by the Healthy Ireland Coordinator to ensure all work is being completed to the highest standards and within the agreed timeframe.
- All invoices/statements/receipts will be requested from implementing partners several weeks in advance of Pobal reporting timeframes to ensure adherence with programme closure deadlines.
- A final project summary will be requested from Implementing Partners which will be uploaded to the Pobal online portal if /when required. This information will form the basis of the non-financial reporting throughout the lifetime of the programme anyway.