

Child Health Public Health

2023 Annual Report



Universal
child health
programme



Integrated
health



Government
and stakeholder
engagement



Children's health
and wellbeing
programmes



mychild.ie



- 3 Foreword
- 4 At a glance: key achievements in 2023
- 6 Our place in the HSE
- 7 Meet the Child Health Public Health team
- 8 Glossary of terms and abbreviations
- 10 What is Child Health Public Health?
- 11 Child Health Public Health in action
- 12 Our vision and core work streams overview
- 16 Child Health Public Health population

Core work stream 1: The National Healthy Childhood Programme (NHCP)

- 17 Universal programme of clinical care for all children
- 18 A child's journey through the National Healthy Childhood Programme
- 19 Screening
- 21 Infant feeding/lactation support
- 22 Infant mental health
- 23 Regional implementation of the NHCP
- 24 Core areas of CHPDO work

Core work stream 2: Integrated health

- 26 Integrated health activities

Core work stream 3: Government and stakeholder engagement

- 29 Government and stakeholder engagement overview

Core work stream 4: Children's health and wellbeing programmes

- 31 Children's health and wellbeing programmes overview
- 32 Healthy Weight for Children

Supporting the core work: Health information

- 35 Parent resources including mychild.ie
- 37 Parent resources available as part of NHCP
- 38 Practitioner resources available as part of NHCP
- 39 Practitioner training

Supporting the core work: Health intelligence

- 42 Health intelligence overview

Underpinning the core work streams: Governance

- 44 Governance groups, national representation and conferences
- 45 Contact details



Foreword: Keeping the focus on children with an integrated approach

“Increased awareness and investment in the newborn screening programmes is particularly welcome and we look forward to further expansion”

54,418 babies were born in Ireland in 2023 and around a quarter of our population are aged under 19 years. We know that a child’s early years have a profound influence on their longer-term health and wellbeing. A positive enduring impact in the first few years of life can be achieved through economic, social and environmental conditions, and public policies which impact on these. Our work to support children and their families is rooted in evidence, health data and intelligence and supported by strong governance structures.



Working for children to achieve their best health and development requires an integrated approach across the health service, government and broader organisations with roles supporting children and families in their lives. Child health public health services must provide accessible universal interventions for all children while additional programmes should be provided based on need – progressive or proportionate universalism. We work closely with HSE colleagues including Community Primary Care, Health and Wellbeing and clinical programmes within the office of the Chief Clinical Officer to deliver on these shared objectives for children.

One of the most challenging areas in 2023 has been the impact of staffing shortages of core practitioners of the universal clinical programme for children, principally our Public Health Nursing colleagues and our Community Medical Doctors. As a national child health public health function, we continue to raise and advocate for the essential role our colleagues play in identifying need and intervening at the earliest point in time, in line with Sláintecare objectives. As we move towards a new central HSE structure and regional areas, we are committed to supporting the provision of the standardised universal child health services in partnership with our regional colleagues.

We also continue to address the underlying causes and drivers of health inequity. To this end, one of the growing areas of our work has been addressing the child health needs of marginalised and disadvantaged families. Poverty for children is an old foe, but remains as challenging now as was for any of my public health colleague predecessors. It is one we need, collectively, to keep shining a light on.

A key area of focus in 2023 has been on newborn screening and the publication of a 3-year report on the national newborn bloodspot and newborn hearing screening programmes. These excellent programmes allow diagnosis and support for families with significant clinical conditions at the earliest possible time. The increased awareness and investment in these programmes is particularly welcome and we look forward to further expansion of them.

Increased investment in public health, subsequent to the Covid-19 pandemic, has allowed child health public health to become a clear priority area for the new National Public Health function. That continued support and leadership from the National Director of Public Health and the Chief Clinical Officer is very welcome.

I want to express my appreciation to everyone involved in delivering the national child health programme, including my own very dedicated team. This vital work for children and their families, could not be successfully implemented without the commitment of so many across the wider health service, and we hope this focus and commitment continues for the benefit of our children.

Dr Abigail Collins

National Clinical Lead, Child Health Public Health (CHPH) / National Healthy Childhood Programme (NHCP)

At a glance: key achievements in 2023

54,418

Births

(Source: CSO birth occurrence data)



98.7%

babies visited by a PHN within 72 hours of discharge from maternity services



87.8%

children reaching 12 months who have had their 9 to 11 month PHN child health and development assessment on time or before reaching 12 months of age

4,977,853

the recorded number of visits to mychild.ie. The balance between new and returning users is 50:50.



91%

of mychild.ie visitors come from organic search (through unpaid search result)

549



pages on mychild.ie and

161 were fact-checked as part of the 3 year review process

26



infant feeding/lactation midwives trained to deliver breastfeeding skills training

54,264



eligible babies offered newborn hearing screening

824

babies referred to audiology

79

babies identified with a permanent childhood hearing loss

54,820



babies screened through the Newborn Bloodspot Screening Programme

284

screen positives

144

babies diagnosed with a rare condition

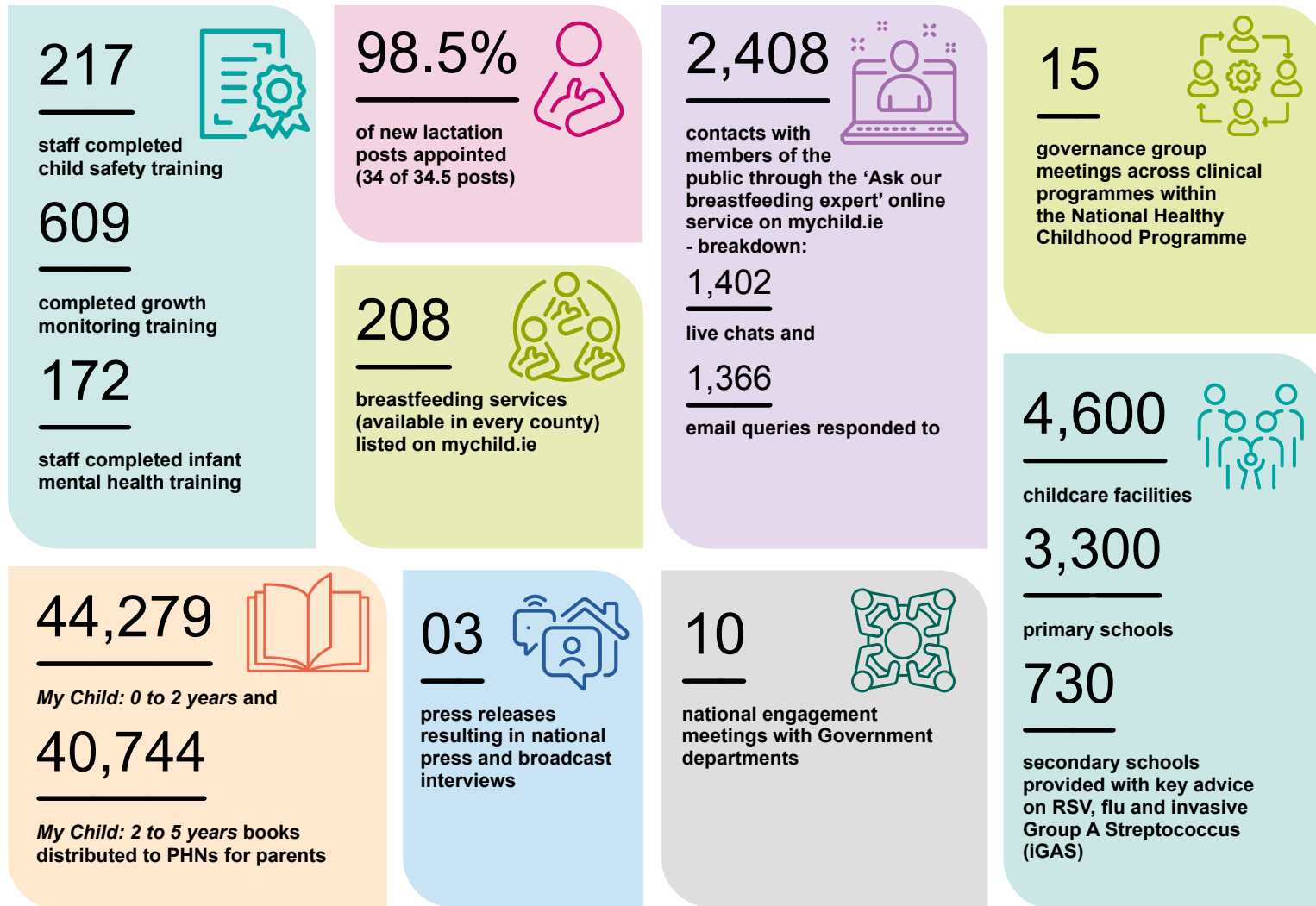
MyChild Facebook community grew by 12% to

65,427

On Instagram, @hse_mychild grew by 15% to

20,168





In line with the Medical Officer of Health function, the data above and on the previous page includes national KPIs and data available related to the Child Health Service as per the [Health Acts](#).



Our place in the HSE





Meet the Child Health Public Health team



Joan O'Kane
Epidemiologist
(Joined in 2024)



Trish O'Connor
Registered General Nurse
(Joined in 2024)



Dr Abigail Collins
National Clinical Lead, Child Health
Public Health / National Healthy
Childhood Programme



Anne Pardy
Programme Manager



Dr Katharine Harkin
Consultant in Public Health
Medicine
(Joined in 2024)



Dr Fiona Cianci
Consultant in Public Health
Medicine
(Joined in 2024)



Paul Marsden
Project Manager, Child Health
Screening Programmes



Brenda McCormack
Project Support



Sorcha Nic Mhathúna
Information and Communications
Manager



Jacinta Egan
Project Support



Sarah Hensey
Project Support



Dr Julianne Harte
Specialist Registrar, Public
Health
(Joined in 2024)



Laura McHugh
National Breastfeeding
Coordinator



Meena Purushothaman
National Assistant
Breastfeeding Coordinator



Dr Mark O'Loughlin
Specialist in Public Health
Medicine
(until January 2024)



Dr Ellen Cosgrave
Specialist Registrar, Public
Health
(until January 2024)



Glossary of terms and abbreviations

ALCI: Association of Lactation Consultants of Ireland

CCPC: Competition and Consumer Protection Commission

CCO: Chief Clinical Officer

CHI: Children's Health Ireland

CHO: Community Healthcare Organisation

CHPH: Child Health Public Health

CHPDO: Child Health Programme Development Officer

CMD: Community Medical Doctor

CNME: Centres of Nursing and Midwifery Education

CSO: Central Statistics Office

CYPSCs: Children and Young People's Services Committees

DCEDIY: Department of Children, Equality, Disability,
Integration and Youth

FSAI: Food Safety Authority of Ireland

GP: General Practitioner

GUI: Growing Up in Ireland

HIQA: Health Information and Quality Authority

HPRA: Health Products Regulatory Authority

HSE: Health Service Executive

HWB: Health and Wellbeing

HWFC: Healthy Weight for Children

IAIMH: Irish Association for Infant Mental Health

ICGP: Irish College of General Practitioners

IMH: Infant mental health

KHF: Katharine Howard Foundation

KPIs: Key performance indicators

LCDCs: Local Community Development Committees

NCAGL: Office of the National Clinical Advisor and Group Lead

NCI: National College of Ireland

NHCP: National Healthy Childhood Programme

NIO: National Immunisation Office

NOCA: National Office of Clinical Audit

NSAC: National Screening Advisory Committee

NWIHP: National Women and Infants Health Programme

ONMSD: Office of the Nursing and Midwifery Services Director

PHN: Public Health Nurse

RCPI: Royal College of Physicians of Ireland

RCSI: Royal College of Surgeons in Ireland

WBTi: World Breastfeeding Trends Initiative

WTE: Whole time equivalent



Child Health Public Health (CHPH)



What is Child Health Public Health?

Evidence demonstrates that economic, social and environmental conditions, and public policies which impact on these, have an enduring impact on the health and wellbeing of children that lasts into their adulthood.

The HSE National Child Health Public Health (CHPH) function provides the clinical leadership for the framework of the National Healthy Childhood Programme (NHCP), the universal programme of clinical care for children within Ireland (see page 17) and leadership for the national population screening programmes within the NHCP (see page 19).

The National CHPH function provides clinical leadership, expertise and support to many areas across the HSE, Governmental and related non-governmental organisations.

This input aims to ensure actions at policy level and actions by organisations both nationally and locally can lead to:

- 1) improvements in the overall health of children and young people
- 2) reduced inequalities for children and young people
- 3) advocacy for the rights of children and young people.

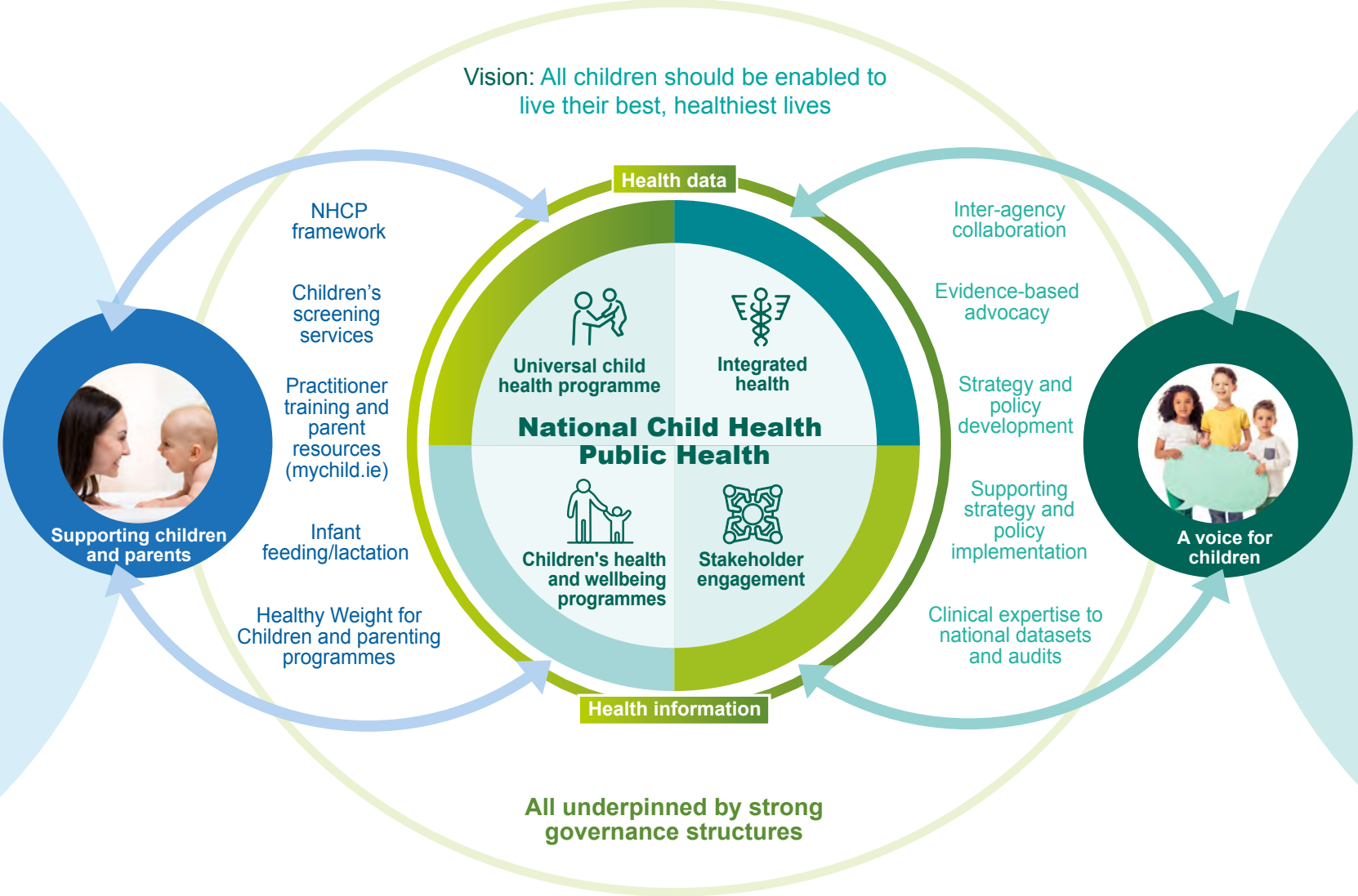


Child Health Public Health in action

Vision: All children should be enabled to live their best, healthiest lives

Colleagues we work with include:

- PHNs
- CMDs
- CHPDOs
- Lactation consultants
- Hearing screeners
- Laboratory staff
- GPs
- Dentists
- NCAGL
- CHI
- Audiology
- Ophthalmology
- ONMSD
- NWIHP
- NIO
- Health and Wellbeing
- National and regional public health functions
- Communications Division
- National Poisons Information Centre



- NHCP framework
- Children's screening services
- Practitioner training and parent resources (mychild.ie)
- Infant feeding/lactation
- Healthy Weight for Children and parenting programmes

- Inter-agency collaboration
- Evidence-based advocacy
- Strategy and policy development
- Supporting strategy and policy implementation
- Clinical expertise to national datasets and audits

Stakeholders we work with include:

- Dept. of an Taoiseach
- Dept. of Children, Equality, Disability, Integration and Youth
- Dept. of Health
- Dept. of Education
- Túsla
- CCPC
- NSAC
- HPRA
- HIQA
- ICGP
- IAIMH
- safefood
- FSAI
- GUI
- NOCA
- RCSI
- RCPI
- NCI
- KHF
- CYPSCs
- LCDCs
- Community voluntary partners

All underpinned by strong governance structures

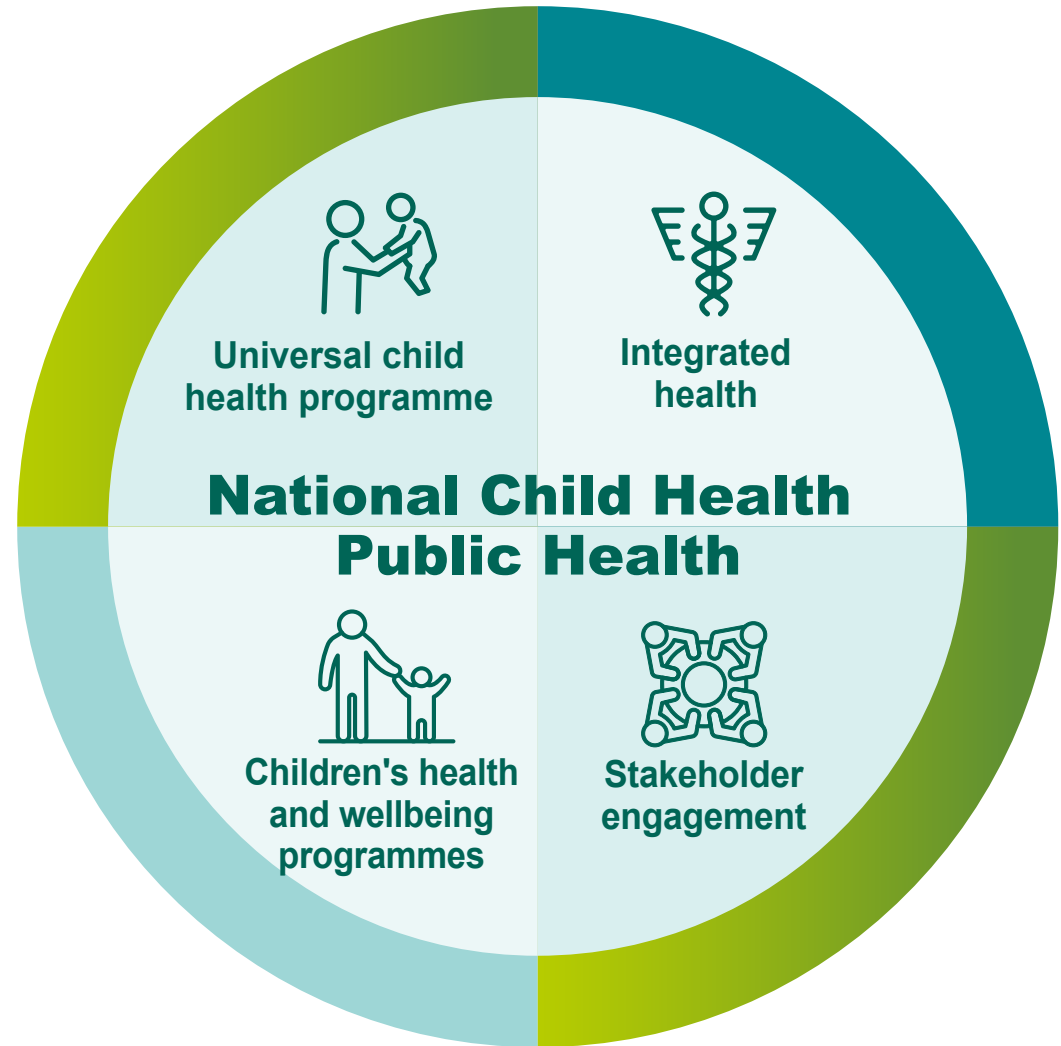
Our vision

‘Children and young people in Ireland will be enabled to live their best, healthiest lives’

Core work streams

Delivering on this vision within the National Child Health Public Health function breaks down to 4 core work streams:

1. Universal child health programme: The National Healthy Childhood Programme (NHCP)
2. Integrated health
3. Government and stakeholder engagement
4. Children’s health and wellbeing programmes





1. Universal child health programme

This is the [National Healthy Childhood Programme \(NHCP\)](#) - see page 17.

The National Child Health Public Health function provides the clinical leadership and governance for the framework of National Healthy Childhood Programme (NHCP), the universal programme of clinical care for children within Ireland.

The National CHPH function also provides the clinical leadership for the national population screening programmes within the NHCP, the Newborn Bloodspot Screening Programme and the Universal Newborn Hearing Screening Programme (see page 19).



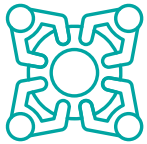
2. Integrated health

This includes specific work with partners across the HSE, e.g. National Clinical Advisor and Group Lead (NCAGL), National Women and Infants Health Programme (NWIHP), Children's Health Ireland (CHI) and the National Health Protection Service.

Examples of this work include:

- development of a vision document for children
- articulating concerns and options on the prevalence of neural tube defects
- supporting the need for paediatric haematopoietic stem cell transplant (HSCT) services to be repatriated to Ireland
- supporting the development of a targeted congenital cytomegalovirus (cCMV) pilot testing programme
- supporting the National Health Protection Service through membership of incident management teams and work related to children, e.g. measles and invasive group A streptococcal disease (iGAS)
- raising awareness and advocacy around current concerns for children, e.g. RSV (respiratory syncytial virus) and children's safety

See page 26 for more.



3. Government and stakeholder engagement

We provide strong support and input to the development of Government strategies, implementation and evaluation of actions and policy advocacy (Department of an Taoiseach, Department of Children, Equality, Disability, Integration and Youth and Department of Health). See page 29 for more information.



4. Children's health and wellbeing programmes

Health means everyone achieving their potential to enjoy physical, mental and social wellbeing.

The National CHPH function specifically leads or supports health and wellbeing programmes designed to enable children directly, and/or adults in their caring roles for children and families. Examples of these programmes include:

- HSE Healthy Weight for Children
- Community Families Home Visiting Programme
- Parenting supports through Sláintecare Healthy Communities

See page 31 for more information.

All 4 of these core functions are supported by and/or informed by:

a) Health information



MyChild suite of resources (see page 35).

b) Health intelligence



Data and reports (see page 42).

Strong governance structures are imperative to underpin the delivery of these 4 core areas for children.





Child Health Public Health population

Around a quarter of Ireland's population are children.

There were an estimated 54,418 births in 2023. This is based on CSO birth occurrence data.

Population aged 0 to 19 years in Ireland (2022)

Age group	Number	Percent
0 to 4 years	295,415	6
5 to 9 years	342,670	7
10 to 14 years	374,202	7
15 to 19 years	337,628	7
Total aged 0 to 19 years	1,349,915	26
Total population	5,149,139	100


Data source: [Health Atlas CSO Census 2022](#)

Due to the timing of the census in early April 2022, many of the children who fled the war in Ukraine are not included in these figures.

As of April 11th 2024, 28,884 PPS numbers have been issued to children aged 0 to 17 years who have arrived from Ukraine (source CSO).

In addition, there are over 7,000 children who have claimed asylum and are living in IPAS accommodation, many of whom were also not included in the census figures given the timing of their arrival to Ireland.





Core work stream 1:
The National Healthy
Childhood Programme
(NHCP)



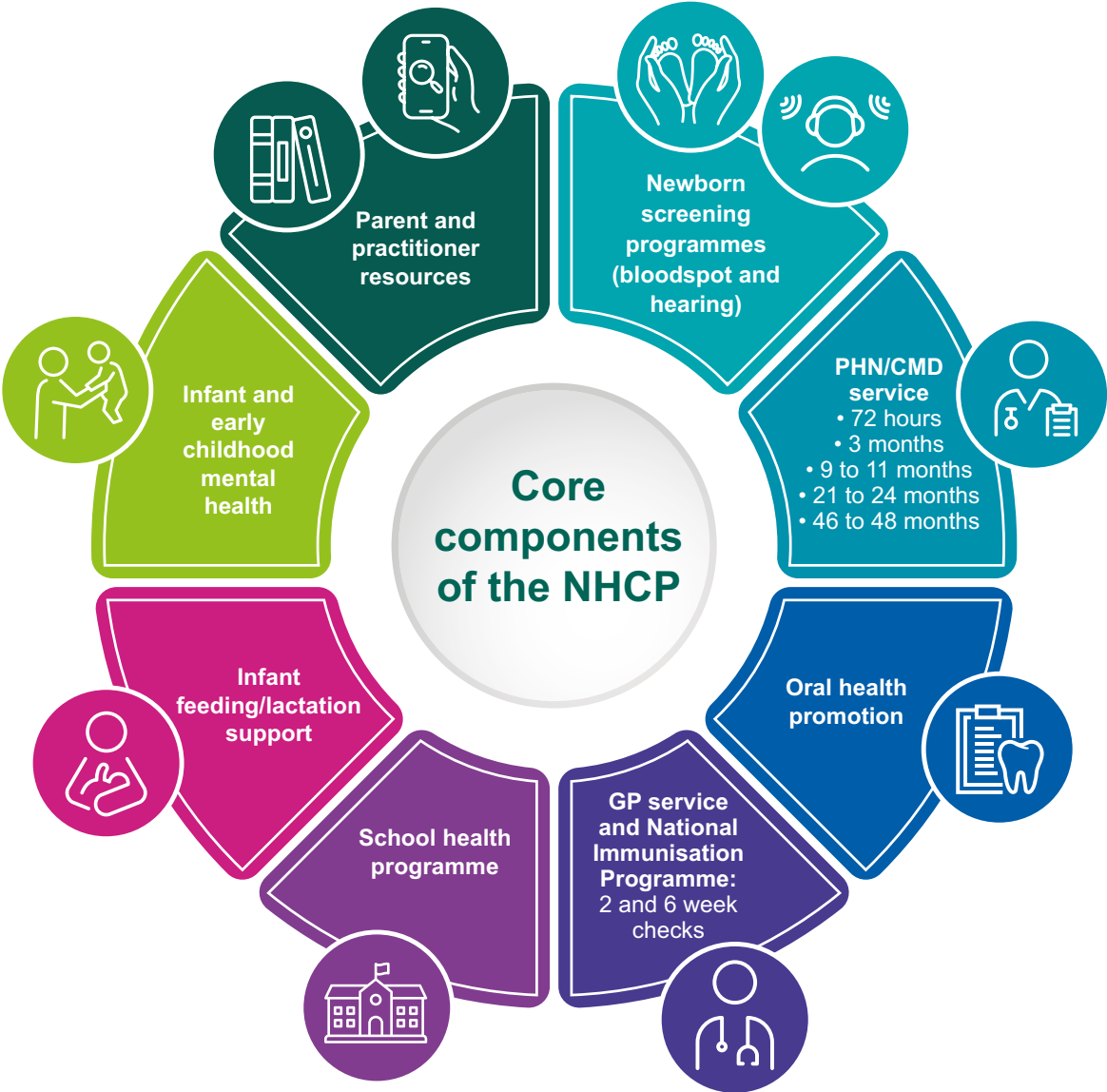
Universal programme of clinical care for all children

The Child Health Public Health function provides leadership and support to the [National Healthy Childhood Programme \(NHCP\)](#).

This is the HSE's universal programme of clinical care for all children to support them and their parents from birth. This support, particularly in the crucial first few years of life, helps to create the best outcomes for children, building the foundations for health over their lifetime.

It is enshrined in law:

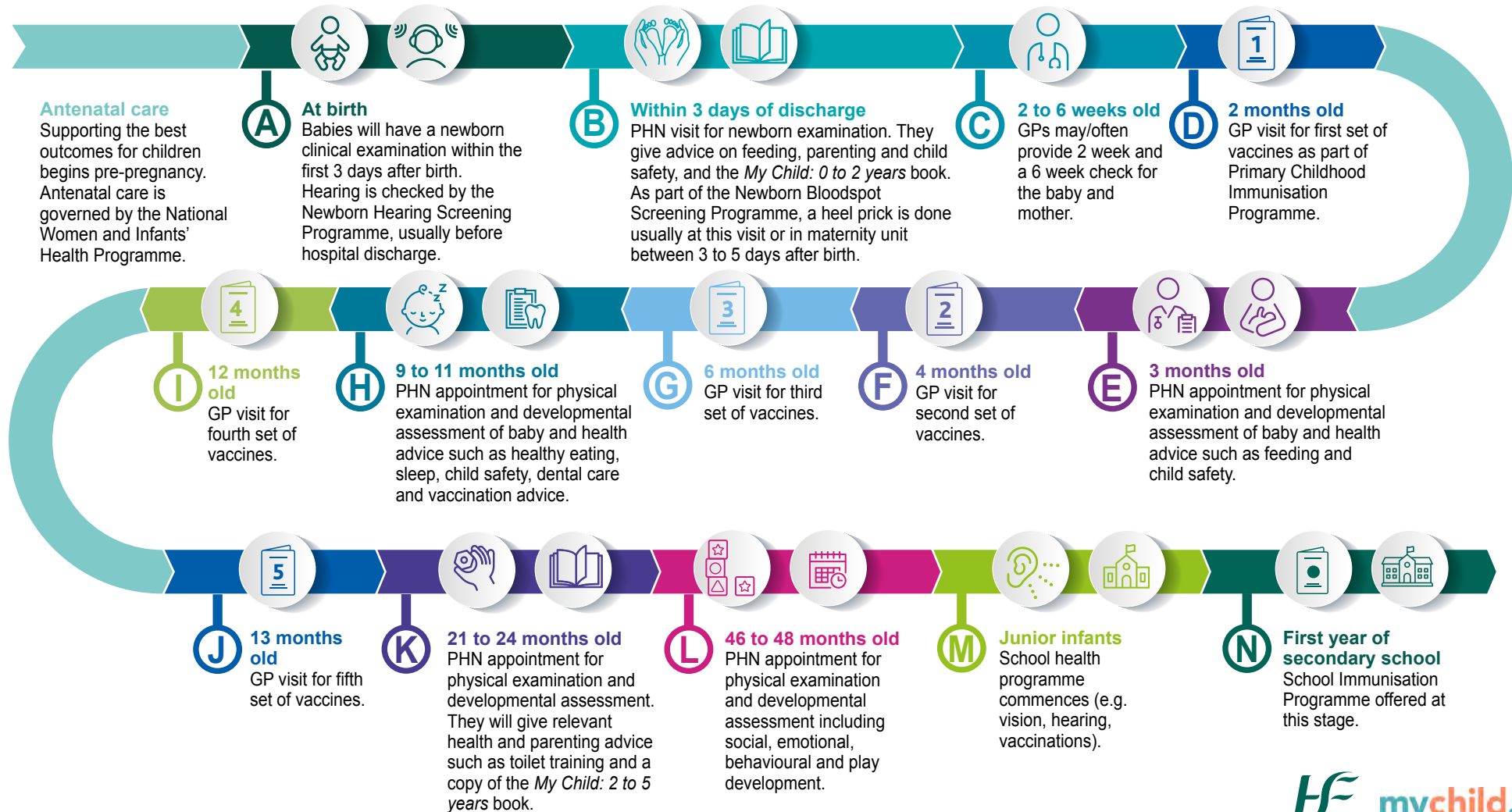
- as one of the core explicit services for the HSE to deliver
- that the Medical Officer of Health 'shall supervise and be responsible to the health authority for the efficient operation of the Mother and Child Health Service' as per the Health Acts



A child's journey through the National Healthy Childhood Programme

The National Healthy Childhood Programme (NHCP) is Ireland's universal programme of clinical care for children.

The service is free to all children and includes screening, physical examinations and developmental assessments, infant feeding/lactation support, vaccinations and health information for parents.



Screening



National Newborn Bloodspot Screening Programme

The overall aim of the National Newborn Bloodspot Screening Programme (NNBSP) is to offer newborn babies screening for rare but clinically serious conditions that would benefit from early intervention to reduce mortality and/or morbidity.

Newborn bloodspot screening involves taking a small sample of blood from a newborn baby's heel (also referred to as the 'heel-prick'). The sample is then sent to the National Newborn Bloodspot Screening Laboratory (NNBSL) at Children's Health Ireland (CHI) Temple Street, Dublin, where the samples are analysed and from where onward care is organised.

Annual screening reports are available [here](#).



Confirmed positive cases

Condition	Positive cases
Congenital Hypothyroidism	87
Cystic Fibrosis	31
Phenylketonuria	17
Classical Galactosaemia	5
Medium Chain Acyl-CoA Dehydrogenase Deficiency	4
Homocystinuria	0
Glutaric Aciduria Type 1	0
Maple Syrup Urine Disease	0
Adenosine Deaminase Deficiency	0
Severe Combined Immunodeficiency	0
Total	144

54,820

babies screened through the Newborn Bloodspot Screening Programme

144

babies diagnosed with a rare condition

99.8%

of babies consented through their parents/care-givers to take up offer of bloodspot screening



National Universal Newborn Hearing Screening Programme

The overall aim of the national Universal Newborn Hearing Screening Programme (UNHSP) is to improve the health and well-being of children through high quality hearing assessments and early intervention.

Early diagnosis and appropriate intervention for permanent childhood hearing loss (PCHL) is vital for these children to approach school entry with age-appropriate language and communication skills.

Newborn hearing screening is undertaken by trained screening staff at each of the 19 maternity hospital and units.



54,264

eligible babies offered newborn hearing screening

99.9%

of eligible babies completed newborn hearing screening

824

babies referred to audiology

79

babies identified with a permanent childhood hearing loss



Infant feeding/lactation support

98.5%

of new lactation posts appointed (34 of the 34.5 posts)

59.1

infant feeding/lactation WTEs - 34.5 in maternity services, 1 in CHI and 23.6 in primary care

2,408

contacts with mychild.ie 'Ask our breastfeeding expert' service - 1,402 live chats and 1,366 email queries

208

breastfeeding services listed on mychild.ie

Breastfeeding breaks extended into legislation

Staff who are breastfeeding are entitled to breastfeeding breaks for up to one hour per normal working day, up until a child's 2nd birthday, if needed.

In 2023:

- 60.3% babies breastfed (exclusive and non-exclusive) at first PHN visit
- 10/32 local health office areas reported breastfeeding (exclusive and non-exclusive) rates at the first PHN visit above the HSE target of 64%
- 42.1% of babies breastfed (exclusive and non-exclusive) at 3 months
- 13/32 local health office areas reported breastfeeding rates above the HSE target of 46% at 3 months

Section 39 Grants under Health and Wellbeing (total €92,500) administered to La Leche League of Ireland, Cuidiú, Friends of Breastfeeding and ALCI

The first *World Breastfeeding Trends Initiative assessment report for Ireland* launched in November. Ireland ranks 57th out of 99 participating countries, and 10th out of 19 participating European countries.

National Infant Feeding Education Programme finalised for roll-out in 2024

26

staff attended a trainers session in July for breastfeeding skills training (safe skin-to-skin contact, positioning and attachment and hand expression)

78

staff completed the programme during the pilot phase in 3 CNMEs

Use of the Breastfeeding Observation and Assessment Tool (BOAT) within public health nursing services:

December 2023	No. of local health offices
BOAT - in use	27
BOAT - not in use	5
Audit completed/in progress in last 2 years	11
Audit not completed in last 2 years	21



Infant mental health



Infant and early childhood mental health (IECMH) describes the social and emotional development of infants and young children within the context of the parent-child relationship. The work of the programme has focused on embedding the principles and

practice of IECMH into child health services and the development and promotion of training, practitioner resources and public information for parents and care-givers.

This has included:

- Embedding IECMH in all communications with parents across mychild.ie and the suite of My Child books.
- Developing and promoting videos for parents relating to infant mental health (IMH) and focused on relationship building, responding to baby's cues and regulating emotions through mychild.ie and social media channels.
- Developing resources to support practitioners to observe, support and enhance the nature and quality of parent-baby interactions including practice prompts, e-learning and skills training in IECMH.

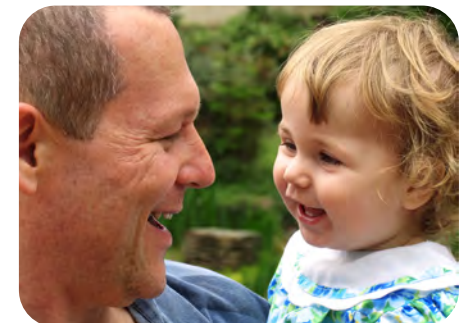
In 2023, we:

- continued collaboration with Tusla and the Irish Association for Infant Mental Health (IAIMH) to support expansion of infant mental health networks and supporting capacity building training and resources
- presented at the World Association of Infant Mental Health Congress in Dublin

- contributed to a new training programme for antenatal educators with a central emphasis on the early parent-child relationship
- supported the implementation of Stronger Together, the HSE's five-year mental health promotion plan
- featured infant mental health in mychild.ie social media posts during Infant Mental Health Awareness Week and throughout the year



In addition, our child health programme development officers (CHPDOs) at regional level supported the development of infant mental networks and forums delivering local events with community partners. These activities raise awareness of IMH, provide opportunity for clinicians and caregivers to learn more about how to bring an IMH lens to child and family interactions, opportunities for reflection and awareness as to where to find more IMH-related resources.





Regional implementation of the NHCP

Child Health Programme Development Officers (CHPDOs)

The role of Child Health Programme Development Officers (CHPDOs) is to support the National Healthy Childhood Programme at regional level. CHPDOs work as a conduit between the National Healthy Childhood Programme and CHO managers, clinicians and community partners involved in the delivery of child and family services. They work in close collaboration with the community and voluntary sector to ensure the consistent delivery of health-related messaging to parents and work on projects to improve health and wellbeing outcomes.

They work to establish Child Health Governance Structures in Community Healthcare Organisations (CHOs), with key child health regional subgroups feeding into this structure, e.g. Breastfeeding, Immunisation, Healthy Weight for Children, Infant Mental Health and National Healthy Childhood Programme Working Groups. They are active members of these subgroups, supporting many quality improvement initiatives at national and regional level.

The role involves project management and planning, quality improvement, research and engaging with HSE, Tusla, Children and Young People's Services Committees (CYPSCs) and voluntary partners on many different projects related to child and family service provision. There are currently seven CHPDOs in place.



CHO 1
Fiola Murphy



CHO 2
Elizabeth (Libby) Lambe



CHO 3
Brenda Mellett



CHO4
Rachel Knox



CHO 5
Siobhan Sinnott



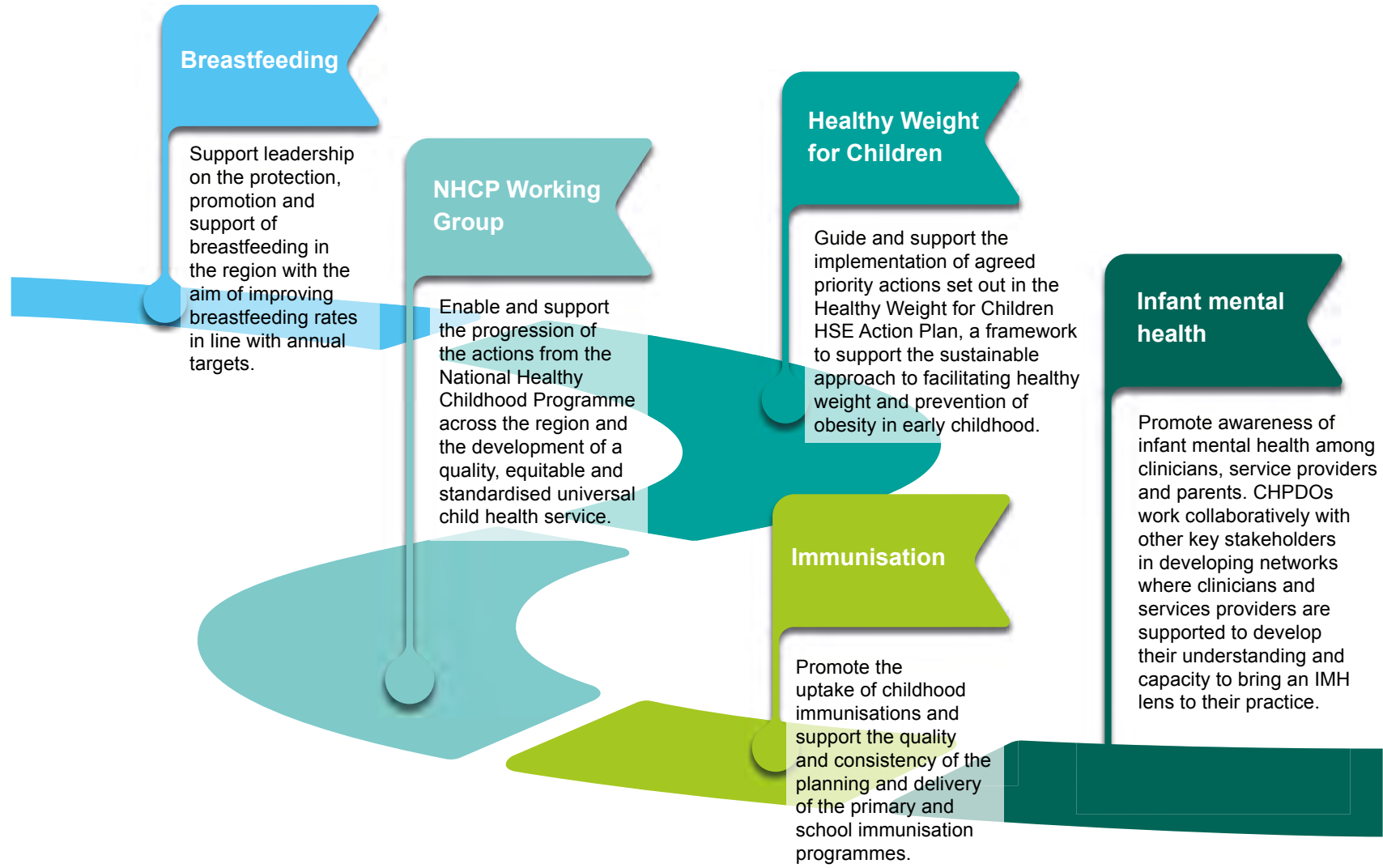
CHO7
Emma Reilly



CHO 9
Siobhán Ní Mhurchú

Core areas of CHPDO work

CHPDOs play a crucial advocacy role in promoting better child health for all children. Their work encompasses some of the following areas:





**Core work stream 2:
Integrated health**



Integrated health activities

Integrated health activities include specific work with partners across the HSE, e.g. National Clinical Advisor and Group Lead (NCAGL), National Women and Infants Health Programme (NWIHP), Children's Health Ireland (CHI) and the National Health Protection Service.

Examples of this work include:

- development of a vision document for children (see right)
- articulating concerns and options on the prevalence of neural tube defects (see next page)
- supporting the need for all paediatric haematopoietic stem cell transplant (HSCT) services to be repatriated to Ireland
- supporting the development of a targeted congenital cytomegalovirus (cCMV) pilot testing programme
- supporting the National Health Protection Service through membership of incident management teams and work related to children, e.g. measles and invasive group A streptococcal disease (iGAS)
- raising awareness and advocacy around current concerns for children, e.g. RSV (respiratory syncytial virus) and children's safety

A vision for children in Ireland

The National Child Health Public Health function is working in collaboration with the National Clinical Advisor and Group Lead, Children and Young People, to develop a vision document for children and young people in Ireland. This document will be informed by the distinct and evolving needs of children and young people.

Our aim is that, 'All children and young people in Ireland will be enabled to live their best, healthiest life'.

The work being undertaken will seek to highlight that this aim can only be achieved when:

1. the environment and services are configured around the distinct needs of children and young people
2. the responsibility and accountability for children and young people's population health and health care is clear
3. the social, commercial and environmental determinants impacting the health of the population are considered and acted on
4. their needs are the basis for service configuration, integration, governance, outcomes and resource allocation for the population

Neural tube defects

Child Health Public Health collaborated with NCAGL Children and Young People and NWHIP on raising awareness and concerns on the rates of neural tube defects (NTDs) affected pregnancies in Ireland. Ireland has an incidence rate of approximately 5/1000 births.

The risk of NTDs can be reduced through adequate intake of folic acid peri-conceptionally by women of reproductive age. To date Irish policies to achieve this on a population level have been based on recommending folic acid supplementation for women of reproductive age and voluntary fortification of foods with folic acid.

Due to large scale challenges with adoption of supplementation recommendations combined with a decline in the number of foods fortified with folic acid, such measures are suboptimal in augmenting folic acid levels on a population level; it is likely this will be compounded by the rising prevalence of obesity, insulin resistance and diabetes.

Mandatory folic acid fortification of food could provide an equitable, population-based policy approach to reduce NTDs.

Child Health Public Health supports and advocates that there is a need to consider the optimal approach to improve folate sufficiency peri-conceptionally among women resident in Ireland.

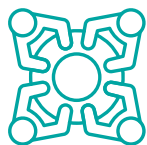




Core work stream 3:
Government and
stakeholder engagement



Government and stakeholder engagement



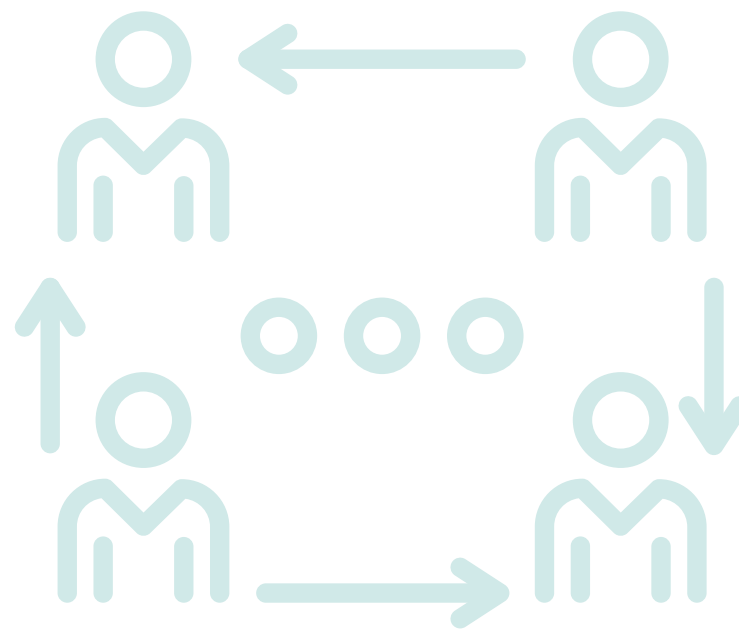
Engagement with government and external stakeholders is critical to developing policy to support children and families, and in implementing these policies.

The National Child Health Public Health function provides strong support and input to Government strategies, implementation and evaluation of actions for and policy advocacy.

It has a core role supporting relevant policies and strategies led by the Department of Health and the implementation of the First 5 strategy for the Department of Children, Equality, Disability, Integration and Youth and the Department of Health. It also has provided early support to the newly established Child Poverty and Wellbeing unit within the Department of an Taoiseach.

Outside of government engagement, the function supports other organisations in their work to support and protect children and families, e.g. working with:

- 1) the Competition and Consumer Protection Commission (CCPC), the Health Products Regulatory Authority (HPRA) and the Food Safety Authority of Ireland (FSAI) around safe products for children and families,
- 2) the Health Information and Quality Authority (HIQA) to support consideration of expansion of screening programmes or vaccination programmes for children





Core work stream 4:
Children's health and
wellbeing programmes



Children’s health and wellbeing programmes



Health means everyone achieving their potential to enjoy physical, mental and social wellbeing. Support for adult health and wellbeing programmes positively impacts on children in society.

The National Child Health Public Health (CHPH) function specifically leads or supports health and wellbeing programmes that are designed to enable children directly and/or adults in their caring roles for children and families.

We support the implementation of:

- Community Families Home Visiting Programme
- Parenting supports through Sláintecare Healthy Communities
- HSE Healthy Weight for Children

Community Families Home Visiting Programme

CHPH jointly chair the Community Families Oversight Group with Tusla colleagues, supporting the implementation of the new Community Families Model.

In 2023 the work of the National Oversight and Steering Group included:

Development of:

- new practice resources and training programme for home visitors
- a CRM-based data and information system
- a readiness assessment tool for sites
- a new Community Families website

Engagement and active participation in:

- meetings and workshops with existing community families coordinators and management

- information sharing events with key stakeholders across statutory and community voluntary agencies, including the Home Visiting Alliance
- input to the DCEDIY-commissioned research on home visiting

Parenting supports through Sláintecare Healthy Communities

The parenting component of Sláintecare Healthy Communities (SHC) is led by CHPH in close collaboration with colleagues in Health and Wellbeing.

We facilitate an advisory structure to guide decisions on the parenting programmes offered, engaging with SHC coordinators and commissioned providers to support implementation of agreed programmes. We work closely with Health and Wellbeing colleagues in identifying barriers to attendance at parenting programmes and developing effective approaches to improve uptake and participation.

Supporting Parents model

We collaborate with colleagues in DCEDIY and Tusla in the implementation of Supporting Parents: A National Model of Parenting Support Services.

We do this through membership and active participation in the implementation and advisory group structures and leading implementation of HSE actions in the model, including:

- development of resources to enable parenting guidance and support to be given by PHNs as part of core developmental assessments
- responding to parenting information needs through mychild.ie and associated resources and channels

Healthy Weight for Children

Approximately 1 in 5 younger children live with overweight and obesity, increasing to approximately 1 in 4 for adolescents. We also know that we see higher trends amongst children and adolescents living in poverty and/or in areas of disadvantage.

It is well evidenced the impact overweight and obesity has on our general health both now and in the longer term, and so all our combined work to support families is critical. It is also well documented that ‘what surrounds us, shapes us’ and factors like easily available and affordable nutritious foods, alongside actions around the marketing of unhealthy foods, are key components of sustainable solutions.

Child Health Public Health (CHPH) works collaboratively across the HSE, particularly with our Healthy Eating Active Living partners in Health and Wellbeing, to support the implementation of the *HSE Healthy Weight for Children Action Plan 2021-2023*.

Child Health Public Health co-chaired the HSE Healthy Weight for Children multi-stakeholder oversight group. This group met three times in 2023. From this group it was agreed:

- to refresh the *HSE Healthy Weight for Children Action Plan* in early 2024 and to provide a HSE-specific forum for regional and national engagement, and
- to establish a specific focussed multi-stakeholder Healthy Weight for Children policy group, to support this critically important policy space for children.

CHPH will co-lead these groups and continue to support the relevant workstreams for the HSE Action Plan.





Obstacles encountered by parents

In 2023, CHPH conducted an evidence review to support our Healthy Weight for Children work. This aimed to identify parental stressors, priorities for family wellbeing, and obstacles parents encounter when attempting to encourage healthy behaviour in their children.

The high cost of living, relationship problems, housing problems, childcare issues, and worries about their own mental health were some of the things that made life stressful for parents. According to parents, the main barriers to healthy weight in children were cost, lack of knowledge and lack of time.

Obstacles to healthy eating included parents' lack of time and other obligations, the price of healthy food, not understanding what food is healthy due to confusing, conflicting information, not being able to cook, not being able to limit unhealthy foods, and relying on treats as rewards for good behaviour. Other problems included picky eating habits, advertisements for unhealthy foods, the influence of unhealthy foods at supermarket checkouts and large portion sizes being considered normal.

Barriers to physical activity included not having enough information on how to be more active, child preferences for sedentary activities, not having access to appropriate local facilities for exercise, pollution, traffic, bad street lighting and unsafe roads. Many parents were worried about child safety, especially when walking to school.

Barriers to communicating about weight included discomfort and

lack of knowledge about weight, and views that weight does not need to be discussed with children. Most parents wanted advice on the best ways to talk to their children about weight, such as encouraging a healthy body image and good habits, lowering weight criticism, putting more emphasis on health, and dealing with bullying due to weight.

We and other colleagues in the HSE plan to use these insights to help better support parents and guardians to promote healthy behaviours for their children.





Supporting the core work:
Health information



Parent resources including mychild.ie

Summary

We support parents and parents-to-be with evidence-based health, safety and parenting information resources, including mychild.ie and the *My Child* books.

The resources are consistent with clinical guidelines and practices and focused on meeting the user needs of parents through content design and Plain English and promoted through a multi-channel communications campaign.

This work is made possible through close collaboration with colleagues in the HSE's Digital team and the Programmes and Campaigns team (HSE Communications Division).

549

guides on mychild.ie

4,977,853

recorded visits to mychild.ie

50:50

the balance between new and returning users to mychild.ie

91%

of visitors come from organic search (unpaid search results)

161

mychild.ie pages fact-checked as part of 3 year review process

44,279

My Child: 0 to 2 years books distributed to PHNs to give to parents

40,744

My Child: 2 to 5 years books distributed to PHNs to give to parents

65,427

followers of MyChild Facebook community – a growth of 12%

Communications campaign

We promote mychild.ie to parents in collaboration with the Communications Division's Programmes and Campaigns team and Digital team.

Search ads and social media ads are always on throughout the year.

Advertising on other channels took place in autumn and winter with TV, VOD (video on demand), radio and digital audio in different bursts across August, September, October and November 2023.



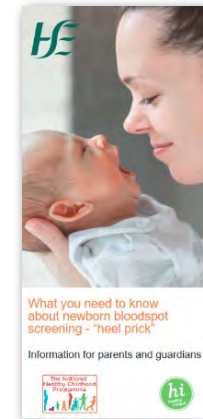
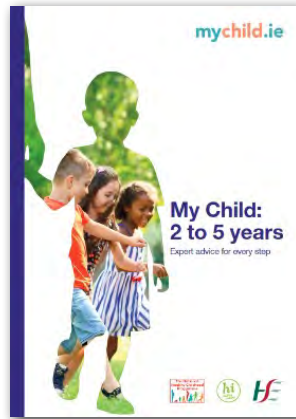
20,168

followers of @hse_mychild on Instagram – a growth of 15%



Parent resources available as part of NHCP

mychild.ie



Links to resources:

- ★ mychild.ie (161 pages updated in 2023)
- ★ [My Child 0 to 2 years book](#)
- ★ [My Child 2 to 5 years book](#)
- ★ [Breastfeeding: A good start in life booklet](#) (updated in 2023)
- ★ [Breastfeeding and expressing for your premature or ill baby booklet](#)
- ★ [Breastfeeding information for Traveller Beoirs booklet](#)
- ★ [What you need to know about newborn bloodspot screening – “heel prick” leaflet](#)
- ★ [Your baby’s hearing screening test leaflet](#)
- ★ [Child safety wall chart](#)
- ★ [Traveller child safety wall chart](#)



Practitioner resources available as part of NHCP



- ★ *The National Healthy Childhood Programme – Practice Manual for Public Health Nurses*
- ★ *The National Healthy Childhood Programme – Child Health Record (PHN Services, CMD services)*
- ★ Child Health Record user guide and data definitions document
- ★ Developmental assessment equipment (pictured)
- ★ *Child Safety Programme: Manual for health professionals on core child health contacts*
- ★ *The Newborn Clinical Examination Handbook*
- ★ BOAT tool
- ★ Breastfeeding posters
- ★ ASQ-3 questionnaires

Resources for practitioners available from [NHCP page](#) and [breastfeeding page](#)



Practitioner training

Learning modules	Completions in 2023*
National infant feeding elearning units <ul style="list-style-type: none"> • Introduction to breastfeeding • Supporting early breastfeeding • Ongoing breastfeeding support • Formula feeding 	907
Child safety <ul style="list-style-type: none"> • Child safety inside and outside the home • Child safety in the farm, in the clinic and in the community 	123 94
Growth monitoring	609
Newborn bloodspot screening	523
Nutrition <ul style="list-style-type: none"> • Recognising and managing allergies in the community • Preconception and pregnancy nutrition • Introducing family foods • Feeding-related challenges in babies 0-12 months • Healthy start for toddlers • Healthy weight for children 	262 69 157 242 222 139



Learning modules	Completions in 2023*
National infant feeding elearning units	
Child developmental ASQ-3™ tool © eLearning Module <ul style="list-style-type: none"> • Undertaking the primary visit (72 hour) child health assessment • Undertaking the 3 month child health assessment • Undertaking the 9-11 month child health assessment • Undertaking the 21-24 / 46-48 month child health assessment 	249 188 194 181
Infant mental health (IMH) <ul style="list-style-type: none"> • Unit 1: General awareness promoting IMH • Unit 2: Supporting the first relationship • Unit 3: Establishing milestones in the first relationship 	219 181 172
Toilet training and enuresis - Contenance in childhood	134
Working in partnership with parents	108
Clinical skills training (mop-up sessions)	
Public health nurses	158
Higher education institutions	151

See [HSeLanD](#) for information on courses or email healthy.childhood@hse.ie

*Data extracted from HSeLanD on 02/05/2024



Supporting the core work:
Health intelligence

R1

17.238

30.02

26.392

27.993

35.44

47.7

S14



Supporting the core work: Health intelligence

Child health intelligence is integral to promoting and protecting the health and wellbeing of children through the effective use of information and intelligence.

To ensure a quality-assured, valuable, child health public health service, an integrated approach to the gathering and utilisation of data is essential. Child health intelligence allows for the conversion of child health data into valuable population-level intelligence enabling evidence-based child health recommendations, oversight and quality assurance of current programmes.

To best identify and meet the needs of children and families, good data sources are required and expertise to interrogate these data.

The Child Health Public Health function is actively working to support recognition of the need for a child health intelligence function with a national integrated child health information system to support both clinical services and an intelligence function.

Child Health Public Health also work in close collaboration with colleagues across the health service, ensuring that the

best available data and intelligence is used appropriately and systematically to drive improvements across the child health system leading to improvements in services and outcomes for children and young people.



A photograph of a business meeting where several people are gathered around a wooden table, holding large, interlocking puzzle pieces. The puzzle pieces are in various shades of green and teal. The background shows a modern office setting with dark wood paneling. The image is overlaid with large, semi-transparent circular graphics in shades of green and teal. The text 'Underpinning core work streams: Governance' is displayed in white on a dark teal background on the left side.

**Underpinning core work
streams:
Governance**



Governance groups, national representation and conferences

Core to the provision of good clinical services are clear governance structures with relevant governance group meetings.

The National CHPH function chairs, co-chairs or critically supports the governance or oversight groups for the following:

Groups	Number of meetings in 2023
National Healthy Childhood Programme Governance Group	3
Universal Newborn Hearing Screening Programme Governance Group	3
National Newborn Bloodspot Screening Programme Governance Group	4
Children's Screening Oversight group	1
Healthy Weight for Children Oversight Group	3
National Breastfeeding Implementation Group	4

The CHPH function has also provided clinical support and leadership to the following groups:

- NSAC Newborn Bloodspot Expert Sub Group
- HIQA expert advisory group for screening
- Growing Up In Ireland Policy group
- World Breastfeeding Trends Initiative (WBTi) group
- NOCA National Paediatric Mortality Register governance committee
- DCEDIY Supporting Parents Implementation Advisory Group
- National Perinatal Reporting System Oversight Group

National Child Health Public Health function have presented at conferences and events aimed at supporting health and social care practitioners in their support for children and families.


Conferences and events presented at in 2023 include:

- Royal College of Physicians Ireland, Faculty of Public Health Medicine Summer Scientific Meeting
- Prevention and Early Intervention Network summit, Limerick
- 'Integrated Care for the Child and Family: Where do we begin' Conference, Galway
- Katharine Howard Foundation Children's Promise grants programme, Dublin
- South East Child Health conference, Kilkenny



 **National Child Health Public Health Programme**
HSE Area Office
Arden Road
Tullamore
Co. Offaly
R35 TY28

 healthy.childhood@hse.ie
child.screening@hse.ie

 057 93 59895