

# Health Improvement Operational and Strategic Plan 2025

HEALTH SERVICE EXECUTIVE



A fairer, healthier future



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The Public Health - Health Improvement Operational and Strategic Plan 2025, sets out our objectives and priority actions for working with others across society to improve the health of Ireland's population.

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## **Abbreviations**

**CPHM** Consultant in Public Health Medicine

**DoH** Department of Health

**EAG** Expert Advisory Group

HIA Health Impact Assessment

**HIQA** Health Information and Quality Authority

**HSE** Health Service Executive

NDPH National Director of Public Health

NGO Non-Governmental Organisation

NOSP National Office of Suicide Prevention

NSAPAG National Self-Harm and Suicide Prevention Advisory Group

NTRIS National Traveller and Roma Inclusion Strategy

**REO** Regional Executive Officer

**SpR** Specialist Registrar

**SWOT** Strengths, Weaknesses, Opportunities, and Threats

PESTEL Political, Economic, Social, Technological, Environmental, Legal

### **Foreword**



The reform of the Health Service Executive (HSE) brings a new focus to addressing health inequalities while improving population health and health services. HSE Public Health - Health Improvement is about addressing health inequalities and the wider social environmental and commercial determinants of health while promoting physical and mental health. We have been recruiting HSE Public Health – Health Improvement team members over the last year and now have a team with a wide range of expertise and interests.

We have been developing our work plan for 2025 by building relationships with partners both within the HSE and with other organisations. Our work will have whole-system, life-course, rights-based, across-society approaches, fostering collaboration among public, private, and community partners to achieve sustainable health outcomes. We aim to integrate our plans into the forthcoming Public Health Strategy.

Our vision is for a fairer, healthier future. We will work towards the overarching aims of the Sustainable Development Goals: leaving no-one behind, and reaching the furthest behind first, while including the population in every aspect of our work – "nothing about us, without us".

I want to thank all the Public Health – Health Improvement contributors for their efforts, especially Dr Therese McGlacken and Dr Chris Carroll, and colleagues in Public Health, the wider HSE and others who have informed this plan.

Together we aim to improve the health of the population.

Ní neart go chur le chéile.

#### Prof Diarmuid O'Donovan

National Director of Health Improvement, HSE Public Health

# **Purpose of the Plan**

This plan sets out the strategic and operational priorities of the National Public Health - Health Improvement team over 2025, working closely with Public Health - Health Improvement colleagues in the regions. It includes our vision, mission, values, and outlines the frameworks that will guide our efforts in tackling our priority public health challenges: health inequalities, mental health, health behaviours, and the structural determinants of health.

## **Mission**

Our mission is to improve health in Ireland by reducing health inequalities, addressing the wider determinants of health, promoting physical health and mental well-being, and ensuring that all health improvement initiatives are evidence-based, collaborative and sustainable.

# **Executive Summary**

This Health Improvement Operational and Strategic Plan outlines how we will address public health challenges in Ireland in 2025. It adopts a whole-system, across-society approach, fostering collaboration among public, private, and community partners to achieve sustainable health outcomes. This includes the consideration of health improvement efforts at every stage of life. We have four priority areas for the coming year:

- Reducing health inequalities
- Improving mental health and reducing suicide
- Promoting prevention and healthy behaviours
- Addressing determinants of health

By focusing on health equity, we aim to reduce inequalities shaped by social, economic, and environmental factors, particularly among the most affected populations, including vulnerable and marginalised groups. As these public health challenges are connected, these efforts will require united efforts across sectors.

Collaboration is central to the plan, working with local, regional and national partners to develop holistic, community-centred solutions. To ensure actions align with health needs and are effective, the plan requires evidence-based interventions, data monitoring, and policy advocacy. We will respond to emerging and evolving new public health challenges and priorities.

We stress the importance of partnerships, including working with environmental and climate-focused organisations. Recognising the growing impact of climate change on public health, we seek to address climate-related health effects and promote sustainable health practices. These efforts aim to mitigate risks while fostering resilience within communities.

For mental health, we focus on improving suicide surveillance, reducing stigma, and delivering tailored interventions for high-risk groups. Preventive actions for chronic diseases aim to address risk factors such as unhealthy diets, tobacco and alcohol misuse. We will act on the broader health determinants by collaborating to help improve living conditions, advocate for sustainable policies, and promote intergenerational equity to meet diverse health needs.

The plan establishes a foundation for the National Health Improvement Team, focusing on capacity building, training, quality assurance, and strategic partnerships. By operating at regional and national levels, this framework ensures Public Health initiatives are sustainable, equitable, and adaptable to emerging challenges.



### 1 Introduction

Public health is "the art and science of preventing disease, prolonging life, and promoting health through the organised efforts of society." Acheson (1988)<sup>1</sup>

The National Health Improvement Team, established in 2024 as part of Ireland's reformed Public Health structure, works across the system to drive health improvement initiatives. The national team currently (January 2025) consists of the Director of National Health Improvement, their Executive Assistant, three Consultants in Public Health Medicine (CPHMs), and two Specialist Registrars (SpRs) in Public Health Medicine.

Aligned to the National Team are five Regional Health Improvement colleagues who report, via the Regional Directors of Public Health, to the Regional Executive Officers (REOs), while the National Health Improvement Team reports to the National Director of Public Health (NDPH) (Figure 1).

Health Improvement links with other Public Health functions, including Health Protection, Health Service Improvement, Health Intelligence, and Child Health. These functions operate regionally and nationally, collaborating closely with the National Screening Service, the National Cancer Control Programme, and the National Quality and Patient Safety Directorate. The team's management priorities include strengthening capacity, fostering collaboration, providing training, and ensuring effective communication, quality, and risk management.

This strategic and operational plan aligns with the HSE Corporate Plan 2021–2024 and reflects its core values of care, compassion, trust, and learning.<sup>2,3</sup> The new Public Health delivery model within the HSE underpins all domains of Irish Public Health practice, ensuring integrated operations nationally and regionally.<sup>4</sup>

<sup>1.</sup> Acheson D. Public Health in England. London: Department of Health; 1988.

<sup>2.</sup> Health Service Executive. HSE Corporate Plan 2021-2024 2021. Available from: https://about.hse.ie/api/v2/download-file/file\_based\_publications/HSE\_corporate\_plan\_2021-2024.pdf/.

Health Service Executive. Values in Action 2024. Available from: https://assets.hse.ie/media/documents/Our\_behaviours\_booklet.pdf.

<sup>4.</sup> Department of Health. Essential public health functions in Ireland 2023. Available from: https://assets.gov.ie/269653/a902072c-78a7-4c92-8c57-6e2cf51f7334.pdf.

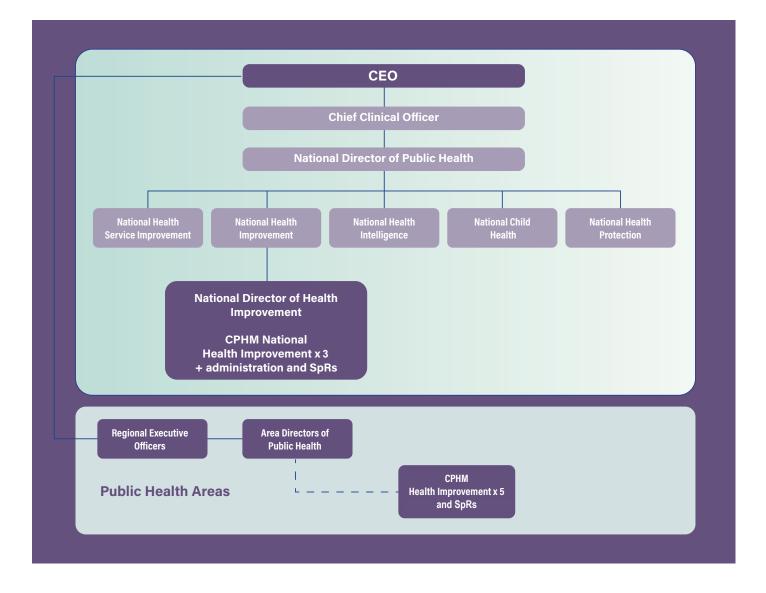


Figure 1: HSE Health Improvement service organisational structure

### Regional Health Improvement

Public Health departments have been established in each of the six health regions as part of the reform of the HSE. This reform brings a renewed focus on Health Improvement and Health Service Improvement regionally and nationally.

Regional teams are actively engaged in a wide range of Health Improvement initiatives. Their input and support are central to the successful implementation of the national plan's objectives. Examples of their ongoing work include:

- **Health Equity Initiatives:** Working with Traveller Health Units, improving primary care access for the Roma community, working with social inclusion and the health needs of migrants, ensuring equality compliance, and promoting breastfeeding, child health, and healthy weight programs.
- Targeted Health Efforts: Monitoring suicide rates among vulnerable groups, preventing substance misuse, running sun safety campaigns, reducing alcohol-related harm, and enhancing community-based services for older adults.
- Collaborative Projects: Participation in Sláintecare Healthy Communities, building partnerships with Non-Governmental Organisations (NGOs), working with local authority Health and Wellbeing committees, and embedding health promotion into routine care.
- Research and Guidance Development: Exploring links between Emergency Department attendance and deprivation, investigating mental health challenges, and creating guidance for Urban Community Initiatives to foster healthier urban environments.

### Developing the Operational and Strategic Plan

National and international strategic and operational plans were reviewed to inform this plan. Two workshops were held with national and regional Health Improvement Teams in July and August 2024, followed by priority-setting meetings in September 2024. National and Regional colleagues contributed to the final plan.

# 2 Principles Underpinning our Work

As Health Improvement requires whole-system and life-course approaches, our work is guided by key principles that ensure a consistent and effective response to the health challenges and needs of the populations we serve. These include:

#### 1. Equity:

Health equity is both a process and an outcome of addressing health inequalities. Tackling inequalities will be a primary focus of our work, including the measurement, monitoring, and evaluation of health inequalities, and actions to address them.

#### 2. Collaboration:

We will work closely across sectors, across society, and with colleagues nationally and regionally. Inter-sectoral and community partnerships will help us understand barriers to health and co-develop solutions that meet local and national needs.

#### 3. Measurement:

Assessment and evaluation will ensure that progress is monitored, and decisions are informed by evidence. This includes measuring health outcomes, behaviours, and the social determinants of health, as well as identifying key indicators of progress and outcomes.

#### 4. Quality:

We are committed to delivering services at the appropriate level, aligned with relevant standards. This principle encompasses how individuals are treated before, during, and after accessing services, and includes adopting continuous quality improvement practices.

#### 5. Research and Evidence:

Developing new knowledge about the health of populations will inform our work. Using evidence-based interventions, grounded in research and adapted to specific contexts for maximum impact.

#### 6. Sustainability:

A sustainable health system is founded on the prevention of ill health and the reduction of health inequalities, ensuring long-term benefits for the population, reducing the pressure on the health system.

#### 7. Agile Working:

Our approach will be flexible and responsive, enabling us to adapt and innovate quickly to emerging health challenges and changing circumstances.

# Framework for action

# **Understanding**

 Understand the causes of health and how to improve it across the population, using evidence and research

### Addressing

 Address the systemic drivers of poor health outcomes to tackle the root causes

## **Preventing**

 Prevent the risk of poor health outcomes before they occur by reducing exposures and promoting health

# **Mitigating**

 Mitigate the effects of exposure to harmful environments and behaviours

# **Monitoring**

 Measure the health of populations and the wider determinants of health

# **3 Our Priorities**

We have four priority areas of work:



Reducing health inequalities



Improving mental health and reducing suicide



Prevention and Behaviours



Determinants of health

Cross-cutting collaborations include:

- Research and evidence
- Capacity building
- Population based planning
- Social participation for universal health coverage and health and wellbeing

# **PRIORITY 1 Health Inequalities**

#### Why is it important?

- Unequal society: Health outcomes in Ireland vary significantly based on an individual's social position.
- Determinants of health: Health inequalities are influenced by a wide range of social, economic and environmental factors.
   Healthcare inequalities relate to differences in access, use and quality of health care services, which can exacerbate health inequalities.
- Policy: Addressing health inequalities aligns with national policies including Healthy Ireland and Sláintecare, as well as the global commitment to inequality through the Sustainable Development Goals.
- Action: Public Health leadership is key to reducing inequalities through universal and targeted interventions, ensuring organisations integrate health equity into their work. This approach prioritises "leaving no one behind" and "reaching the furthest behind first".

#### What will we do?

- Position paper: This will inform the Public Health Strategy and compliance with Public Sector Equity and Human Rights Duty.
- Measurement: We will advance work to improve the routine measurement and reporting of health inequalities.
- Collaboration: We will build on existing partnerships and look for new opportunities to advance health equity.
- Research: We will publish learnings from past reports on health inequalities in Ireland and host a national conference on health inequalities.
- Training: Contribute to learning and professional development by supporting ongoing education and development.

#### What are we trying to achieve?

"A fairer, healthier society". Our aim is to reduce health inequalities across the social gradient, with a particular focus on the most vulnerable groups.

- Action on determinants: Our efforts will target both upstream and downstream determinants of health inequalities, including reducing social hierarchies, preventing risk exposures, and mitigating vulnerabilities of affected individuals.
- Collaboration: We aim to integrate a health equity focus into population-based planning and needs assessments, working with the National Social Inclusion Office (NSIO) and other partners to support inclusion health services. We will support public participation in HSE decision-making through research and practice.
- Climate: We will collaborate with organisations and communities to promote sustainable health improvements and work with partners to address the public health impacts of climate change.
- Reporting: A standardised approach to identifying, monitoring and reporting health inequalities is essential.
- Learning: We are committed to continuously building the evidence base to ensure a cohesive approach to tackling health inequalities nationally, regionally and at local level.

Ob	jectives in 2025	Deliverable	Date for completion
1	Produce a Public Health Position Paper on Health Inequalities	Report	Jan 2025
2	Develop operational definitions of health inequalities, health equity and equity stratifiers, and investigate datasets available to routinely measure health inequalities	Report	Dec 2025
4	Collaborate on the scoping of requirements for the HSE to comply with Public Sector Duty legislation	Report/ toolkit	Dec 2025
5	Deliver a conference on health inequalities in Ireland and produce a conference report	Conference/ report	Sept 2025
6	Develop and deliver training resources on health inequalities	Training	Apr 2025
7	Publish research on learning from previous reports on health inequalities in Ireland and disseminate findings	Publication	Dec 2025
8	Work with regional and national leads in the implementation and review of place-based initiatives	Report	Dec 2025

# PRIORITY 2 Mental Health and Suicide Reduction

#### Why is it important?

- Rising burden: Mental illness is a growing contributor to the overall disease burden.
- Health inequalities: People with mental health problems are often at risk of inequalities in health and other parts of their lives. Inequalities can also contribute to the risk of mental health problems.
- Suicide: Suicide remains a pressing public health issue impacting individuals, families, and communities. Investment in suicide reduction strategies is essential to reducing its prevalence in Ireland.

#### What will we do?

- Improve evidence base: Enhance research to better understand the factors driving mental health challenges and inequalities.
- Surveillance and monitoring:
   Strengthen suicide surveillance systems using real-time data to enable prompt, targeted interventions, particularly for vulnerable groups.
- Collaborate: Work with organisations addressing mental health challenges, stigma, and suicide risk among vulnerable populations, such as people experiencing homelessness and Travellers.

#### What are we trying to achieve?

A programme of collaborative work on mental health promotion and suicide reduction that will include:

- Better health outcomes: Reduce the prevalence of mental illness, self-harm, and suicide, while fostering positive mental health and well-being.
- Stronger communities: Contribute to building connected and resilient communities where mental health is prioritised and individuals are supported to thrive.
- Evidence-based interventions: Implement mental health and suicide prevention initiatives that are informed by robust research and reliable data.
- Collaborative approach: Partner with local and national organisations to address mental health challenges through a holistic and unified effort.
- Awareness and advocacy: Raise public awareness about mental health issues and advocate for policy changes to support prevention, early intervention, and equitable access to care.

Objectives in 2025	Deliverable	Date for completion
Partner with the National Office for Suicide Prevention (NOSP) to address suicide on a national scale	Working group in place	Feb 2025
Conduct a Health Impact     Assessment (HIA) on plans to     install safety rails at bridges in     Dublin to reduce suicide rates	Report	Mar 2025
Develop a surveillance platform in Dublin and Northeast and consider opportunities to expand this work into other regions	Platform in place	Jun 2025
4 Submit a plan and business case for ongoing funding to support a national suicide surveillance platform	Submission to Department of Health (DoH)	Aug 2025
5 Launch a Mental Health Special Interest Group (SIG) and aim to develop tailored mental health plans for high-risk groups, such as those outlined in the National Traveller and Roma Inclusion Strategy (NTRIS)	Working Group in place	Feb 2025

### **PRIORITY 3 Prevention and Behaviours**

#### Why is it important?

- Preventable chronic disease: Many diseases can be avoided.
- Behavioural impact: Behaviours can directly impact our health and longevity.
- Health inequalities: Unequal distribution of behaviours, awareness of harm, and opportunities for change, are linked to socioeconomic and environmental factors.
- Cost effectiveness: Investing in behaviour change and conditions to support healthy choices, yields long-term societal cost savings, and more sustainable healthcare.
- Societal impact: Healthy behaviours can positively influence population health and reduce the social and economic burden of illness
- Public policy role: Effective behaviour change requires supportive environments and healthy public policies across sectors. This aligns with national policies, including Healthy Ireland and Sláintecare.

#### What will we do?

- Improve the evidence-base: Build the
  evidence to support a better understanding
  of factors driving certain behaviours, and the
  population health needs to address these,
  particularly in relation to risk factors such as
  tobacco, alcohol and drug use and physical
  inactivity.
- Measurement and evaluation: Measure and evaluate key interventions and policies, to ensure these are based on high-quality evidence, are inclusive, and effective.
- Collaborate: Work collaboratively with Health and Wellbeing teams and other multi-sectoral partners to increase awareness of the benefits of healthy behaviours, develop guidance, and coordinate programmes of work. Examples include promoting breastfeeding and healthy behaviours in school, addressing childhood obesity, and progress on tobacco, alcohol and drug use, and physical activity. Work with the National Screening Service to promote screening.
- Supportive environments: Advocate for policies and infrastructure that make healthy choices more accessible to all and promote prevention.
- Promote a 'Health in All Policies' approach: Integrate Health Impact Assessment (HIA) into practice, guided by an initial scoping exercise outlining any key opportunities and priorities for

#### What are we trying to achieve?

A programme of collaborative work to support and promote behaviours that lead to improved health outcomes.

- Address inequalities: Ensure all populations have access to healthier opportunities, and that resources and support are tailored to meet the varying levels of need.
- Improved awareness: Increase health literacy and public awareness of the risks associated with unhealthy behaviours.
- Supportive public policy: Informing and advocating for policies that promote health.
- Reduced morbidity and mortality: Decrease the incidence of preventable diseases, improving overall population health and longevity.
- Strengthen partnerships across government, healthcare, education, and community sectors to promote healthy behaviours.

0	bjectives in 2025	Deliverable	Date for completion
1	Contribute to the evaluation of key interventions, policies, and plans that improve health, promote health literacy and support health equity	Evaluations of the Public Health Alcohol Act and other relevant interventions	June 2025
2	Contribute to the understanding of the health needs of a population, to inform prevention strategies and support healthy behaviours	Health Needs Assessment report	Dec 2025
3	Inform research priorities	Research prioritisation report	Jan 2025
4	Support development of evidence- based national guidance to promote healthy behaviours including updating low-risk alcohol drinking guidance for Ireland	Guidance report	Dec 2025
5	Work with Health and Wellbeing programmes to promote healthy behaviours across the life course	Part of collaborative work programmes in each area.	Dec 2025
6	Develop evidence-based prevention strategies to improve the physical and mental health of children and adolescents, collaborating with community-based programmes	Prevention programmes in place nationally and regionally	Dec 2025

### **PRIORITY 4 Determinants of Health**

#### Why is it important?

- Influence on inequalities: Health and health equity are influenced by the conditions in which people are born, grow, live, work and age, as well as biological factors and the systems to deal with illness. These are known as the determinants of health and include structural, environmental and commercial factors.
- Understanding the impact: Determinants like housing, education, and marketing are root causes of poor health, with effects that can be lifelong, cyclical, and intergenerational.
- Cross-sectoral approach: Addressing these root causes requires a coordinated, upstream approach.
- Policy impact: Policy changes in poverty, education, housing, spatial planning and marketing have the most potential to reduce inequalities and improve health outcomes.
- Long-term benefits: Effective action on these determinants can lead to intergenerational health improvements, benefiting society, the economy and the environment.
- Complex but essential: While challenging due to conflicting interests, addressing these determinants is essential for long-term health improvements.

#### What will we do?

- Advocacy and partnerships: Foster multisectoral partnerships and advocate for a "Health in All Policies" approach, collaborating with local government, housing, environmental and other sectors. Promote better housing and living conditions, while advocating for equitable energy access to support overall health and well-being. Develop participatory approaches to needs assessment with academic research partners.
- Unhealthy commodity industries: Work with partners to address the influence of industries promoting unhealthy commodities (e.g., alcohol, tobacco, gambling, ultra-processed foods) and their impact on public health.
- Data and evidence: Use health metrics and HIA to guide actions, influence policy, and evaluate the success of public health interventions and consultations.
- Expertise development: Strengthen public health skills through education and training focused on addressing health challenges using legal and planning frameworks, particularly those related to structural and environmental determinants of health.

#### What are we trying to achieve?

A programme of collaborative work that addresses:

- Healthier, fairer society: Promote an equitable society where the environments people live in contribute to better health outcomes and reduce disparities.
- "Health in All Policies": Embed health considerations into policies across sectors, ensuring that public policies support health and well-being.
- Increased awareness: Raise awareness among the public and decision-makers about the determinants of health and their impact on population health.
- A wellbeing economy: That prioritises human and planetary health by focusing on environmental sustainability, equity, and health as central goals. It shifts the focus from economic growth alone to putting the economy in service of our ultimate objective: achieving a fairer, healthier society for all.

Objectives in 2025	Deliverable	Date for completion
Apply HIA methods to health improvement initiatives	HIA conducted in at least one initiative	Dec 2025
2. Conduct stakeholder analysis to identify partners addressing determinants of health and to contribute to the development of public participation in HSE processes	Stakeholder analysis report	Feb 2025
Conduct a scoping review of the health needs of tenants in private rental accommodation to inform ongoing work on housing and energy poverty	Briefing document	Jan 2025
Collaborate to develop and publish a collaborative position paper on healthy places and place-based approaches to health	Collaborative position paper	Dec 2025
5. Participate in the Environmental Protection Agency's (EPA) Health Advisory Committee and other expert groups	Participation in advisory groups	Ongoing
6. Evaluate Public Health responses to planning and environmental statutory consultations to assess effectiveness and inform future practices	Evaluation report complete and recommendations agreed	April 2025
7. Establish regular cross-sectoral webinars to foster relationship building and a better understanding of the environmental and commercial determinants of health.	Webinar process established and facilitated	Dec 2025
8 Develop a joint action plan in collaboration with Healthy Ireland Local Government focusing on place-based initiatives, training and the well-being economy	Deliver a joint action plan	Mar 2025

# 4 Strategic Enablers

#### 1. Clear Vision and Strategic Goals

• A clear mission and prioritised goals align team efforts and direct resources toward targeted health outcomes.

#### 2. Leadership and Governance

• Strong leadership and a governance framework ensure guidance, accountability, and empower teams to innovate.

#### 3. Collaboration and Partnerships

• Interdisciplinary collaboration and community engagement foster holistic health approaches and tailored interventions.

#### 4. Data and Analytics

 Real-time data and health metrics drive decision-making and help target interventions effectively.

#### 5. Workforce Capacity and Training

 A skilled, empowered workforce with ongoing training boosts motivation and adaptability.

#### 6. Funding and Resources

• Sustainable funding and modern tools are essential for efficient program delivery and patient engagement.

#### 7. Effective Communication

• Clear internal and external communication builds team alignment and public support for initiatives.

#### 8. Monitoring, Evaluation, and Feedback

• Continuous monitoring and feedback loops enable program adjustment and improvement.

#### 9. Policy and Regulatory Support

• Alignment with supportive health policies and legal frameworks ensures compliance and protection.

#### 10. Culture of Innovation and Adaptability

• Fostering innovation and maintaining adaptability helps teams respond to health challenges and changes.

# **Appendix**

Health Improvement Operation and Strategic Plan Working Group

Name	Job Title	Affiliations
Diarmuid O'Donovan	National Director of Health Improvement	Chair
Christopher Carroll	Consultant in Public Health Medicine	National Health Improvement
Gregory Martin	Consultant in Public Health Medicine	National Health Improvement
Claire Neill	Consultant in Public Health Medicine	National Health Improvement
Sara Hamdona	Executive Assistant	National Health Improvement
James O'Connell	SpR in Public Health Medicine	National Health Improvement
Therese McGlacken	SpR in Public Health Medicine	National Health Improvement
Anne Dee	Consultant in Public Health Medicine	Regional Health Improvement, HSE Mid West
Catherine Lynch	Consultant in Public Health Medicine	Regional Health Improvement, HSE Dublin and South East
Douglas Hamilton	Consultant in Public Health Medicine	Regional Health Improvement, HSE Dublin and North East
Melissa Canny	Consultant in Public Health Medicine	Regional Health Improvement, HSE West and North West
Una Fallon	Consultant in Public Health Medicine	Regional Health Improvement, HSE Dublin and Midlands
Shaunna Kelly	SpR in Public Health Medicine	Regional Health Improvement, HSE Dublin and Midlands
Ruth Ceannt	SpR in Public Health Medicine	Regional Health Improvement, HSE Dublin and Midlands
Emma Kearney	SpR in Public Health Medicine	Regional Health Improvement, HSE Mid West
Neil Hyland	SpR in Public Health Medicine	Regional Health Improvement, HSE West and North West