



# **REPORT on the STAKEHOLDERS' MEETING for IRELAND AND NORTHERN IRELAND'S POPULATION HEALTH OBSERVATORY**

## **Background**

The need for reliable intelligence to support public health has been highlighted in both Ireland and Northern Ireland. Around the world, public health observatories have been developed to help meet the growing information requirements for effective public health policy and practice.

In 2004 the Institute of Public Health in Ireland received seeding funds from the Health Research Board in Ireland and the Department of Health, Social Services and Public Safety in Northern Ireland to build resources for an all-island population health observatory.

A broad-based advisory group was established to oversee the longer term planning for the observatory. The advisory group, chaired by Dr Paula Kilbane, Chief Executive, Eastern Health and Social Services Board, includes members from the departments of health, the health boards and health and social services boards, their departments of public health, the leading statistical agencies on the island, the community and voluntary sector and academia.

The advisory group is helping to develop a longer-term plan for the observatory. As part of their work it held a Stakeholders' Meeting on 21 October 2004 at the Royal Hospital Kilmainham, Dublin.

The aim of the meeting was to bring together potential partner organisations and stakeholders to discuss their information requirements and how the observatory could best add value to efforts to improve health and reduce health inequalities on the island.

## **Delegates**

On the day 110 people from the public health community across the island attended (29 from the North and 81 from the South). They included representatives from:

- Health departments and other government departments
- Health (and Social Services) Boards and their departments of public health and health promotion
- Environmental health agencies
- Community and voluntary groups
- Disease registries (cancer, communicable disease)
- Local government and other regional development agencies
- Leading statistical agencies
- University departments
- Selected partnership organisations
- North/South bodies

The list of organisations is attached.

Thirty two delegates completed the evaluation form. The vast majority reported being satisfied or very satisfied with the meeting. The practical arrangements were very well received and there was a very positive response to the speakers. The workshops also seem to have worked well - over three quarters of those who completed the evaluation form felt they were fully able to participate in the workshop discussions to the extent that they wanted to.

### **Exhibitions**

During the day delegates were able to view displays/demonstrations of some of the key health information resources on the island:

- National Disease Surveillance Centre (Ireland)
- Communicable Disease Surveillance Centre (Northern Ireland)
- Northern Ireland Cancer Registry
- National Cancer Registry of Ireland
- Central Statistics Office (Ireland)
- Northern Ireland's Statistics and Research Agency
- Public Health Information System (PHIS(CD)) (Ireland)

Many delegates visited the exhibitions and valued the opportunity to discuss the information resources directly with their developers and managers.

### **Plenary Session**

Dr Paula Kilbane first welcomed delegates and thanked them for attending when a number of other public health events were taking place across the island.

The meeting was then officially opened by Mr Michael Kelly, Secretary General, Department of Health and Children in the South and Dr Liz Mitchell, Principal Medical Officer, Department of Health, Social Services and Public Safety in the North. Mr Kelly was very supportive of the population health observatory project. He outlined the National Health Information Strategy and highlighted the role of the observatory (Slides attached). Despite financial constraints in the North, Dr Mitchell was also very supportive and was eager to explore ways in which North/South links could be strengthened.

Prof John Wilkinson, Chair, Association of Public Health Observatories gave an overview of public health observatories in the UK. He outlined the functions they performed at the regional, national and local level, and highlighted some of the significant contributions they had made to date (Slides attached). He was followed by Dr Kevin Balanda, Associate Director, Institute of Public Health who reflected on the

role of population health observatories and some of the key issues facing an all-island observatory (Slides attached).

### **Roundtable Workshops and Plenary Discussion**

Mr Owen Metcalfe, Associate Director, Institute of Public Health introduced the workshops and facilitated the plenary discussion that followed.

The aims of the workshops were to explore opinions about a number of identified issues:

- Information and functions
- Local/regional/national information needs
- Partners and relationships
- Management and governance.

Delegates were divided into mixed groups (of about 10 people each) with members from the North and South selected from across the public health community. Each roundtable workshop lasted approximately 2½ hours and was facilitated by a designated facilitator (See attached).

The key issues that arose in each workshop were then explored in a plenary discussion.

### **Closing**

Dr Kilbane summarised the day and told delegates that a report on the meeting will be sent out to all invitees. The Advisory Group will incorporate input from the meeting into its report which will be released in March 2005. Dr Jane Wilde, Director, Institute of Public Health then thanked participants and closed the meeting.

### **Key messages**

Some of the key messages arising from the workshops, the plenary discussion and Chair's summary are listed below.

The notion of an all-island population health observatory was enthusiastically welcomed. While many issues needed to be clarified, none of these were seen as insurmountable and there was widespread support for moving forward with the development of an all-island population health observatory.

#### Information and function

- The observatory should be action oriented and not just a repository of data. It should have a focus on action to improve health and reduce inequalities. There was some debate about just how far it should become actively involved in advocacy.
- As well as maximising the use of existing data the observatory should help fill gaps in information- in particular there was support for including qualitative information in the observatory.
- Information needs to be disseminated to a wide audience of users in an accessible format.
- The observatory needs to avoid duplicating the efforts of other agencies.
- There was support for 'quick wins' which do not jeopardise long term strategic development.

- A population health observatory could play a key role supporting standards for information, and information and communication technology.

#### Local/regional/national information needs

- There was a strong feeling that the observatory should meet local and regional information needs. The development of an agreed core data set was considered useful for this purpose.
- As well as the North/South dimension, the British and European dimensions were also important (in particular the European Health Monitoring Framework).

#### Partners and relationships

- The observatory should be inclusive and participatory in its development and operation.
- The nature of the relationships between partner organisations and other users is very important. Two-way communication was emphasised- not only should the observatory support its partners and users, they in turn should have an input into the development and management of the observatory.
- The observatory should have clear relationships with other information agencies such as HIQA and the disease registries.
- The observatory should clearly define the value it would add and how it would support the efforts of existing agencies.

#### Management and governance

- There are ethical issues associated with increasing access to information. Data protection issues associated with data transfer also need to be addressed.