

Annual Report

Financial year ended
31 December 2022

Institute of
Public Health



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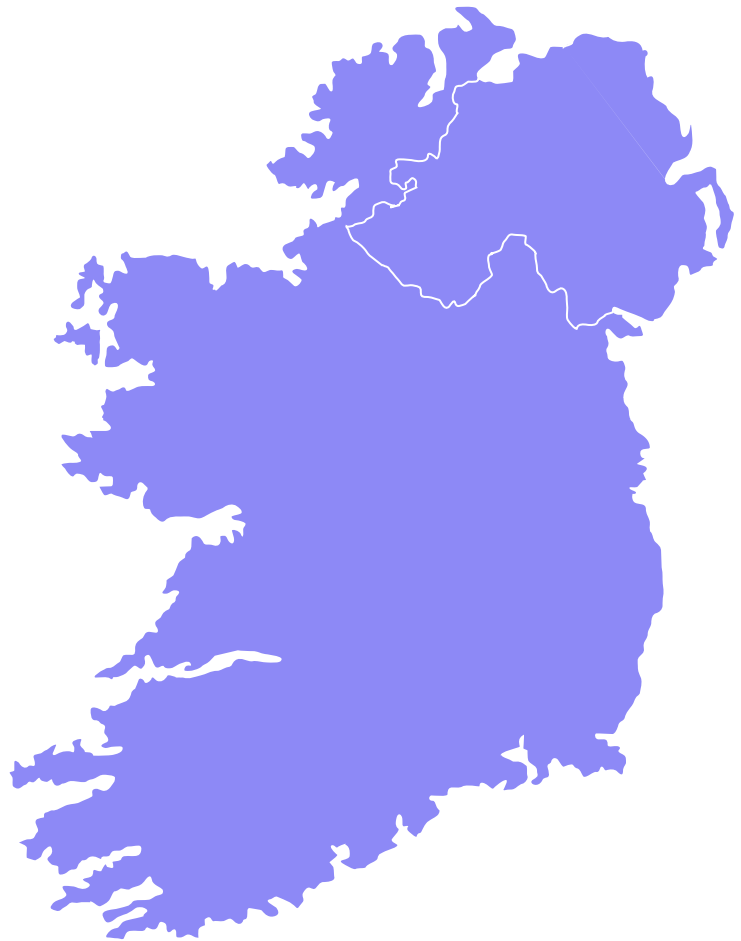
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The Institute of Public Health (IPH) informs public policy to support a healthier population in Ireland and Northern Ireland. Through a health equity and health inequalities lens, we review evidence, conduct research, and analyse policies and proposals to shape a healthier island for all.

IPH was established in 1998, just prior to the signing of the Good Friday/Belfast Agreement to provide support on public health policy to the respective Departments of Health and Chief Medical Officers in both jurisdictions. It is jointly funded by the Departments of Health in Ireland and Northern Ireland.



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About the Institute of Public Health and Overview



Corporate Governance

The Institute is governed by a Board of Directors. In 2022 IPH invited applications for a new Chair and Deputy Chair to serve as Non-Executive Directors on the Board.

Following a selection process, Professor Bernie Hannigan and Martin Higgins were appointed Chair and Deputy Chair respectively in January 2023.

In 2022 the following Board appointments were made: Dr Marie Casey, Consultant in Public Health Medicine, HSE; Dr Paul Kavanagh, Specialist in Public Health Medicine, National Health Intelligence Unit, HSE; and Dr Deirdre Mulholland, Area Director of Public Health, Area A - Cavan, Louth, Meath, Monaghan and Dublin North, HSE.



Professor Bernie Hannigan
*Incoming Chair,
Board of Directors*

Professor Bernie Hannigan took up her role as Chair of the Board of the Institute of Public Health on 1 January 2023.

Between 2014 and 2021, Bernie served as Director of Research, Translation and Innovation for Public Health England (now UK Health Security Agency). She also served as Director of R&D and Chief Scientific Adviser for Health and Social Care in Northern Ireland (2008-2014) and, prior to that, she held an academic leadership role at the University of Ulster.

Bernie was appointed Chairperson of the Health Research Board by the Minister for Health in April 2021, having been a Board member since November 2015. Her previous non-executive roles include Board membership of Invest Northern Ireland and the Marine Institute. More recently, she was a member of the Health and Life Sciences Panel for the UK Research Excellence Framework (REF 2022).

A native of Dublin, Bernie graduated with BA (Mod) Natural Sciences from Trinity College Dublin and PhD (Immunology) from the National University of Ireland for research at the Royal College of Surgeons Ireland (RCSI).

Throughout her academic career, Bernie has led or participated in research teams that attracted significant external funding, authored over 100 papers and two textbooks, and supervised 20 successful PhD students.



Martin Higgins
*Incoming Deputy Chair,
Board of Directors*

Martin Higgins became Deputy Chair of the Board of the Institute of Public Health on 1 January 2023.

Martin was Chief Executive of Safefood, one of the cross-border bodies set up under the Good Friday Agreement, for 14 years until his retirement.

Prior to that, he worked in the Department of Health in Ireland for many years specialising in finance and later in public health regulation. He is an experienced board member having served on the boards of the Irish Medicines Board, the Irish Health and Social Care Professionals regulator, Coru, and the Nursing and Midwifery Board of Ireland.

He was also Board Chair of the Food Safety Authority of Ireland and is currently a member of the Board of the Health Information and Quality Authority (HIQA). Martin has a keen interest in governance and is former Chair of the audit and risk committees of both COMREG and An Bord Pleanála. He is currently the external member of the Health Research Board's audit and risk committee.

A professional accountant with additional qualifications in governance, regulation and health economics, Martin is a Fellow of the Chartered Management Institute.



Dr Paul Kavanagh

Dr Paul Kavanagh has been a Member of the Board of the Institute of Public Health since 1 January 2023.

Dr Kavanagh is a Consultant in Public Health Medicine at the National Health

Intelligence Unit in the Health Service Executive (HSE). He provides public health leadership for population health planning, major health service reform, health policy and programme evaluation, and health information system design and is also Public Health Advisor to the HSE Tobacco Free Ireland Programme.

Paul is a medical doctor, a registered specialist in public health medicine, and holds postgraduate qualifications in Community Health, Health Economics, Medical Education, Healthcare Leadership and Data Science. He is a Fellow of the Faculty of Public Health Medicine in Ireland, serves as Honorary Secretary to the Board of the Faculty, and is Honorary Senior Lecturer in Epidemiology and Public Health at the School of Population Health, Royal College of Surgeons in Ireland.



Dr Deirdre Mulholland

Dr Deirdre Mulholland took up her role as Member of the Board of the Institute of Public Health on 1 January 2023.

Deirdre graduated from Trinity College Dublin, and

trained and worked as a GP before moving into public health medicine.

She has served as a Deputy Chief Medical Officer in the Department of Health in Ireland, with a special remit for health information and acute service performance (2012-2015), and worked as a Consultant in Public Health Medicine in HSE Dublin East before being appointed Director of Public Health in 2017.

Deirdre took up her post as Area Director of Public Health for Area A (North Dublin, Meath, Cavan, Monaghan and Louth) in May 2022 and is leading on public health reform and the delivery of public health services at regional and national level. She continues to have an interest in Patient Safety and Quality of Care, as well as health service improvement.



Dr Marie Casey

Dr Marie Casey took up her role as Member of the Board of the Institute of Public Health on 1 January 2023.

Dr Casey is a Consultant in Public Health Medicine in the Health Service Executive

(HSE) specialising in Health Protection. She joined the HSE as a Specialist in Public Health Medicine in 2013.

Her interests also include health intelligence, health service technology and Public Health and inequalities. Prior to working in the HSE, Marie undertook her Higher Specialist Training in Public Health in England, where she completed a Masters in Public Health and a Masters in Evidence Based Healthcare and Health Technology Assessment. She is currently a Fellow of the Faculty of Public Health Medicine in Ireland.



Foreword from Chair

Welcome from incoming Board Chair – Professor Bernie Hannigan

As incoming Chair, I am delighted to present the 2022 Annual Report for the Institute of Public Health (IPH). This report details the important work carried out by the Institute during the year to shape public health policy across the island of Ireland.

I was appointed Chair of the Board of IPH in January 2023 and look forward to working with colleagues, management, and staff to implement the Institute's current strategic objectives (2020-2025) and to revising and developing a new strategic framework as a road map for future work and priorities.

In 2022, as the world began to exit the emergency phase of the Covid-19 pandemic, the work of the public health community, in both policy and practice, was never more important. While we now face new and emerging challenges, such as climate change, there is a prime opportunity to take stock and renew our focus on tackling health inequalities, which were so gravely exposed during the pandemic.

The overarching goal of the Institute is to make lives better for all, by improving health equity and reducing health inequalities in Ireland and Northern Ireland. To that end, IPH works with a variety of stakeholders, including healthcare professionals, community organisations, and policymakers at local and national level, to ensure that public health policies are equitable and based on the best available evidence.

Today, some of the enduring public health challenges that remain to be resolved, include tobacco and alcohol harms, overweight and obesity, and physical inactivity. The social and commercial determinants of health present additional challenges, as they include environmental, economic, and social factors, many of which are outside our control, as individuals.

These issues go to the very heart of what the Institute was set up to do. Public health knows no borders and for almost 25 years, IPH has worked to improve population health across the island of Ireland and foster greater North-South working and cooperation.

On that note, I would like to acknowledge the support that IPH receives from the Departments of Health in Ireland and Northern Ireland, as well as from the Public Health Agency and Health Service Executive among other partner organisations within the wider public health community across the UK, Europe, and beyond.

I would also like to thank CEO Suzanne Costello, the IPH management team, and all IPH staff for their diligence and dedication to their work which ensures everyone across the island of Ireland has a chance to live a healthier life.

I extend my gratitude to the Board of IPH, to outgoing Board Members and new Members joining, for their commitment, knowledge, expertise and support for the Institute's work.

The Institute looks forward to 2023 with renewed optimism, in particular as it prepares to mark 25 years of working towards improving population health across the island of Ireland.

In the face of the climate crisis and so many challenges, it is clear that the public health community and policy makers cannot stand still. Now more than ever, we must work together to safeguard our health and the health of future generations.



Professor Bernie Hannigan
IPH Chair

Foreword from Chief Executive

Overview of 2022

I am pleased to introduce the 2022 Annual Report for the Institute of Public Health (IPH).

As we emerge from the pandemic, the public health landscape across the island of Ireland is changing. The impetus to ensure a healthy population, as a keystone of economic and social wellbeing, is greater than ever. Improving health equity and reducing health inequalities are core to achieving that aim and the Institute continued to focus on these objectives throughout 2022.

While preventing ill health is essential for a flourishing society and economy, this cannot be left to individuals alone. The social determinants of health - the non-medical factors that influence health outcomes - must be central to all policy development. These factors include the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping our daily lives.

Public health frameworks in Ireland and Northern Ireland - Healthy Ireland and Making Life Better - acknowledge that preventable non-communicable diseases place a huge burden on the healthcare system and diminish quality of life for individuals and families. The frameworks also acknowledge that many of the drivers of ill-health go beyond the health policy arena and sit within wider public policy.

To that end, IPH engages widely, and inputs extensively to strategy and working groups on a broad range of public health issues relevant to Ireland and Northern Ireland. In 2022 it responded to 12 public consultations, engaged in pre-legislative scrutiny on the Public Health (Tobacco and Nicotine Inhaling Products) Bill and the Gambling Regulation Bill in Ireland, while participating in more than 40 strategy and working groups.

During the year we were also pleased to work with the Economic and Social Research Institute (ESRI) on the publication of a new report, 'Unequal Chances? Inequalities in Mortality'. The report which identified improvements and persistent issues around health inequalities and underlined the critical need for enhanced population data to inform policy development.

Increasing awareness of the importance of putting health at the heart of public policy continued to underpin IPH's communications and training work in 2022. The Institute developed and launched a new digital learning platform and app, Public Health Matters. Appealing to a wide range of public health practitioners, the platform offers free online training courses on Health Impact Assessment and 'Getting Active for Better Ageing', among other content.

A new Public Health Matters podcast featured interviews and discussions with experts in health inequalities, alcohol policy, tobacco control, mental health, climate change and air pollution.

Separately, IPH ran an all-island photography competition on the theme of ageing, which culminated in the launch of a free-to-use 'How We Age' image bank. We hope to extend this initiative into the future to focus on other themes.

As an established North-South agency, the Institute liaises with a wide network of public health professionals, North-South, East-West, and within the EU. This partnership approach enhances many of the online and in-person events we hold each year.

One such event was the annual Joint North South Public Health Conference, which took place in November and was jointly organised by the Institute, Public Health Agency, Queen's University Belfast, Ulster University, University College Cork and HSE Health and Wellbeing. Focusing on the impact of climate change on health, the Healthy Planet, Healthy People conference attracted close to 1,000 delegates from across the island and beyond to consider the opportunities and challenges presented by climate change.

In 2022, IPH also worked with research partners to publish the Ireland North and South Report Card on Physical Activity for Children and Adolescents. This report found that not all children and teens in Ireland and Northern Ireland had an equal chance to be active and that disability, gender, social economic status and age impacted physical activity levels.

The Institute is fortunate to have a talented and committed multidisciplinary team of colleagues, who can analyse and review the complex policy ecosystem that influences health and wellbeing at population level.

This year, we were also delighted to welcome new Board Members and a new Chair, Professor Bernie Hannigan, and Deputy Chair, Martin Higgins. We are very appreciative of the expertise and experience they bring to the Institute.

I would also like to take this opportunity to thank our colleagues in the Departments of Health in Ireland and Northern Ireland for their ongoing support and engagement with our work.

Finally, 2023 will be an important milestone for the Institute, marking the 25th anniversary of its foundation. This will be an opportunity to reflect on the shared public health challenges we face on the island of Ireland and how continued cooperation and collaboration can improve the lives of everyone.



Suzanne Costello
CEO

IPH Vision and Values

The Institute of Public Health (IPH) informs public policy to improve health equity and reduce health inequalities on the island of Ireland. This means ensuring that public policy, not just health policy, enables everyone to live a healthier life for longer.

IPH was set up prior to the signing of the 1998 Good Friday/Belfast Agreement to provide support on public health policy to the respective Departments of Health and Chief Medical Officers in both jurisdictions. The Institute is jointly funded by the Departments of Health in Ireland and Northern Ireland.

IPH works with a variety of stakeholders and partners, including healthcare professionals, community organisations, and policymakers at local and national level to ensure that public health policies are equitable and based on the best available evidence.

Vision and Values

Everyone has an important role in looking after their own health. However, many of the factors that influence our health outcomes are outside the control of the individual, such as environmental, economic and social factors.

Where we live, learn, work, play, and age influences our health and the opportunities we have to make healthy choices. Inequities in these factors can create health inequalities.

Health equity - **giving everyone a chance to reach their potential to live a healthier life** - is a core aim of public health and the primary focus of the Institute.

Through our work, IPH supports the United Nations Sustainable Development Goals, including Goal 3, which focuses on good health and wellbeing.

Key goals of the Institute:

The Institute has staff teams based in Dublin and Belfast, who work across the following areas:



Research and evidence review



Partnership working



Policy analysis and evaluation



Specialist training and public communications



Key Achievements in 2022



Website visits
349,629



Downloaded outputs
75,391



Podcast listens
1,500+



Webinar registrations
2,660



Publications and Reports
11



Consultation Responses
12



Engagement with strategy
and working groups
43



Parliamentary Committees
- Joint Oireachtas Health
Committee
- Joint Oireachtas Justice
Committee



New online learning courses
2



Blogs
10

2022 in Review

Key Highlights

Throughout the year, the Institute worked across a wide range of public health areas, from tobacco control, alcohol policy and obesity prevention, to air pollution and the climate crisis.



Alcohol Policy

In January the Institute responded to a Department of Justice consultation on a **Review of Alcohol Licensing** in Ireland. This preceded the publication of the **Sale of Alcohol Bill 2022**, which the Institute also made a submission on in December.



Tobacco Control

The Institute contributed to the development of a new **Tobacco 21** report, published by the Royal College of Physicians of Ireland's Policy Group on Tobacco, which made the case for raising the minimum age of sale of tobacco from 18 to 21 years in Ireland.



Inequalities

Inequalities in Mortality Report: September saw the launch of the 'Unequal Chances?' report on inequalities in mortality in Ireland, commissioned by IPH and produced by the Economic and Social Research Institute (ESRI).



Climate Change

Healthy Planet, Healthy People Conference: Close to 1,000 delegates registered for the all-island online Joint Public Health Conference in November, which brought together global experts to consider the health impacts of climate change.



Obesity Prevention

IPH carried out a significant programme of work on obesity prevention in Northern Ireland in 2022. This involved considering the evidence behind a **whole systems approach (WSA) to obesity prevention** and conducting a rapid review of evidence to inform a policy options matrix.



Positive Ageing

'How We Age' Competition and Image Gallery: IPH initiated an all-island photography competition to reframe how older people are portrayed and this culminated in the creation of the 'How We Age' photo gallery as a free-to-use image resource.



Engagement and Learning

Public Health Matters: In June IPH launched Public Health Matters, a new app and digital learning platform, offering free online courses and other public health content. The first online course provided an introduction to **Health Impact Assessment**; a second course on **'Getting Active for Better Ageing'** was launched later in the year.



Podcast

Public Health Matters Podcast: IPH launched a Public Health Matters podcast, featuring interviews and discussions with experts across a wide range of public health themes, such as alcohol and tobacco control policy, climate change, and mental health.



Physical Activity

North South Physical Activity Report Card: In August IPH published the findings of the Ireland North and South Report Card on Physical Activity for Children and Adolescents, which found that not all children and teens had an equal chance to be active.

Walk with Me Study: During the year IPH commenced work on a joint £1.3 million research programme with Ulster University which will examine whether a peer-led walking programme can support older people to be more physically active.

Webinar: IPH hosted a webinar on physical activity in October to launch a new online learning course on 'Getting Active for Better Ageing'. The new course is based on evidence from the Generating Active Lives in Older People (GALOP) research programme and the webinar attracted more than 500 delegates.

Strategic Plan 2020 – 2025

The work of the Institute in 2022 aligned with the organisation's 2020-2025 strategic framework.

The current strategic plan was informed by developments in the field of policy, research, and the wider factors that impact upon the health and wellbeing of people living on the island of Ireland.

The strategic objectives of the organisation are delivered through three key pillars – evidence, policy, and partnership.

OUR PURPOSE

Informing public policy to support healthier populations.

WE DO THIS BY

Research and evidence review;
policy analysis and evaluation;
partnership working; specialist training;
and public communication.

**Evidence.
Policy.
Partnership.**

WE WORK FOR

Governments, policy makers
and civil society in Ireland and
Northern Ireland.

WE PRIORITISE

Promoting health and wellbeing;
improving health equity;
reducing health inequalities.

2020-2025 Strategic Objectives

The work of the Institute in 2022 aligned with the following strategic objectives.

1 Understanding what works

Research and evidence review of:

- How to live healthily for longer
- The impact of social, environmental, and commercial determinants of health
- The factors that influence health behaviours

2 Optimising impact and investment

Policy analysis and evaluation of:

- The impact of preventative health strategies
- Health and wellbeing impact assessment; training and delivery
- Interventions to optimise population health and wellbeing outcomes

3 Working together to improve outcomes North and South

Island of Ireland partnership working based on:

- Academic, clinical and civil society partners working towards health equity
- Engaging with leaders and innovators in public health
- Linking research and evidence to policy and practice

4 Knowledge and communication

Sharing knowledge and communicating the value of public health by:

- Providing accredited training for Specialist Registrars in public health medicine
- Promoting of health in all policies through cross disciplinary engagement and training
- Increasing public understanding of the role of policy in population health

5 Organisational Excellence

Setting and meeting high standards in:

- Accountability and adherence to public health values
- Governance, financial sustainability and value for money in everything we do
- Investment in our staff; building expertise to optimise outcomes

2

Research and Evidence



Core Strategic Objective: Conducting research and reviewing evidence to understand what works and inform public health policy.

This section summarises and highlights key projects and programmes undertaken in 2022 to build the evidence base and increase our understanding of the following:

- How to live healthily for longer
- The impact of social, environmental, and commercial determinants of health
- The factors that influence health behaviours.

BMJ Editorial: The need for a public health approach to loneliness

IPH Director of Ageing Research and Development, Professor Roger O'Sullivan, co-authored an editorial in the **British Medical Journal** in February to highlight the need for a public health approach to tackle loneliness.

In the joint editorial, Professor O'Sullivan, Professor Gerry Leavey from the Bamford Centre, Ulster University and Professor Brian Lawlor from the Global Brain Health Institute, Trinity College Dublin observed that loneliness is experienced across all age groups and is costly to individuals and society.

Professors O'Sullivan, Leavey and Lawlor also highlighted the need to “segment” the experience of loneliness for at-risk groups and to address the social and structural factors influencing the risk of loneliness.

“A public health approach to loneliness means confronting the social and structural factors that influence risk of loneliness across the life course, including poverty, education, transport, inequalities, and housing,” Professors O'Sullivan, Leavey and Lawlor wrote.

They added that a “better understanding” is required of the intensity and impact of the experience of loneliness, as well as cultural differences and geographical variations.

In addition to understanding the causes of loneliness, consideration must also be given to the various types of loneliness – emotional, social, and existential – as well as frequency – transient, situational, occasional, and chronic.



Public awareness campaigns are also needed to deal with stigma and stereotypes around loneliness and to highlight the value of community involvement and participation.

“It is important to facilitate healthy social choices, making it easier to connect with others in the community, change work environments, and increase opportunities for building trust and social capital,” Professors O'Sullivan, Leavey and Lawlor wrote.

Separately, Professor O'Sullivan also wrote a [blog on loneliness](#) for the Rural Community Network in Northern Ireland in January 2022.

Ahead of Northern Ireland Assembly elections, IPH also chaired the Action Group on Loneliness Policy Hustings in April, which featured representatives from political parties across Northern Ireland.

Home Support Services in Ireland

In 2022 the Institute was commissioned by the Department of Health in Ireland to provide support on a public consultation on Draft Regulations for Providers of Home Support Services.

IPH assisted with the design and preparation of the **consultation** documentation, which set out to develop new regulations governing providers of home support services in Ireland.

The consultation, launched by the Minister of State for Mental Health and Older People, Mary Butler, on 16 June, sought views on the proposed regulations. A wide range of stakeholders, including service providers, service users, home support workers and family carers were consulted.

The Institute, led by Professor Roger O'Sullivan, analysed all submissions to the public consultation with a view to producing a summary report in 2023 for the Department of Health.

The draft regulations apply to public, private, and not-for-profit providers of home support services and set out the minimum requirements that providers of home support services must meet to obtain a license to operate.

The licensing system will help to ensure that home support services are of consistently high quality, as well as to safeguard service-users.

The requirement to obtain a licence falls centrally on providers of home support services whose employees may encompass home helps, personal assistants and community-based healthcare support assistants, and whose services encompass the provision of assistance with personal hygiene, mobility, social engagement, and essential household tasks.

Providing support to the Department of Health in the area of adult safeguarding, IPH also presented to the Adult Support and Protection and Safeguarding Five Nations Conference Series in October 2022.

North South Physical Activity Report Card for Children and Adolescents

In August IPH published the Active Healthy Kids Report Card, which found a slight improvement in overall physical activity levels across the island of Ireland since 2016 but also identified a number of inequalities.

The **Ireland North and South Report Card on Physical Activity for Children and Adolescents** was produced as part of the **Active Healthy Kids Global Alliance**, established in 2014 to create a world of active healthy kids. Close to 70 countries have signed up and taken part in the global alliance to date.

The 2022 report was produced by a team of investigators from IPH policy team, Ulster University, Dublin City University, Munster Technological University, University of Limerick, Technical University of Shannon, University College Cork, University of Strathclyde, and University of Eastern Finland.

Across the island of Ireland, it is recommended that children and adolescents, aged 6-17 years, attain on average 60 minutes per day of moderate-to-vigorous intensity physical activity throughout the week.

On evaluating data across both jurisdictions, the team of investigators awarded a **C minus grade for overall physical activity in children and teens** across the whole island. This represents a slight improvement on the D grade awarded in 2016.

The report found evidence of inequalities across a range of indicators with disability, gender, social economic status and age all impacting on physical activity levels.

The 2022 Report Card made several recommendations, including the need to further develop policy measures to address the inequalities identified and the need for a framework for the systematic surveillance of indicators related to physical activity for children and teens with disabilities.

Obesity Prevention in Northern Ireland

During the year IPH worked as part of a team of researchers tasked with examining the potential to use a whole systems approach (WSA) to obesity prevention in Northern Ireland.

The team of researchers included Dr Jenny Mack, IPH, Dr Helen McAvoy, IPH, Dr Ciara Reynolds, IPH, Dr Gavin Breslin, Senior Lecturer in the School of Psychology at Ulster University; Dr Laura McGowan, Lecturer in Nutrition and Behaviour Change at Queen's University Belfast, and Lead for the Association for the Study of Obesity Northern Ireland Network; and Professor Wendy Wills, Professor of Food and Public Health, University of Hertfordshire and Director of the Centre for Research in Public Health and Community Care.

This work will produce a report for the Department of Health to inform a new obesity prevention strategy for Northern Ireland.

As part of this work programme, IPH staff conducted an evidence review to explore the effectiveness of significant regulatory developments in international obesity policy in the past decade under the following headings: food labelling; food packaging; food reformulation; taxation/subsidies; advertising, marketing and sponsorship; the food and physical activity environment; and targeted population policy measures.

This work also culminated in the development of an obesity prevention policy matrix and a policy mapping tool, summarising possible policy options and considering how these may or may not be applied in Northern Ireland. The tool was co-produced by the Obesity Prevention Strategy Project Board.

Spotlight on Unequal Chances: Inequalities in Mortality in Ireland

Building on the Institute's previous work on inequalities, IPH commissioned a report examining inequalities in mortality in Ireland from 2000 onwards.



The report, **'Unequal Chances? Inequalities in Mortality in Ireland'** was published in September 2022. It provided a timely update on the 2001 landmark **'Inequalities in Mortality: A report on All Ireland Mortality Data'** report,

which analysed deaths on the island between 1989 – 1999.

The 2022 report was produced by the Economic and Social Research Institute (ESRI) and examined inequalities in mortality in Ireland between 2000-2019, with a focus on socio-economic status (SES). For the first time the report assessed how ethnicity,

place of birth, or nationality, may have a bearing on mortality rates and inequalities.

The report found a fall in overall mortality rates since 2000 but that inequalities remain between different groups of the population.

IPH Director of Policy, Dr Helen McAvoy, said the report findings strengthened the case for better health data to support commitments to reduce health inequalities:

"This report updates our understanding of how social and economic disadvantage can influence when and how people died in Ireland over the past decade. The analysis reveals new insights but also starkly highlights the ongoing limitations of Irish data. A robust health information system is needed to better monitor health inequalities and to meet the health equity goals of policies like Healthy Ireland and Sláintecare."

Key findings from the 'Unequal Chances' report:

Fewer deaths in the first week of life

The number of stillbirths and deaths in the first week of life per 1,000 births fell significantly between 2000 and 2019. This improvement was not experienced equally, the risk of death among babies born to mothers who were unemployed, or mothers of African origin remained elevated over time. Previous studies also show higher perinatal mortality in the Traveller Community. In 2019 the overall perinatal mortality rate, across all population groups, saw the first recorded increase since 2012.

Fewer deaths in the first year of life

Between 2000 and 2018, the infant mortality rate fell significantly (from 6.60 to 2.99 deaths per 1,000 infants). The gender gap decreased over time and then disappeared, with boys and girls experiencing similar infant mortality in 2018 compared to the higher rate observed for boys in 2000.

Fewer deaths in childhood

Between 2000 and 2018, the child mortality rate (deaths among children aged 1 to 14 years) fell significantly (from 0.17 to 0.08 deaths per 1,000 children). The gender gap decreased over time.

Inequality gap in mortality persists

The standardised mortality rate for those in the least advantaged socio-economic group was twice as high as those in the most advantaged group based on analysis of data from 2018. These inequalities translate into stark differences in life expectancy by socio-economic status. Life expectancy for males living in the most deprived areas of Ireland is five years shorter than those living in the least deprived areas (79.4 years versus 84.4 years).

Inequalities in respiratory disease of real concern

In the period 2000 to 2012, people working in manual jobs were two times more likely to die of respiratory disease than people identified as employers and managers. High rates of respiratory mortality were observed in agricultural workers in this study.

Fewer deaths from circulatory disease and marginal fall in lung disease deaths

In 2000, circulatory disease (heart disease and stroke) accounted for 41% of deaths, falling to 29% of deaths in 2018. The proportion of deaths due to respiratory disease (conditions affecting the lungs) fell from 16% to 13% in the same time period.

Cancer overtakes circulatory disease as main cause of death

The proportion of adult deaths caused by cancer rose from 25% in 2000 to 30% in 2018. Around 6 in 10 deaths were caused by either cancer or circulatory disease in 2018.

Lower mortality rates in some ethnic groups

Analysis of adult mortality rates according to ethnic and cultural background, country of birth and nationality revealed a substantially lower mortality rate in ethnic minority groups, as well as in those born outside Ireland or with non-Irish nationality. This may reflect a "healthy immigrant effect" whereby individuals migrating to Ireland are healthier on average than those in the destination country. Previous analyses, however, show higher mortality rates for adults in the Traveller Community.

Early evidence of inequalities in mortality from COVID-19 by socio-economic status

Although analysis was limited by data availability, there was evidence of a higher proportion of deaths from COVID-19 among people from lower socio-economic groups in the period May 2020 to May 2021. It is hoped that data from the COVID Data Research Hub will support further analyses on inequalities in COVID-19 mortality in Ireland. In those aged 65+ years, a higher share of COVID-19 deaths was observed among people born outside of Ireland and ethnic minority groups than might be expected given the size of the population.

<https://publichealth.ie/news/mortality-rates-ireland-improved-2000-inequalities-remain-new-unequal-chances-report-finds>

'Getting Active for Better Ageing' – Developing guidance and training for health professionals

In 2022 IPH built on research findings from the Generating Active Lives in Older People (GALOP) project which identified the need for tailored education, training, and resources to support healthcare professionals to promote physical activity in routine practice.

Based on the GALOP findings, IPH developed a free online course to help healthcare professionals to support older people to have more physically active lives.

The **'Getting Active for Better Ageing'** resource is aimed at general practitioners, nurses, physiotherapists, occupational therapists and all healthcare professionals who interact with older persons, as well as anyone interested in supporting older adults getting or staying active.

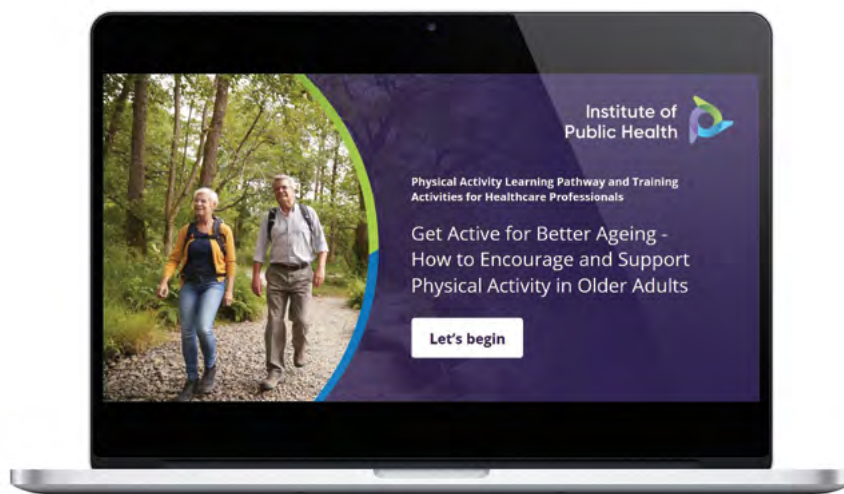
The course sets out key facts, information and guidelines, tools on how to support behaviour change in older adults, as well as other essential resources. It is available on IPH's **Public Health Matters** app and desktop platform.



IPH Director of Ageing Research and Development, Professor Roger O'Sullivan said:

"The evidence is clear, physical activity plays an important role in our health at all stages of life, including in older age which is sometimes overlooked. This new free learning resource is available on our Public Health Matters platform and was developed as a practical programme to assist healthcare professionals to support older persons to be more physically active."

In November IPH presented findings from the GALOP Programme at the Annual Saint John of God Research Study Day.



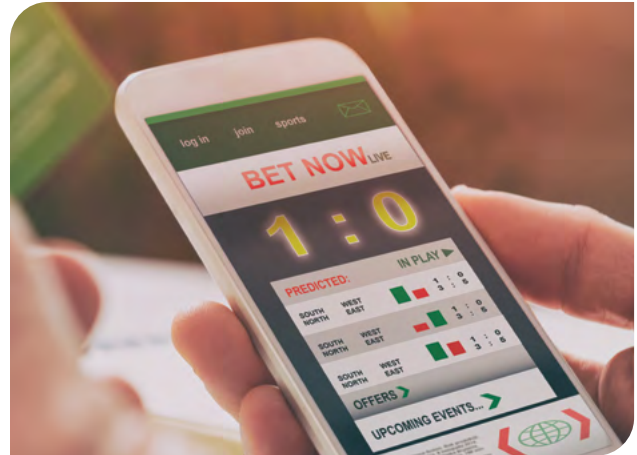
Multi-Year Work

Gambling Harm and Young People

In 2022 work commenced on a project to determine the extent of gambling, excessive gambling and problem gambling among children in Ireland.

The project, commissioned by IPH, involves an analysis of data from a survey of 15-16-year-old students through the European School Survey Project on Alcohol and other Drugs (ESPAD).

The study is also investigating the most popular forms of gambling among children as well as relationships between gambling, including excessive gambling, and demographic and lifestyle factors. The findings are expected to be published in 2023.



Obesity Prevention

In 2022 IPH commenced work on a project to increase our understanding of healthy weight management behaviours among adults in Northern Ireland.

The analysis was based on Health Survey NI data from 2,100 participants aged 16 and over. Through a psycho-behavioural segmentation approach, the analysis set out to gain insights into the attitudes, motivations, and priorities of individuals with respect to their weight management behaviours. It also sought to identify distinguishable segments of the population to help inform policy, services, and programmes.

This work will be published in 2023.



3

Policy Analysis and Evaluation



Core Strategic Objective: Reviewing policy and evidence to inform public health policy and optimise impact and investment.

This strategic objective aligns with the following themes:

- The impact of preventative health strategies
- Health and wellbeing impact assessment; training and delivery
- Interventions to optimise population health and wellbeing outcomes.

This section summarises and highlights key policy and evaluation projects undertaken in 2022, including those focusing on tobacco control, alcohol policy, gambling harms, physical activity, arts and creativity and wellbeing, among other public health issues.

Tobacco

KEY PROJECTS

Tobacco Free Ireland: Mid-term Stakeholder Engagement

In 2022 IPH published the findings from a stakeholder workshop conducted as part of a mid-term review of Tobacco Free Ireland (TFI) policy. The workshop was organised by the Tobacco and Alcohol Control Unit (TACU) at the Department of Health to seek the views of the TFI Partners Group on implementation priorities. IPH facilitated the workshop on 4 March and produced a report on findings from the stakeholder engagement event.

The report found that despite significant progress in reducing smoking prevalence in adult and child populations in Ireland, the target of <5% smoking population prevalence by 2025 will not be met. It also found that the retail market for tobacco and nicotine-containing products has changed substantially since the TFI policy was initiated. This has created significant challenges for both decision-making and resourcing within the legislative, policy and operational delivery components of TFI. The effects of the COVID-19 pandemic were also considered.

NI Tobacco Control Strategy End of Term Review

In 2022 IPH commenced a programme of work to develop a series of reports to inform an end of term review of Northern Ireland's Tobacco Control Strategy (2012-2022).



This work to support the Department of Health will include a Stakeholder Engagement report, a report on second-hand smoke exposure in Northern Ireland, a policy analysis examining the relationship between tobacco and mental health, and an evidence review on e-cigarettes.

Tobacco 21

The Institute contributed to the development of a new report making the case for raising the minimum age of sale of tobacco in Ireland from 18 to 21 years.

The Tobacco 21 report was published by the Royal College of Physicians of Ireland's (RCPI) Policy Group on Tobacco in September.

The report was developed from national and international evidence analysed by the Institute of Public Health. IPH Director of Policy, Dr Helen McAvoy, is a member of the RCPI Tobacco Policy Group.

The Tobacco 21 report concluded that amending legislation to raise the minimum legal age for the sale of tobacco products in Ireland offered a proven approach to significantly reduce the numbers of teenagers and young adults becoming addicted to tobacco.



Dr Helen McAvoy, IPH Director of Policy

Parliamentary Committees

On 25 February IPH Director of Policy Dr Helen McAvoy attended the Oireachtas Joint Committee on Health to give evidence on the Public Health (Tobacco and Nicotine Inhaling Products) Bill 2019. Dr McAvoy and Professor Des Cox from the Royal College of Physicians Ireland (RCPI) Tobacco Policy Group gave evidence on this proposed legislation.

In an opening statement to the Joint Committee on Health, IPH said the Bill would make both tobacco and e-cigarettes less accessible to children and enhance government oversight on the supply of these products. IPH and RCPI previously submitted joint written positions on this legislation in January 2020 and in June 2021.

Presentations, Conferences and Workshops

- On 2 March Dr Helen McAvoy took part in a panel discussion at the Forward Thinking in Tobacco Control event, hosted by the Health Service Executive (HSE) to mark National No Smoking Day.
- On 31 May Dr Ciara Reynolds gave a presentation on 'How can we better focus stop smoking services on health inequalities in Ireland?' at the Tobacco Endgame conference hosted by the Health Service Executive (HSE).



Dr Ciara Reynolds presenting at the Tobacco Endgame conference hosted by the HSE in May 2022.

Alcohol

KEY PROJECTS

Beaumont Alcohol Care Team Study

The Institute of Public Health and Health Service Executive (HSE) are funding a clinical research fellowship at Beaumont Hospital. The fellowship has been taken up by Dr Tobias Maharaj under the supervision of Professor Siobhan MacHale and Professor John Ryan.

The research aims to measure the impact of alcohol misuse on morbidity and mortality in hospital.

Dr Maharaj will undertake four individual studies, including a systematic review, a study on the impact of Minimum Unit Pricing (MUP) on alcohol-related healthcare burden at Beaumont Hospital, a study on alcohol-related healthcare burden and impact of MUP, and a study on healthcare cost savings for alcohol-related hospitalisations as a result of MUP.

To date there have been no empirical MUP studies examining the alcohol-related healthcare burden in Ireland. Irish studies which had sought to characterise the alcohol-related healthcare burden have used retrospective data which has limitations in terms of coding medical conditions. This work has the advantage of using prospective data which will contribute to the body of Irish data and the national monitoring and evaluation of MUP in Ireland.

Exposure to Alcohol Advertising in Ireland and Northern Ireland

The Institute is funding research on the impact of new controls on advertising and event sponsorship, which came into effect in Ireland in November 2019.

The Institute has partnered with the University of Stirling and the Society for the Study of Addiction (SSA) to research the impact of new controls on alcohol marketing introduced under the Public Health (Alcohol) Act 2018.



The research is being led by Dr Nathan Critchlow, SSA Academic Fellow, Institute for Social Marketing and Health, University of Stirling and Dr Crawford Moodie, Senior Research Fellow, Institute for Social Marketing and Health, University of Stirling.

Modelling the impact of Minimum Unit Pricing (MUP) for alcohol in Northern Ireland

In May the Institute commissioned the University of Sheffield, on behalf of the Department of Health in Northern Ireland, to model the impact of introducing a minimum unit pricing (MUP) policy for alcohol in Northern Ireland.

This piece of work followed a Department of Health public consultation on MUP, launched in February 2022.

The NI modelling study was led by Dr Colin Angus from the Sheffield Alcohol Research Group, which had previously modelled the impact of introducing MUP for alcohol in Ireland and Northern Ireland.

The modelling study will use the latest available data from Northern Ireland and the most recent version of the Sheffield Alcohol Policy Model to consider the impact of MUP on consumption, expenditure, alcohol-related hospital admissions, alcohol-related deaths, and crime.

The findings of the modelling study will be published in 2023.

Parliamentary Committees

Oireachtas Joint Committee on Justice: Sale of Alcohol Bill (2022)

In December 2022 IPH submitted written evidence to the Oireachtas Joint Committee on Justice on the Sale of Alcohol Bill, which was published in October.

The proposed legislation follows a Department of Justice review and consultation on reforming Ireland's alcohol licencing system. IPH contributed to this review by making a written submission to the Department in January 2022.

In its submission to the Justice Committee, IPH provided data and evidence on alcohol harms in Ireland and detailed the potential impacts of reforming Ireland's alcohol licencing system. It also made the case for including public health as a defined licensing objective.

Presentations, Conferences and Workshops

- On 13 April Dr Joanna Purdy, Public Health Development Officer at the Institute, gave a presentation on research design and data at a webinar on Alcohol Availability, hosted by the Alcohol Research Network UK-Ireland (ACORN).



Gambling

KEY PROJECTS

Parliamentary Committees

Oireachtas Joint Committee on Justice: General Scheme of the Gambling Regulation Bill

During the year the Institute provided written and oral evidence to the Joint Oireachtas Committee on Justice on the General Scheme of the Gambling Regulation Bill 2022.

IPH provided written evidence to the Joint Oireachtas Committee in January and subsequently gave evidence, as part of the Committee's pre-legislative scrutiny of proposed legislation to regulate gambling in Ireland.

IPH Director of Policy, Dr Helen McAvoy, and IPH Public Health Development Officer, Dr Ciara Reynolds, attended the Committee in March to provide observations on the Gambling Regulation Bill.

Gambling Codes of Practice in Northern Ireland

In February the Institute responded to a public consultation launched by the Department for Communities in Northern Ireland on Gambling Codes of Practice.

In April the Institute provided support to the Public Health Agency (PHA) in Northern Ireland on the development of questions about gambling as part of the Young Persons' Behaviour and Attitudes Survey.



Spotlight on Health Impact Assessment



Health Impact Assessment (HIA) is a process that can help to improve the health of communities and reduce health inequalities.

Our health is affected by decisions made in areas outside of public health, such as planning, transport, housing and education. HIA ensures that health is considered in these and other important decisions.

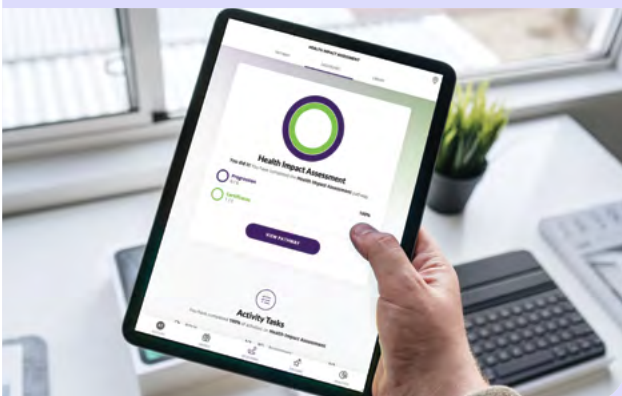
HIA can help to determine the impact of proposed policies, laws, programmes or plans on the health of communities to ensure they are more inclusive, equitable, and sustainable for everyone.

Policy frameworks in Ireland and Northern Ireland, Healthy Ireland and Making Life Better, place a high priority on improving health and tackling the wider determinants of health. The policy frameworks set out the importance of a 'Health in All Policies' approach, HIA, equity and social justice.

Since launching updated HIA Guidance in 2021, the Institute has developed a number of new resources on HIA, as it continues to build on this work, towards developing a community of practice.

In June 2022, IPH launched a new online learning course, 'Introduction to Health Impact Assessment', which is available on a new Public Health Matters app and platform.

We also developed a short animated video explaining how HIA works and can be used to create healthier populations.



Multi-Year Work

Arts, Creativity, and Wellbeing

In 2022 the Institute further developed a programme of work in the area of arts, creativity and wellbeing.

This work drew on an evidence review in 2021 that found that arts and creativity have an important role to play in health and wellbeing in later life. The report, 'Arts and Creativity in Later Life: Implications for Public Health and Older People', found that dancing, music and singing, visual and creative arts, and drama and theatre can help improve physical, psychological, and social health and wellbeing in older adults.

One of the report recommendations identified the need for an evaluation toolkit for the arts and creativity sector to be able to better measure, record and assess their programmes' impact. It was this work that led to the development of a toolkit with input from a sectoral advisory group. This toolkit aims to support the arts and creativity sector to design, plan, conduct, assess and report on evaluations of arts and creativity programmes and interventions within a public health context.

Work on this toolkit, and on developing a new arts and creativity online learning course on our new Public Health Matters platform, commenced in 2022 and will be launched in 2023.



Physical Activity

In 2022 IPH commenced work on the 'Walk with Me' study in Northern Ireland that aims to support physical activity in older age through a peer-led intervention in the community.



Many older adults would benefit from being more physically active. The aim of the Walk with Me (WWM) project, led by Ulster University, is to determine if a peer mentoring walking programme can help older adults increase their physical activity over one year compared to a control group.

The WWM study will examine whether a 12-week walking intervention can help inactive older adults become, and stay active, and what the costs and benefits are for older adults and the health system. It aims to recruit around 350 inactive older adults aged 60 years and over living in socio-economically disadvantaged communities.

Dental Services and Oral Health Report

In February 2022 the Institute published a report providing an overview of **Dental Services and Oral Health in Northern Ireland and Ireland**.

The report drew on available data and research from Ireland and Northern Ireland and aims to be a resource for policymakers, dental professionals and the general public.

The report showed that oral health has improved in recent decades but that significant inequalities remain.



The report found that those living in disadvantaged areas experienced poorer oral health and attended the dentist less frequently than those living in more affluent areas.

- Response to consultation on the Public Health Reform Expert Advisory Group (PHREAG) Consultation - Post Pandemic Public Health in Ireland
- Response to consultation on the Clean Air Strategy for Ireland 2022
- Submission to Review of Housing Adaptation Grant for Older People and People with a Disability

Northern Ireland

Response to a consultation on developing new Gambling Codes of Practice for Northern Ireland

- Written evidence on the Northern Ireland Gambling Codes of Practice
- Written evidence on the Minimum Unit Pricing of Alcohol in Northern Ireland
- Response to a consultation on Amending the Bread and Flour Regulations 1998 and the Bread and Flour Regulations (Northern Ireland) 1998
- Written evidence on the UK Alcohol Duty Review (HM Revenue and Customs)

Skin Cancer

During the year IPH supported work to develop a new National Skin Cancer Prevention Plan for Ireland (2023-2026), the second plan to be published under Healthy Ireland.

From 2019 to 2022 IPH sat on the Children and Young People subgroup, as part of the Health Service Executive (HSE) National Cancer Control Programme. The subgroup works to bring evidence to policy implementation and review.

Consultation Responses and Submissions

Throughout the year IPH responded to cross government public consultations, North and South, as well as to some UK-wide consultations, to provide a public health perspective on proposed legislative or policy changes.

Ireland

- Written evidence on the Sale of Alcohol Bill in Ireland
- Oral evidence on the Public Health (Tobacco and Nicotine Inhaling Products) Bill 2019
- Written evidence on the General Scheme of the Gambling Regulation Bill in Ireland
- Oral evidence on the General Scheme of the Gambling Regulation Bill in Ireland
- Written evidence on the National Minimum Wage 2023 in Ireland



4

North-South Working



Core Strategic Objective: Working with partners North and South to improve outcomes.

The Institute and its staff regularly engages with public health leaders and networks on key public health topics across the island of Ireland, and in Scotland, Wales and England. This section features key projects and programmes, undertaken in 2022, that reflect the range and scope of North-South and East-West working and cooperation on public health.

This cooperation and collaboration seeks to improve health outcomes across the island of Ireland by adopting the following partnership approach:

- Academic, clinical and civil society partners working towards health equity
- Engaging with leaders and innovators in public health
- Linking research and evidence to policy and practice.

Partnership Working in 2022

The following summary highlights how IPH collaborated with other organisations, bodies, and individuals during the year.

Spotlight on Annual North South Joint Public Health Conference



On 30 November IPH co-hosted a major all-island conference highlighting the impacts of climate change on population health in Ireland and Northern Ireland.

Close to 1,000 health professionals, researchers and policymakers registered for the Joint Public Health Conference. This online conference was organised by the Institute, Public Health Agency, Queen's University Belfast, Ulster University, University College Cork and HSE Health and Wellbeing.

The **Healthy Planet, Healthy People** conference was opened by Sir Patrick Vallance, Chief Scientific Adviser to the UK Government and chaired by Dr Jenny Mack, a member of the policy team at the Institute.

The one-day event heard from Dr Maria Neira, Director of Public Health and Environment, World Health Organization, about the health argument for tackling air pollution; Dr Nick Watts, NHS Chief

Sustainability Officer, about becoming the world's first net zero national health service; and Professor John Barry from Queen's University Belfast, about the links between the economy, climate change and our health.

"While we face what the World Health Organization has described as the single greatest challenge of the 21st century, there are opportunities to secure positive health gains through climate action. Moving away from burning fossil fuels, improving access to active or public transport and creating climate resilient, sustainable health systems are just some of the ways we can improve health outcomes through climate action," Dr Jenny Mack said.

The event also highlighted the latest public health research, interventions and innovation in the area of health and climate change, as well as sustainability in healthcare.

Spotlight on North South Alcohol Policy Advisory Group

The Institute chairs and provides the secretariat for the North South Alcohol Policy Advisory Group (NSAPAG), which was established in 2013 at the request of the Chief Medical Officers in Ireland and Northern Ireland.

The NSAPAG contributes to reducing alcohol-related harm on the island of Ireland by strengthening all-island initiatives, developing opportunities for North-South cooperation, and identifying policy solutions and other measures to improve the legislative and regulatory arrangements impacting on the supply and use of alcohol.

Membership comprises representatives from government departments, academia, professional bodies and healthcare delivery agencies. The Group met twice during 2022.

At the May NSAPAG meeting, Dr Emily Nicholls from the University of York presented the findings from her study, [The Marketing and Consumption of No and Low Alcohol Drinks in the UK](#).

In November 2022 NSAPAG members heard presentations from Professor Katy Holloway from the University of South Wales and Professor Wulf Livingston from Wrexham Glyndŵr University on [Assessing Impact of COVID-19 and the Early Impact of Minimum Pricing for Alcohol on the Wider Population of Drinkers](#). The meeting also included a presentation from Dr Tobias Maharaj, Clinical Research Fellow, Hepatology Unit Beaumont Hospital Dublin, and Honorary Clinical Lecturer at the Royal College of Surgeons in Ireland. Dr Maharaj is undertaking a 'Study on Minimum Unit Pricing and alcohol's strain on hospitals (SMASH Study)' as part of a Clinical Research Fellowship funded by the Institute of Public Health and Health Service Executive.

Stormont Act on Air Pollution event

As part of the Institute's work on climate change and air pollution, it contributed to an all-island event in June that focused on the need for action to improve air quality. The 'Act on Air Pollution' event was hosted at Stormont and jointly organised by the British Heart Foundation in Northern Ireland and the Irish Heart Foundation.

Representing IPH, Dr Jenny Mack, a Public Health Medicine Consultant at the Institute, outlined the evidence base surrounding the public health impacts of air pollution and provided some policy-focused recommendations to help mitigate these impacts in Northern Ireland.



Dr Jenny Mack presented evidence in relation to air pollution and climate change at an all-island event hosted by the British Heart Foundation in Northern Ireland and the Irish Heart Foundation in June.



Cross Border Working

During 2022 IPH continued to engage with and support the work of several cross border agencies and organisations, including the following:



Cooperation and Working Together (CAWT)

During the year, IPH provided data analysis support to Cooperation and Working Together (CAWT), a cross border health and social care partnership. CAWT was set up to improve the health and wellbeing of the border populations, by working across boundaries and jurisdictions.



Centre for Cross Border Studies (CCBS)

In September, IPH supported the annual Centre for Cross Border Studies (CCBS) conference, which focused on North-South, East-West relations, cooperation, and mobility. The CCBS contributes to the increased social, economic and territorial cohesion of the island of Ireland.



Cross-border Healthcare Intervention Trials in Ireland Network (CHITIN)

The Institute sits on the Advisory Group of the Cross-border Healthcare Intervention Trials in Ireland Network (CHITIN). This unique cross-border partnership between the Public Health Agency in Northern Ireland and the Health Research Board in Ireland, focuses on developing infrastructure and delivering healthcare intervention trials to help prevent and cure illness and promote improved health and wellbeing across the island of Ireland.



Men's Health Forum in Ireland (MHFI)

IPH is a member of the Advisory Group of the Men's Health Forum in Ireland (MHFI), which works to enhance the health and wellbeing of men and boys across the island of Ireland through initiatives like Men's Health Week.

Partners across the UK



FACULTY OF
PUBLIC HEALTH

UK Faculty of Public Health

The Institute supported the UK Faculty of Public Health's Climate and Health Committee with the launch of a new Climate and Health Strategy. The Institute chaired a strategy implementation subgroup, to support the launch of the strategy through event planning, information sharing, and collaboration across Northern Ireland, England, Scotland and Wales.



UK Public Health Network (UKPHN)

The Institute continued to engage with the UK Public Health Network (UKPHN) throughout 2022, meeting on a monthly basis. The UKPHN is a collaboration of national umbrella organisations and national organisations representing public health across the four nations of the UK – Northern Ireland, England, Scotland and Wales - and it works to support information sharing and collaboration across public health policy.



THE UNIVERSITY
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Public Health Ethics and Law Network (PHELN)

IPH is a partner in the Public Health Ethics and Law Network (PHELN), a network of lawyers and academics engaged and interested in public health law, and has participated in a number of PHELN workshops to date.



ACORN

The Institute continued to support and engage with the Alcohol Research Network UK-Ireland (ACORN) throughout the year.

ACORN was set up in 2021 to build capacity and drive innovation in alcohol policy research to support effective policy development, enactment, implementation, and evaluation across Ireland and the UK.

The research network, which is funded by the Irish Research Council (IRC) and the Economic and Social Research Council (ESRC) in the UK, was established to focus on the alcohol policy landscape, including the availability, marketing, and pricing of alcohol.



SHINE

In 2022, the Institute continued to support the work of the Smoke Free Home Innovation Network (SHINE), which is funded by the Economic and Social Research Council (ESRC) in the UK and the Irish Research Council (IRC).

The network of researchers and policy partners across the UK and Ireland was set up to understand the best ways to support people to create a smoke-free home.

Creating a smoke-free home increases the likelihood of quit attempts and decreases the likelihood that children go on to become smokers themselves.

5

Knowledge and Communication



Core Strategic Objective: Sharing knowledge and communicating the value of public health.

Under the 2020-2025 strategic plan, IPH strives to promote a 'health in all policies' approach and increase public understanding of the role of policy in population health.

In 2022 IPH delivered a number of new and innovative initiatives to extend its reach and connect with a wide-ranging audience.

This section summarises and highlights key projects and programmes under the theme of knowledge and communication.

Training

Higher Specialist Training in Public Health Medicine

In 2022 the Institute worked towards resuming its role as a training provider to public health specialist registrars (SpRs) in Ireland and Northern Ireland.

IPH conducted a mapping exercise of competencies against the Public Health Specialty Training Curriculum offered by the UK Faculty of Public Health and the Higher Specialist Training in Public Health Medicine Outcome Based Education Curriculum offered by the Royal College of Physicians of Ireland, with a view to seeking approval as a training site from both bodies in the future.



Workforce

Developing a multi-disciplinary public health workforce for Ireland

The Institute continued to support an ongoing programme of work to explore options to develop a multidisciplinary model of public health in Ireland.

In 2021 IPH established a Working Group on the Recognition and Regulation of Multi-Disciplinary Public Health and Health Promotion, chaired by Professor Ivan Perry, and commissioned **Crowe**, a consultancy firm, to develop a discussion paper on a framework for multidisciplinary public health (MDPH) in Ireland.

The discussion paper was commissioned in the wake of the **2018 Crowe Howarth report**, which set out a new vision for public health in Ireland and has paved the way for the reform of existing structures.

During the year IPH staff worked closely with Crowe to develop this discussion paper, which is due for publication in 2023.

The discussion paper is intended to complement and support ongoing work to reform the Irish public health system, including the Public Health Reform Expert Advisory Group, Healthy Ireland Strategic Action Plan 2021-2025, Sláintecare, as well as strategy and workforce planning within the Health Service Executive.

Digital Learning Strategy

In 2022 the Institute delivered two key objectives from its digital learning strategy - to design and develop public health online learning courses and develop a new podcast series to widen the debate on public health issues.

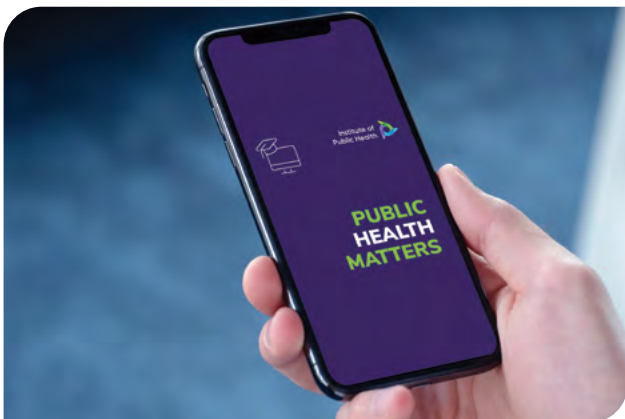
This led to the launch of a new digital learning and communications platform and app, called **Public Health Matters**, and a new podcast by the same name.

Both were developed to appeal to public health professionals and policy makers, as well as members of the public interested in population health issues.

The **Public Health Matters** app is free to download on the Google Play (Android) and iTunes store (Apple) and a desktop version is available at <https://learning.publichealth.ie/>.

Learn on Public Health Matters

In June the Institute launched its new **Public Health Matters** platform and app, offering its first online learning course, [a short introductory module to Health Impact Assessment \(HIA\)](#).



The **'Introduction to Health Impact Assessment'** course provides an interactive learning experience for anyone interested in understanding HIA and how it might apply to new policies, programmes or projects and ultimately benefit population or community health.

In October IPH also rolled out a new online learning course on physical activity and older people, **'Getting Active for Better Ageing'**. This module was developed

for healthcare professionals seeking to update their knowledge and skills in this area and to support older people to live more physically active lives.

Since launching this digital learning platform, 410 learners have enrolled in these free online courses up until the end of 2022.

Given the success of the platform to date, the Institute will continue to develop additional learning courses on HIA and physical activity, while also adding additional resources and new materials, such as, blogs, videos, and other content.

Listen on Public Health Matters

The Institute also launched a new **Public Health Matters** podcast highlighting key public health issues across Ireland and Northern Ireland during 2022.

The first episode featured Sir Michael Marmot, a Professor of Epidemiology at University College London, and an internationally renowned expert in the social determinants of health and health inequalities. Professor Marmot discussed how social factors such as housing, education, and income impact our health and life expectancy. This episode has attracted the highest number of listens in the podcast series to date.

Other podcast episodes featured in-depth interviews and discussions with experts on a range of topics, from tobacco and alcohol policy to obesity and mental health.



The Public Health Matters podcast is available on all major podcast platforms, including **Spotify**, **SoundCloud**, as well as the **Public Health Matters** platform and app.

Since launching, the podcast series has secured more than 1,500 listens during 2022.

Series 1

- **S1 Ep1** Lessons from Public Health: **Sir Michael Marmot on Living for Longer – How social factors influence life expectancy**
- **S1 Ep2** Lessons from Public Health: **The mental health legacy of The Troubles with Northern Ireland’s Mental Health Champion, Professor Siobhan O’Neill**
- **S1 Ep3** Lessons from Public Health: **Ireland’s smoking ban - Realising a world first, with Professor Luke Clancy**
- **S1 Ep4** Lessons from Public Health: **Food for Thought - How does marketing influence what we eat, with Dr Norah Campbell**
- **S1 Ep5** Lessons from Public Health: **Minimum Unit Pricing for alcohol – Lessons from Scotland, with Dr Eric Carlin**

Series 2

- **S2 Ep2** Healthy Planet, Healthy People: **How health and economics should inform our response to the Climate Crisis, with Professor John Barry**
- **S2 Ep1** The Air We Breathe: **The case for Ireland’s new solid fuel regulations, with Professor Pat Goodman**

Communication

In 2022 the communications and ICT team at the Institute worked with, and supported, colleagues across the organisation to highlight and communicate key programmes of work.

This support involved information management, design and technical support, media and communications support, social media, and support to disseminate knowledge and raise awareness of new evidence on key public health issues.

Media and Social Media

Effective media coverage through 2022 helped to raise awareness of the work of the organisation at both local and national level. Some media highlights included extensive coverage of the North South Physical Activity Report Card for Children and Adolescents in August and strong coverage of the Institute’s ‘How We Age’ photography competition. The latter produced a new bank of images for use by the Institute and partner organisations.

In September the Institute also secured media coverage for its role in supporting the RCPI tobacco policy group’s ‘Tobacco 21’ report and for commissioning a new report on health inequalities in mortality rates in Ireland, published by the ESRI.

The communications team responded to several media queries about public health during the year and continued to highlight and communicate the work of the Institute through social media, predominantly via Twitter and LinkedIn.

Newsletters

The Institute’s regular newsletter provides news and updates to almost 3,000 subscribers across the public health community in Ireland, Northern Ireland and beyond.

As chair of the North South Alcohol Policy Advisory Group (NSAPAG), IPH also collates and circulates a newsletter on alcohol policy related news and updates to members regularly during the year. NSAPAG membership comprises representatives from government departments, academia, professional bodies and healthcare delivery agencies.

Online Platforms, Information Management and Engagement

The communications and ICT team also manage information and resources across the organisation. This includes management of all outputs, reports, and documents, as well as the Institute's website and social media channels.

The www.publichealth.ie website had almost 350,000 visits during the year, with almost 95,000 unique visitors over this period. The number of documents downloaded exceeded 75,000 in 2022.

Work also commenced during the year on plans to enhance IPH's online presence, including the design, development, and relaunch of its corporate website.

Webinars and Videos

Webinars

During 2022 the Institute hosted three webinar events drawing 2,660 registrations in total.

The online Joint Public Health Conference attracted close to 1,000 registrations from Ireland, Northern Ireland and beyond. This all-island event provided a platform to consider the impacts of climate change on health, as well as the challenges and opportunities presented by climate action.

During the year IPH hosted two webinars to launch new online learning courses on our Public Health Matters digital learning platform and app.

An 'Introduction to Health Impact Assessment' was launched in June at a webinar with Dr Joanna Purdy, IPH Public Health Development Officer and Dr Liz Green, Consultant in Public Health, Policy and International Health/Programme Director for Health Impact Assessment, Public Health Wales.

This was followed by the launch of a second online learning course in October to help health professionals to support older people to be more physically active. The webinar event featured presentations from Professor Ryan Rhodes, University of Victoria, Canada, Professor Mark Tully from Ulster University, and

Professor Suzanne McDonough from the Royal College of Surgeons in Ireland, as well as a panel discussion about how behaviour change can be supported.

Explainers and Short Videos

As part of the launch of the HIA online learning course, a short video was developed and created as a three-minute explainer about how HIA can help to build healthier communities.

A short video was also developed to support communications around the findings of the Ireland North and South Report Card on Physical Activity for Children and Adolescents, which were launched in August.

These webinars and videos were made available on the [IPH YouTube channel](#), which attracted more than 3,500 views over the course of the year.

- [Introduction to Health Impact Assessment](#) webinar recording
- Short [video explainer about HIA](#)
- ['Getting Active For Better Ageing'](#) webinar recording
- ['Healthy Planet, Healthy People'](#) Joint Public Health Conference recording
- Short [video summarising findings of Ireland North and South Report Card](#) on Physical Activity for Children and Adolescents



Spotlight on 'How We Age' Image Bank



1st prize



2nd prize



3rd prize

In 2022 the Institute set about developing a public health photographic repository for use in its ongoing work to promote healthy ageing and broader public health themes.

It launched an all-island photography competition to reframe how older people are portrayed in Ireland and Northern Ireland and to create a free-to-access image resource for use by the Institute and partner and allied organisations.

The competition invited photographers of all abilities to submit images capturing older people in their everyday lives under the theme of 'Staying Active, Staying Social, Staying Connected'. The initiative was supported by the Irish Photographic Federation (IPF) and Northern Ireland Photographic Association (NIPA).

The judging panel was made up of Professor Roger O'Sullivan, IPH Director of Ageing Development and Research; Eddie Lynch, Commissioner for Older People in Northern Ireland; Tara Byrne, Arts Programme Manager, Age and Opportunity; Robin Webster, Adjunct Lecturer, Irish Centre for Social Gerontology, NUI Galway and former CEO Age Action Ireland, and Maresa Fagan, IPH Communications Officer.

An intergenerational vignette, a moment of holiday fun, and a poignant Covid-19 snapshot were selected as the winning images.

1st prize went to photographer Helen Maloney, Athlone, for her intergenerational image featuring great grandmother Eileen Whelan and her great granddaughter Ryleigh Maloney Hughes.

2nd prize went to Gerry Scully, Dublin, for an image of parents-in-law, Aidan and Mary Ellison, on a family holiday in France.

3rd prize went to photographer Mark Davison, Lisburn, for his poignant image of Wilma Anderson and Nigel Fowler during the pandemic.

IPH Director of Ageing Development and Research, Roger O'Sullivan, said the gallery of images captured the ordinary and extraordinary moments in the everyday lives of older people.

The 'How We Age' gallery of selected images was launched in October to mark International Day of Older Persons.

The Institute intends to build on this initiative's success into the future, to include images across a range of public health themes.

<https://publichealth.ie/gallery>

6

Organisational Excellence



Core Strategic Objective: The Institute strives for organisational excellence in all aspects of its work.

This section summarises and highlights key projects and programmes under the following themes and objectives:

- Accountability and adherence to public health values
- Governance, financial sustainability and value for money in everything we do
- Investment in our staff; building expertise to optimise outcomes.



- managing waste and minimising volumes going to landfill, by re-using and recycling wherever possible
- purchasing supplies which are recycled and recyclable, and whose production and use minimises the consumption of natural resources where possible
- using contractors/suppliers who perform their services in accordance with government sustainable procurement policies in Ireland and the UK
- disposing of retired goods in accordance with the relevant environmental regulations.

Sustainability - Climate Commitment

The Institute strives to minimise its environmental impact and is committed to the continuous improvement of environmental performance and the management and prevention of pollution.

The organisation seeks to comply with all applicable legal and other relevant environmental requirements including official codes of practice in Ireland and the UK and, as far as practicable, accept best practice in environmental management.

IPH is committed to promoting sustainability and reducing the environmental impact of our activities by:

- implementing energy-saving technologies and initiatives
- adopting strategies to minimise the environmental impacts of business travel
- using utilities in a responsible and economic way to minimise negative impacts on the environment

Healthy Workplaces - Health and Wellbeing Programme

IPH is committed to creating a healthier workplace that supports the physical and mental health of its employees and considers age, gender, and the type and level of responsibility involved in their role.

The Department of Health in Ireland encourages all agencies to facilitate and empower staff and service users to adopt healthier lifestyles in accordance with 'Healthy Ireland at Work, A National Framework for Healthy Workplaces in Ireland 2021-25'.

In keeping with this framework, IPH has established a Healthy Workplace Committee to collate evidence and propose policies and initiatives that will support the mental and physical health and wellbeing of IPH staff within the structure and remit of the organisation.



Open Access (OA) Initiative

The Institute is committed to Open Access, to promoting free, unrestricted, timely online access to its publications and other information for the benefit of public health.

Access to the most up-to-date health information is a key determinant of health and wellbeing for individuals, families, communities and places. It is necessary to support the development of effective healthy public policy and practice, clinical practice and health and social services management. Making information more broadly available will make a significant contribution to tackling inequalities. The Institute was an original signatory to Ireland's National Principles for Open Access Policy Statement and we adopt the principles it sets out:

- The freedom to publish where most appropriate
- To increase the visibility of, and improve access, to the outputs of research
- To support the free flow of information across national and international research communities
- To support the principle of research-enabled teaching.

As it has done since it was established, the Institute provides free and open access to its reports, policy consultations, journal articles and other materials.

The Institute will continue to actively advocate for an Open Access policy across the island of Ireland and support the development of necessary research and information infrastructure.



Certification by National Cyber Security Centre (UK)

The ICT team at IPH undertook a rigorous external cyber security assurance audit of our IT systems and infrastructure during 2022. The audit involved a review of all IPH IT systems, hardware, software and services in addition to penetration tests, vulnerability scans and a range of attempts to actively and directly attack our organisation networks (including both office locations). This was part of our ongoing commitment to quality and assurance of our systems.

As a result, we achieved both the standard Cyber Essentials, and the higher-level Cyber Essentials Plus assurance certification, standards that are supported by the UK Government's National Cyber Security Centre.

The Cyber Essentials certification process is managed by the IASME Consortium (IASME), which licenses certification bodies to carry out Cyber Essentials and Cyber Essentials Plus certifications.



7

Annual Financial Statements and Directors' Report



Company Information

| | |
|-----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Directors | Bryan Dooley Suzanne Costello (resigned 12 October 2022) Greg Straton (resigned 10 October 2022) Paul Kavanagh (appointed 10 October 2022) Deirdre Mulholland (appointed 10 October 2022) Bernadette Hannigan (appointed 1 January 2023) Martin Higgins (appointed 20 January 2023) Marie Cassidy (appointed 18 October 2022) |
| Company secretary | Sinéad Ward |
| Registered number | 362110 |
| Registered office | 700 South Circular Road, Dublin, D08 NH90 |
| Trading address | 700 South Circular Road, Dublin, D08 NH90 6th Floor City Exchange, Gloucester Street, Belfast, BT1 4JH |
| Independent auditors | PKF O'Connor, Leddy & Holmes Limited Harold's Cross Road, Dublin, D6W P993 |
| Bankers | Ulster Bank 130 Lower Baggot Street, Dublin 2, D02 XN61 Lombard House, 10 - 20 Lombard Street, Belfast, BT1 1BH AIB 9 Terenure Road East, Rathgar, Dublin 6 |
| Solicitors | Lewis Silkin LLP Dublin, D02 P211 O'Connell Brennan Solicitors Armitage House, 10 Hatch Street Lower, Dublin, D02 HX72 |

Directors' Report

For the year ended 31 December 2022

The Directors present their annual report and the audited financial statements for The Institute of Public Health in Ireland Company Limited by Guarantee for the year ended 31 December 2022. The Company qualifies as a small company in accordance with Section 280A of the Companies Act 2014 and this report has been prepared in accordance with the small companies regime.

Principal activities

The Company is a North-South agency whose members are the Department of Health, Ireland and the Department of Health, Northern Ireland. Co-funded by its members, its activities are non-commercial and in the public interest. The activities of the company are governed by its constitution and directed by a five-year strategic plan. The principal activities of the Company continued to be research and development in the field of public health and the provision of expertise in public health policy to support healthier populations in Ireland and Northern Ireland.

Results and review of operations

The deficit for the year, after taxation, amounted to €141,341 (2021 - deficit €171,373).

Funding from both Departments for 2022 allowed the Institute to meet the business plan objectives approved by the Board and to do so in compliance with internal budgets and control procedures. The Institute delivered its program of research, evidence review and policy development with additional expenditure above Departmental funding of €141,341 reflecting as always, the multi-year nature of some projects. While the worst of the pandemic related restrictions receded, the impact of the pandemic had not wholly passed. At the height of the crisis, many health improvement projects could not be progressed due to the demands of the wider public health situation. In 2022 attention began to return to these projects and in some areas, there was a rapid increase in workload as the backlog began to be addressed. This was seen particularly in cross government consultation responses, postponed and rescheduled events and projects that required clinical input where clinicians remained unavailable due to leave or illnesses.

This placed considerable pressure on staff who responded with energy and commitment, but despite this, three items on the service plan had to be rescheduled to 2023.

2022 marks the halfway point in the IPH Strategic plan and we are pleased with the progress made towards our strategic objectives. IPH is ambitious for public health – post pandemic it is important that we do not overlook the importance of investment in health improvement as a critical aspect of economic and societal recovery and a key element of future pandemic preparedness. In 2022, IPH's strategic objectives have remained if not increased in relevance. A significant milestone has been achieved in IPH obtaining reaccreditation as a training site for Higher Specialist Training in Public Health Medicine and we look forward to welcoming our first trainee in 2023. This work was enabled by the recruitment of a full-time public health medicine consultant, the sustainability of this training programme is dependent on adding a permanent position for a public health medicine consultant to the IPH staff. A business case for this post will be submitted to the Department of Health in Dublin in early 2023 for consideration for budget 2024.

Public health in Ireland will shortly undergo a period of significant reform when the Public Health Reform Expert Advisory Group Report is published. In order to input into this change process IPH with colleagues in academic public health, worked throughout 2022 to develop a discussion document on an approach to multi-disciplinary

public health in Ireland drawing on examples from other countries and highlighting the particular need for a mix of skills to address the complex social determinants of health and the 'wicked' problems which create persistent health inequalities.

Also in 2022, the report 'Unequal Chances? Inequalities in Mortality in Ireland' was published. IPH commissioned the ESRI to undertake this report which used a variety of sources to examine inequalities in mortality in Ireland over the period since 2000, focusing on two broad dimensions of inequality: socio-economic status and ethnicity/country of birth/nationality. This report was a timely and important addition to our understanding of health inequalities in Ireland, building on the IPH's work in this area over 25 years, reducing health inequalities is a priority for governments, however the gaps in health data in Ireland present a major challenge to making progress, as highlighted in this report.

IPH has established expertise in tobacco control, alcohol harm and obesity. This year IPH was pleased to commission the University of Sheffield to report on 'Model-based appraisal of Minimum Unit Pricing and Promotion Restrictions for alcohol in Northern Ireland': on behalf of the Health Policy Unit in the Department of Health in Northern Ireland; to publish a Whole Systems Approach to Obesity to inform the Northern Ireland Obesity Prevention Strategy Board and to assist in evaluating and reviewing services and strategies relating to tobacco control North and South.

Communications has been an area of significant focus for IPH since 2019 – In 2022 several projects came to fruition, particularly the launch of a new digital learning platform Public Health Matters. Resources uploaded to the platform in 2022 included learning modules on Health Impact Assessment, Physical Activity in Older Years and a podcast series. ICT and communications are located within the one team in IPH, and this enables a digital approach to learning and communication. A significant project which dominated the work of this team during 2022 was the redevelopment of the IPH website – investment in user experience (UX) was a vital component in presenting a diverse and complex set of resources in a coherent manner.

Governance renewal has made substantial progress in 2022. The appointment of three new directors in the autumn and the selection of a Chair and Deputy Chair following a public recruitment (taking up their new roles in January 2023), concludes a significant phase of work addressing legacy issues. Further board recruitment will take place in 2023 to complete the process. The final governance matter relating to an MOU between both Departments of Health is undertaken by DoH leads in both jurisdictions.

Legal status

The IPH is a company limited by guarantee, incorporated in 2002 and is required to ensure compliance with the Companies Act 2014. The registered office is 700 South Circular Road, Kilmainham, Dublin 8. The constitution governing the Institute was updated in 2022 to ensure the organisation's governance structures can comply with modern governance arrangements and compliance with best practice in public sector governance across the island. The new constitution was adopted by the Members in June 2022 with the Department of Health, Ireland and Department of Health, Northern Ireland listed as the two Members of the Institute. The Institute is listed as an agency of the Department of Health, Ireland.

Directors

Board structure

The Board of IPH can appoint up to 10 Directors under its new constitution and all appointments must be nominated by one of the Members as set down in the constitution. Following the adoption of the new constitution in 2022, the Departments approved the public appointment process for the Board Chair and Board Deputy Chair. All incoming Directors appointed under the new constitution will serve a four-year term with the possibility of having that extended by a second term. In accordance with the Articles of Association, the Directors do not retire by rotation.

The Directors who served during the year were:

| | |
|--------------------|-----------------------------|
| Bryan Dooley | |
| Suzanne Costello | (resigned 12 October 2022) |
| Greg Straton | (resigned 10 October 2022) |
| Paul Kavanagh | (appointed 10 October 2022) |
| Deirdre Mulholland | (appointed 10 October 2022) |
| Marie Cassidy | (appointed 18 October 2022) |

In accordance with the Articles of Association, the Directors do not retire by rotation.

Principal risks and uncertainties

The Directors consider that the principal risks and uncertainties faced by the company are in the following categories:

- Funding from the Departments of Health in Ireland and Northern Ireland remained static in 2022, except for some project specific investment from the Department of Health in Northern Ireland which yielded some excellent work on alcohol and obesity policy approaches. There has been no diminution in outputs thanks largely to the commitment of the staff team, and a focus on staff retention. However, this is not a sustainable position in the medium term.
- As noted last year increasing the capacity of the Institute to meet its strategic objectives is achievable by planned incremental increases in funding via business case submissions, and grant applications if there is a reasonable expectation of success. Barriers do remain and it is notable that while tremendous work and momentum has been achieved by the Shared Island initiative and its associated investment and funding streams – IPH has not been eligible for any of the recent funding calls. This unintended consequence has been raised with the Shared Island Unit at the Department of the Taoiseach.
- As the legacy issues around governance are addressed, costs arising from internal governance and compliance requirements must be met out of existing funding, creating an inconsistency between compliance requirements and funding levels.
- This inconsistency extends to the status of IPH employees and eligibility and responsibility for the application of public sector pay agreements and pensions provisions, which is a strategic risk to recruitment and retention of staff.

- Staff capacity remains the overarching challenge for the organisation. Capacity is the most significant risk on the IPH risk register, this has been noted by ARC and advised to the Board of Directors. Mitigating this risk is a core concern of the Board and the Executive, and additional posts and consistency regarding the IPH's status would enable appropriate mitigations.

Accounting records

The Directors believe they have complied with the requirements of Sections 281 to 285 of the Companies Act 2014 with regard to the keeping of accounting records, by employing persons with appropriate expertise and by providing adequate resources to the financial function. The Company's accounting records are maintained at the Company's registered office at 700 South Circular Road, Dublin 8.

Research and development activities

The Company incurred €366,080 (2021: €337,525) on the continuing evidence synthesis and research on the provision of public health activities in Northern Ireland and Ireland.

Statement on relevant audit information

Each of the persons who are Directors at the time when this Directors' Report is approved has confirmed that:

- so far as the Director is aware, there is no relevant audit information of which the Company's auditors are unaware, and
- the Director has taken all the steps that ought to have been taken as a Director in order to be aware of any relevant audit information and to establish that the Company's auditors are aware of that information.

Branches outside the state

The Company has a branch in Belfast, Northern Ireland.

Events since the year end of the financial year

The Board was further enhanced by the appointment of Professor Bernadette Hannigan as Board Chair and Mr Martin Higgins as Board Deputy Chair (and ARC Chair) in January 2023. These appointments were the conclusion of a public appointment process during the autumn of 2022 and followed the receipt of nominations from the Departments as required under the Institute's constitution.

Statement of internal controls

Scope of Responsibility

On behalf of The Institute of Public Health in Ireland CLG, I acknowledge the Board's responsibility for ensuring that an effective system of internal control is maintained and operated. This responsibility takes account of the requirements of the Code of Practice for the Governance of State Bodies (2016).

Purpose of the System of Internal Control

The system of internal control is designed to manage risk to a tolerable level rather than to eliminate it. The system can therefore only provide reasonable and not absolute assurance that assets are safeguarded, transactions authorised and properly recorded, and that material errors or irregularities are either prevented or detected in a timely way.

The system of internal control at IPH is enhanced by the assurances provided by the internal audit and external audit functions and reviewed by the ARC and is in line with the guidance provided by the Department of Public Expenditure and Reform.

Capacity to Handle Risk

The Institute of Public Health in Ireland CLG has an Audit and Risk Committee (ARC) comprising one Board member and two external members, with financial and audit expertise, one of whom is the Acting Chairperson. The ARC met four times in 2022. The ARC had an independent Chair appointed at the end of 2022 and who took up the role in January 2023. The membership of the ARC will be expanded to appoint a second Board member with adequate financial and risk expertise during 2023. This will bring the ARC membership in line with best practice under the Code.

The Institute has established an outsourced internal audit function in 2022 which is adequately resourced and conducts a programme of work agreed with the ARC.

The Board has developed a risk policy which sets out its risk appetite. The policy has been issued to all staff who are expected to work within The Institute's risk management policies, to alert management on emerging risks and control weaknesses and assume responsibility for risks and controls within their own area of work.

Risk and Control Framework

The Institute of Public Health in Ireland CLG has a risk register in place which identifies the key risks facing the organisation and these have been identified, evaluated and graded according to their significance. The register is reviewed and updated by the ARC on a quarterly basis. The outcome of these assessments is used to plan and allocate resources to ensure risks are managed to an acceptable level.

The risk register details the controls and actions needed to mitigate risks and responsibility for operation of controls assigned to specific staff.

The audit and risk committee has arranged for an audit of the risk management process in 2023 to identify further improvements required to enhance the risk management framework within the organisation and to support the programme of work by the committee.

IPH have a control environment containing the following elements:

- procedures for all key business processes have been documented,
- budgetary responsibilities have been assigned at management level with corresponding accountability,
- there is an appropriate budgeting system with an annual budget which is kept under review by senior management,
- there are systems aimed at ensuring the security of the information and communication technology systems,
- there are systems in place to safeguard the assets, and
- control procedures over grant funding to outside agencies ensure adequate control over approval of grants and monitoring and review of grantees to ensure grant funding has been applied for the purpose intended.

Ongoing Monitoring and Review

Formal procedures have been established for monitoring control processes and control deficiencies are communicated to those responsible for taking corrective action and to management and the Board, where relevant, in a timely way. I confirm that the following ongoing monitoring systems are in place:

- key risks and related controls have been identified and processes have been put in place to monitor the operation of those key controls and report any identified deficiencies,
- reporting arrangements have been established at all levels where responsibility for financial management has been assigned, and
- there are regular reviews by senior management of periodic and annual performance and financial reports which indicate performance against budgets/forecasts.

Procurement

I confirm that The Institute of Public Health in Ireland CLG has procedures in place to ensure compliance with current procurement rules and guidelines and that during 2022 The Institute of Public Health in Ireland CLG complied with those procedures.

Review of Effectiveness

IPH's monitoring and review of the effectiveness of the system of internal financial control is informed by the work of the internal and external auditors, the Audit and Risk Committee which oversees their work, and the senior management within the Institute is responsible for the development and maintenance of the internal financial control framework.

Audit and risk committee

The audit and risk committee's terms of reference define the scope of the committee's oversight responsibility and how they are to be discharged.

The members of the committee in 2022 were:

| | |
|------------------------|----------------------|
| Mr Bryan Dooley | (Acting Chairperson) |
| Ms Bernadette Costello | (Independent member) |
| Mr Patrick Lynch | (Independent member) |

The committee met four times in 2022 and reported directly to the Board following each meeting. It is expected that the membership of the committee will be expanded in 2023 following the appointment of a new Committee Chair (Mr Martin Higgins). The expanded membership will ensure the committee has the relevant expertise from both Northern Ireland and Ireland to reflect its often dual-reporting and compliance requirements for the Institute as a North-South agency.

Auditors

The auditors, PKF O'Connor, Leddy & Holmes Limited, continue in office in accordance with section 383(2) of the Companies Act 2014.

This report was approved by the board and signed on its behalf.

Martin Higgins

Director

Date: 27 April 2023

Bryan Dooley

Director

Date: 27 April 2023

Directors' Responsibilities Statement

For the year ended 31 December 2022

The Directors are responsible for preparing the Directors' Report and the financial statements in accordance with Irish law and regulations.

Irish company law requires the Directors to prepare the financial statements for each financial year. Under the law, the Directors have elected to prepare the financial statements in accordance with the Companies Act 2014 and Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland'.

Under company law, the Directors must not approve the financial statements unless they are satisfied that they give a true and fair view of the assets, liabilities and financial position of the Company as at the financial year end date, of the profit or loss for that financial year and otherwise comply with the Companies Act 2014.

In preparing these financial statements, the Directors are required to:

- select suitable accounting policies for the Company's financial statements and then apply them consistently;
- make judgments and accounting estimates that are reasonable and prudent;
- state whether the financial statements have been prepared in accordance with applicable accounting standards, identify those standards, and note the effect and the reasons for any material departure from those standards; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Company will continue in business.

The Directors are responsible for ensuring that the Company keeps or causes to be kept adequate accounting records which correctly explain and record the transactions of the Company, enable at any time the assets, liabilities, financial position and profit or loss of the Company to be determined with reasonable accuracy, enable them to ensure that the financial statements and Directors' Report comply with the Companies Act 2014 and enable the financial statements to be audited. They are also responsible for safeguarding the assets of the Company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Directors are responsible for the maintenance and integrity of the corporate and financial information included on the Company's website. Legislation in Republic of Ireland governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

This report was approved by the board and signed on its behalf.

Martin Higgins

Director

Date: 27 April 2023

Bryan Dooley

Director

Date: 27 April 2023

Independent Auditors' Report

Report on the audit of the financial statements

Opinion

We have audited the financial statements of The Institute of Public Health in Ireland Company Limited by Guarantee (the 'Company') for the year ended 31 December 2022, which comprise the Income and Expenditure Account, the Balance Sheet, the Statement of Changes in Reserves and the notes to the financial statements, including a summary of significant accounting policies set out in note 2. The financial reporting framework that has been applied in their preparation is Irish law and Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' issued in the United Kingdom by the Financial Reporting Council.

In our opinion, the financial statements:

- give a true and fair view of the assets, liabilities and financial position of the Company as at 31 December 2022 and of its loss for the year then ended;
- have been properly prepared in accordance with Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland'; and
- have been properly prepared in accordance with the requirements of the Companies Act 2014.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (Ireland) (ISAs (Ireland)) and applicable law. Our responsibilities under those standards are further described in the Auditors' responsibilities for the audit of the financial statements section of our report. We are independent of the Company in accordance with the ethical requirements that are relevant to our audit of financial statements in Ireland, including the Ethical Standard for Auditors (Ireland) issued by the Irish Auditing and Accounting Supervisory Authority (IAASA), and we have fulfilled our other ethical responsibilities in accordance with these requirements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the directors' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the Company's ability to continue as a going concern for a period of at least twelve months from the date when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Directors with respect to going concern are described in the relevant sections of this report.

Other information

The directors are responsible for the other information. The other information comprises the information included in the Annual report, other than the financial statements and our Auditors' report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Matters on which we are required to report by the Companies Act 2014

In our opinion, based on the work undertaken in the course of the audit, we report that:

- the information given in the Directors' Report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Directors' Report has been prepared in accordance with applicable legal requirements.

We have obtained all the information and explanations which, to the best of our knowledge and belief, are necessary for the purposes of our audit.

In our opinion the accounting records of the Company were sufficient to permit the financial statements to be readily and properly audited, and the financial statements are in agreement with the accounting records.

Matters on which we are required to report by exception

Based on the knowledge and understanding of the Company and its environment obtained in the course of the audit, we have not identified any material misstatements in the Directors' Report.

The Companies Act 2014 requires us to report to you if, in our opinion, the requirements of any of sections 305 to 312 of the Act, which relate to disclosures of directors' remuneration and transactions are not complied with by the Company. We have nothing to report in this regard.

Respective responsibilities and restrictions on use

Responsibilities of the management and those charged with governance for the financial statements

As explained more fully in the Directors' Responsibilities Statement on page 7, the Directors are responsible for the preparation of the financial statements in accordance with the applicable financial reporting framework that give a true and fair view, and for such internal control as the Directors determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Directors are responsible for assessing the Company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the management either intends to liquidate the Company or to cease operations, or has no realistic alternative but to do so.

Responsibilities of the auditor for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an Auditors' Report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (Ireland) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of our responsibilities for the audit of the financial statements is located on the IAASA's website at: <https://iaasa.ie/auditing-and-assurance-standards/>. This description forms part of our Auditors' Report.

The purpose of our audit work and to whom we owe our responsibilities

This report is made solely to the Company's member in accordance with Section 391 of the Companies Act 2014. Our audit work has been undertaken so that we might state to the Company's member those matters we are required to state to them in an Auditors' Report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Company and the Company's member for our audit work, for this report, or for the opinions we have formed.

David McGarry

for and on behalf of

PKF O'Connor, Leddy & Holmes Limited
Statutory Audit Firm
Harold's Cross Road, Dublin, D6W P993

Date: 27 April 2023

Income and Expenditure Account

For the year ended 31 December 2022

| | Note | 2022 | 2021 |
|-------------------------------------------------|------|-------------------------|--------------------|
| | | € | € |
| Income | 4 | 2,051,320 | 1,933,848 |
| Administrative expenses | | <u>(2,192,661)</u> | <u>(2,105,221)</u> |
| Operating (deficit)/surplus | 5 | (141,341) | (171,373) |
| Tax on (deficit)/ surplus | 8 | <u>-</u> | <u>-</u> |
| (Deficit)/surplus for the financial year | | <u>(141,341)</u> | <u>(171,373)</u> |

All amounts relate to continuing operations.

There are no items of other comprehensive income for 2022 or 2021 other than the loss for the year. As a result, no separate Statement of Comprehensive Income has been presented.

The notes on pages 14 to 23 form part of these financial statements.

Signed on behalf of the board:

Martin Higgins

Director

Date: 27 April 2023

Bryan Dooley

Director

Date: 27 April 2023

Balance Sheet

As at 31 December 2022

| | Note | 2022 | 2021 |
|------------------------------------------------|------|-------------------------|-------------------------|
| | | € | € |
| Fixed assets | | | |
| Tangible assets | 9 | <u>156,757</u> | <u>199,666</u> |
| | | 156,757 | 199,666 |
| Current assets | | | |
| Debtors: amounts falling due within one year | 10 | 53,890 | 87,423 |
| Cash at bank and in hand | 11 | <u>977,816</u> | <u>1,015,871</u> |
| | | 1,031,706 | 1,103,294 |
| Creditors: amounts falling due within one year | 12 | <u>(169,831)</u> | <u>(142,987)</u> |
| | | 861,875 | 960,307 |
| Total assets less current liabilities | | <u>1,018,632</u> | <u>1,159,973</u> |
| Net assets | | <u>1,018,632</u> | <u>1,159,973</u> |
| Reserves | | | |
| Accumulated funds | 13 | <u>1,018,632</u> | <u>1,159,973</u> |
| Members' funds | | <u>1,018,632</u> | <u>1,159,973</u> |

These financial statements have been prepared in accordance with the small companies regime.

The financial statements were approved and authorised for issue by the board:

Martin Higgins

Director

Date: 27 April 2023

Bryan Dooley

Director

Date: 27 April 2023

The notes on pages 62 to 71 form part of these financial statements.

Statement of Changes in Reserves

For the year ended 31 December 2022

| | Accumulated funds | Members' funds |
|------------------------------------------------|-------------------------|-------------------------|
| | € | € |
| At 1 January 2022 | 1,159,973 | 1,159,973 |
| Comprehensive income for the year | | |
| Deficit for the year | <u>(141,341)</u> | <u>(141,341)</u> |
| Total comprehensive income for the year | <u>(141,341)</u> | <u>(141,341)</u> |
| At 31 December 2022 | <u><u>1,018,632</u></u> | <u><u>1,018,632</u></u> |

Statement of Changes in Reserves

For the year ended 31 December 2021

| | Accumulated funds | Members' funds |
|------------------------------------------------|-------------------------|-------------------------|
| | € | € |
| At 1 January 2021 | 1,331,346 | 1,331,346 |
| Comprehensive income for the year | | |
| Deficit for the year | <u>(171,373)</u> | <u>(171,373)</u> |
| Total comprehensive income for the year | <u>(171,373)</u> | <u>(171,373)</u> |
| | - | - |
| At 31 December 2021 | <u><u>1,159,973</u></u> | <u><u>1,159,973</u></u> |

The notes on pages 62 to 71 form part of these financial statements.

Notes to the Financial Statements

For the year ended 31 December 2022

1. General information

These financial statements comprising the Income and Expenditure Account, the Balance Sheet, the Statement of Changes in Reserves and the related notes constitute the individual financial statements of The Institute of Public Health in Ireland Company Limited by Guarantee for the financial year ended 31 December 2022.

The Institute of Public Health in Ireland Company Limited by Guarantee is a state sponsored body which is limited by guarantee. It is incorporated in the Republic of Ireland and the address of its registered office is 700 South Circular Road, Dublin 8.

2. Accounting policies

2.1 Basis of preparation of financial statements

The financial statements have been prepared under the historical cost convention unless otherwise specified within these accounting policies and in accordance with Section 1A of Financial Reporting Standard 102, the Financial Reporting Standard applicable in the UK and the Republic of Ireland and the Companies Act 2014.

The preparation of financial statements in compliance with FRS 102 requires the use of certain critical accounting estimates. It also requires management to exercise judgment in applying the Company's accounting policies (see note 3).

The Company has availed of the exemption in FRS 102 7.1B from including a cash flow statement in the financial statements on the grounds that the Company is small.

The following principal accounting policies have been applied:

2.2 Income

Income is recognised when earned and is dealt with in the financial statements of the year to which it relates.

2.3 Going concern

The financial statements have been prepared on a going concern basis.

2.4 Foreign currency translation

Functional and presentation currency

The Company's functional and presentational currency is Euros.

Transactions and balances

Foreign currency transactions are translated into the functional currency using the spot exchange rates at the dates of the transactions.

At each period end foreign currency monetary items are translated using the closing rate.

Non-monetary items measured at historical cost are translated using the exchange rate at the date

of the transaction and non-monetary items measured at fair value are measured using the exchange rate when fair value was determined.

Foreign exchange gains and losses resulting from the settlement of transactions and from the translation at period-end exchange rates of monetary assets and liabilities denominated in foreign currencies are recognised in profit or loss except when deferred in other comprehensive income as qualifying cash flow hedges.

Foreign exchange gains and losses that relate to borrowings and cash and cash equivalents are presented in the Profit and Loss Account within 'finance income or costs'. All other foreign exchange gains and losses are presented in profit or loss within 'other operating income'.

2.5 Operating leases: the Company as lessee

Rentals paid under operating leases are charged to profit or loss on a straight-line basis over the lease term.

Benefits received and receivable as an incentive to sign an operating lease are recognised on a straight-line basis over the lease term, unless another systematic basis is representative of the time pattern of the lessee's benefit from the use of the leased asset.

2.6 Government grants

Grants are accounted under the accruals model as permitted by FRS 102. Grants relating to expenditure on tangible fixed assets are credited to profit or loss at the same rate as the depreciation on the assets to which the grant relates. The deferred element of grants is included in creditors as deferred income.

Grants of a revenue nature are recognised in the Profit and Loss Account in the same period as the related expenditure.

2.7 Pensions

Defined contribution pension plan.

The Company operates a defined contribution plan for its employees. A defined contribution plan is a pension plan under which the Company pays fixed contributions into a separate entity. Once the contributions have been paid the Company has no further payment obligations.

The contributions are recognised as an expense in profit or loss when they fall due. Amounts not paid are shown in accruals as a liability in the Balance Sheet. The assets of the plan are held separately from the Company in independently administered funds.

2.8 Taxation

Tax is recognised in profit or loss except that a charge attributable to an item of income and expense recognised as other comprehensive income or to an item recognised directly in equity is also recognised in other comprehensive income or directly in equity respectively.

The current income tax charge is calculated on the basis of tax rates and laws that have been enacted or substantively enacted by the balance sheet date in the countries where the Company operates and generates income.

Deferred tax balances are recognised in respect of all timing differences that have originated but not reversed by the balance sheet date, except that:

- The recognition of deferred tax assets is limited to the extent that it is probable that they will be recovered against the reversal of deferred tax liabilities or other future taxable profits; and
- Any deferred tax balances are reversed if and when all conditions for retaining associated tax allowances have been met.

Deferred tax balances are not recognised in respect of permanent differences except in respect of business combinations, when deferred tax is recognised on the differences between the fair values of assets acquired and the future tax deductions available for them and the differences between the fair values of liabilities acquired and the amount that will be assessed for tax. Deferred tax is determined using tax rates and laws that have been enacted or substantively enacted by the balance sheet date.

As the institute is a non-commercial state sponsored body, it is exempt from paying corporation tax on any surplus income arising in the year.

2.9 Tangible fixed assets

Tangible fixed assets under the cost model are stated at historical cost less accumulated depreciation and any accumulated impairment losses. Historical cost includes expenditure that is directly attributable to bringing the asset to the location and condition necessary for it to be capable of operating in the manner intended by management.

At each reporting date the Company assesses whether there is any indication of impairment. If such indication exists, the recoverable amount of the asset is determined which is the higher of its fair value less costs to sell and its value in use. An impairment loss is recognised where the carrying amount exceeds the recoverable amount.

The Company adds to the carrying amount of an item of fixed assets the cost of replacing part of such an item when that cost is incurred, if the replacement part is expected to provide incremental future benefits to the Company. The carrying amount of the replaced part is derecognised. Repairs and maintenance are charged to profit or loss during the period in which they are incurred.

Depreciation is charged so as to allocate the cost of assets less their residual value over their estimated useful lives, using the straight-line method.

Depreciation is provided on the following basis:

| | | | |
|--------------------|---|-----|---------------|
| Office equipment | - | 20% | Straight Line |
| Computer equipment | - | 33% | Straight Line |

The assets' residual values, useful lives and depreciation methods are reviewed, and adjusted prospectively if appropriate, or if there is an indication of a significant change since the last reporting date.

Gains and losses on disposals are determined by comparing the proceeds with the carrying amount and are recognised in profit or loss.

2.10 Impairment of assets

At each reporting date fixed assets are reviewed to determine whether there is any indication that those assets have suffered an impairment loss. If there is an indication of possible impairment, the recoverable amount of any affected asset is estimated and compared with its carrying amount. If estimated recoverable amount is lower, the carrying amount is reduced to its estimated recoverable amount, and an impairment loss is recognised immediately in surplus or deficit.

If an impairment loss subsequently reserves, the carry amount of the asset is increased to the revised estimate of its recoverable amount, but not in excess of the amount that would have been determined had no impairment loss had been recognised for the asset in prior years. A reversal of an impairment loss is recognised immediately in profit or loss.

2.11 Debtors

Short-term debtors are measured at transaction price, less any impairment. Loans receivable are measured initially at fair value, net of transaction costs, and are measured subsequently at amortised cost using the effective interest method, less any impairment.

2.12 Cash and cash equivalents

Cash is represented by cash in hand and deposits with financial institutions repayable without penalty on notice of not more than 24 hours. Cash equivalents are highly liquid investments that mature in no more than three months from the date of acquisition and that are readily convertible to known amounts of cash with insignificant risk of change in value.

2.13 Creditors

Short-term creditors are measured at the transaction price. Other financial liabilities, including bank loans, are measured initially at fair value, net of transaction costs, and are measured subsequently at amortised cost using the effective interest method.

2.14 Provisions for liabilities

Provisions are made where an event has taken place that gives the Company a legal or constructive obligation that probably requires settlement by transfer of economic benefit, and a reliable estimate can be made of the amount of the obligation.

Provisions are charged as an expense to the Income and Expenditure Account in the year that the company becomes aware of the obligation, and are measured at the best estimate at the Balance Sheet date of the expenditure required to settle the obligation, taking in to account relevant risks and uncertainties.

When payments are eventually made, they are charged to the provision carried in the Balance Sheet.

3. Judgments in applying accounting policies and key sources of estimation uncertainty

When preparing financial statements, management makes a number of judgments, estimates and assumptions about the recognition and measurement of assets, liabilities, income and expenses.

The following are significant management judgments in applying the accounting policies of the company, that have the most effect on the financial statements.

Revenue Recognition

Judgment is used to interpret the terms and determine when all the criteria of revenue recognition have been met in order for revenue recognition to occur in the appropriate financial reporting period.

Useful Lives of Tangible Fixed Assets

Long-lived assets comprise primarily of land and buildings. The annual depreciation charge depends primarily on the estimated lives of each type of asset. The Directors regularly review these useful lives and change them if necessary to reflect current conditions. In determining these useful lives management consider technological change, patterns of consumption, physical condition and expected economic utilisation of the assets. Changes in the useful lives can have a significant impact on the depreciation charge for the financial year. The net book value of Tangible Fixed Assets subject to depreciation at the financial year end date was €156,757 (2021: €199,666).

4. Income

An analysis of turnover by class of business is as follows:

| | 2022 | 2021 |
|----------------------------|------------------|------------------|
| | € | € |
| Department of Health (ROI) | 1,377,000 | 1,377,000 |
| Department of Health (NI) | 637,860 | 493,673 |
| Grant income | 22,982 | 27,035 |
| Other income | 42 | - |
| Other funding | 13,436 | 36,140 |
| | <u>2,051,320</u> | <u>1,933,848</u> |

5. (Deficit)/surplus on ordinary activities before taxation

The operating surplus/(deficit) is stated after charging:

| | 2022 | 2021 |
|----------------------------------------------|----------------|----------------|
| | € | € |
| Research & development charged as an expense | 366,080 | 361,609 |
| Depreciation of tangible fixed assets | 71,518 | 60,795 |
| Exchange differences | 12,491 | (19,179) |
| Defined contribution pension cost | 85,111 | 80,673 |
| Rent – operating leases | 148,637 | 146,095 |
| | <u>148,637</u> | <u>146,095</u> |

6. Employees

The average monthly number of employees, including the Directors, during the year was as follows:

| | 2022 | 2021 |
|---------------------------|-----------|-----------|
| | No. | No. |
| Management | 5 | 5 |
| Program Staff | 9 | 8 |
| Technical & support staff | 6 | 6 |
| | <u>20</u> | <u>19</u> |

Key management compensation amounted to €460,787 (2021: €438,678).

7. Directors' remuneration

| | 2022 | 2021 |
|---------------------------------------------------------------|----------------------|-----------------------|
| | € | € |
| Directors' emoluments | 79,759 | 97,880 |
| Company contributions to defined contribution pension schemes | <u>6,381</u> | <u>7,911</u> |
| | <u><u>86,140</u></u> | <u><u>105,791</u></u> |

During the year retirement benefits were accruing to no Directors (2021 - NIL) in respect of defined contribution pension schemes.

8. Taxation

| | 2022 | 2021 |
|--------------------------------------------------|----------|----------|
| | € | € |
| Total current tax | <u>-</u> | <u>-</u> |
| Deferred tax | <u>-</u> | <u>-</u> |
| Total deferred tax | <u>-</u> | <u>-</u> |
| Taxation on profit on ordinary activities | <u>-</u> | <u>-</u> |

Factors affecting tax charge for the year

The tax assessed for the year is the same as (2021 – the same as) the standard rate of corporation tax in Ireland of 12.5% (2021 – 12.5%) as set out below:

| | 2022 | 2021 |
|---------------------------------------------------------------------------------------------------------------|------------------|------------------|
| | € | € |
| Loss on ordinary activities before tax | <u>(141,341)</u> | <u>(171,373)</u> |
| Loss on ordinary activities multiplied by standard rate of corporation tax in Ireland of 12.5% (2021 - 12.5%) | (16,786) | (21,422) |
| Effects of: | | |
| State sponsored body exemption from corporation tax | <u>16,786</u> | <u>21,422</u> |
| Total tax charge for the year | <u>-</u> | <u>-</u> |

Factors that may affect future tax charges

There were no factors that may affect future tax charges.

9. Tangible fixed assets

| | Office equipment | Computer equipment | Total |
|-------------------------------------|------------------|--------------------|----------------|
| | € | € | € |
| Cost or valuation | | | |
| At 1 January 2022 | 255,920 | 91,791 | 347,711 |
| Additions | <u>3,953</u> | <u>24,656</u> | <u>28,609</u> |
| At 31 December 2022 | <u>259,873</u> | <u>116,447</u> | <u>376,320</u> |
| Depreciation | | | |
| At 1 January 2022 | 87,914 | 60,131 | 148,045 |
| Charge for the year on owned assets | <u>51,450</u> | <u>20,068</u> | <u>71,518</u> |
| At 31 December 2022 | <u>139,364</u> | <u>80,199</u> | <u>219,563</u> |
| Net book value | | | |
| At 31 December 2022 | <u>120,509</u> | <u>36,248</u> | <u>156,757</u> |
| At 31 December 2021 | <u>168,006</u> | <u>31,660</u> | <u>199,666</u> |

10. Debtors

| | 2022 | 2021 |
|----------------|---------------|---------------|
| | € | € |
| Other debtors | 11,151 | 11,146 |
| Prepayments | 41,197 | 74,735 |
| Accrued income | <u>1,542</u> | <u>1,542</u> |
| | <u>53,890</u> | <u>87,423</u> |

11. Cash and cash equivalents

| | 2022 | 2021 |
|--------------------------|----------------|------------------|
| | € | € |
| Cash at bank and in hand | <u>977,816</u> | <u>1,015,871</u> |
| | <u>977,816</u> | <u>1,015,871</u> |

12. Creditors: Amounts falling due within one year

| | 2022 | 2021 |
|-------------------------------|----------------|----------------|
| | € | € |
| Trade creditors | 19,133 | 5,430 |
| VAT Payable | 14,567 | 11,710 |
| Taxation and social insurance | 34,275 | 18,344 |
| Other creditors | 12,809 | - |
| Accruals | 89,047 | 107,503 |
| | <u>169,831</u> | <u>142,987</u> |

Trade Creditors are payable at various dates over the coming months in accordance with the suppliers' usual and customary credit terms.

Other taxes including social insurance are repayable at various dates over the coming months in accordance with the applicable statutory provisions.

The terms of accruals and deferred income are based on the underlying contracts.

13. Reserves

Accumulated Funds

Includes all current and prior period retained surpluses and deficits.

14. Company status

The Company is limited by guarantee and consequently does not have share capital. Each of the members is liable to contribute an amount not exceeding €1 towards the assets of the company in the event of liquidation.

15. Pension commitments

The company operates a defined contributions pensions scheme. The assets of the scheme are held separately from those of the company in an independently administered fund. The pension cost charge represents contributions payable by the company to the fund and amounted to €85,111 (2021: €80,673). Contributions totaling €12,809 (2021: €Nil) were payable to the fund at the reporting date are included in other creditors.

16. Commitments under operating leases

At 31 December 2022 the Company had future minimum lease payments due under non-cancellable operating leases for each of the following periods:

| | 2022 | 2021 |
|----------------------------------------------|-----------------------|-----------------------|
| | € | € |
| Not later than 1 year | 138,138 | 138,138 |
| Later than 1 year and not later than 5 years | 454,231 | 518,431 |
| Later than 5 years | 8,854 | 78,093 |
| | <u>601,223</u> | <u>734,662</u> |

17. Post balance sheet events

There have been no significant events affecting the Company since the year end.

18. Controlling party

The company is controlled by the members.

19. Approval of financial statements

The board of Directors approved these financial statements for issue on 27 April 2023.

Detailed Income and Expenditure Account

For the year ended 31 December 2022

| | 2022 | 2021 |
|---------------------------------------|--------------------|--------------------|
| | € | € |
| Income | <u>2,051,320</u> | <u>1,933,848</u> |
| Less: overheads | | |
| Administration expenses | <u>(2,192,661)</u> | <u>(2,105,221)</u> |
| Operating (deficit)/surplus | <u>(141,341)</u> | <u>(171,373)</u> |
| (Deficit)/surplus for the year | <u>(141,341)</u> | <u>(171,373)</u> |

Schedule to the Detailed Accounts

For the year ended 31 December 2022

| | 2022 | 2021 |
|----------------------------|-------------------------|-------------------------|
| | € | € |
| Income | | |
| Department of Health (ROI) | 1,377,000 | 1,377,000 |
| Department of Health (NI) | 637,860 | 493,673 |
| Grant income | 22,982 | 27,035 |
| Other income | 42 | - |
| Other funding | 13,436 | 36,140 |
| | <u>2,051,320</u> | <u>1,933,848</u> |

Schedule to the Detailed Accounts

For the year ended 31 December 2022

| | 2022 | 2021 |
|--------------------------------------------------------|-------------------------|-------------------------|
| | € | € |
| Administration expenses | | |
| Directors salaries | 79,759 | 97,880 |
| Directors pension costs - defined contribution schemes | 6,381 | 7,911 |
| Staff salaries | 1,059,534 | 996,960 |
| Employers PRSI | 119,206 | 110,608 |
| Staff pension costs - defined contribution schemes | 78,730 | 72,762 |
| Staff training | 16,743 | 15,202 |
| Canteen | 217 | 534 |
| Hotels, travel and subsistence | 8,241 | 1,113 |
| Research and development | 366,080 | 361,609 |
| Printing and stationery | 889 | 434 |
| Postage | 625 | 1,164 |
| Telephone and fax | 16,890 | 21,678 |
| Computer costs | 23,032 | 35,296 |
| General office expenses | 88 | 5,373 |
| Trade subscriptions | 14,366 | 10,777 |
| Legal and professional | 54,312 | 69,006 |
| Auditors' remuneration | 9,735 | 8,213 |
| Internal audit costs | 6,278 | - |
| Accountancy fees | 10,369 | 24,996 |
| Bank charges | 781 | 834 |
| Difference on foreign exchange | 12,491 | (19,179) |
| Sundry expenses | 3 | - |
| Rent - operating leases | 148,637 | 146,095 |
| Rates | 10,981 | 26,455 |
| Light and heat | 4,818 | 588 |
| Cleaning | 8,675 | 3,396 |
| Service charges | 9,065 | 7,941 |
| Insurances | 10,510 | 8,390 |
| Repairs and maintenance | 2,560 | 1,306 |
| Tangible fixed assets depreciation | 71,517 | 60,795 |
| Recruitment costs | 207 | 5,296 |
| Communication costs | 23,466 | 13,493 |
| Public events | 17,475 | 8,295 |
| | <u>2,192,661</u> | <u>2,105,221</u> |

Appendix A

IPH Membership: Groups, Committees and Networks

IPH engages widely with policy development in Ireland, Northern Ireland, the UK, and beyond.

Ireland

- Healthy Ireland Cross-Sectoral Group, Healthy Ireland
- Healthy Cities and Healthy Counties Network of Ireland Steering Committee, Healthy Ireland
- Health Behaviour in School Aged Children Survey Advisory Committee, Healthy Ireland
- Healthy Ireland Survey Advisory Group, Healthy Ireland
- Public Health Alcohol Research Group, Department of Health
- Women's Health Taskforce, Department of Health
- Tobacco Free Ireland Partners Group, Health Service Executive (HSE)
- Royal College of Physicians of Ireland, Policy Group on Tobacco
- World Conference Tobacco or Health 2023 Local Organising Committee (Ireland)
- National Environmental Research Coordination Group, Environmental Protection Agency (EPA)
- Skin Cancer Prevention Strategy - Children and Young People Subgroup, National Cancer Control Programme, Health Service Executive (HSE)
- Advisory group on developing a Cancer Awareness Survey, National Cancer Control Programme, Health Service Executive (HSE)
- Working Group on the Recognition and Regulation of Multi-Disciplinary Public Health and Health Promotion (IPH and University College Cork)
- Healthy Weight for Children National Oversight Group, Health Service Executive (HSE)
- Advisory group on Strategic Equity Framework for the National Cancer Screening Service, National Cancer Control Programme, Health Service Executive (HSE)
- The Irish Longitudinal Study on Ageing (TILDA) Oversight Board, Trinity College Dublin

Northern Ireland

- Making Life Better Review Group, Office of the Chief Medical Officer
- Tobacco Strategy Implementation Steering Group, Department of Health
- Tobacco Strategy Research and Information Sub-Group, Public Health Agency (PHA)
- Research Workstrand, Breastfeeding Strategy Implementation Steering Group, Public Health Agency (PHA)
- Regional Obesity Prevention Implementation Group, Public Health Agency (PHA)
- Obesity Prevention Policy Project Board, Department of Health
- Northern Ireland Public Health Research Network Steering Committee
- Climate Change and Health Network
- Substance Use Strategy Oversight Group, Department of Health
- Substance Use Strategy (SUS) Indicators and Monitoring Group, Department of Health
- Northern Ireland Cohort for the Longitudinal study of Ageing (NICOLA) Council
- Regional Frailty Expert Panel - Advisory Panel (Public Health Agency)
- Health and Social Care (HSC) Loneliness Forum

All island

- North South Alcohol Policy Advisory Group (IPH is Chair and Secretariat)
- Cross-border Healthcare Intervention Trials in Ireland Network (CHITIN), Advisory Group
- Joint North South Public Health Conference Standing Committee
- Men's Health Forum in Ireland, Advisory Group
- All Island Obesity Action Forum, Safefood
- Ireland and Northern Ireland Criminology Research Network

UK

- UK Faculty of Public Health - Special Interest Group on Alcohol
- UK Faculty of Public Health - Climate and Health Committee
- Smoke Free Home Innovation Network (SHINE)
- UK Health Alliance for Climate Change
- UK Public Health Network (UKPHN)

Europe

- EuroHealthNet Members Committee
- Social Marketing for Addictions Thematic Working Group (SOMAD TWIG) - Sante Publique France/ EuroHealthNet

Global

- International Association of National Public Health Institutes (IANPHI)



Appendix B

Publications, reports, briefs, and blogs published in 2022

Reports

- **An Overview of Dental Services and Oral Health in Northern Ireland and Ireland** – an IPH report providing an overview of Dental Services and Oral Health in both jurisdictions.
- **The 2022 Ireland North and South Report Card on Physical Activity for Children and Adolescents** – produced as part of the Active Healthy Kids Global Alliance.
- **Tobacco 21 report** – published by the Royal College of Physicians of Ireland’s Policy Group on Tobacco.
- **‘Unequal Chances? Inequalities in Mortality in Ireland** – commissioned by IPH and published by the Economic and Social Research Institute (ESRI).
- Tobacco Free Ireland: Mid-term Stakeholder Engagement.

InBriefs and Easy Reads

- **Easy Read: Mid-term review of Tobacco Control Strategy for Northern Ireland – Stakeholder Engagement Report** – This Easy Read version provides a summary of a detailed report developed by the Institute for the Department of Health in Northern Ireland.
- **Easy Read: Review of the New Strategic Direction for Alcohol and Drugs Phase 2 (NSD-2)** – This Easy Read version provides a summary of a detailed report developed by the Institute for the Department of Health in Northern Ireland.
- **Easy Read: Children’s sun safety – and their risk of future skin cancers** – This Easy Read summary presents key findings from a report exploring risk factors for children aged 10 to 17 in Ireland. The report was developed by the Institute of Public Health and National University of Ireland Galway for the National Cancer Control Programme.
- **InBrief: Health professionals require support to promote physical activity to older adults** – This InBrief summarised new IPH research, which found that healthcare professionals want more tailored training and support to help promote and improve physical activity levels in older adults.
- **InBrief: Arts and creativity in later life has positive health and wellbeing impacts** – This InBrief summarised the findings of a recent IPH report, ‘Arts and Creativity in Later Life: Implications for Public Health and Older People’, which found that arts and creativity can help improve physical, psychological, and social health and wellbeing in older adults.
- **InBrief: The heat is on for Northern Ireland to tackle climate change** – This InBrief summarised the main recommendations made by the Institute of Public Health in a recent submission on the Northern Ireland Climate Change (No.2) Bill.



IPH Blogs

February

Impact of COVID-19 on the mental health of people living on the island of Ireland – Louise O'Connor, a research assistant at the Institute of Public Health, wrote a blog exploring the impact of COVID-19 on the mental health of people living on the island of Ireland.

Housing and Health – Why tackling cold homes is a public health issue – IPH Knowledge Translation Officer for Ageing and Public Health, Aideen Sheehan explored the issue of housing and health in this blog on 'Why tackling cold homes is a public health issue'.

May

#EPHW22: Health, wealth and our planet – To mark European Public Health Week in May, Dr Jenny Mack, explored the link between climate change and health in a blog about 'Health, wealth and our planet'.

June

Young Women and Mental Health - We All Have a Part to Play – Esther Atuhaire, who undertook a student placement at the Institute, wrote a blog exploring the relationship between young women and mental health.

Men's Health Week: Stacking the odds against gambling harms – the case for stronger regulation – To mark Men's Health Week in June, policy team members, Louise O'Connor, Ciara Reynolds and Joanna Purdy looked at what current data and evidence can tell us about the higher odds of gambling rates, risks, and harms among men and boys and the case for stronger regulation.

July

Clear evidence that it's time for a Tobacco Endgame – In this blog, Lauren Rodriguez, IPH Public Health Development Officer, shared an overview of the evidence presented at the 'Tobacco Endgame: Nobody Left Behind' conference, hosted by the HSE, to mark World No Tobacco Day on 31 May.

Becoming SunSmart – Reflections on skin cancer prevention in Ireland – This blog by Lauren Rodriguez, IPH Public Health Development Officer, reflected on the policy impact from a sun safety report IPH published in 2020 in partnership with NUI Galway.

The importance of arts for older people's health and wellbeing – Laura McQuade, IPH Evaluations and Interventions Officer, explored the role of the arts to support population health in a blog about the role of art and creativity in ageing.

October

Taking the mystery out of menopause and smoking – To mark National Menopause Awareness Week, Dr Helen McAvoy, Director of Policy at the Institute, wrote a blog shining a light on the relationship between menopause and smoking.

Active Healthy Kids – How physical activity levels compare across Ireland and the UK – This blog by Lauren Rodriguez, IPH Public Health Development Officer, provided an overview of the 2022 Ireland North and South Report Card on Physical Activity and also looked at how the findings compare with Scotland and Wales.



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