# IAPC Annual Report 2021/2022

Irish Association for Palliative Care

IAPC gratefully acknowledges the Scheme to Support National Organisations is funded by the Government of Ireland through the Department of Rural and Community Development 2022–2025. IAPC gratefully acknowledgement HSE Primary Care funding under Services for Older Person January 2022–December 2022. The IAPC also acknowledges receipt of funding through the Hospital Saturday Fund to support the Education and Research Seminar 2022.





**Rialtas na hÉireann** Government of Ireland





Contents



1.	About IAPC	4
	<ol> <li>IAPC – The Voice of Palliative Care</li> <li>IAPC Constitution</li> <li>Vision</li> <li>Mission Statement</li> <li>Our Values informing our Strategics Goals</li> <li>Key Strategic Goals: September 2021 to December 2022</li> <li>Governance</li> </ol>	
 2.	Chair Report 2021/22 - Dr. Hannah Linane 2.1 Strategic Plan Goals 2.2 Governance 2.3 Implementation of IAPC Strategic Plan 2021 - 2022	7
 3.	CEO Report 2021/22 - Jacinta Cuthbert	11
 4.	Secretary's Report 2021/2022 – Dr. Ciara McGrath 4.1 Board Meetings 4.2 Review/Strategic Plan 4.3 Governance 4.4 Staffing 4.4 1Staff of the IAPC 2021/2022 4.5 Members of the IAPC Board 2021/2022	12
 5.	Treasurers Report 5.1 Financial Supports 5.2 Grant-Aid 5.3 Reserves Policy	14



6.	Membe	ership Events	15
	6.1	Lecture Series 2021	
		6.1.1 Outputs	
	6.2	Education & Research Seminar 2022	
		6.2.1 A word from the outgoing Chair – Fiona Woods	
		6.2.2 Members of Education and Research Forum 2021/2022	
		6.2.3 Programme for the day and platform presentations	
		6.2.4 Winners – Platform Presentation	
		6.2.5 Collaboration with BMJSPC	
		6.2.6 Plenary Speaker	
		6.2.7 Seminar Abstracts – Poster Presentations	
		6.2.8 Winners – Poster Presentation	
		6.2.9 Highly Commended	
		6.2.10 Outputs	
		6.2.11 A message from the incoming Chair – Dr. Claire Kruger	
7.	Collabo	prative Workshops:	2
7.			2
7.		Orative Workshops: Workshop Topic: Bringing the Public and Patient Voice to Your Research 7.1.1 Outputs:	2
7.		Workshop Topic: Bringing the Public and Patient Voice to Your Research	2
7.	7.1	Workshop Topic: Bringing the Public and Patient Voice to Your Research 7.1.1 Outputs:	2
7.	7.1	Workshop Topic: Bringing the Public and Patient Voice to Your Research 7.1.1 Outputs: Workshop Topic: Let's Get Animated: exploring the use of animation in	2
7.	7.1	Workshop Topic: Bringing the Public and Patient Voice to Your Research 7.1.1 Outputs: Workshop Topic: Let's Get Animated: exploring the use of animation in translating qualitative research into meaningful and	2
7.	7.1	Workshop Topic: Bringing the Public and Patient Voice to Your Research 7.1.1 Outputs: Workshop Topic: Let's Get Animated: exploring the use of animation in translating qualitative research into meaningful and accessible public health outputs	2
7.	7.1 7.2	Workshop Topic: Bringing the Public and Patient Voice to Your Research 7.1.1 Outputs: Workshop Topic: Let's Get Animated: exploring the use of animation in translating qualitative research into meaningful and accessible public health outputs 7.2.1 Outputs:	2
7.	7.1 7.2	Workshop Topic: Bringing the Public and Patient Voice to Your Research 7.1.1 Outputs: Workshop Topic: Let's Get Animated: exploring the use of animation in translating qualitative research into meaningful and accessible public health outputs 7.2.1 Outputs: Workshop Topic: How AIIHPC supports early researchers in Palliative Care	2
7.	7.1 7.2	<ul> <li>Workshop Topic: Bringing the Public and Patient Voice to Your Research 7.1.1 Outputs:</li> <li>Workshop Topic: Let's Get Animated: exploring the use of animation in translating qualitative research into meaningful and accessible public health outputs</li> <li>7.2.1 Outputs:</li> <li>Workshop Topic: How AIIHPC supports early researchers in Palliative Care through Early Career Researcher Forum and Palliative Care</li> </ul>	2
7.	7.1 7.2	<ul> <li>Workshop Topic: Bringing the Public and Patient Voice to Your Research 7.1.1 Outputs:</li> <li>Workshop Topic: Let's Get Animated: exploring the use of animation in translating qualitative research into meaningful and accessible public health outputs</li> <li>7.2.1 Outputs:</li> <li>Workshop Topic: How AIIHPC supports early researchers in Palliative Care through Early Career Researcher Forum and Palliative Care Research Network.</li> </ul>	2
7.	7.1 7.2 7.3.	<ul> <li>Workshop Topic: Bringing the Public and Patient Voice to Your Research 7.1.1 Outputs:</li> <li>Workshop Topic: Let's Get Animated: exploring the use of animation in translating qualitative research into meaningful and accessible public health outputs</li> <li>7.2.1 Outputs:</li> <li>Workshop Topic: How AIIHPC supports early researchers in Palliative Care through Early Career Researcher Forum and Palliative Care Research Network.</li> <li>7.3.1 Outputs:</li> </ul>	2
7.	7.1 7.2 7.3.	<ul> <li>Workshop Topic: Bringing the Public and Patient Voice to Your Research 7.1.1 Outputs:</li> <li>Workshop Topic: Let's Get Animated: exploring the use of animation in translating qualitative research into meaningful and accessible public health outputs</li> <li>7.2.1 Outputs:</li> <li>Workshop Topic: How AIIHPC supports early researchers in Palliative Care through Early Career Researcher Forum and Palliative Care Research Network.</li> <li>7.3.1 Outputs:</li> <li>Workshop Topic: European Association for Palliative Care: Membership,</li> </ul>	2
7.	7.1 7.2 7.3.	<ul> <li>Workshop Topic: Bringing the Public and Patient Voice to Your Research 7.1.1 Outputs:</li> <li>Workshop Topic: Let's Get Animated: exploring the use of animation in translating qualitative research into meaningful and accessible public health outputs</li> <li>7.2.1 Outputs:</li> <li>Workshop Topic: How AIIHPC supports early researchers in Palliative Care through Early Career Researcher Forum and Palliative Care Research Network.</li> <li>7.3.1 Outputs:</li> <li>Workshop Topic: European Association for Palliative Care: Membership, benefits and more</li> </ul>	2
7.	7.1 7.2 7.3. 7.4	<ul> <li>Workshop Topic: Bringing the Public and Patient Voice to Your Research 7.1.1 Outputs:</li> <li>Workshop Topic: Let's Get Animated: exploring the use of animation in translating qualitative research into meaningful and accessible public health outputs</li> <li>7.2.1 Outputs:</li> <li>Workshop Topic: How AIIHPC supports early researchers in Palliative Care through Early Career Researcher Forum and Palliative Care Research Network.</li> <li>7.3.1 Outputs:</li> <li>Workshop Topic: European Association for Palliative Care: Membership, benefits and more</li> <li>7.4.1 Outputs:</li> </ul>	2
7.	7.1 7.2 7.3. 7.4	<ul> <li>Workshop Topic: Bringing the Public and Patient Voice to Your Research 7.1.1 Outputs:</li> <li>Workshop Topic: Let's Get Animated: exploring the use of animation in translating qualitative research into meaningful and accessible public health outputs</li> <li>7.2.1 Outputs:</li> <li>Workshop Topic: How AIIHPC supports early researchers in Palliative Care through Early Career Researcher Forum and Palliative Care Research Network.</li> <li>7.3.1 Outputs:</li> <li>Workshop Topic: European Association for Palliative Care: Membership, benefits and more</li> <li>7.4.1 Outputs:</li> <li>Workshop Topic: How to write a successful abstract</li> </ul>	2



8.	Commu	unication	s Update	38	3
			Communications Report		
			Twitter		
		8.1.3	Mailchimp		
		8.1.5	IAPC Networking		
		8.1.6	Outputs:		
 9.	IAPC Fo	ora		40	)
	9.1	Ethics Fo	rum		
		9.1.2	Ethics Forum Member 2022/23		
	9.2	Pharmac	y Forum		
			Pharmacy Forum members 2022/23		
	9.3	Nursing I	Forum		
10.	IAPC Ar	nnual Acc	ounts 2021:	43	}
 					-



# 1. About IAPC

# 1.1 IAPC – The Voice of Palliative Care

Established in 1993 as an all island body with the purpose of promoting palliative care nationally and internationally, the Irish Association for Palliative Care (IAPC) is a multidisciplinary membership non-government organisation. The intention of the founders was that IAPC would be identified by its inclusiveness and would encompass the whole island of Ireland.

The IAPC membership reflects the entire spectrum of all those who work in or have a professional interest in the provision of palliative care, i.e. doctors, nurses, social workers, chaplains and pastoral carers, pharmacists, psychologists, physiotherapists, occupational therapists, dietitians, as well as executive staff and academics and educationalists. Membership also includes clinicians and allied health professionals working in related areas such as geriatrics, oncology, psycho-oncology, paediatrics, and pain management.

The IAPC is organised around a number of working groups designed to create forums for shared best practice and learning opportunities, and for members to further their professional development, education and research.

The Association pursues its objectives through providing structured opportunities for:

- · Networking,
- · Sharing and learning,
- Educational offerings,
- · Promoting evidence-based research,
- · Publications,
- Representation on national bodies and influencing the development of national policy.

Internationally it is strongly aligned with the European Association for Palliative Care (EAPC).



The IAPC Working Groups (fora) inform the strategic direction and policy decisions of the Board, thereby creating a strong foundation for the IAPC's position as the primary collective voice for palliative care in Ireland. Currently the IAPC are working towards re-developing the forums that will actively support the work of the organisation and its membership. As part of the ongoing review and development of the various fora, there will be continuous discussion on each forum and its relevance to the future outcomes of the Strategic Plan. Key fora that were identified for this first strategic plan

- 1. Ethics
- 2. Nursing
- 3. Spirituality
- 4. Re-invigorate the Pharmacy Forum
- 5. Continue to support Education & Research Forum

Fora for future Board discussion:

- · IAPC Education and Research Forum active
- · IAPC Palliative Nursing Forum *launching November 2022*
- · IAPC Ethics Group in progress
- IAPC Psychology Forum to be discussed
- · IAPC Palliative Care Pharmacy Forum active
- · IAPC Older Person Care Special Interest Forum to be discussed
- · IAPC Primary Palliative Care Special Interest Forum to be discussed
- · IAPC Spirituality in Palliative Care to be discussed
- · IAPC Children's Palliative Care Special Interest Grou to be discussed

We receive project funding through the HSE and POBAL. In July 2022 the IAPC was granted a three year funding stream to support the salaries of the three part-time members of staff. We are a registered charity and a company limited by guarantee. A plan for funding the organisation and allowing it to continue to meet its objectives, will form part of the ongoing sustainability of the organisation.

### 1.2 IAPC Constitution

A voluntary committee drew up the Constitution for the Association which was ratified in 1993. The IAPC has amended its Constitution over the years to reflect the changes to Company Law and the changing needs of the organisation.

1.3 Vision –

The Vision of the IAPC is using our collective expert voice to advance palliative care in Ireland.



# 1.4 Mission Statement

As a multi-disciplinary membership organisation, the Irish Association for Palliative Care brings practitioners together in order to influence palliative care policy and practice.

#### We do this:

- By engagement with our members;
- By supporting education and research in palliative care;
- Through collaboration and involvement with the palliative care community, service users and others.

# 1.5 Our Values informing our Strategics Goals

Challenge	The Irish Association for Palliative Care will challenge whenever It is appropriate, both internally and externally, to ensure good palliative care policy and practice.
Collaboration	The Irish Association for Palliative Care will collaborate with others to ensure good palliative care policy and practice
Independence	The Irish Association for Palliative Care will seek to remain independent of any vested interests in order to help it ensure good palliative care policy and practice
Governance	The Irish Association for Palliative Care will ensure that it is accountable and transparent in its working and decision-making
Multi-disciplinary	The Irish Association for Palliative Care will encourage the participation and development of all relevant healthcare disciplines in order to ensure good palliative care policy and practice
Valuing all voices	The Irish Association for Palliative Care work to hear and value the perspectives of all participants in order to ensure good palliative care policy and practice



# 1.6 Key Strategic Goals: September 2021 to December 2022

- 1. Grow and support the membership of the organisation by providing information, networking and education opportunities for members
- 2. Ensure the collective voice of the Irish Association for Palliative Care is represented on appropriate external bodies
- 3. Influence legislative and policy changes to further the aims of IAPC
- 4. Ensure good governance and build organisational capacity
- 4.A Implement and evaluate the Strategic Plan

### 1.7. Governance

The Governing Body of the Organisation is the Board of Directors, in accordance with the Companies Act 1963, and comprises:

- Ten elected membership members, "members" as outlined in the Constitution; of which there will be Four Officers.
- $\cdot$  The four Officers constitute the Officer Board and includes the Chairperson, the Vice- $\cdot$
- · Chairperson, the Honorary Secretary, and the Honorary Treasurer.
- · And up to five additional co-opted Directors
- The Board shall not exceed 15 Directors

The Board of Directors, take on the responsibilities of Governance in conjunction with the CEO, to continually interrogate and update policies and procedures in line with current legislation. To develop and maintain a strong and sustainable organisation the Board of Directors has to possess the capacity and willingness to use their expertise to assist the organisation in meeting its policy and operational functions.

The key role of the Board of IAPC is to provide efficient and effective leadership for the Organisation within a framework of practical controls. The Board performs three roles. It firstly provides strategic direction to IAPC based on listening to, understanding and representing the needs of the members and relevant stakeholders. Secondly it has specific oversight responsibilities in respect of executive functions and thirdly it self-regulates and evaluates to ensure the Board functions efficiently and effectively.

In 1995 the Committee on Standards in Public Life (The Nolan Committee) drew up seven principles of conduct. The principles which are now widely used in relation to the directors of charitable organisations are: Selflessness, Integrity, Objectivity, Accountability, Openness, Honesty, and Leadership (Nolan, 1995). These principles are the bedrock of excellent governance and should be practised to ensure the governance of IAPC is continually striving to achieve the pinnacle of success.



# 2. Chairperson's Report 2021/22

- Dr. Hannah Linane

I would like to welcome you all to the IAPC's 12th AGM. I would like to sincerely thank Dr. Mannix for sharing her presentation on "Tender Conversations". It has been a pleasure, as always, to hear her speak today.

I am delighted to be a part of such an exciting new period of development and growth for The Irish Association for Palliative Care. I was fortunate to be able to build on a foundation of strength, stability and good governance that had been fostered under the leadership of my predecessor, Dr. Coman Hennelly. I feel huge gratitude as chairperson that both myself and the association is supported by an excellent multidisciplinary board, CEO, administration assistant, our new communication and digital marketing officer, expanding fora and a growing and engaged membership.

I would like to give you an overview of the work which has been carried out by the Board and staff team since we last met at the 2021 AGM. I hope to give an insight into the growth which has taken place within the association, which will provide the platform for the next phase of our development. The report in full provides more in-depth detail on all of our activities.

### 2.1 Strategic Plan our Goals

# Goal 1. Grow and support the membership of the organisation by providing information, networking and education opportunities for members

Our education and research forum continues to thrive and was responsible for an excellent Education and Research Seminar in February 2022. I am very grateful to the forum including its former chair Fiona Woods. The forum board has recently changed and I wish the new chair Dr. Clare Kruger and her committee the very best in the ongoing stellar work.

We met our regulatory requirements by hosting the 2021 AGM in November. This event coincided with the IAPC Lecture Series, which was presented by Rev Joan Halifax. She made a beautiful and thought provoking presentation entitled "Edge States & Compassion in Care of the Dying" which was very well received.

The IAPC delivered six workshops throughout 2022 that were greatly supported by our membership. This area of work will continue into the next strategic plan 2022-25.



# Goal 2. Ensure the collective voice of the Irish Association for Palliative Care is represented on appropriate external bodies.

Collaborative work has taken place between the association and other stakeholders in the palliative care sphere and we hope to strengthen these links and collaborative projects going forward.

Our relationship with the AIIHPC was enhanced through collaboration on palliative care week and representation of the IAPC on the Children's Conference Organising Committee. AIIHPC also delivered a workshop as part of the Education and Research Seminar. Collaboration also took place for the remaining two workshops that followed our Seminar with The Irish Hospice Foundation and The Health Research Board. We plan to consolidate and expand our working relationships with others in the palliative care environment.

We are delighted to have a member of the board with joint membership of the Irish Palliative Medicine Consultants Association in Dr. Cliona Lorton.

We plan to engage with the relevant stakeholders in the HSE going forward.

#### Goal 3. Influence legislative and policy changes to further the aims of IAPC

The establishment and support of each of the following fora have been approved by the Board and have all received a governance handbook from the IAPC.

Education and Research Forum	IAPC continue to support the excellent work carried out by this forum. They plan and prepare the Seminar each year which supports our number 1 strategic goal.
Ethics Forum	The newly established ethics forum will play a pivotal role in the development of discussion papers, policy papers and submissions in response to ethical questions raised by Government, IAPC Board members or other sources.
Pharmacy Forum	The re-establishment of the Pharmacy forum in 2022 will strengthen our voice in terms of the delivery of palliative care treatments and legislation.
Nursing Forum	When the nursing forum is re-established and has a mandate this forum too will lead out on issues relating to nursing within the palliative care environment.

#### Goal 4. Ensure good governance and build organisational capacity

Goal 4.A Implement and evaluate the Strategic Plan



### 2.2 Governance

During my tenure we welcomed two new directors to the board at the last AGM in November 2021, Dr. John Allen, Locum Consultant Paediatrician in Palliative Medicine in Children's Health Ireland and Dr. Cliona Lorton, Consultant in Palliative Medicine in Our Lady's Hospice and Care Services, Wicklow. Their additions have brought a wealth of knowledge and experience to the board as well as strengthening our links with the paediatric palliative care services and Irish Palliative Consultants Association.

As part of the ongoing growth and development Jacinta Cuthbert was promoted to the role of Chief Executive Officer, this was a well-planned strategic decision by the Board to ensure the internal continuity of the IAPC.

Also during 2022 the Board successfully recruited a Communications and Digital Marketing Officer, Stephen Cogan. His work has enhanced our communications to membership through social media channels, email and newsletter and a renewed focus on the development of a new association website.

Cathy Herbert remains in the role of Accounts and Administration officer since her appointment in 2021. Cathy has also carried out her role to a very high level. I am delighted to report that the IAPC staff team have demonstrated their commitment and dedication to ensuring the strategic goals are delivered.

# 2.3 Implementation of IAPC Strategic Plan 2021 – 2022

In 2021 the Board together with the then General Manager, agreed that it was necessary to collectively examine our purpose and aims. Following a series of meetings with the board and an external facilitator, we produced a strategic plan from October 2021 to December 2022. Progress on implementation was regularly reviewed at board meetings and a plan for production of the next strategic plan is organised for December 2022. The review meeting in December will finalise the current Strategic Plan with a view to scrutinising our outputs and achievements against our goals.

We will then undertake a Strategic Planning phase, which will commence in January, with a view to developing a new Strategic Plan for three years to 2025.

During this presentation on the Annual Report 2022, you will hear how the CEO, Board and staff have implemented the strategic plan and will highlight how each of our goals have been achieved. We will not be presenting on all items within the Annual Report as we hope that you will read about the activities and the results that we achieved throughout the year and take pride in the support you have shown to the association.

I would like to thank the Board and staff of the IAPC for all the hard work and dedication to growing and developing the organisation over the last year. Without their commitment it would not have been possible. Thank you too, to the members who have shown their support to the Board in leading out the work of the strategic plan.



# 3. CEO Report 2021/22

#### – Jacinta Cuthbert

Welcome to our 12th AGM and Lecture Series. This is my 4th AGM with the IAPC and I am very proud to see the continued development of the association throughout that time. Our primary focus initially was to ensure the governance of the association and Board stability was to the fore and we achieved that in a short period of time. This work was time consuming but necessary to build the very solid foundations that has enabled us to move forward into the growth territory, which is where the association is placed now. No more looking back, only looking forward to bigger and better membership supports.

From 2021/2022 the focus of the organisation has been led by the Strategic Plan which was developed with the support of an external facilitator and was the result of combined review processes. The Strategic Plan enabled us to develop a definitive workplan that outlined our "tasks" and gave us goals to achieve. It also gave us the ability to benchmark our work and strive to meet all goals whether they were realistic and achievable or totally aspirational.

2022 brought the good and the bad. Unfortunately, we had unforeseen circumstances within our staff team which meant that some of our goals were not met or were perhaps partially met. For example, the website has not yet been developed, although we had December 2022 as a target, this just could not happen. We have however commenced the work of the website development and it is now at the procurement stage. We are committed to focussing on the delivery of a new and improved IAPC Website in early 2023. On the other hand we were one of 35% of applicants who were chosen to receive POBAL funding which will support our three part-time staff for the period of July 2022 to June 2025. This resulted in the IAPC doubling their major source of funding. This is a major achievement on behalf of the IAPC and secures our future for the next strategic plan phase.



The core principles of the previous strategic plan were Membership, Policy and Partnerships, underpinned by good governance and building organisational capacity. With the development of the new Strategic Plan in 2023 it will, I have no doubt, remain underpinned by those core areas of work.



I would like to thank you for your continued support and encouragement, that we as staff, receive on a very regular basis from you. It may be a quick email, or a follow on Twitter but it makes us feel part of the community and lets us see that our work is valued. We want to move onwards and upwards and with that high level of support, we will be able to achieve new heights and support you, in your work through our membership engagement strategy.



# 4. Secretary's Report 2021/2022

- Dr. Ciara McGrath

Goal 4. Ensure good governance and build organisational capacity

Goal 4.A Implement and evaluate the Strategic Plan

The Secretary who served from November 2021 is Dr. Ciara McGrath, and who will continue to serve through till November 2023 unless contested.

The Directors and Secretary had no interests in the share capital of the company at the beginning and end of the year.

In accordance with the Constitution, the Directors retire by rotation and, being eligible offer themselves for re-election.

It must be noted that a great thanks is due to all members of the Board for their huge contribution to the steady growth and development of the organisation.

### 4.1 Board Meetings:

The Board met five times during the financial year, with the sixth meeting to take place in December 2022. As agreed, as part of the strategic plan Sep 2021/Dec 2022 the Board by the year end will also have held two review meetings, conducted by an external facilitator. Theses review meetings are to assess and score our outputs by comparison to our goals. Due to accessibility it has been agreed that all meetings were held in a virtual capacity. The AGM is being held today 10th of November and will follow with a meeting of the new Board.

# 4.2 Review/Strategic Plan

As you are aware the IAPC underwent a strategic consultation and engaged an external facilitator to assist with this work. We will have met with the external facilitator three times by the end of 2022 to review our progress on the current strategic plan. We will also meet early in the new year to develop a new strategic plan for the coming three year period. In the previous Annual Report 2021 we announced that a new communications plan would be drawn up to drive the communications aspect of the IAPC. During this process it was agreed that the new communications plan would be developed as part of the strategic planning process. It was clear that there was sufficient communications and digital marketing goals to be achieved by the end of 2022.



# 4.3 Governance

All policies and procedures all fully up to date and have been maintained. The Charities Regulator has extended our deadline of October for submission of our yearly report. This was applied for on the basis of unforeseen staff leave, this will be attended to by the end of November as agreed with Charities Regulator.

There has been an amendment to the Staff Handbook which reflects the policy position of the IHF on bereavement leave.

# 4.4 Staffing

As previously mentioned the IAPC were one of the successful applicants for funding of the organisation through POBAL. The funding is granted for three years for three part-time employees. Only 35% of applications were successful so this is a major recognition of the work of the organisation to secure this funding stream.

#### 4.4.1 Staff of the IAPC 2021/2022

Ms. Jacinta Cuthbert, CEO Ms. Cathy Herbert, Accounts and Administration Officer Mr. Stephen Cogan, Communications & Digital Marketing Officer (joined in January 2022)



# 4.5 Members of the IAPC Board 2021/2022

**Dr. Hannah Linane,** Chair IAPC, Temple Street Children's Hospital, Dublin

**Ms. Bettina Korn,** Vice Chair IAPC, End-of-Life Care Coordinator, St. James's Hospital

**Dr. Ciara McGrath,** Secretary IAPC, Specialist registrar (SpR) in Palliative Medicine, Our Lady of Lourdes Hospital, Drogheda, Co. Louth

**Dr. Maria Walsh,** Treasurer IAPC, SpR in Palliative Medicine, University Hospital Waterford

#### Dr. Coman Hennelly,

Clinical Research Registrar in Palliative Medicine, Doctoral Candidate RCSI, Special Palliative Care Services NE at OLOLH RCSI Hospitals Group — resigning November 2022

**Ms. Julie Goss,** Advanced Nurse Practitioner, Our Lady's Hospice and Care Services, Dublin

#### Ms.Lasarina Maguire,

Staff Nurse, Irish Cancer Society, Dublin

#### Ms. Eimear O'Dwyer,

Chief Pharmacist, Our Lady's Hospice and Care Services, Dublin

#### Dr. Lauren Boland,

Senior Occupational Therapist, St Francis Hospice Dublin

#### Dr. Aidan McKiernan,

Principal Clinical Psychologist (Specialist), LauraLynn Children's Hospice, Adjunct Assistant Professor, School of Psychology UCD — resigning November 2022

#### Dr. Stacey Power Walsh,

Assistant Professor, University College Dublin.

#### Dr. Daniel Nuzum,

Board certified healthcare chaplain and a clinical pastoral education supervisor and educator at Marymount University Hospital and Hospice and at Cork University Hospital

#### Dr. Cliona Lorton,

Consultant in Palliative Medicine at Our Lady's Hospice & Care Services

#### Dr. John Allen,

Fellow in Paediatric Palliative Care, CHI at Crumlin

Following this AGM, Dr. Coman Hennelly and Dr. Aidan McKiernan will step down from the Board. I would like to thank them for their commitment and dedication for leading out on the implementation of the strategic plan.



# 5. Treasurers Report

Goal 4. Ensure good Governance and build organisational capacity

### 5.1 Financial Supports

Financial support, in addition to its membership subscriptions, is essential to the sustainability of the IAPC. The Association again acknowledges the funding it receives.

Health Service Executive (HSE) POBAL SSNO Carmichael training grant for Board Members Hospital Saturday Fund to support with Exordo for Education and Research Seminar 2022

# 5.2 Grant-Aid

The IAPC is funded and it's financial viability guaranteed by grant-aid.

We are also delighted to announce that the Irish Association for Palliative Care has been approved for POBAL funding for the next three years. Overall, we received 90% of the funding requested, with funding including three part-time staff members from July 2022 - June 2025.

POBAL grant aid is funded by a Scheme that is designed to Support National Organisations and is funded by the Government of Ireland through the Department of Rural and Community Development

The Health Service Executive (HSE) has continued to provide the IAPC with an untied operational grant in 2022. Its continued provision by HSE Primary Care and Services for Older Persons requires an annual assessment and reporting by the CEO and the Treasurer. The continuation of this grant is of critical importance in order to enable the ongoing work of the IAPC.

Hospital Saturday fund provided costs to contribute to the costs of the Exordo platform that the Education & Research Forum use while dealing with the abstract submissions.

The IAPC are very grateful for the ongoing and continued funding received through our funders.

You will note in the accounts that the expenditure has decreased, I would like to thank the IAPC staff for ensuring the continued fiscal efficiency of the association.



# 5.3 Reserves Policy

IAPC has set a reserves policy and account that requires reserves to be maintained at a level that ensures that the organization can continue to provide a stable and quality service and to cover unrestricted expenditure for a set period, as well as all contractual obligations and any other associated costs that would arise from the winding up of the organisation, in the event that this was necessary, and any large unexpected costs defending the charity's interests are factored into this policy.



# 6. Membership Events

**Goal 1.** Grow and support the membership of the organisation by providing information, networking and education opportunities for members

### 6.1 Lecture Series 2021

The IAPC Lecture Series has been developed to create a space for members of the organisation to become engaged with a renowned international speaker. Last year's speaker was invited to present as she has world and life experience in the field of end of life care. She made a beautiful and thought provoking presentation entitled "Edge States & Compassion in Care of the Dying" which was very well received. The presentation generated a very lively questions and answers sessions.

**Joan Halifax**, *Ph.D.* is a pioneer in the field of end-of-life care. She has lectured on the subject of death and dying at many academic institutions and medical centers around the world. She received a National Science Foundation Fellowship in Visual Anthropology, was an Honorary Research Fellow in Medical Ethnobotany at Harvard University, was a Distinguished Visiting Scholar at the Library of Congress, received an Honorary DSc from the Royal College of Surgeons in Ireland.



From 1972-1975, she worked with psychiatrist Stanislav Grof at the Maryland Psychiatric Research Center with dying cancer patients. She

has continued to work with dying people and their families, and to teach health care professionals and family caregivers the psycho-social, ethical and spiritual aspects of care of the dying. She is Director of the Project on Being with Dying, and Founder of the Upaya Prison Project that develops programs on meditation for prisoners. She is also founder of the Nomads Clinic in Nepal.

Her books include: The Human Encounter with Death (with Stanislav Grof); The Fruitful Darkness, A Journey Through Buddhist Practice; Simplicity in the Complex: A Buddhist Life in America; Being with Dying: Cultivating Compassion and Wisdom in the Presence of Death; and Standing at the Edge: Finding Freedom Where Fear and Courage Meet.

#### 6.1.1 Outputs:

This event was delivered virtually through Zoom, it was attended by over 50 attendees. The presentation was well received and instigated a lively questions and answers session, which Rev Halifax was delighted to engage in.



# 6.2 Education & Research Seminar 2022

The Education and Research Seminar was held virtually on Thursday the 3rd of February 2022.

#### 6.2.1 A word from the outgoing Chair

#### - Fiona Woods

The IAPC Education & Research Forum held its Annual Seminar in February 2022. This was the 21st Seminar and for the second-year running was held virtually. The Forum has 16 members and as Chair for the last two years, we have as a team faced new challenges, hosting a virtual seminar, and engaging with and maintaining a sense of connectedness with our Forum members. With these changes, we now have all our meetings virtually, this allows for geographical equity with members able to participate from home or their workplace and fully contribute to the Forum.

There were more than 75 abstracts received for the Annual Seminar with 12 chosen as platform presentations, they represented a wide range of areas from general to specialist and paediatric palliative care. The winner was Dr. Maria Walsh, with her presentation 'An Assessment of Perceived Symptom Burden in Patients Diagnosed with Congestive Cardiac Failure attending Out-Patient Cardiology services' and in collaboration with the team at the BMJ Supportive & Palliative Care journal, Dr. Maria Walsh will have the opportunity to have her work published. The winner of the Poster Prize was 'Not as simple as you think – QI Project on Discharge Opioid prescribing' by Dr. Thomas Cahill and a team from University Hospital Waterford.

The supporting workshops were also held virtually in February 2022 and were hosted by the HRB (Health Research Board), the IHF (Irish Hospice Foundation) and the AIIHPC (All Island Institute of Hospice and Palliative Care) and offered members insights into public engagement in research, using animation for qualitative research and the supports for early career researchers.

Looking to the future, we are planning to expand the scope of the Seminar and will include QI projects as a stream. A small working group are looking at criteria and the plans will be launched at the Seminar in 2023.

Finally, I would like to thank all the Forum members, the staff of the IAPC office and the Board of the IAPC for their support and commitment to promote palliative care education and research in Ireland.



#### 6.2.2 Members of Education and Research Forum 2021/2022

**Ms.Fiona Woods,** Chairperson IAPC, Head of Clinical Education, LauraLynn Ireland's Children's Hospice, Dublin.

**Dr. Claire Kruger,** Vice Chair IAPC, Registrar, Mater Hospital, Dublin

Dr. Hannah O'Brien, Secretary IAPC, Specialist Registrar, St. Luke's Hospital, Dublin

**Ms. Fiona Cahill,** *Clinical Specialist Physiotherapist, St Francis Hospice, Dublin.* 

**Dr. Stacey Power Walsh,** Assistant Professor, University College Dublin.

Ms. Julie Donohoe, Senior Occupational Therapist, St Francis Hospice, Dublin.

Mrs. Lucy McGettigan, Assistant Director of Nursing, Donegal Hospice Letterkenny, Co. Donegal.

**Ms. Una Molloy,** Candidate Advanced Nurse practitioner Community Palliative Care, St Francis Hospice.

**Dr. Daniel Kelly,** Palliative Registrar, St. Vincent's Dublin

**Mr. Niall Manktelow,** Chief Pharmacist, Galway Hospice Governed Services

Mr. Ray Elder, Strategic Lead Palliative Care, South Eastern Health and Social Care Trust, Belfast

**Dr. Felicity Hasson,** Senior Lecturer, Institute of Nursing and Health Research, School of Nursing

**Dr. Kyle Taheny,** Registrar, Mater Hospital, Dublin

Dr. Helena Daly, PhD, Dublin

**Dr. Mary Kennedy,** Palliative Care Registrar, Marymount University Hospital and Hospice



# 6.2.3 Programme for the day and platform presentations

8.30 - 9.30	Registration and Poster Viewing
9.30 - 9.45	<b>Opening and Welcome</b> Ms. Fiona Woods, Chairperson, Education and Research Forum
9.45 - 9.55	Presentation 1 · <b>Dr. Pauline Kane</b> Prevalence of Advance Care Plans and Emergency Department transfers for frail older adults in residential care facilities Q & A
9.55 - 10.05	Presentation 2 · <b>Dr. Elaine Deane</b> Malignant Spinal Cord Compression in a Regional Cancer Centre: 3 Audit Cycles over 12 Years Q & A
10.05 - 10.15	Presentation 3 · <b>Dr. Bernadette Hanley</b> Management of enteral feeding tubes in a specialist palliative care inpatient unit Q & A
10.15 - 10.25	Presentation 4 · <b>Dr. Niamh Lane</b> An Exploration of Occupational Therapists use of Outcome Measures in Palliative Care in Ireland Q & A
10.25 - 10.35	Presentation 5 · <b>Dr. Hannah O Brien</b> Perceived Palliative Care Educational Needs: A Qualitative Study of General Practitioner (GP) Trainees in Ireland Q & A
10.35 - 10.45	Presentation 6 · <b>Dr. Maria Walsh</b> An Assessment of Perceived Symptom Burden in Patients Diagnosed with Congestive Cardiac Failure attending Out-Patient Cardiology services Q & A
10.45 - 10.55	Presentation 7 · <b>Dr. Paula Denise Alexander</b> Bioethical issues in initiating technology dependence for children: clinicians' perspectives Q & A
10.55 -	Discussion - Questions and Answers
11.10	
11.10 -	Comfort break
11.45	Poster viewing
11.45 - 12.45	Plenary Speaker · <b>Professor Catherine Walshe,</b> Head of Department, Health Research, Lancaster University, UK Research publication and dissemination: Lessons from an Editor
12.45 -	Lunch Break
13.20	View Poster Presentations



13.20 -	Presentation 8 · Dr. Aoibheann Conneely
13.30	Estimation of palliative care needs of people experiencing homelessness using
	mortality data and cause of death
	Q & A
13.30 -	Presentation 9 · Dr. Martina O Reilly
13.40	Evaluating a Multidisciplinary teams (MDT) perceptions of the utility of
	Patient Care Outcomes Collaboration (PCOC).
	Q & A
13.40 -	Presentation 10 · <b>Dr. Mairèad Doherty</b>
13.50	The palliative care needs of patients with Multiple Sclerosis, Parkinson's Related
	Diseases and Motor Neurone Disease: a secondary analysis of the OPTCARE
	Neuro trial data.
	Q & A
13.50 -	Presentation 11 · Dr. Maria Walsh
14.00	An Observational Study of the Use of 48-hour Continuous Subcutaneous Infusions in a
	Community Specialist Palliative Care Setting
14.00 -	Presentation 12 · Dr. John Allen
14.10	The family impact of caring for children with severe neurological impairment
	Q & A
14.10 -	Discussion Questions and Answers
14.25	
14.25 -	Announcement of Poster Winners
14.30	Dr. Claire Kruger, Vice Chair, Education and Research Forum
14.30 -	Closing Remarks
14.45	Dr. Hannah Linane, Chair, IAPC
14.45- 15.	Announcement of Platform Presentation Winners
15	Professor Declan Walsh, Fellow Emeritus Trinity College Dublin, Editor-in-Chief BMJ
	Supportive and Palliative Care
	and Ms. Fiona Woods. Chairperson. Education & Research Forum



#### 6.2.4 Platform Presentation Winners

The winner of the Platform presentation was: **Dr. Maria Walsh,** co-authored with **Dr. Elizabeth Bowen**, **Prof. Carl Vaughan** and **Dr. Fiona Kiely**.

'An Assessment of Perceived Symptom Burden in Patients Diagnosed with Congestive Cardiac Failure attending Out-Patient Cardiology services'.

#### 6.2.5 Collaboration with BMJSPC

The IAPC presentation winner will be offered the opportunity to publish their work in BMJSPC as part of the prize award. This prestigious award is being offered for the first time to the presentation winners at the IAPC Education and Research Seminar, it will afford the winners the opportunity to have their research disseminated to a wider audience. Working jointly with Dr. Declan Walsh who became the Editor-in-Chief of the BMJ Palliative and Supportive Care in 2017 the winner will have their findings published. He has received the John Mendelsohn Award from MD Anderson Cancer Center and was a Visiting Fellow at Oxford University, UK. Other honors have included both the National Leadership and Visionary Awards from the American Academy of Hospice and Palliative Medicine and a lifetime achievement award from the Multinational Association for Supportive Care in Cancer. In 2017.

#### 6.2.6 Plenary Speaker

Prof. Catherine Walshe gave an overview of how to write and present an article for publication. Research publication and dissemination: Lessons from an Editor.

As this event is aimed at new and existing professionals in the Palliative Care environment. This presentation was very well received and highlighted the core principals of developing, writing and publishing in the research arena.

Professor Walshe's research expertise is in palliative and end of life care. Prof. Walshe has two main research interests: the way that palliative care is provided especially within primary and community care settings; and the experience of symptoms at the end of life. Current or recent projects include those examining the effectiveness of social action projects on quality of life at the end of life (2014-2016), peer mentors for those with advanced cancer (2015-2018), a trial of NAMASTE care (2016-2019) an evaluation of Cottage Hospice (2016-2019), evaluating an Age UK end-of-life care service (2017-19), evaluations of Macmillan Cancer Support services (2018-21), implementing care planning for people with dementia (2019-21), and the impact of COVID-19 on palliative care



(2020-2021) . I am also interested in research methods and dissemination, and edit the journal 'Palliative Medicine'.



### 6.2.7 Seminar Abstracts – Poster Presentations

No	Poster Title	Authors
	Clinical Audits	
1	Antimicrobial Stewardship in End-of-Life Care	Lannan, Reilly, Fleming, Waldron
2	Clinical Audit of Nurses' Perceptions of Conservative Care for Patients with Chronic Kidney Disease	Moffett, Kenny, Rooney
3	Evaluation of dexamethasone prescribing in a hospice inpatient unit	Taylor, Boyle, Stone
	Research Abstracts	
4	The Symptom Experience of Early Satiety: A Pilot Study	O'Donoghue, Barrett, Uí Dhuibhir Doyle, Walsh, Conlon
5	A Comparison of Palliative Care Outcomes Collaboration Assessment Completion: Inpatients and Homecare Patients	Mc Carthy, Kiely
6	A scoping review of the community palliative care key worker	Hasson, Betts, Shannon, Fee
7	Community palliative care Healthcare Assistant's involvement in advanced care planning discussions	Hasson, McGuinness
8	The Palliative Care Outcomes Collaboration (PCOC) audits in practice	Gregg, Mc Carthy, Cunningham, Lowney, Kiely
9	Retrospective analysis of methadone prescribed as analgesic for palliative care patients in an acute hospital setting	Hayes, Gaffney, Azhar, Beatty, Gantley, Waterson, Mannion, Waldron
10	Prevalence of oral symptoms in patients receiving palliative care in an acute hospital	Cassidy, Ryan, Logan, Dawood
11	"Home is where the heart is": Excellent team work to achieve End-of-Life wishes	Waterson, Bruten, Sui, Molony, Murphy, Reilly, Waldron
12	A Controlled Clinical Trial of the effects of Meditation on patient's Perceptions of their Quality of Life in an Acute Hospital setting:	McDonnell, Kennedy, Murphy, Mannion, Waldron
13	Patient satisfaction with Video Consultation in Community Palliative Care: interim results of a mixed methods study	Lee, Mc Carthy, Ryan, Kiely
14	"The glass coffin": Akathisia, an insidious yet reversible side effect of anti-emetics.	Murphy, Maher, Sheng Looi, Kennedy, Reilly, Hayes, Gorey, Waldron
15	Management of acute neurological symptoms at end of life in a hospice inpatient setting	Hayes, Healy, Joyce, Lynott, Wall, Brennock, Cran



No	Poster Title	Authors
16	A 'Point Prevalence' Pain Study over two days in three Dialysis units in the West of Ireland.	Gorey, Lappin, Murphy, Sheng Looi, Molony, Kennedy, Reilly, Mannion, Waldron
17	To assess if breakthrough opiate analgesic dose is appropriately calculated for palliative care patients in an acute hospital	Hayes, Stenson, Waldron
18	Analysis of methadone prescribing for pathological cough in palliative care patients in an acute hospital setting	Hayes, Azhar, Gaffney, Beatty, Mannion, Waldron
19	Making the case for enhanced integration between medicine for older persons and specialist palliative care services.	O'Reilly, Molloy, Kennelly, Ryan
20	Multidisciplinary quality improvement (QI) project: Improved management of diabetes in the last days of life	Hayes, Griffin, Reddington, Costello, Waterson, McEvoy, Mannion, Beatty, Waldron
21	Multidisciplinary Quality Improvement (QI) Project: discharge planning checklist for purpose of patient transfer from hospice to home	Hayes, Buckley, Wakefield, Quinn, Healy, Regan, McHale, Grimes, Wall, Lynott, Cran, Brennock
22	Quality improvement project: bereavement follow-up in an acute hospital during Covid-19 and beyond	Hayes, Beatty, Murphy, McKeown, Gaffney, Azhar, Macken, Burke, Mannion, Waldron
23	Transient episodes of expressive dysphasia and confusion precipitated minutes after administration of intravenous cyclizine: a case series	Hayes, Fahy, Maher, Stenson, Waterson, Mannion, Beatty, Waldron
24	Retrospective study of hospitalised COVID-19 patients receiving specialist palliative care during first and third waves	Malik, Swanton, Dennehy, O'Leary, Balding
25	Exploring the perceived challenges of insomnia in specialist inpatient palliative care units: a qualitative study.	Geoghegan, Linane, Swanton, Connaire, Cranfield, Ebrahem, Ryan, McAleer, McQuillan
26	Transitioning during End-of-Life Care from the Perspective of Informal Caregivers - A Scoping Review	McCarthy, Timmins, Connolly
27	Expanding treatment options for iron deficiency anaemia in the hospice setting - a quality improvement project.	Kennedy, Lee, Carmichael, Lowney
28	Recurrent syncope from cancerous parapharyngeal lesions: a case series	Howard



No	Poster Title	Authors
29	The use of subcutaneous devices in children requiring paediatric palliative care.	Jennings, Hurley, O Donoghue, Wadw
30	A case report of hyaluronidase in subcutaneous infusion site irritation	Cleary, O Gorman, Tipping
31	Not as simple as you think - QI Project on Discharge Opioid prescribing	Cahill, Kelly, Logan, Lumsden, Ni Laoire, Ryan
32	The integration of early specialist palliative care for patients with COPD and CHF	O Driscoll
33	Palliative Care Outcomes Collaboration (PCOC) – Embedding the Symptom Assessment Scale (SAS)	Coffey, O Reilly, Twomey, Lucey
34	A rare manifestation of Renal Cell Cancer	McSweeney, O Reilly. Salazar
35	Out of Hours Specialist Palliative Care Telephone Advice by Specialist Palliative Care Services in Ireland	Coffey, Twomey, O Reilly, Lucey, Callinan, Holmes, Coffey
36	Does DNAR mean 'Do Not Treat'- Exploring the impact of a DNAR order on patient care decisions in an Irish acute hospital	Cahill, Nolan, Cahill, Creedon
37	'The care circle consists of me.' Loneliness and social isolation for older spousal male care-givers. A qualitative study	Fee, McIlfatrick, Ryan
38	The sibling experience of living with a child with Severe Neurological Impairment	Allen, Hill, Brenner, Byrne, Mahony, McDonald, Molloy
39	A Steroid Inhaler for Hyoscine Patch Skin Reaction	O Mahony, O Leary
40	Specialist Palliative Care referrals in Stage IV Cancer: A Single Centre Review	Ni Nuallain, McQuillan, McAleer
41	Developing a Quality Improvement Project to Increase Use of HEEADSSS Psychosocial Assessment Tool Amongst Adolescents	Linnane, McElligott, Walsh, Fitzsimons
42	The Impact of COVID-19 on Inpatient and Community Palliative Care Services: Analysis of a Shifting Paradigm.	Coleman, Higgins
43	Evaluation of alfentanil conversion ratios in producing successful analgesic effects	Taylor, Stone
44	Psychosocial functioning in individuals with advanced oesophago-gastric cancer: A mixed-methods systematic review	Ghiglieri, Dempster, Graham- Wisener
45	Malignant psoas syndrome – associated complexities	Featherstone, Myles
46	Evaluation of Family Meeting Documentation in an Acute Hospital Setting	Bluett, Loggan, Walsh

#### **Case Studies**



No	Poster Title	Authors
47	Rotation of high dose alfentanil to oxycodone via continuous subcutaneous infusion: A case report	Featherstone, Myles
48	Two occasions when Hospital policy had to be overridden to use intravenous opioids.	Murphy, McDonnell, O Donoghue, Brassil, White, Mannion, Beatty, Waldron
49	Pain that is Opioid Responsive remains Opioid responsive: The role of Intrathecal Opioid Pumps.	Kennedy, Levins, O Rourke, Reilly, Murphy, O Shea, Murphy, Cran, Mannion, Waldron
50	Effective Management of Refractory Status Epilepticus at End of Life.	Hayes, Maher, Joyce, Waterson, Stenson, Beatty, Mannion, Waldron
51	The Presentation and Management of a Severe Cutaneous Adverse Drug Reaction to Sodium Valproate in a Hospice Setting	Taheny, O Sullivan, Roche, Colleran
52	Sixth Cranial Nerve palsy, a manageable problem to avoid severe 'sea sickness' secondary to diplopia.	O Shea, Waldron, Cran, Burke, Molony, Kennedy, Waldron
53	Knowledge of appropriate opioid prescribing amongst final year medical students.	Kelly
54	Intramedullary Spinal Cord Metastasis from Metastatic Melanoma presenting as an Acute Abdomen: A Case Report	Walsh, Hamid, Calvert, Ryan
55	Unusual Visualisation of OxyContin Ghost Tablets: a case report	Walsh, Hayes, Cooney, Jacob, Myles, Twomey
56	Spit it Out! Management of Mucus Morphology with Bethanechol: A Case Study.	Coleman, Davies



#### 6.2.8 Poster Presentation Winners

The winning poster presentation went to **Dr. Thomas Cahill, Dr. Lisa Kelly, Ms. Roisin Logan, Mr. David Lumsden, Dr. Áine ní Laoire** and **Dr. Suzanne Ryan.** 

'Not as simple as you think – QI Project on Discharge Opioid prescribing'.

#### 6.2.9 Highly Commended

A further three presentations were highly commended by the judges:

#### Dr. Hannah O'Brien

'Perceived Palliative Care Educational Needs: A Qualitative Study of General Practitioner (GP) Trainees in Ireland'

#### Dr. Aoibheann Conneely

'Estimation of palliative care needs of people experiencing homelessness using mortality data and cause of death'

#### Dr. Maria Walsh

'An Observational Study of the Use of 48-hour Continuous Subcutaneous Infusions in a Community Specialist Palliative Care Setting'



#### 6.2.10 Outputs:

#### **Attendees:**

A total of 115 people registered to attend the event, with over 100 logged on throughout the day at any one time. The virtual nature of the event allowed many attendees to effectively manage attendance at both work and the seminar and this was a key aspect of the feedback received, both formally and informally.

#### Feedback:

Feedback was gathered from participants on both a formal and informal basis. Formal feedback was gathered from paper surveys submitted via email and from electronic surveys completed on Microsoft Forms. Informal feedback was submitted in the Zoom chat box and given verbally.

#### Formal feedback:

An electronic survey of 15 questions was developed to gather feedback from attendees of the Education and Research Seminar.

Key Feedback Highlights:

**Overall Experience** 

- 30% of responses rated the overall experience of the event as 'excellent', with a further
   45% rating the event as 'very good'. The remaining responses rated the event as good, with only one 'fair response'.
- 61% of responses rated the plenary speaker Professor Catherine Walshe's presentation as 'excellent'. While a further 28% rated the speaker as 'very good'. Only one response rated the speaker as being 'fair'.

#### Informal feedback:

Informal feedback was overwhelmingly positive.

Overall Seminar:

- "Congratulations to all, very interesting and enjoyable day, well done"
- "Thanks for a very helpful and informative day. Well done to all the presenters"
- "Well done to everyone. The standard was extremely high. Congratulations Maria, Aoibheann and Hannah"
- "Congratulations! Great day excellent thought-provoking research and presentations"



### 6.2.11 A message from the incoming Chair

#### - Dr. Claire Kruger

It is a great privilege to be taking on the role of Chair of the Education and Research Forum this year. I first joined the forum in 2019 and its been such a great learning experience. The last two years we have managed to hold successful events despite the challenges of Covid and not being able to meet in person. I hope to carry on this success with this years forum. Currently we're looking to expand our focus on Quality Improvement projects and to keep organising workshops to help our members develop their research skills. I look forward to seeing you all at this year's seminar.



# 7. Collaborative Workshops:

# 7.1 Workshop Topic: Bringing the Public and Patient Voice to Your Research

10th February 2022

Chair:

#### **Ms.Fiona Cahill,** Clinical Specialist Physiotherapist, St Francis Hospice, Dublin. IAPC Forum

Presenters:

Health Research Board –

#### Dr. Aoife Cahill,

Programme Manager: Investigator-led grants and PPI, Research Strategy and Funding Directorate **Anne Cody**,

PhD, MSc Bus Practice, Head of Investigator-led Grants, Research Careers and Enablers

Dr. Aoife Cahill is Programme Manager for Investigator Led Research and Public, Patient and Carer Involvement (PPI) at the Health Research Board, Ireland. She holds a PhD in Molecular Biology and has held a variety of roles in research strategy and funding for almost 15 years. Her current portfolio includes management of a number of Investigator led projects and development and implementation of public, patient and carer involvement (PPI) initiatives in research. This includes managing the PPI Ignite Network Award, the HRB public review process, raising awareness of PPI and supporting researchers to build capacity and skills in PPI.



Anne Cody has a background in cell biology and spent ten years as a researcher in Germany and Ireland. She has been working with the Health Research Board in a variety of roles for almost 20 years. During this time, she has gained experience across all types of health research and funding instruments and worked with a wide group of stakeholders.

Anne is currently responsible for Investigator-led Grants, Research Careers and Enablers. She has been the driver behind the HRB's systems approach to Public, Patient and Carer Involvement (PPI) and is a Steering

Group member of the <u>Ensuring Value in Research Funders' Forum</u>. She has been actively involved in tackling unconscious bias, has initiated a number of transparency initiatives and represents the HRB on two international groups that provide thought leadership on research culture and responsible research assessment, respectively.





#### 7.1.1 Outputs:

Attendees: There were 20 participants who engaged with this workshop

Overall, the workshop addressing 'PPI' was received well by attendees, however, there was an attendee who felt that the "The level to be clearly outlined" for the workshop i.e., if it is aimed at beginners, intermediates, or experts.

50% of respondents rated the workshop as 'excellent', with a further 16% rating the workshop as '*very good*'. The following feedback outlines some of the positives regarding the workshop:

#### "What did you like about the workshop?"

- "Introduction to PPI"
- "Examples from research projects"
- "Engaging, not too technical, presenter was very methodical interesting, unusual topic".
- "Great engagement with the breakout rooms. Caused me to question how I should be conducting research and looking for ways to incorporate patient and public voice into the research design, analysis and dissemination".

Negative feedback in relation to the workshop was relating to the level the workshop was pitched at, with the following quote identifying the issue further.

- Basic level - more for novice researchers



# 7.2 Workshop Topic:

# Let's Get Animated: exploring the use of animation in translating qualitative research into meaningful and accessible public health outputs

17th February 2022

#### Chair:

#### Dr.Hannah O'Brien, Secretary IAPC, Specialist Registrar, St. Luke's Hospital, Dublin

#### Presenter:

Irish Hospice Foundation –

#### Dr. Helen Coughlan,

Special Projects and Research Manager, Honorary Clinical Lecturer, RCSI University of Medicine and Health Sciences

Dr. Helen Coughlan is an experienced clinician, advocate, researcher and project manager. A social worker by profession, Helen has worked for over twenty years across the health, education and NGO sectors. Her clinical work spans the fields of both mental health and palliative care. She also previously held a lectureship in social work with Trinity College Dublin. Prior to joining Irish Hospice Foundation in her role as Special Projects and Research Manager, Helen worked as a Clinical Research Fellow with the Department of Psychiatry, RCSI University of Medicine and Health Sciences. Helen's PhD research focused on early adversity and young people's mental health. She has a particular



interest in using creative ways to translate and disseminate research findings for public audiences. In 2019, she launched a series of mental health animations for young people based on findings from her own research. Helen is an established and internationally recognised youth mental health advocate. She was the lead writer of the International Declaration on Youth Mental Health and, in 2019, she was invited to contribute to a World Economic Forum project focused on developing of a global model for youth mental health service provision. In addition to her work with Irish Hospice Foundation, Helen is currently undertaking psychotherapy training with Turning Point Institute, Dublin.


### 7.2.1 Outputs:

#### Attendees: 21

The second of the IAPC workshops was like the first, very well received. Each respondent rated the workshop as 'excellent'. Each respondent also advised that they would be 'very likely' to recommend the workshop to a friend. This is a very important measure, as even when an individual rates a workshop as being 'excellent' it does not necessarily mean that they would rate it in a broader context to other professionals.

The following feedback further outlines the positives regarding the workshop:

### "What did you like about the workshop?"

- "Innovative. New ideas and way to share research findings Good that it was virtual easier to access".
- "Great presentation.
  Really engaging and thought-provoking workshop.
  Encouraged participants to think outside the box."

There was no negative or constructive criticism in relation to the workshop.



# 7.3 Workshop Topic:

# How AIIHPC supports early researchers in Palliative Care through Early Career Researcher Forum and Palliative Care Research Network.

24th February 2022

#### Chair:

#### Ms.Julie Donohoe, Senior Occupational Therapist, St Francis Hospice, Dublin

#### Presenters:

### Prof. Suzanne Guerin, University College Dublin and Vice Chair of PCRN Dr. Deborah Muldrew,

Ulster University and Chair of ECRF.

Suzanne is Professor of Research Design & Analysis and Head of School at the UCD School of Psychology (https://people.ucd.ie/suzanne.guerin). Her main research activity lies in the broad area of health services research, with a specific focus on palliative care and intellectual disability. She is particularly interested in collaborative research that meets the needs of service organisations and holds research roles in St. Michael's House Disability Services and LauraLynn Children's Hospice. Suzanne is a member and Vice Chair of the All Ireland Institute for Hospice and Palliative Care Palliative Care Research Network.

Deborah is a Research Associate at the Institute of Nursing and Health Research, Ulster University, and Research Fellow/Facilitator on the My Home Life NI Project. Deborah has a primary degree in psychology and completed her PhD in 2017 which considered the ethical issues experienced during palliative care provision in nursing homes. She has worked on postdoctoral projects focused on advance care planning and clinical education, and is currently supporting and advising on the development and submission of research grant applications. Deborah is the current chair for the AIIHPC Early Career Researcher Forum.





Dr. Deborah Muldrew, Ulster University Institute of Nursing and Health Research



### 7.3.1 Outputs:

#### Attendees: 18

Feedback for workshop number three was limited and only one respondent filled out the questionnaire. However, the format of the workshop was very engaging and took on an interview style with the participants to identify common issues in research and the journey to being a researcher. Informal feedback received on the day was very positive.

The one respondent who completed the survey rated the workshop as 'excellent' and stated they would be 'very likely' to recommend this workshop to a friend. The following feedback was also provided.

- Engaging conversation style.
  Enthusiastic. Knowledge sharing.
  Good to have the workshops virtual as easier to attend.
- Time good 4pm

There was no negative or constructive criticism in relation to the workshop.



# 7.4 Workshop Topic: European Association for Palliative Care: Membership, benefits and more

28th April 2022

Presenters:

**Prof. Sonja McIlfatrick,** Professor of Nursing and Palliative Care, Ulster University **Joanne Brennan,** Project Officer EAPC

Currently working as a Professor of Nursing in the Institute of Nursing and Health Research (INHR) in Ulster. One of the key aspects she enjoys about the work is that no two days are ever the same. So one minute I may be engaged in PhD supervision with students, and later I may be writing a paper for publication, writing a research grant application, teaching students, or hosting a workshop on strategic planning for research.



Overall I would describe my career path in nursing as flexible and extremely rewarding. Over the last fifteen years I have worked in an academic setting,

that has included three joint appointments. First of a Lectureship in Cancer Nursing, joint with the Cancer Centre in Belfast, then an Assistant Director of Nursing Research and Development/Reader with one of the Health Care Trusts in Northern Ireland and more recently as the Head of Research for the All Ireland Institute of Hospice and Palliative Care (AIIHPC). Each of these roles have been challenging and yet hugely rewarding. By undertaking such roles I have been enabled to develop skills in research leadership, developing collaborations and networks and overall strategic developments for research.

Education, advocacy and quality improvement have always been an important part of her work and she has extensive experience in these both in physiotherapy and also in end-of-life care. In 2007 she began working with the Irish Hospice Foundation (IHF) on their 'Hospice Friendly Hospitals' programme, an ambitious project which aimed to improve the delivery of end-of-life care in Ireland on a national scale. She has contributed to the development, design and delivery of the IHF's healthcare training programmes and continues to deliver education, training and support to staff throughout the country in hospitals and residential care settings. She is passionate about person-centred end-of-life care and her



aim through this work is to support healthcare staff to be confident and comfortable when communicating with patients and their loved ones, particularly in end-of-life situations.

Joanne joined the EAPC in April 2021. She is thankful for the opportunity to work with the EAPC head office team, Board and the many experts of the palliative care community who are part of the EAPC Task Force and Reference Groups.



### **EAPC Mission Statement**

The European Association for Palliative Care is a membership organisation dedicated to the promotion and development of palliative care throughout Europe.

### Mission:

To promote the development of high quality palliative care across the life span by fostering and sharing palliative care education, research, policy and evidence-based practice.

### **EAPC Vision:**

One voice, one vision: A world without preventable suffering where those with lifethreatening illnesses and their families have timely access to high quality palliative care as an integral part of the healthcare system.

### EAPC Core Values:

- Strive for excellence in palliative care
- Value interdisciplinary working and representation
- Respect diversity and promote inclusion
- Work collaboratively



### 7.4.1 Outputs:

Attendees: 19

#### Feedback:

**Overall, how would you rate the workshop?** Out of 5 respondents 2 (40%) excellent and 3 (60%) very good.

### How likely is it that you would recommend this workshop to a friend/colleague? 4 (80%) out of 5 respondents would be very likely to recommend the workshop to a friend

or colleague, with one respondent (20%) being somewhat likely to recommend.

#### What did you like about the workshop?

- "very informative and clear"
- "Detailed information re. benefits of EAPC"
- "time of the day, the short session compared to a full conference, topic was of interest to me and accessible even at the end of a long day...its free, knew about the EAPC - IAPC connection but not what's available with that"
- "information about the EAPC and benefits of membership"
- "broad information on EACP that was very Informative.; I was aware of EAPC membership option but hadn't looked into how to access that information re how to register. I think it would be good that this is given to people on joining and renewing with IAPC- maybe a flyer- maybe it is already!"

#### Were you aware that membership of the IAPC entitles you to free EAPC membership?

3 (60%) of 5 respondents were aware that membership of the IAPC entitles them to free EAPC membership. The remaining 40% were unaware of this as a benefit and suggested creating a flyer to inform members how to join. This has now been created and will be distributed to new and existing members.

### **Recommendations:**

There was no negative or constructive criticism of the event, however, attendees did outline that having some documentation on how to join the EAPC as an associate member would be beneficial for both new and existing members. A "how to guide" was developed and was emailed to members as well as distributed to membership via Twitter.



# 7.5 Workshop Topic: How to write a successful abstract

1st September 2022

Presenter:

#### **Dr. Mary Nevin**

Assistant Professor of Nursing and lecturer in the School of Nursing, Psychotherapy and Community Health in DCU

This workshop also marked the opening of the "Call for Abstracts" for the Education and Research Seminar 2023.

This workshop was designed to support the abstract launch for the 2023 IAPC Education & Research Forum, Dr. Mary Nevin, delivered a talk on 'How to write a successful abstract' to IAPC members. In line with the call for abstracts, which went out via email and Twitter, the webinar focused on creating and building a successful abstract which is a key priority in submissions to ensure a high level of quality, while also promoting early career researchers to submit.



### 7.5.1 Outputs:

Attendees: 21

#### Feedback:

**Overall, how would you rate the workshop?** Out of 7 respondents 6 (85%) excellent and 1 (15%) very good.

How would you rate the presenter? (85%) excellent and 1 (15%) very good.

### **Organisation of virtual event?** 6 (85%) excellent and 1 (15%) very good.

How did you find the overall experience of the virtual event? 6 (85%) excellent and 1 (15%) very good.

### Additional Comments

- "Very interesting presentation which is very relevant to my current practice
- "Great presentation and delivery"
- "Excellent introduction and recap of how to develop good abstracts with practical guidelines provided"
- "Great Session, well laid out and great to have clarity on consent for case studies"
- "I found the session really helpful. The speaker was excellent and gave a great overview to approaching abstracts both for researchers and assessors."



# 7.6 Workshop Topic: Let's talk LGBTQI+ inclusion and diversity in palliative care

13th September 2022

Presenter:

Bettina Korn, IAPC Vice Chair, LGBT Older Person's Champion and End of Life Co-ordinator, St James Hospital

Bettina Korn was elected onto the Board of the IAPC in 2018 where she currently serves as Vice Chair.

Bettina is employed by St James's Hospital, Dublin where she coordinates the Hospice Friendly Hospitals (HfH) Programme. The HfH is a national programme which aims to improve all aspects of end of life care in acute hospitals.



Having originally qualified as a nurse in Germany, Bettina moved to Ireland in 1996 and worked for 15 years as a Respiratory Clinical Nurse Specialist where she developed a strong interest in palliative care while working with patients with advanced non-malignant lung diseases. Her MSc in Nursing (TCD, 2009)

explored Family caregivers' experience of COPD end-of-life care in the home. Bettina was a lead investigator on the Survey of Bereaved Relatives: VOICES MaJam (2017) study.

The session outlined the historical context of the Irish LGBT movement, discuss the Health concerns & issues for people from the LGBT community, and provide signposting to resources and research in the field of palliative care and LGBTQI+ communities. Most importantly the webinar will provide an opportunity to discus and identify how individual practitioners and services can become more inclusive and welcoming to people from the LGBT community - patients, their families of choice and staff alike.



### 7.6.1 Outputs:

### Attendees: **30** on the day however 62 had registered

Overall, the webinar was extremely well received, while also generating a lot of interest from both members and non-members participants felt that there was merit in attending this type of membership event and commended both Bettina and the IAPC on the successful and thought-provoking event.

### Feedback:

### Overall, how would you rate the workshop?

Out of 14 respondents 11 (79%) excellent and 3 (21%) very good.

### *How likely is it that you would recommend this workshop to a friend/colleague?* Out of 14 respondents 100% would recommend this workshop to a friend/colleague

### Did you have issues logging into Zoom?

Out of 14 respondents 0 (100%) reported no issues with Zoom as a platform.

#### How did you hear about this workshop?

Out of 7 respondents 6 (85%) excellent and 1 (15%) very good.

### How did you hear about the event?

Interestingly, the IAPC, AIIHPC newsletters and referred by a colleague scored highest.

### What did you like about the workshop?

- Ease of access to online lecture series.
- So informative and practical. Real food for thought
- The overview was so informative and the personal stories really added to the workshop.
- Speaker knowledge, opportunity to ask questions and join the discussion. It was a smaller group which made it a bit more intimate.
- Hugely knowledgeable speaker and lots of learning
- So informative and well-presented and personal
- The uniqueness of the content implications of dementia in trans patients, etc.
- Informative, video's very powerful message
- Simple, raw, meaningful, useful, and really made me think.
- Balance of awareness and practical resources especially using people's real stories.
  Excellent session.
- Stories from real people, excellent resources
- Super informative and knowledgeable and engaging speaker
- Honesty of speakers



# 8. Communications Update

Grow and support the membership of the organisation by providing information, networking and education opportunities for members

### 8.1.1 Communications Report

Since January 2022, a Digital Marketing and Communications Officer has been employed within the IAPC.

The focus of this role has been two-fold. Firstly, to streamline communications with current members, keeping them informed and up-to-date with developments, events, workshops etc. within the IAPC. Secondly, the focus has been on building awareness of the IAPC and communicating with potential members. These activities are broadly carried out across three platforms, Twitter (social media), email and Mailchimp, campaign newsletter and events management.

### 8.1.2 Twitter

Twitter has played a key role in both communicating with current members, so as to promote workshops and events, while also communicating with potential members. Growth has been strong over the course of the year. The below graph illustrates growth in followers over a 3 month period, from August to November, with this trend holding through, over the course of the year. Other methods of analysis may be pursued.

From the time period of October to November there is particularly strong growth, which coincides with attendance at the Explortions: National Palliative Care Conference. 36 new followers were added after this event, which equates to approx. 1% growth over a short period. Our hope now is to translate that in new members.





### 8.1.3. Mailchimp

Mailchimp is a marketing automation platform and email marketing service that was implemented in June of this year. The goal of this implementation was to increase interaction and design of emails to members, ensuring the professional nature of the IAPC was reflected in communications with members. The platform also provides analytics that allows the IAPC to track engagement and tailor content to what our members want to see. An example of this process in action is provided below for the October 22 newsletter and the registration form for the AGM and associated Lecture Series.

- On average the IAPC newsletter is sent to approximately 258 recipients each month
- Successful deliveries 255 (98.8%)
- Total opens 157 (61.6%)

On average IAPC newsletters are opened by approximately 55.3% of members. This compares to an industry-standard in the non-profit sector of 42.3%. With this information and other analytics within the tool itself, we have been able to tailor our newsletter and other activities to suit our members and readers, providing valuable information for them.

As part of our recent newsletter and AGM campaign information was distributed to members on a Lecture Series being facilitated by Dr. Kathryn Mannix. This email was opened by 200 of our members, with 76 (38%) clicking on the registration link. This so far has resulted in 65 (20%) registering to attend the event. Using a tool such as this has ensured that signing up for events that are of intertest is extremely easy and quick for members, while also ensuring the IAPC can provide the types of events our members wish to see.

### 8.1.4 Outputs:

Overall the communications strategy continues to make progress in terms of streamlining communications with current members and reaching out to prospective members. The focus of the communications officer will be the new IAPC website, which is currently in the procurement stage.



### 8.1.5 IAPC Networking:

On the 12th of October Stephen (Digital Marketing & Communications Officer) and Lasarina Maguire (IAPC Board Member) attended the Explorations: National Palliative Care Conference in the Sligo Park Hotel. The IAPC had a stand at the back of the area on the day, along with a pull-up, containing details on the IAPC as well as 200 printed leaflets for interested members.

The following key points have been put together by Lasarina and Stephen, after a discussion of attendance at the event.

- The ground for a good day was set before the conference started when Dr. Feargal Twomey, Clinical Lead in Palliative Care approached the stand and spoke of a planned meeting between the IAPC Chair and CEO.
- Throughout the day we had a steady flow of callers to the stand from all disciplines and without question the education updates and seminars were a major talking point. The November lecture series being facilitated by Dr. Kathryn Mannix was a particular point of interest.
- The LGBTQI+ seminar run recently by the IAPC was also of interest to stand attendees.
- One talking point at the conference itself was discussion amongst nurses as to a lack of support both peer and otherwise in the area, and the potential reinvigoration of the IAPC nursing forum was another point of interest.
- There was also a further positive take-home message for the IAPC in response to a question querying where nurses can get support and the answer from the speaker's forum was the IAPC. This message was delivered by Rory Wilkinson, ANP at St. James Hospital

### 8.1.6 Outputs:

Overwhelmingly this was a positive event to have attended and brought some muchneeded and well-earned exposure to the IAPC. There appeared to be three main types of visitors to the stand.

- Some attendees had not heard of the IAPC and were not on the likes of Twitter etc, so attendance at these events was important from an exposure perspective.
- Some members had simply let their membership lapse, and this served as a reminder to renew.
- Some attendees had heard of us but were not members and we perhaps need to identify further ways of appealing to these potential members.



# 9. IAPC Fora

Goal 3. Influence legislative and policy changes to further the aims of IAPC

The IAPC Fora are designed to assist the Board and CEO in the future direction of the association. They are designed to develop positions/policy papers that are relevant to the palliative care environment and are there to support the Board in formulating strategic goals and to support the development of our influence on policy. These new/re-established fora will provide support and guidance to the Board on relevant topics. The Education and Research forum, through sheer hard work and diligence remained a staple in the IAPC work environment. Details are above under Education & Research Seminar.

### 9.1 Ethics Forum

We are delighted to establish the new ethics forum. This forum had its first meeting in September 2022 where the Chair, Vice Chair and Secretary were appointed. The second meeting took place on the 19th of October and will be closely followed by the next meeting on the 16th November 2022. The forum members met to jointly discuss the ethical issues which may arise in the palliative care environment. The Board of the IAPC need to be in a position to respond to issues on an informed basis and in a timely manner. The forum aims to:

- Identify and interpret the ethical questions raised by Government, IAPC Board members or other, in order to respond to and anticipate questions of significant concern.
- To investigate and report on such questions in the interests of promoting public and membership understanding of ethical issues.
- Through the Board to ensure that all IAPC members are fully informed of decisions, policy papers or submissions.

The newly established ethics forum will play a pivotal role in the development of discussion papers, policy papers submissions in response to ethical questions raised by Government, IAPC Board members or other sources.

This will build on the IAPCs previous influential work including its response to a call for submissions to the Joint Committee on Justice submissions on the Dying with Dignity Bill in Spring 2021 in which it reiterated its opposition to change in the current law and its opposition to the proposed bill.

In Autumn 2021 the IAPC prepared an organisational submission for the Department of Health on the Update to the Palliative Care Policy in Ireland for Adults and the association was involvement on EAPC Delphi Panels for Palliative Sedation and Standards and Norms in Palliative and Hospice Care.

Further strengthening collaborative links with stakeholders in palliative care development in Ireland will be essential to influencing policy and legislative change going forward.



### 9.1.2 Ethics Forum Member 2022/23

**Dr. Miriam Colleran,** Chair, Consultant Palliative Care, St. Brigid's Hospice, Co. Kildare

**Dr. Bernadette Brady,** Vice Chair, Consultant in Palliative Medicine in Our Lady's Hospice, Harold's Cross

**Ms. Una Molloy,** Secretary Clinical Nurse Specialist, St Francis Hospice

**Professor David Smith,** Ass Professor of Health Care Ethics and Director of the MSc in Health Care Ethics and Law in RCSI

**Mr. Niall Manktelow,** Chief Pharmacist, Galway Pharmacist

**Ms. Gillian Rufti,** End of Life Co-Ordinator, Nurse & Midwife, Beaumont Hospital, Dublin 9

**Ms. Elisabeth Koch,** Occupational Therapist, University Hospital Kerry

**Dr. Hannah Linane,** Chair IAPC, Fellow in Adolescent & Young adult palliative medicine

**Dr. Daniel Nuzum,** Healthcare Chaplain/Pastoral Care



# 9.2 Pharmacy Forum

The pharmacy forum has been re-established and we are delighted to be able to facilitate group discussions on pharmacy issues affecting pharmacists working in specialist palliative care in Ireland. The first meeting took place on the 8th of September 2022 and the second meeting will take place on the 23rd of November 2022. At the inaugural meeting a Chair, Vice Chair and Secretary were appointed and they will be responsible to develop the work programme for the coming year.

### 9.2.1 Pharmacy Forum members 2022/23

Ann Carmichael, Chair Marymount University Hospice

Claire Kavanagh Our Ladys Hospice

Eilin Grant Senior Pharmacist, Milford Care Centre

**Eimear O'Dwyer** Chief Pharmacist, Our Lady's Hospice

#### Eimear McGowan

Chief Pharmacist II, University Hospital Waterford

**Emma Stodart,** Secretary Secretary, Senior Pharmacist, Milford Care Centre

Karen McKee Galway Hospice

Maedbh Flannery Marymount University Hospital

Marie Wright Chief II Pharmacist, Milford Care Centre

Niall Manktelow, Vice Chair Chief II Pharmacist, Galway Hospice

#### Oisín Ó hAlmhain

Superintendent Pharmacist, St. Francis Hospice & Blanchardstown

Olivia Buckley Galway Hospice

 $\downarrow$ 

Irish Association For Palliative Care · A Collective Voice for Palliative Care in Ireland since



Pharmacy Forum members 2022/23 continued

Paula Reynolds Pharmacist, St. Francis Hospice

Ruth Keane Senior Pharmacist, University Hospital Kerry

**Sharon Byrne** Our Lady's Hospice

**Aoife Harrington** Senior Pharmacist, LauraLynn Ireland's Children's Hospice

### 9.3 Nursing Forum

The Nursing Forum are in the process of re-establishment and we hope to be able to support their first meeting later this year. While the first meeting has not yet taken place to appoint Chair, Vice Chair and Secretary the members leading out the development of this work are Ms. Bettina Korn, Ms. Lasarina Maguire, Ms. Julie Goss and Dr. Stacey Power Walsh.

# 10. IAPC Annual Accounts 2021:

Irish Association for Palliative Care

Directors' Report and Unaudited Financial Statements for the financial year ended 31 December 2021

Company Number: 475267



# Contents

	Page
Directors and Other Information	Х
Directors' Report	Х
Directors' Responsibilities Statement	Х
Accountants' Report	Х
Income and Expenditure Account	Х
Balance Sheet	Х
Reconciliation of Members' Funds	Х
Notes to the Financial Statements	Х
Supplementary Information on Income and Expenditure Account	Х
Irish Association for Palliative Care	Х



# **Directors And Other Information**

Directors	Coman Patrick Hennelly Bettina Korn Lasarina Maguire Eimear O'Dwyer Julie Goss Ciara McGrath Stacey Power Walsh Aidan McKiernan Hannah Linane Daniel Nuzum Maria Walsh Lauren Boland Stephen McDermott ( <i>Resigned 10 November 2021</i> ) Cliona Lorton ( <i>Appointed 10 November 2021</i> ) John Allen ( <i>Appointed 10 November 2021</i> )
Company Secretary	Ciara McGrath (Appointed 10 November 2021) Hannah Linane (Resigned 10 November 2021)
Company Number	475267
Charity Number	CHY 14939
Registered Office	Carmichael House 4 Brunswick Street North Dublin 7
Accountants	Kelliher Kelly & Co Chartered Accountant 129 Upper Main Street Castleisland Co. Kerry
Bankers	Bank of Ireland Smithfield Dublin 7



# **Directors' Report**

for the financial year ended 31 December 2021

The directors present their report and the unaudited financial statements for the financial year ended 31 December 2021.

### Principal Activity and Review of the Business

The principal activity of the company is to promote palliative care nationally and internationally through education, publication and representation on national and international bodies.

The organisation is a charitable company and is limited by guarantee not having a share capital. Consequently the liability of members is limited, subject to an undertaking by each member to contribute to the net assets or liabilities of the company on winding up such amounts as may be required not exceeding one Euro ( $\leq 1$ ).

The charity was established under a Memorandum of Association which established the objects and powers of the charitable company and is governed under its Articles of Association (or Constitution) and managed by its Board of Directors.

The charity has been granted charitable tax status under Sections 207 and 208 of the Taxes Consolidation Act 1997, Charity No CHY 14939 and is registered with the Charities Regulatory Authority.

There has been no significant change in these activities during the financial year ended 31 December 2021. The entity has secured grant funding for a period of three years commencing July 2019.

### **Financial Results**

The surplus for the financial year after providing for depreciation amounted to €17,518 (2020 - €19,763).

At the end of the financial year, the company has assets of €121,541 (2020 - €102,255) and liabilities of €6,533 (2020 - €4,765). The net assets of the company have increased by €17,518.



### **Directors and Secretary**

The directors who served throughout the financial year, except as noted, were as follows:

Coman Patrick Hennelly Bettina Korn Lasarina Maguire Eimear O'Dwyer Julie Goss Ciara McGrath Stacey Power Walsh Aidan McKiernan Hannah Linane Daniel Nuzum Maria Walsh Lauren Boland Stephen McDermott (Resigned 10 November 2021) Cliona Lorton (Appointed 10 November 2021) John Allen (Appointed 10 November 2021)

The secretaries who served during the financial year were:

**Ciara McGrath** (Appointed 10 November 2021) **Hannah Linane** (Resigned 10 November 2021)

The directors and secretary had no interests in the share capital of the company at the beginning and end of the year.

In accordance with the Constitution, the directors retire by rotation and, being eligible, offer themselves for reelection.

### **Future Developments**

The company plans to continue its present activities and is actively seeking out new sources of funding for the future. Employees are kept as fully informed as practicable about developments within the business.

### Post Balance Sheet Events

There have been no significant events affecting the company since the financial year-end.



### Accounting Records

To ensure that adequate accounting records are kept in accordance with sections 281 to 285 of the Companies Act 2014, the directors have employed appropriately qualified accounting personnel and have maintained appropriate computerised accounting systems. The accounting records are located at the company's office at Carmichael House, 4 Brunswick Street North, Dublin 7.

Signed on behalf of the board

Comen Hennelly

Coman Patrick Hennelly Director 1 July 2022

BULLING LOOK

Bettina Korn Director 1 July 2022



# Directors' Responsibilities Statement

for the financial year ended 31 December 2021

### General Responsibilities

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

Irish company law requires the directors to prepare 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 FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland", applying Section 1A of that Standard, issued by the Financial Reporting Council. 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 and of the surplus or deficit of the company for the 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 financial statements and then apply them consistently;
- make judgements 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 surplus or deficit 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. 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.



### Directors' declaration on unaudited financial statements

In relation to the financial statements which comprise the Income and Expenditure Account, the Balance Sheet, the Reconciliation of Members' Funds and notes:

The directors approve these financial statements and confirm that they are responsible for them, including selecting the appropriate accounting policies, applying them consistently and making, on a reasonable and prudent basis, the judgements underlying them. They have been prepared on the going concern basis on the grounds that the company will continue in business.

The directors confirm that they have made available to Kelliher Kelly & Co, (Chartered Accountant), all the company's accounting records and provided all the information, books and documents necessary for the compilation of the financial statements.

The directors confirm that to the best of their knowledge and belief, the accounting records reflect all the transactions of the company for the financial year ended 31 December 2021.

Signed on behalf of the board

Comen Hennelly

Coman Patrick Hennelly Director 1 July 2022

RUHING LOK

Bettina Korn Director 1 July 2022



# Chartered Accountant's Report

to the Board of Directors on the unaudited financial statements of Irish Association for Palliative Care for the financial year ended 31 December 2021

In accordance with my engagement letter and in order to assist you to fulfil your duties under the Companies Act 2014, I have prepared for your approval the financial statements of the company for the financial year ended 31 December 2021 which comprise the Income and Expenditure Account, the Balance Sheet, the Reconciliation of Members' Funds and notes from the company's accounting records and from information and explanations you have given to me.

This report is made solely to the Board of Directors of Irish Association for Palliative Care, as a body, in accordance with the terms of my engagement. My work has been undertaken solely to prepare for your approval the financial statements of Irish Association for Palliative Care and state those matters that I have agreed to state to the Board of Directors of Irish Association for Palliative Care, as a body, in this report in accordance with the guidance of Chartered Accountants Ireland. To the fullest extent permitted by law, I do not accept or assume responsibility to anyone other than Irish Association for Palliative Care and its Board of Directors, as a body, for my work or for this report.

I have carried out this engagement in accordance with guidance issued by Chartered Accountants Ireland and have complied with the ethical guidance laid down by Chartered Accountants Ireland relating to members undertaking the compilation of financial statements.

It is your duty to ensure that Irish Association for Palliative Care has kept adequate accounting records and to prepare statutory financial statements that give a true and fair view of the assets, liabilities, financial position and surplus of Irish Association for Palliative Care. You consider that Irish Association for Palliative Care is exempt from the statutory audit requirement for the financial year.

I have not been instructed to carry out an audit or a review of the financial statements of Irish Association for Palliative Care. For this reason, I have not verified the accuracy or completeness of the accounting records or information and explanations you have given to me and I do not, therefore, express any opinion on the statutory financial statements.

Kelliher Kelly & Co. Chartered Accountant 129 Upper Main Street Castleisland Co. Kerry

1 July 2022



# **Income and Expenditure Account** for the financial year ended 31 December 2021

		2021	2020
	Notes	€	€
Income Expenditure	5	90,928 (73,410)	98,894 (79,131)
<b>Surplus before tax</b> Tax on surplus		17,518 -	19,763
Surplus for the financial year		17,518	19,763
Total comprehensive income		17,518	19,763

The notes on pages XX to XX form part of the financial statements



# **Balance Sheet**

as at 31 December 2021

	Notes	2021 €	2020 €
Fixed Assets			
Tangible assets		8 1,298	940
Current Assets			
Receivables	9	3,861	11,111
Cash and cash equivalents		116,382	90,204
		120,243	101,315
Payables: amounts falling due within one year	10	(6,533)	(4,510)
Net Current Assets		113,710	96,805
<b>Total Assets less Current Liabilities</b> amounts falling due after more than one year		115,008	97,745 (255)
Net Assets		115,008	97,490
Reserves			
Income and expenditure account		115,008	97,490

115,008

97,490

The notes on pages XX to XX form part of the financial statements

**Members' Funds** 



# **Reconciliation of Members' Funds**

as at 31 December 2021

	Retained surplus €	Total €
At 1 January 2020	77,727	77,727
Surplus for the financial year	19,763	19,763
At 31 December 2020	97,490	97,490
Surplus for the financial year	17,518	17,518
At 31 December 2021	115,008	115,008

The financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies' regime and in accordance with FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland", applying Section 1A of that Standard.

We as Directors of Irish Association for Palliative Care, state that -

- (a) the company is availing itself of the exemption provided for by Chapter 15 of Part 6 of the Companies Act 2014,
- (b) the company is availing itself of the exemption on the grounds that the conditions specified in section 358 are satisfied,
- (c) the members of the company have not served a notice on the company under section 334(1) in accordance with section 334(2),
- (d) we acknowledge the company's obligations under the Companies Act 2014, to keep adequate accounting records and prepare financial statements which give a true and fair view of the assets, liabilities and financial position of the company at the end of its financial year and of its profit or loss for such a financial year and to otherwise comply with the provisions of the Companies Act 2014 relating to financial statements so far as they are applicable to the company.

Approved by the board on 1 July 2022 and signed on its behalf by:

Comen Hennelly

ing lok

Coman Patrick Hennelly Director

Bettina Korn DirectorIrish Association for Palliative Care

The notes on pages XX to XX form part of the financial statements



# Notes to The Financial Statements

for the financial year ended 31 December 2021

### 1. General Information

Irish Association for Palliative Care is a company limited by guarantee and is a public benefit entity incorporated in the Republic of Ireland. Carmichael House, 4 Brunswick Street North, Dublin 7 is the registered office, which is also the principal place of business of the company. The nature of the company's operations and its principal activities are set out in the Directors' Report. The financial statements have been presented in Euro ( $\in$ ) which is also the functional currency of the company.

### 2. Summary of Significant Accounting Policies

The following accounting policies have been applied consistently in dealing with items which are considered material in relation to the company's financial statements.

### Statement of compliance

The financial statements of the company for the year ended 31 December 2021 have been prepared in accordance with the provisions of FRS 102 Section 1A (Small Entities) and the Companies Act 2014.

### **Basis of preparation**

The financial statements have been prepared on the going concern basis and in accordance with the historical cost convention except for certain properties and financial instruments that are measured at revalued amounts or fair values, as explained in the accounting policies below. Historical cost is generally based on the fair value of the consideration given in exchange for assets. The financial reporting framework that has been applied in their preparation is the Companies Act 2014 and FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" Section 1A, issued by the Financial Reporting Council.

The company qualifies as a small company as defined by section 280A of the Companies Act 2014 in respect of the financial year, and has applied the rules of the 'Small Companies Regime' in accordance with section 280C of the Companies Act 2014 and Section 1A of FRS 102.



### Income

Income consists of donations and other funds generated by voluntary activities. These are included in the financial statements when received. Incoming resources have been included in the financial statements only when realised or when the ultimate cash realisation of which can be assessed with reasonable certainty.

### Tangible assets and depreciation

Tangible assets are stated at cost or at valuation, less accumulated depreciation. The charge to depreciation is calculated to write off the original cost or valuation of tangible assets, less their estimated residual value, over their expected useful lives as follows:

Fixtures, fittings and equipment - 12.5% Straight Line

The carrying values of tangible fixed assets are reviewed annually for impairment in periods if events or changes in circumstances indicate the carrying value may not be recoverable.

### Trade and other receivables

Trade and other receivables are initially recognised at fair value and thereafter stated at amortised cost using the effective interest method less impairment losses for bad and doubtful debts except where the effect of discounting would be immaterial. In such cases the receivables are stated at cost less impairment losses for bad and doubtful debts.

### **Borrowing costs**

Borrowing costs relating to the acquisition of assets are capitalised at the appropriate rate by adding them to the cost of assets being acquired. Investment income earned on the temporary investment of specific borrowings pending their expenditure on the assets is deducted from the borrowing costs eligible for capitalisation. All other borrowing costs are recognised in profit or loss in the period in which they are incurred.

### Trade and other payables

Trade and other payables are initially recognised at fair value and thereafter stated at amortised cost using the effective interest rate method, unless the effect of discounting would be immaterial, in which case they are stated at cost.

### **Employee benefits**

The company provides access to a a defined contribution PRSA pension scheme. The assets of the scheme are held separately from those of the company in an independently administered fund.



### Taxation

No charge to current or deferred taxation arises as the charity has been granted charitable status under Sections 207 and 208 of the Taxes Consolidation Act 1997, Charity No. CHY 14939. The charity is eligible under the 'Scheme of Tax Relief for Donations to Eligible Charities and Approved Bodies under Section 848A Taxes Consolidation Act, 1997' therefore income tax refunds arising from sponsorships exceeding €250 per annum are included in unrestricted funds. Irrecoverable value added tax is expended as incurred.

### Government grants

Capital grants received and receivable are treated as deferred income and amortised to the Income and Expenditure Account annually over the useful economic life of the asset to which it relates. Revenue grants are credited to the Income and Expenditure Account when received.

### Foreign currencies

Monetary assets and liabilities denominated in foreign currencies are translated at the rates of exchange ruling at the Balance Sheet date. Non-monetary items that are measured in terms of historical cost in a foreign currency are translated at the rates of exchange ruling at the date of the transaction. Non-monetary items that are measured at fair value in a foreign currency are translated using the exchange rates at the date when the fair value was determined. The resulting exchange differences are dealt with in the Income and Expenditure Account.

### 3. Departure from Companies Act 2014 Presentation

The directors have elected to present an Income and Expenditure Account instead of a Profit and Loss Account in these financial statements as this company is a not-forprofit entity.

### 4. Going concern

The directors have prepared a budget and cashflow projection for a period of twelve months from the date of approval of the financial statements which indicate that there is no material uncertainty regarding the company's ability to meet it's liabilities as they fall due, and to continue as a going concern. On that basis, the directors consider it appropriate to prepare the financial statements on the going concern basis.

Accordingly, these financial statements do not include any adjustments to the carrying amounts and classification of assets and liabilities that may arise if the company were unable to continue as a going concern.



### 5. Income

The income for the financial year is analysed as follows:

	2021	2020
	€	€
By Category:		
Membership Income	6,920	10,400
Education and Research Seminar	4,440	8,920
HSE Grant	23,482	23,482
Pobal Grant (Scheme to support National Organisations)	51,538	55,063
Other Grants	4,500	1,000
Other income	48	29
	90,928	98,894

Included in 'Pobal Grant' above is an amount granted by Pobal of €51,538 (2020:€55,063) received from an overall grant of €150,702 covering the period from 1st July 2019 to 30th June 2022. €50,234 of the grant was received during the year and €1,050 of this was receivable at the year end. The purpose of the grant is to support staffing costs for a programme manager, and to contribute to the indirect costs of running the organisation.

No employee falls within a payband of €60,000 upwards.

It is funded by the Department of Environment, Community and Local Government.

The company is fully tax compliant.

The whole of the company's income is attributable to its market in the Republic of Ireland and is derived from the principal activity of promoting palliative care nationally and internationally through education, publication and representation on national and international bodies.



# 6. Operating surplus 2021 2020

	€	€
Operating surplus is stated after charging:		
Depreciation of tangible assets	302	219

### 7. Employees

The average monthly number of employees, including directors, during the financial year was 2, (2020 - 2).

	2021 Number	2020 Number
Administration	2	2

### 8. Tangible assets

At 31 December 2020

	Fixtures, fittings and equipment	Total
Cost	€	€
At 1 January 2021 Additions	1,748 660	1,748 660
At 31 December 2021	2,408	2,408
Depreciation		
At 1 January 2021	808	808
Charge for the financial year	302	302
At 31 December 2021	1,110	1,110
Net book value		
At 31 December 2021	1,298	1,298

www.iapc.ie + Irish Association For Palliative Care + A Collective Voice for Palliative Care in Ireland since 1993

940

940



### 9. Receivables

	2021	2020
	€	€
Trade receivables	2,060	2,440
Other debtors	1,049	1,957
Prepayments	752	6,714
	3,861	11,111

### 10. Payables 2021 2020

Amounts falling due within one year

	€	€
Amounts owed to credit institutions	362	-
Trade payables	-	444
Taxation	3,926	2,693
Other creditors	780	-
Accruals	1,465	1,373
	6,533	4,510

### 11. Taxation 2021 2020

	€	€
Payables:		
PAYE	3,926	2,693

### 12. Status

The liability of the members is limited.

Every member of the company undertakes to contribute to the assets of the company in the event of its being wound up while they are members, or within one year thereafter, for the payment of the debts and liabilities of the company contracted before they ceased to be members, and of the costs, charges and expenses of winding up, and for the adjustment of the rights of the contributors among themselves, such amount as may be required, not exceeding  $\in$  1.



# 13. Capital commitments

The company had no material capital commitments at the financial year-ended 31 December 2021.

### 14. Post-Balance Sheet Events

There have been no significant events affecting the company since the financial year-end.



### Supplementary Information Relating to The Financial Statements

For the financial year ended 31 December 2021

### Detailed Income and Expenditure Account

For the financial year ended 31 December 2021

	2021	2020
	€	€
Income		
Membership	6,920	10,400
Education and Research Seminar	4,440	8,920
Grant - HSE	23,482	23,482
Pobal Grant	51,539	55,063
Other Grants	4,500	1,000
Interest Received	48	29
	90,928	98,894
Expenditure		
Wages and salaries	45,133	46,377
Social welfare costs	4,395	3,772
Annual Seminar(E & R Forum)	7,476	11,102
Rent payable	4,164	2,980
Insurance	891	790
Photocopying and Postage(General)	2,841	2,440
Stationery Office Supplies	1,309	2,348
Telephone	957	1,134
Computer Software	1,823	1,750
Recruitment Cost	90	-
Representation	910	-
Company Secretary/Consultants	938	3,332
Accountancy	1,373	1,351
Bank charges	413	695
Board Expenses	395	513
Subscriptions	-	328
Depreciation	302	219
	73,410	79,131

Net surplus 17,518 19,763

The supplementary information does not form part of the financial statements



Established in 1993 as an all-island body with the purpose of promoting palliative care nationally and internationally, the Irish Association for Palliative Care (IAPC) is a multidisciplinary membership nongovernment organisation. The intention of the founders was that IAPC would be identified

by its inclusiveness and would encompass the whole island of Ireland. The IAPC membership reflects the entire spectrum of all those who work in or have a professional interest in the provision of palliative care. This includes doctors, nurses, social workers, chaplains and pastoral carers, pharmacists, psychologists, physiotherapists, occupational therapists,

pastoral carers, pharmacists, psychologists, physiotherapists, occupational therapists, dietitians, as well as executive staff, academics and educators. Membership also includes clinicians and allied health professionals working in related areas such as geriatrics, oncology, psycho-oncology, paediatrics, and pain management.

The IAPC is organised around a number of working groups designed to create forums aimed at promoting best practice, professional development, research and learning in palliative care.education and research.

Irish Association for Palliative Care Carmichael House, 4 Brunswick Street North, Dublin 7 D07RHA8 TEL : 01 873 4735 FAX : 01 873 5737 EMAIL : info@iapc.ie WV