

The Nursing and Midwifery Contribution
to the HSE Spark Innovation Programme

Annual Report 2024



Innovation Programme



Oifig an Stiúrthóra Seirbhísí
Altranais & Cnáimhseachais

Office of the Nursing &
Midwifery Services Director



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TABLE OF CONTENTS

A Message from Dr Geraldine Shaw	2
Foreword from Jared Gormly	3
HSE Spark	4
Aims & Objectives, Pillars of the Spark Programme	5
2024 at a Glance	6
Nursing & Midwifery at a Glance	7
The ONMSD & HSE Spark Collaboration	8
Thank You to Champions of Innovation	10
The Nursing & Midwifery Innovation Fellowship	12
Spark Seed	14
Spark Impact	16
Meet a Midwifery Innovator	18
Productivity Boost	19
Spark Summit	22
Nursing & Midwifery Brightspark Awards 2024	24
Engagement	26
Professional Development	27
External Awards & Recognition	28
Evaluating Impact	29
The Year Ahead 2025	30
Nursing & Midwifery Innovator Awards 2024	31

A MESSAGE FROM DR GERALDINE SHAW

I am pleased to reflect on the continued collaboration between the Spark Programme and the Office of the Nursing and Midwifery Services Director (ONMSD) throughout 2024. This marks three years of ONMSD's support for the Nursing and Midwifery National Fellowship in Innovation, a dedicated programme designed to equip clinical nurses and midwives with the leadership and innovation skills needed to drive change and shape the evolution of the Spark Innovation Programme.



I would like to take this opportunity to acknowledge the contributions of the ONMSD Nursing and Midwifery Fellow, Catherine Marsh. Her leadership has been instrumental in increasing awareness and engagement with Spark among nurses and midwives, strengthening their role in frontline innovation. Notably, Catherine and the Sexual Assault Treatment Unit (SATU) team in The Rotunda Hospital Dublin were recognised with an Irish Healthcare Award for Best Nursing and Midwifery Project of the Year, a testament to the impact of the innovation for patients and staff in this important service. Her dedication and influence within the Spark programme have been truly commendable.

The Spark Innovation Programme continues to provide a vital place for nurses and midwives to share their ideas and expertise, in testing and introducing new approaches, that drive meaningful improvements in high-quality, person-centred care. The ONMSD collaboration with Spark remains an important initiative as we work to create more opportunities for nurses, midwives, and interdisciplinary teams to contribute their expertise, creativity, and passion to healthcare innovation.

This report highlights the real-world impact of this collaboration, demonstrating improvements in staff and patient experiences, with enhanced health outcomes, throughout nursing and midwifery practices. It also showcases outstanding examples of innovation, commitment, and excellence, reflecting the commitment of those who continue to develop and implement projects that make a lasting difference in healthcare delivery.

Congratulations and heartfelt thanks to everyone who has contributed to these achievements.

Dr Geraldine Shaw

Nursing & Midwifery Services Director and Nursing and Midwifery Advisor (Interim) to the HSE CEO
Office of the Nursing & Midwifery Services Director (ONMSD)
Office of the Chief Clinical Officer

FOREWORD FROM JARED GORMLY

It's a real pleasure to introduce the 2024 HSE Spark Nursing and Midwifery Innovation Report, which highlights the growing influence and impact of nurses and midwives in shaping healthcare through innovation. This year's report brings together just some of the many projects and ideas driven by frontline staff, evidence of what's possible when people are given the time, space, and support to think differently.



Now in its fifth year, our partnership with the Office of the Nursing and Midwifery Services Director (ONMSD) continues to go from strength to strength. Thanks to their support, more nurses and midwives than ever before are engaging with Spark. The reach of the programme has expanded significantly, and with it, so has the scale of ambition. We've seen a significant rise in applications, a major uplift in funding allocated to nursing and midwifery-led projects, and more award-winning initiatives coming directly from clinical practice.

The National Nursing & Midwifery Innovation Fellowship remains a vital part of this journey. In 2024, Ms. Catherine Marsh continued for a second year in the role, this brought continuity and energy to the Spark team, helping us design more inclusive processes, broaden our engagement, and ensure that frontline realities stay at the heart of the programme.

This year, we launched Productivity Boost—a new funding stream focused on improving efficiency and impact at the frontline. Nurses and midwives responded in force, submitting over 100 applications for nurse- and midwifery-led initiatives. This level of engagement reflects a growing appetite within the professions to lead meaningful change. We also saw continued momentum behind Spark Seed, which remains a vital entry point for clinical staff who are exploring innovation for the first time. Alongside this, Spark Connect has become a well-established and thriving community, where experiences, challenges, and ideas are shared across disciplines and services. This kind of cross-professional exchange is essential—not only for solving complex problems but for building a culture where innovation becomes part of how we deliver care every day.

Looking ahead, we're delighted that ONMSD has renewed its commitment to the Fellowship for 2024/25. This kind of continuity makes a real difference, giving us the stability to grow, improve, and support a wider range of voices in the innovation space.

As always, it's the stories in this report that speak loudest, the ideas sparked, the patients impacted, and the professionals who stepped up with courage and creativity. We're proud to support them and look forward to what comes next.

Jared Gormly

Head of HSE Spark





The HSE Spark Innovation Programme collaborates with the National Doctors Training and Planning programme, (NDTP), Office of Nursing and Midwifery Service Division (ONMSD) and the The National Health and Social Care Professions Office (NHSCPO) to support all clinical staff right across the health service in Innovation.

The programme recognises the unique insights and perspectives of Nurses and Midwives and is inspired by their ability to generate creative and novel solutions to the challenges that exist in individual settings and right across the health service.

HSE Spark believes that the best way to become active agents of change and to learn more about innovation is to engage in innovation activity through projects. To that end Spark Innovation offers a number of initiatives every year that allow Nurses and Midwives to engage in innovation activity in a meaningful and impactful manner. Through engagement with the programme's multiple initiatives, Nurses and Midwives can access funding, mentorship and professional development opportunities through Fellowships and innovation training.

SPARK TEAM 2024



Jared Gormly
Head of HSE Spark



Caitriona Heffernan
National Clinical
Innovation Lead



Dermot Burke
Programme Operations
Manager



Dr. Michelle Howard
Clinical Research Lead



Catherine Marsh
National Nursing & Midwifery
Innovation Fellow



Claire McElvanna
National HSCP
Innovation Fellow



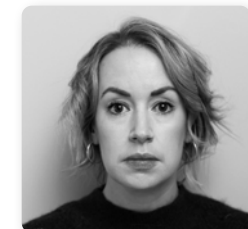
Muthu Thangaramajam
National HSCP
Innovation Fellow



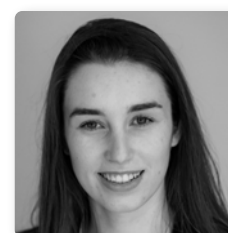
Dr. Eve Stanley
National NDTP
Innovation Fellow



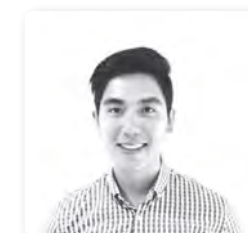
Dr. Alanna Allen
National NDTP
Innovation Fellow



Siobhan Power
National HSCP
Innovation Fellow



Dr. Emily Wallace
National NDTP
Innovation Fellow



Dr. Bobby Tang
National NDTP
Innovation Fellow

AIMS & OBJECTIVES

The aims and objectives of the HSE Spark Innovation Programme align closely with the HSE Corporate Plan 2021-2024, ensuring that activity receives strong support from the centre of the organisation.

1. ENGAGE & EMPOWER FRONTLINE STAFF

We seek to empower staff to deliver change, identify barriers and implement improvements for patients and service- users.*

- Promote and celebrate initiative, creativity and collaboration
- Create funding streams for staff-generated solutions to identified problems and opportunities
- Enable access to training in design and innovation methodologies
- Provide mentoring
- Share success stories

*HSE Corporate Plan 2021-24

2. CREATE A SUPPORTIVE ECOSYSTEM FOR HEALTH INNOVATORS

With a shared vision of improving patient and service-user experience, we will work together more effectively and overcome barriers that have made change more difficult in the past.*

- Create an innovation-friendly workplace
- Promote collaborative work practices
- Normalise innovation practices
- Promote the role of human-centred thinking in the health system
- Promote early engagement with emerging technology

3. DEVELOP SYSTEMATIC CAPABILITY

To create an 'innovation ready' environment, we will focus on creating education and training programmes. We will also provide opportunities for teamwork and collaboration across local and national networks.*

- Create an innovation-friendly workplace
- Promote collaborative work practices
- Normalise innovation practices
- Promote the role of human-centred thinking in the health system
- Promote early engagement with emerging technology

PILLARS OF THE SPARK PROGRAMME

In pursuit of our organisational aims and objectives, we have established a strategic framework built upon seven core pillars of activity. These pillars provide the solid foundation for our operations, guiding our efforts to maximise engagement, innovation and impact.



RESEARCH

Contributing to the body of research in the frontline innovation space both nationally and internationally.



INITIATIVES

Creating opportunities to develop skills, secure micro funding, access mentorship and embed innovation.



PIONEERING

Leading the way with new products, services and ways of working through pilots and validation studies.



ENGAGEMENT

Providing multimodal engagement opportunities for our innovation collective across the health service.



DESIGN

Implementing user informed change and innovation.



PROFESSIONAL DEVELOPMENT

Developing our staff for agency and impact.



NETWORK

Gathering and connecting our internal and external partners.

2024 AT A GLANCE

2,129

SPARK
PARTICIPANTS
IN 2024



550

NURSES &
MIDWIVES



562

HSCP



1,017

DOCTORS

270

PRODUCTIVITY BOOST
APPLICATIONS

240

CONSULTANT POCC
INNOVATION FUNDING
APPLICATIONS

48

SPARK SEED
PROJECTS SUPPORTED

47

PRODUCTIVITY BOOST
PROJECTS FUNDED

SPARK IMPACT '24
PROJECTS FUNDED

27

12

DESIGN SCHOLARSHIPS



SPARK SEED PITCH EVENTS

4



DESIGN THINKING
WORKSHOPS
ATTENDEES

419



PROFESSIONALS
COMPLETED
INNOVATION & DESIGN
COURSES

26



SPARK CONNECT
TOOLKITS SENT

100



BETTER HEALTH BY
DESIGN SYMPOSIUM

1



BRIGHT SPARK
NATIONAL
INNOVATION AWARDS

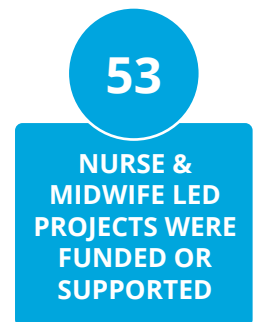
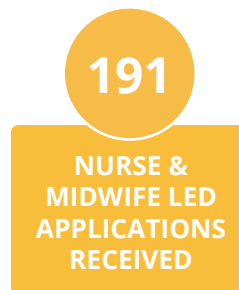
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SPARK SUMMIT
ATTENDEES

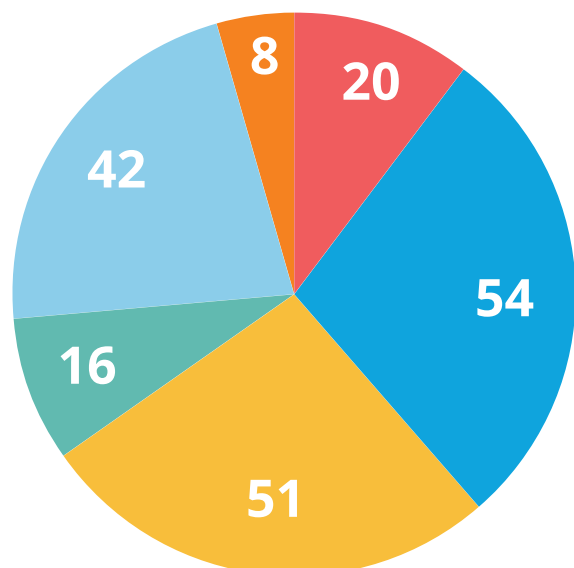
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NURSING & MIDWIFERY AT A GLANCE



BREAKDOWN OF 191 NURSING & MIDWIFERY LEAD INNOVATOR ROLES

- 20 Director of Nursing (DON) /Assistant Director of Nursing (ADON)/ Director of Midwifery (DOM)/Assistant Director of Midwifery (ADOM)
- 54 Clinical Nurse Managers 1,Clinical Nurse Manager 2,Clinical Nurse Manager 3,Clinical Midwife Manager
- 51 Clinical Nurse Specialist, Clinical Midwife Specialist, Clinical Skills Facilitators
- 16 Public Health Nurse
- 42 Advanced Midwife Practitioner/Advanced Nurse Practitioner
- 8 Staff Nurse/Midwife



THE ONMSD & HSE SPARK COLLABORATION

Now in its fifth year, the collaboration between the ONMSD and the HSE Spark Innovation Programme continues to grow and embed innovation across nursing and midwifery practice.

At the heart of this collaboration is a shared commitment to human centre design thinking in enabling frontline staff to lead, and implement change. Together the ONMSD and Spark team have created connections, networks and structures, empowering nurses and midwives to shape the design of care delivery.

In 2024, the focus of this collaboration has evolved from programme establishment to deepening strategic partnerships and delivering impact across services. This includes strong engagement with Advanced Nurse and Midwife Practitioners (ANPs and AMPs), senior nursing and midwifery leaders, and staff working directly with patients and communities.

At the centre of this work is the National Nursing & Midwifery Innovation Fellowship. This one year Nursing and Midwifery National Fellowship in Innovation gives a clinical nurse or midwife the opportunity to develop their innovation and leadership skills and shape the Spark Programme. The nursing and midwifery innovation fellow joins medical and health and social care professional fellows so that all professional groups are represented in the decision-making processes, and the support to and implementation of projects, making it truly interdisciplinary.



From left to right, Dr Geraldine Shaw, Catherine Marsh, Dr Maureen Flynn, and Rachel Kenna

Ms Catherine Marsh, Nursing & Midwifery Innovation Fellow for 23-24 applied and was successful for the 24-25 fellowship. The second year of the fellowship deepened the experiences of human centred design thinking, whilst also affording her developmental opportunities in leadership and mentorship for incoming fellows.

This year has also seen continued growth in support for innovation at local level. Catherine has offered practical support and mentorship to individuals and teams navigating the early stages of innovation, applying principles of human-centred design to co-create solutions rooted in real clinical need. Through this continued Fellowship and the collaborative structures behind it, ONMSD and HSE Spark are ensuring that innovation is not a one-time initiative, but a sustained, supported culture that empowers nurses and midwives to lead meaningful change.

By showcasing innovation at national events, hosting educational sessions, and providing hands-on guidance at local level, the ONMSD–Spark collaboration has helped to foster a more confident, connected culture of innovation.

The ONMSD's continued support in 2024 reflects its long-term commitment to embedding innovation across the health system, enabling sustained progress, visibility, and integration of this work at all levels.

MEET THE TEAM

Dr Maureen Flynn, Director of Nursing, QPS lead, (ONMSD Spark lead)



Margaret Quigley, National Lead for Midwifery, ONMSD



Dr Mary Nolan, Interim Director of Nursing and Midwifery Planning and Development, Midlands representing Directors of Nursing and Midwifery Planning and Development Units (NMPDUs)



Clare Mac Gabhann, Director of Nursing and Midwifery (Prescribing), ONMSD



Dr Aoife Lane, Leadership Advisor – National Clinical Leadership Centre for Nursing and Midwifery



Jared Gormly, Head of Spark Innovation



Kevin Mc Kenna, centre for Learning and Development, St James Hospital, representing Directors of Centres for Nursing and Midwifery Education (CNMEs)



Caitriona Heffernan, National Clinical Innovation Lead, HSE Spark



Ruth Hoban, Assistant Director of Nursing and Midwifery (Medicinal Product Prescribing) HSE West, Office of the Nursing and Midwifery Services Director



Catherine Marsh, National Nursing and Midwifery Innovation Fellow 2024/25



THANK YOU TO CHAMPIONS OF INNOVATION

This year, two important members of the ONMSD collaborative team retired. Margaret Quigley and Clare Mac Gabhann have been champions of innovation in nursing and midwifery.

They understand that meaningful transformation in healthcare happens through persistent, incremental shifts from within. Clare and Margaret give us their insights and perspectives.

Margaret's introduction to midwifery came from a maternity placement at the Rotunda Hospital during general nursing training. Inspired, she headed to the UK to train and during her 14 years there fell naturally into clinical management. She has also completed a postgraduate degree in midwifery and a master's in healthcare management.

When the opportunity to be National Lead in Midwifery came along, it seemed that Margaret's clinical, educational, and managerial stars had aligned to create the perfect role. She was ready for this more strategic, national direction and jumped at the chance to also get involved with the Spark collaboration.

Clare became involved in innovation when the ONMSD was exploring ways to highlight, showcase, and support nurses and midwives, who had become prescribers. She saw the value of networking, knowledge, and funding in moving projects forward. Joining the collaboration team was a natural fit for someone already so enthusiastic about supporting innovation.

"I wanted to enable nurses and midwives to showcase their achievements in areas like service delivery and continuum of care. It progressed from there... when the ONMSD collaboration started in 2019 I became a member."

Like Clare, Margaret found that conferences, posters, and presenting opportunities were a great way to share ideas and showcase the innovations brought in by colleagues.



From left to right, Margaret Quigley and Clare Mac Gabhann

Margaret Quigley, National Lead for Midwifery, ONMSD

Career path: Midwifery Tutor, Assistant Director of Midwifery, Directorate Nursing & Midwifery Manager, Director of Midwifery

Clare Mac Gabhann, Director of Nursing and Midwifery (Prescribing), ONMSD

Career path: Assistant Director of Nursing and Midwifery (HSE South), Interim Director

"Before Spark, tools and supports were limited. I pushed to get nurses involved in applications to Nursing and Midwifery Planning and Development Unit (NMPDU) funding. Once one or two projects were successfully embedded, people could see..... forward for both Spark and NMPDU support. One year, I had 16 projects worthy of a funding application."

It's often said that change is the only constant. Innovation can simply be the natural response to evolving patient needs or a more logical way to do things. Anyone, at any level, can drive innovation. Margaret underlines that everyone's opinion matters and that the ONMSD is committed to supporting anyone with an idea.

"Innovation – like leadership – has become an important word in professional practice. I thought Spark sounded interesting before, but it was only when I joined the collaboration team that I had a real understanding of its impact. So be open minded about Spark and get involved yourself."

Clare agrees. *"Many people are innovating, but we don't know about it because they haven't approached anyone. Once you ask, you see that they are doing remarkable things that have dramatically improved the safety, the experience, or the cost. They are making a difference, yet no one outside their service would even know about it."*

Margaret first learned the principles of service design and innovation via the plan, do, study, act (PDSA) model for continuous improvement. She remembers an RCPI initiative that involved progressing a multidisciplinary quality improvement project with doctors, midwives, porters, etc., and which cemented her enthusiasm for getting different staff working together.

Clare has also observed the value of collaboration. *"Innovation is accelerated through skills, education, and team work. It comes down to the dedication, commitment, understanding, and knowledge base of the people driving it. You have the opportunity to work as part of an innovation team as well as in your own clinical area."*

Nurses and midwives are innovative by nature but often the last to label themselves as trailblazers. As Clare underlines, innovation is seen as something people do in businesses, not healthcare. But focusing on the human impact of change is innovation, even if we aren't using the language of innovation when we talk about enhancing the experience of a patient or being more efficient.

"We most appreciate the importance of management support and protected time for innovation. Human resources as well as financial resources are essential. Other professions are more inclined to get involved with innovation; it should be systemic in nursing and midwifery

too – part of the role. The ONMSD continues to identify and articulate the opportunity for innovation and supports it at regional and group levels."

Margaret adds, *"Many projects are undertaken outside of clinical time because the human resources or funding to dedicate the time aren't there. Roles like specialists and advanced practice give people the opportunity to do innovation and be taken seriously when they bring ideas forward. These leadership roles are often enablers who will get other staff involved."*

Spark programmes teach the importance of bringing colleagues and patients into the process from the very beginning and of finding innovation champions within the organisation. It helps implement change more smoothly. But what other advice do Clare and Margaret have for future leaders organisation for co-design?

"Innovation is fantastic and necessary," says Clare, "but it's nothing without continuous showcasing and demonstration. We need people to see where the funding came from, its nothing without peoples passion, continuous showcasing, how it's being managed, who is behind it, and how it is being sustained. There is a wealth of skill, expertise, training, education, and development out there. We're embedding innovation from the start and collaboration will ensure we keep building on our ideas."

Margaret has a call to action for the next generation of leader and managers. *"If you're a leader, get involved in innovation yourself. Start to use the language of innovation and design thinking, and your teams will model that. Listen to ideas; don't let lack of time or fatigue or 'we've been here before' dampen your enthusiasm. With an innovation skillset comes a new way of doing things and a different outcome. Take a leap of faith, you'll only see the fruits of it."*

THE NURSING & MIDWIFERY INNOVATION FELLOWSHIP



Ms Catherine Marsh is the National Nursing and Midwifery Innovation Fellow for 24-25. This year 2 reflects both the remarkable contributions Catherine has made during her first year and the strategic value of continuing to grow the impact of the Fellowship across the healthcare system.

In her role, Catherine has represented the innovation of nurses and midwives nationally, contributing to programme development, leading education sessions, and supporting individuals and teams in bringing their ideas to life. Her lived clinical experience, coupled with her formal qualifications from a professional diploma in Service Design from the National College of Art and Design (NCAD) and Innovation in Healthcare from RCSI, continues to shape her unique and influential leadership style.

One of the most significant outcomes of Catherine's Fellowship has been her leadership on a project in the Sexual Assault Treatment Unit (SATU) at the Rotunda Hospital. Working in collaboration with the HSE Spark Innovation Programme and her colleagues in SATU, Catherine led the design and implementation of a new photo documentation system aimed at enhancing dignity, and improving how physical injuries are recorded and managed following a sexual assault.

In 2024, the initiative was awarded with the Irish Healthcare Award for Best Nursing and Midwifery Project of the Year, a proud and powerful acknowledgement of the potential for innovation to drive excellence in care. The project has been recognized not only for its clinical sensitivity and human centred design, but for its real-life impact on patient care.

This project stands as a flagship example of how the Fellowship can support real change, with frontline staff leading new approaches to complex challenges. It also recognised the strong and collaborative spirit between services like Rotunda Hospital SATU and national programmes like Spark Innovation.

Reflecting on her Fellowship, Catherine describes the role as transformative.

WHAT CHANGES HAVE YOU NOTICED IN YOURSELF PROFESSIONALLY SINCE STARTING THE FELLOWSHIP?

Since starting the Fellowship, I've noticed a real shift in my confidence and how I approach challenges. I've developed a broader understanding of innovation in healthcare and have become more strategic in my thinking. Professionally, I've grown into a leadership role where I can support others to explore and action their own ideas, which has been incredibly rewarding. I've also developed skills in human centred design and project management that I never imagined I'd have the opportunity to learn. Overall, the Fellowship has expanded my perspective beyond clinical care, helping me see the bigger picture and the real potential for nurses and midwives to lead meaningful change.

WHAT HAS BEEN YOUR GREATEST PERSONAL AND PROFESSIONAL ACHIEVEMENT DURING THE FELLOWSHIP?

My greatest personal and professional achievement during the Fellowship has been leading the design and rollout of an innovative photo documentation system for the SATU in the Rotunda Hospital. This project has been close to my heart for several years, and the Fellowship gave me the platform, support, and confidence to bring it to life. Collaborating with the Spark Innovation Programme and SATU teams, we implemented a simple solution that directly improves care for individuals following sexual assault, a space where dignity, accuracy, and sensitivity are absolutely essential. To see the project not only implemented, but also recognised nationally with the Irish Healthcare Award for Best Nursing and Midwifery Project of the Year 2024, has been an incredibly proud and humbling moment. It's proof of what can happen when clinical experience, compassion, and innovation come together.

ANY FINAL WORDS ON THE FELLOWSHIP EXPERIENCE FOR THOSE THINKING OF APPLYING NEXT YEAR?

The Fellowship has been one of the most enriching experiences of my career. It challenged me to think differently, step into new spaces, and develop skills I never thought I'd have the opportunity to learn, all while staying grounded in the values of nursing and midwifery. For anyone thinking of applying next year: go for it. If you're passionate about improving care, supporting your colleagues, and making a difference, this Fellowship gives you the opportunity to do just that. You don't need to have all the answers, just the drive to explore, lead, and learn. Innovation starts with seeing things differently, and this role gives you the chance to help shape a better future for patients and staff alike.



Throughout 2024, the Spark Seed initiative continued to play a key role as a key enabler of innovation among nurses, midwives, and wider frontline health and social care professionals. By offering micro-funding, structured design support, and access to innovation resources, Spark Seed empowers staff closest to care delivery to shape real, meaningful improvements within their services.

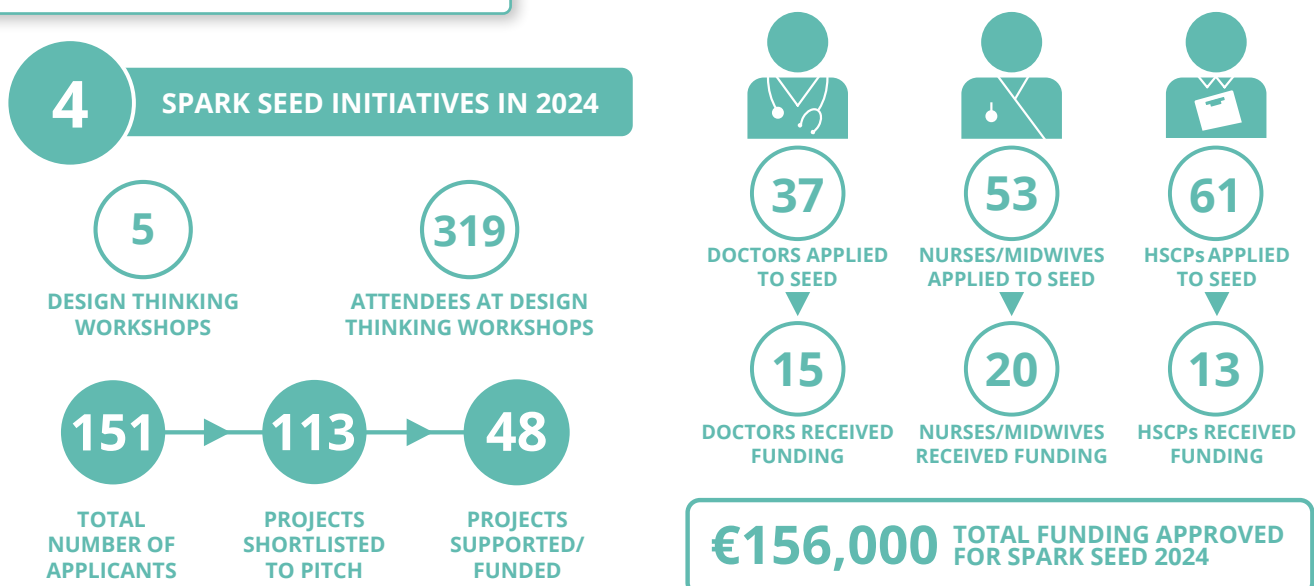
This initiative is embedded in the belief that those working at the front line are best placed to identify opportunities for change. It supports the development of small, practical innovations that lead to better patient outcomes, enhanced staff experiences, more efficient service delivery, and cost savings for the wider health system.

Spark Seed equips participants with the tools, confidence, and practical pathways needed to turn ideas into action. By fostering a culture of continuous improvement and creative problem-solving, the initiative ensures that innovation remains embedded at the heart of the healthcare system.

KEY FEATURES OF SPARK SEED 2024

- **Design Thinking Workshops:** All applicants are offered places on dedicated workshops that teach practical, human-centred design techniques. These sessions help frontline staff refine and shape their ideas into testable solutions.
- **Pitching Skills Development:** Participants learn how to communicate their innovation challenges and propose solutions clearly and compellingly, an essential skill for gaining support and endorsement within complex systems.
- **Digital Application Portal:** A newly enhanced online application system ensures Spark Seed is accessible year-round, closing only during shortlisting phases. This flexibility respects the busy, often unpredictable schedules of clinical staff.
- **Four National Pitching Events:** Shortlisted innovators present their ideas at four dedicated online pitching events held throughout the year. These sessions create momentum, visibility, and a clear roadmap for decision-making and support.
- **Individualised Feedback for Every Applicant:** All applicants receive individualised feedback, including signposting to other supports or networks within the HSE that align with their project themes or aims, ensuring no idea goes unheard.

SPARK SEED DATA 2024



SPARK SEED PROJECT EXAMPLES

RESPLINK FRIDGE MAGNETS

Hermi Lo, Respiratory Clinical Nurse Specialist, St. James's Hospital Respiratory Assessment Unit



THE PROBLEM: Patients with chronic respiratory conditions often struggle to access reliable health information, especially older individuals. Critical details about their medical condition, medications, self-management strategies are scattered across multiple sources, (i.e., internet, booklets, pamphlets, etc.) making it difficult to find and retain essential guidance. As a result, many patients rely on incomplete, or inaccurate information, impacting their ability to manage their health effectively.

THE SOLUTION: The RespLink Fridge magnet provides a simple, accessible solution by featuring a QR code that links directly to a curated online resource hub. Placed in a visible household location, it ensures that patients and their families can quickly and easily access trustworthy, up-to-date information about their lung condition (Asthma, COPD, ILD, etc.), oxygen therapy, inhaler techniques and more. This eliminates the need for searching multiple sources, holding on to easily-lost printed materials and the risk of misinformation.

THE IMPACT: By integrating digital health education into patient's daily environments, RespLink Fridge Magnets empowers them to take an active role in managing their condition. This leads to improved access to reliable information enhances adherence to treatment, reduces unnecessary hospital visits and supports better health outcomes. For healthcare providers, it serves as an efficient tool to reinforce patient education beyond clinical interactions.

CAN I STAY A LITTLE LONGER WITH MY BABY?

Nitu John, Clinical Nurse Manager 2: Special Care Baby Unit, Midlands Regional Hospital Portlaoise



THE PROBLEM: In neonatal units, confidentiality is critical—especially during ward rounds and clinical handovers. However, this often leads to parents being asked to leave the nursery while discussions about other babies take place. While well-intentioned, this practice causes distress and disconnection for parents, particularly when they are already navigating the emotional challenges of having a baby in special care. The inability to remain with their own baby during critical times not only affects their experience but also limits their involvement in care. It presents a conflict between upholding confidentiality and providing family-centred, compassionate care in sensitive and high-stress environments.

THE SOLUTION: To address this issue, the Special Care Baby Unit introduced high-quality, wireless noise-cancelling headphones that allow parents to remain physically present with their baby during ward rounds and clinical handovers. These specially designed headphones are completely soundproof and equipped with inbuilt radio technology. When another baby's care is being discussed, parents wear the headphones, effectively blocking out conversations

and ensuring the privacy of other families is respected. This practical, cost-effective solution supports both confidentiality and inclusivity, aligning with the unit's values of privacy, dignity, and keeping babies and their families together as much as possible.

THE IMPACT: This innovation significantly enhances the experience of families in the neonatal unit. Parents no longer need to leave their baby's side during sensitive care discussions, reducing anxiety and promoting bonding. The solution upholds confidentiality while supporting emotional wellbeing and family involvement in care. It also contributes to a more compassionate, family-centred culture within the unit, helping parents feel more included and respected. Staff report that it facilitates smoother ward rounds and improves communication. Overall, the use of noise-cancelling headphones offers a simple yet impactful improvement that aligns with best practices in neonatal care and supports core values of dignity and trust.

THE VIRTUAL REALITY SELF SOOTHE EXPERIENCE PICTURE

Ciaran Cuddihy, Practice Development Facilitator, Practice Development Unit (Mental Health), Merlin Park Hospital, Galway



THE PROBLEM: In inpatient mental health settings, conflict between staff and service users is a significant and recurring issue. Such conflicts can result in the use of restrictive practices like physical restraint or seclusion, which may cause physical and psychological harm. These interventions can damage therapeutic relationships and lead to mistrust, trauma, and emotional distress for both service users and staff. Staff may feel overwhelmed and fearful, while service users often experience these measures as punitive or frightening. Reducing the use of restrictive practices has become a priority, requiring innovative, person-centred approaches to help manage distress and support emotional regulation.

THE SOLUTION: To support the Safewards Model of Care already in place, the team has introduced the use of Virtual Reality (VR) as part of a self-soothing strategy. VR headsets allow service users to immerse themselves in calming, nature-based virtual environments using visual, audio, and even scent-based stimuli. This experience promotes relaxation and emotional regulation, particularly for individuals restricted from accessing the outdoors due to observation levels. By integrating VR technology into care plans, staff can offer a proactive, non-restrictive option to help de-escalate heightened emotions and foster self-management, ultimately reducing the need for containment or restrictive interventions.

THE IMPACT: The VR Self Soothe Experience empowers service users by giving them an effective, non-invasive tool to manage distress, anxiety, or agitation. This intervention supports recovery by encouraging autonomy and self-regulation, helping to maintain trust in the treating team. Staff also benefit, as it provides a safer, more therapeutic way to manage difficult situations, reducing the need for physical interventions. The innovation aligns with national goals to minimise restrictive practices, improve therapeutic relationships, and foster a more humane and recovery-oriented mental health environment. The intervention shows promise for broader rollout across mental health services as a scalable and patient-centred solution.



2024 saw the launch of the HSE Spark Innovation Programme's 'Spark Impact' Initiative. Spark Impact is a funding call designed to support all frontline social care professionals deliver innovative solutions to today's most pressing health and social care challenges. Spark Impact was developed as an amalgamation of previous Spark initiatives—the Hospital Innovation Fund and the Community Innovation Fund. This streamlining of initiatives reflects the ongoing transition of the broader health service to more integrated models of care.

Spark Impact 2024 focused on projects that aligned with critical health and social care priorities including, but not limited to; Preventative and Screening Services, Mental Health, Children's Health, Integrated Urgent and Emergency Care, Access to Care, Climate Change and Disability Services.

This funding call sought applications that proposed a novel solution to a clear unmet need in our health service. In addition, projects needed to demonstrate their potential to scale, spread, and deliver a return on investment. As part of Spark's support framework, successful projects received structured mentorship from our National Spark Innovation Fellows. These follow-up calls served as a platform to track progress, assess milestones, and address challenges in project implementation.

SPARK IMPACT DATA 2024

98

TOTAL APPLICATIONS

PROFESSION OF LEAD APPLICANT



HSCP (40.8%)

40



NURSE/MIDWIFE (26.5%)

26



CONSULTANT (20.4%)

20



NCHD (12.3%)

12

FUNDED PROJECTS

27

PROFESSION OF LEAD APPLICANT



12

DOCTORS (44.4%)



9

HSCP (33.3%)



6

NURSE/MIDWIFE (22.3%)

FIND THE VEIN TO EASE THE PAIN

Kathleen Greenough, Clinical Nurse Manager, Paediatric Outpatients, Women's and Children's Directorate, Letterkenny University Hospital



THE PROBLEM: Venous access is one of the most stressful and painful experiences for children in healthcare. Accessing veins in paediatric patients—especially infants, those with chronic conditions, obesity, malnutrition, oedema, or darker skin tones—can be extremely difficult. High DIVA (Difficult Intravenous Access) scores often lead to multiple failed attempts, heightened anxiety, and even postponed procedures. These failed attempts cause distress for the child and family, increase staff workload, and negatively affect service delivery. Repeat appointments are frequently required, leading to delays in diagnosis or treatment, extended waiting times, and the potential for long-term psychological effects such as needle phobia and treatment avoidance.

THE SOLUTION: The proposed solution is to introduce a vein finder device, supported by clear clinical protocols, to assist with venous access in children with a high DIVA score. This portable device uses near-infrared technology to help clinicians locate veins more easily and accurately, especially in challenging cases. Used in paediatric outpatients and the day ward, the vein finder will significantly reduce the number of failed attempts and eliminate the need for many children to return for further procedures. The project will include baseline data collection, ongoing measurement, and regular evaluation of outcomes to ensure clinical effectiveness, efficiency, and overall satisfaction.

THE IMPACT: Implementing a vein finder will lead to faster, more accurate venous access for children with high DIVA scores, reducing pain, anxiety, and the need for repeat appointments. It will enhance patient and family satisfaction, ease the burden on staff, and decrease clinic waiting times and waiting list pressures. The project will also collect robust data on first-time success rates, time spent in clinic, and satisfaction feedback from staff and families. Results will be compared at baseline and six months post-implementation. The approach is scalable and transferable to other departments, aligning with national paediatric nursing strategies and HSE service improvement goals.

"VIRTUALLY PAIN FREE." USING MOBILE PHONE BASED VIRTUAL REALITY FOR COMMUNITY BASED CHRONIC PAIN.

Anna Marie Kiernan, RANP Pain Management, Croom Orthopaedic Hospital, Limerick



THE PROBLEM: The prevalence of chronic pain in Ireland ranges from 20 to 40%. The experience of chronic pain imposes a significant emotional, psychological and financial burden on sufferers, their families and constitutes a huge financial burden on resources in the public health sector. The area of self-management has helped in addressing the impact of pain on patient's multidimensional experiences and supports achieving the best from treatments provided.

THE SOLUTION: This innovative idea involved the introduction of virtual reality as a treatment enhancement for patients prior to interventional injection to continue to 6 months post procedure. Patients access the Shine VR platform, a virtual reality platform which supports mindfulness and guided

imagery, on a VR headset in hospital. On discharge, patients can access an adapted version of the platform for 6 months on their mobile phone using a mobile phone mountable headset to give the exact same virtual reality experience.

THE IMPACT:

- Cost-saving in comparison with common over the counter analgesia
- Uses gaze technology with single button touch for access
- Fully GDPR compliant
- Supports the development of self-management skills for independent management of pain symptoms
- Potential to diffuse and scale project to other areas and fields of specialty.

DERMA DIARY

Lisa Joyce, Tissue Viability Clinical Nurse Specialist, and Alan MacFarlane, Designer, Mater Misericordiae University Hospital, Dublin



THE PROBLEM: Pressure ulcers (PUs) are preventable yet rising in prevalence both nationally and internationally. Accurate identification and staging are essential for timely intervention, but many staff lack practical training. Misclassification, especially in people with darker skin tones, leads to incorrect care, deterioration, extended hospital stays, and serious reportable events. Health Care Assistants (HCAs), who deliver the most direct patient care, are often excluded from training. Current classroom-based education lacks the tactile and visual fidelity needed to assess real-world wounds. These challenges result in underreporting, increased referrals to specialists, service strain, patient harm, and a significant financial burden on the health system.

THE SOLUTION: The "Pressure Relief" project proposes a high-fidelity educational toolkit co-designed with clinical educators, designers, and frontline staff. Building on the success of the "Sim-U-Skin" dermatology teaching aid, the team will develop 3D models of pressure ulcers at various stages, incorporating different skin tones and commonly misidentified conditions such as MASD. These models will offer tactile, realistic training for nurses, HCAs, and students across hospital and community settings. The toolkit will support hands-on learning, enabling earlier identification and accurate classification. The team is collaborating nationally to ensure scalability and alignment with Ireland's wound care improvement strategies.

THE IMPACT: This innovation will improve clinical outcomes by supporting earlier and more accurate pressure ulcer assessment, leading to prompt interventions and fewer complications. It will increase confidence and competence among nurses and HCAs, reduce the number of serious reportable events, and enhance documentation and reporting accuracy. Specialist nurse time will be freed up to focus on complex cases. The project will also reduce the need for expensive treatments, equipment, and extended hospital stays. Designed for scalability, the toolkit can be integrated into national nursing education and community training, strengthening workforce capability and improving safety and quality of care system-wide.



MEET A MIDWIFERY INNOVATOR

In the spirit of connecting, informing and inspiring frontline health and social care workers from across the system, the 'Interviews with Innovators' online event took place again this year in October 2024. The online event featured clinicians from across the HSE who shared their firsthand experiences of leading innovation on the frontline. Among them was a midwifery colleague, who highlighted her inspiring journey as an innovator on the day.

Una always knew she wanted to work in healthcare and had a strong interest in childbirth and women's health. Her love of labour and delivery surfaced as soon as she started her training at Our Lady of Lourdes Hospital, Drogheda, where she spent most of her time on the labour ward. Five years after qualifying as a midwife, a management opportunity came up in Co. Galway. Encouraged by her higher management team, Una applied for and was offered the role of Labour Ward Manager.

"It was a natural progression from midwife to management; it felt right. I've always been someone who rose to a challenge and took on leadership positions."

A happy coincidence brought Una to the Spark Innovation Programme, during a meeting where she was discussing some of the challenges faced in outpatient services. A colleague who had experience of the programme mentioned Spark. With a potential solution in mind - but not knowing what steps to take to deliver it - Una researched Spark and felt it was a good fit. After her application was successful, Una joined other innovators for a design thinking workshop.

"The workshop was great. It taught me how to be more forensic about the details. As clinical people, it's in our nature to see the end goal first, whereas working through the programme I learned to spend more time on the planning and design phases. Pacing yourself means you will have fewer problems along the way, also."

The problem Una looked to solve lay in the multicultural makeup of the patient base in the Galway regions presenting to maternity services. This included many women from countries like Syria or Ukraine who were at vulnerable time in their lives and spoke little or no English. Translation services were slow to respond or simply unavailable, meaning staff could not communicate adequately with the patients.

Una found a translation app that could be used instantly instead of needing a third person. The Spark workshop teaches innovators to think about all the possible outcomes, get other people involved in the solution, and find innovation champions to help keep the momentum going. Design thinking helped Una demonstrate the value of this innovation to her management team and get the green light. The result? Transformational.

"Overnight, we were able to communicate with a large cohort of women where previously we weren't. Everyone got behind the idea, which I'm so grateful for. You can't underestimate it, it was transformational."

An early direct experience of Una's solution in action came when a Syrian woman arrived by ambulance, alone, in the middle of the night. Her baby was on the way, and she was very afraid. Historically, Una would have had to wait an hour for an interpreter to arrive. But this time she conducted the entire birth using the app. After a safe delivery, the patient used the app to thank Una for having found this easy channel of communication.

"Without the design thinking training, I would have tackled this issue alone. As clinicians, we know that innovation is the key to moving forward with healthcare. It's how we'll overcome the challenges. We can't stay where we are, so we have to come together and look for solutions."

If you have an idea, take a chance with Spark! Before this project, Una felt she was at a crossroads in her career. She wasn't sure if she wanted to keep moving up the line management route or do something different. But after the programme, she knows she wants to focus on service design and development.

"As the one on the ground, you're the best person put ideas into action. Talk to your line manager, or the management above. Keep pushing, someone out there will listen and will help you bring your idea on. As an innovator, as a midwife, this experience has been so liberating for me. I'm so excited and I have a new passion for midwifery! As a manager, I'm now less obsessed with metrics and KPIs and more focused on listening to people's ideas and showing them optimism and support."



**Una Rogers, Clinical
Midwife Manager,
Community Midwife
Team, Galway
University Hospital**

PRODUCTIVITY BOOST

In August 2024, prompted by the call from central leadership within the HSE, Spark launched a brand-new funding call - The “Productivity Boost” initiative. Productivity Boost was designed to empower frontline health and social care teams to bring their ideas for improving efficiency, productivity, and innovation to life.

It provided a valuable opportunity for staff to lead meaningful change from within, building on their unique insights into the everyday workings of health and social care services. Though we recognised that most of the innovative ideas put forward by health and social care staff already yielded many benefits that could be linked to improved productivity, Spark welcomed the opportunity to once again showcase the ingenuity of the frontline in responding intelligently and impactfully to a call from leadership.

Through this initiative, staff across the HSE and HSE-funded services (Section 38) organisations were supported to design and implement projects that made real differences in how care was delivered—whether by introducing new ways of working, automating processes, testing advance practice models of care or streamlining services to better meet patient needs.

At the heart of the initiative was the Quadruple Aim framework, which shaped and guided the programme’s impact. This framework focuses on four essential goals:

- Enhancing the experience of patients
- Achieving better health outcomes
- Reducing the cost of care
- Supporting and improving the experience of health and social care providers

By aligning with these goals, applicants were able to propose initiatives that not only boosted productivity but also delivered meaningful, system-wide improvements. The Productivity Boost initiative created a space for innovation to thrive, placing frontline staff at the centre of change. It celebrated creativity, encouraged collaboration, and delivered real value for both patients and health and social care providers—laying the groundwork for a more effective, efficient, and responsive health service.

270

APPLICANTS TO
PRODUCTIVITY BOOST

PROJECTS FUNDED THROUGH
PRODUCTIVITY BOOST

47

14

NURSING & MIDWIFERY
PROJECTS FUNDED



PRODUCTIVITY BOOST PROJECT EXAMPLES

“DIGITALLY ENABLED PATIENT INITIATED REVIEW (PIR)”

Suzanne Marie Egan, Clinical Nurse Specialist Pancreas and Biliary Diseases. Department of Upper GI Surgery, Tallaght University Hospital, Dublin

THE PROBLEM: The current outpatient care model in many Irish hospitals, including TUH, is physician-driven with fixed-interval appointments that often don't match patients' actual needs. This leads to unnecessary visits for stable patients, long waits for those who need urgent care, high “Did-Not-Attend” (DNA) rates, and wasted resources. For chronic illnesses such as diabetes and chronic pancreatitis, this traditional model fails to support timely interventions and patient autonomy. Despite strong evidence for more flexible models, digital tools to facilitate this shift are underused. A scalable, patient-centred model using Patient Initiated Review (PIR) could revolutionise chronic care management across multiple conditions.

THE SOLUTION: The team successfully piloted a digital PIR system using the SmartCP app for patients with chronic pancreatitis. This app enables symptom tracking, critical alerts, and communication with healthcare professionals, empowering patients to initiate follow-up based on need rather than fixed schedules. With 124 active users, the app has already processed over 1,100 PROMs and 700 triage tasks. The project now aims to scale this digital PIR approach to other chronic diseases such as diabetes and respiratory illnesses, where objective health data can guide follow-up needs. By integrating with MyPatientSpace, the project will configure disease-specific templates and expand access to 1,000 patients.

INTENDED IMPACT: Expanding digital PIR will reduce waiting times, emergency attendances, and unnecessary reviews, while increasing patient engagement, satisfaction, and clinical efficiency. It allows clinicians to prioritise those most in need, improving outcomes and resource allocation. The model offers long-term cost savings through reduced hospital admissions, GP contacts, and administrative overheads. Staff experience and inter-professional collaboration are enhanced through streamlined workflows. Evaluation will include PROMs, avoided ED visits, admission metrics, and clinician feedback. This scalable model supports national goals around digital health, patient empowerment, and chronic disease management, and aligns directly with the 2024–2030 Digital for Care framework.

“FENO FOCUS – EMPOWERING ASTHMA CARE”

Anne Marie O'Shea. Advanced Nurse Practitioner, Adult Respiratory. Midland Regional Hospital Portlaoise

THE PROBLEM: Asthma management at Midland Regional Hospital Portlaoise faces several challenges. Currently, blood eosinophil levels are the primary biomarker used, which is invasive, slow, and relies heavily on laboratory services and paper-based records. This creates delays in diagnosis, missed treatment opportunities, and fragmented communication across services. Patients often need to be referred to tertiary centres for advanced asthma care, adding stress and travel. Paper records limit real-time clinical decision-making, data sharing, and quality improvement. These inefficiencies contribute to long patient journeys, repeat visits, increased admissions, and administrative burdens—highlighting the need for streamlined, patient-centred, point-of-care solutions like FeNO testing.

THE SOLUTION: The project introduces FeNO (Fractional exhaled Nitric Oxide) testing—an innovative, non-invasive biomarker tool for assessing asthma inflammation—into adult respiratory care at MRHP. It enables same-day, point-of-care testing, reducing reliance on blood tests and laboratory delays. Two FeNO devices will be deployed across Respiratory Consultant and ANP clinics, with full staff training included. Testing will be fully integrated into daily clinics, improving clinical decision-making, streamlining the patient journey, and personalising treatment. The staged rollout includes procurement, training, clinical integration, and auditing at 3, 6, and 12 months. FeNO will be a key tool in delivering Sláintecare-aligned, community-based asthma care.

INTENDED IMPACT: FeNO testing will reduce patient wait times, enhance care accuracy, and improve patient experience by offering faster, evidence-based treatment plans. For staff, it saves time, reduces administrative and lab workloads, and empowers clinical decision-making. The initiative supports Sláintecare goals of care closer to home, while aligning with the HSE's Digital Transformation Strategy. Clinical metrics—like admissions, flare rates, and adherence—will be monitored, along with patient satisfaction. The use of FeNO will likely reduce unnecessary hospital admissions, improve asthma control, and support sustained patient engagement. This innovation also fosters interdisciplinary collaboration, enhances audit capabilities, and creates a scalable model for chronic disease care.

“ENHANCING NENAGH HOSPITAL OPHTHALMOLOGY OPD EFFICIENCY THROUGH ADVANCED EQUIPMENT ACQUISITION”

Adebusola Adenike Owokole, Clinical Nurse Manager 2.Ophthalmology OPD, Lough Derg Suite, UL Hospital Nenagh

THE PROBLEM: Since the opening of the Ophthalmology OPD at UL Hospital Nenagh in July 2023, the unit has struggled with a shortage of critical equipment. This includes the lack of an electrolysis machine, slit lamps, appropriate lid sets, and a surgistool chair for intravitreal injections. As a result, patients face long delays for minor oculoplastic and ophthalmologic procedures, while staff experience inefficiencies and increased workloads. The limited resources impact clinical quality, lengthen waiting lists across the UL Hospital Group, and place unnecessary pressure on the ophthalmic theatre services at University Hospital Limerick. Immediate investment is needed to meet growing patient demand.

THE SOLUTION: The project proposes the purchase of essential ophthalmic equipment to enhance clinical capacity and care quality. This includes one electrolysis machine, one surgistool, one slit lamp, and eight lid instrument sets (four major, four minor). These tools will enable timely, safe, and effective delivery of eye procedures locally, decreasing reliance on overburdened tertiary facilities. Once funding is received, procurement will begin immediately, followed by staff training and operational integration. The initiative will allow more procedures to be completed within Nenagh Hospital, improving care accessibility for patients in the region while increasing the efficiency and autonomy of the local ophthalmology team.

INTENDED IMPACT: By acquiring advanced ophthalmic equipment, the project will improve workflow, reduce patient waiting times, and enhance clinical outcomes for eye care. Patients will benefit from receiving care closer to home, with reduced travel and appointment delays. Staff will experience increased efficiency, less administrative burden, and more time for direct patient care. Theatre demand at University Hospital Limerick will ease, allowing that site to focus on more complex cases. Additionally, the new equipment enables the UL Hospital Group to deliver more cost-effective, high-quality, and timely eye care—supporting wider system goals of optimised patient flow and resource use across the region.

“POINT OF CARE TESTING EQUIPMENT FOR WARFARIN CLINIC”

Deirdre Scanlon, Nurse Prescriber. Warfarin Clinic, Sligo University Hospital

THE PROBLEM: The warfarin clinic currently relies on lab-based INR testing to monitor anticoagulation levels, causing delays in care delivery. Frequent lab system outages have worsened this issue, with recent crashes delaying results by hours or even days. These delays pose serious risks to patients, including potential brain haemorrhage if levels are too high or stroke if too low. In addition, current processes are inefficient: results must be posted, books are often lost, and clinical actions are delayed. There is an urgent need for a more responsive, streamlined approach to ensure safe, timely treatment adjustments for patients on warfarin.

THE SOLUTION: Introducing point-of-care testing equipment at the warfarin clinic will allow instant INR results through a simple finger-prick test. This enables real-time dose adjustments, improving both safety and efficiency. Once trained (a 1–2 hour session by Roche), Deirdre Scanlon can implement the device immediately, maintaining lab testing as backup for select patients such as those with anti-phospholipid syndrome. By having results on the spot, patient consultations become more meaningful, responsive, and clinically accurate. Equipment includes a testing machine and consumable strips, enabling safer anticoagulation management and eliminating delays caused by lab processing or IT system outages.

INTENDED IMPACT: Point-of-care testing will transform the warfarin clinic by enhancing patient safety, reducing clinical risk, and increasing operational efficiency. Patients benefit from quicker consultations, fewer postal delays, and reduced anxiety about pending results. Clinicians can provide more accurate dosing decisions instantly, improving continuity of care. It also lowers costs by reducing postage, follow-up admin, and risk of adverse events. The approach aligns with best practice in anticoagulation management and ensures robust clinical governance. Deirdre's extensive experience and prescriber status strengthen the project's credibility. With quick implementation possible, this innovation will have an immediate and lasting impact on patient outcomes.

HSE Spark Summit 2024 welcomed hundreds of innovation enthusiasts from across the country to the historic setting of the Mansion House, Dublin. The Opening Address from Mr Bernard Gloster, CEO of the HSE, set a powerful tone for the day. In addition to presenting his annual CEO's Choice Innovation Award, Mr. Gloster announced a new bursary to recognise individuals and teams creating impactful change and innovation in the health service using existing resources.

We were delighted to welcome Mr Robert Watt, Secretary General at the Department of Health, who spoke candidly about the challenges of scaling innovation across the system and the transformative potential of system-wide change for patients. Adding to the policy perspective, Rachel Kenna, Chief Nursing Officer at the Department of Health, highlighted the essential role of nurses and midwives in shaping healthcare policy through innovation. Her remarks reinforced the importance of embedding frontline experience into national strategies and recognised nursing and midwifery leadership as critical to delivering sustainable, person-centred change.

As always, the highlight of the summit was hearing directly from passionate and inspirational health and social care professionals across the system. Frontline staff, including several outstanding nursing and midwifery-led initiatives, presented their clinically driven innovation projects, each one a testament to the creativity and commitment of those delivering care on the ground. It was a privilege to honour them through the Spark annual awards ceremony, recognising their invaluable contributions to improving care across the health service.



Left to right back row Claire McElvanna, Catherine Marsh, Mutu Kumaran Thangaramanujam, Siobhan Power, Dermot Burke. Front row, left to right Jared Gormly, Caitriona Heffernan, Dr Michelle Howard and Dr Emily Wallace.



BRIGHTSPARK AWARDS 2024

As we reflect on the activity of 2024, we celebrate the remarkable individuals from across our health service who have made significant contributions to their patients, their care settings and the organisation at large. The Brightspark Awards 2024 once again highlighted the extraordinary talent and dedication within our health and social care workforce in Ireland.

The annual Brightspark awards celebrate the innovative spirit and unwavering commitment of our staff, who continually strive to improve and transform our services. Each year, these awards recognise and honour the exceptional projects and individuals who have gone above and beyond to enhance patient care and service delivery. The awards not only celebrate the achievements of our staff but also inspire others to pursue excellence and innovation in their respective fields.

The 2024 Brightspark Awards have brought to light a diverse range of projects that address critical challenges in health and social care. From improving postnatal care and reducing hospital admissions for chronic conditions to enhancing patient safety and streamlining administrative processes, these projects demonstrate the profound impact of innovation on patient outcomes and health and social care efficiency.

Our award winners have shown that with determination, creativity, and a patient-centred approach, it is possible to make significant strides in health and social care. Their work exemplifies the core values of our organisation: human centredness, clinical excellence, and innovation. By recognising their achievements, we aim to foster a culture of continuous improvement and encourage all staff members to think creatively and collaboratively.

The Brightspark Awards also provide an opportunity to share best practices and successful initiatives across our organisation. By highlighting these exemplary projects, we hope to inspire others to adopt similar approaches and drive positive change in their own areas of work. The stories of our award winners serve as powerful reminders of what can be achieved when we work together towards a common goal.

We extend our heartfelt congratulations to all the winners and express our deepest appreciation for their contributions.



NURSING & MIDWIFERY BRIGHTSPARK AWARD WINNERS 2024

BEST EMPLOYEE FOCUSED AWARD

Great Minds Don't Think Alike: Pauline Chapman & Geraldine Crilly, Clinical Placement Coordinators – Limerick

This project developed training resources for preceptors to support neurodiversity nursing students during clinical placements. The initiative includes educational videos and aims to organise a national conference to expand collective knowledge and create neuroinclusive clinical environments.



NURSING AND MIDWIFERY AWARD

Muma Postnatal Hub: Amy Carroll, ADOM - St Luke's General Hospital, Kilkenny

The Muma Postnatal Hub aims to tackle the high levels of physical and mental postpartum morbidity through a structured, multidisciplinary support service for mothers, their babies, and partners. Developed using human-centred design, the hub incorporates user feedback to evolve continuously. It offers midwifery services seven days a week, providing early intervention for post-birth challenges via phone, social media, and physical contact such as assessments, feeding sessions, or coffee groups. The core hub in St Luke's General Hospital and its outreach clinics saw 110 mothers and provided 274 touchpoints in March 2023, significantly improving physical recovery outcomes through direct access to specialist women's health physiotherapists.



BEST DIGITAL PROJECT AWARD

CARE - Community and Acute Respiratory Excellence for COPD Patients in Donegal: Antoinette Doherty, ANP - CHO 1

The CARE project introduced a 20-bed Community Virtual Ward (CVW) with continuous respiratory rate monitoring, allowing COPD patients to self-manage their condition at home while receiving optimised care through a digital platform. This innovative solution integrates real-time monitoring, treatments, and patient education, leading to a 100% hospital avoidance rate and a significant reduction in costs per patient. Key improvements include a 29.1% increase in self-management, a 35.3% increase in understanding of COPD, and a 36% reduction in readmission rates.



BEST SERVICE IMPROVEMENT AWARD

Fast-Track Process for Maternity Registrations: Esme Denvir, Head of Patient Services - The Coombe Hospital, Dublin

The introduction of a web-based maternity registration form has streamlined the registration process, reducing manual tasks for staff and improving efficiency. In 2023, 98.8% of patients opted for the web-based form, leading to a marked reduction in turnaround time for appointments and improved patient data accuracy. This initiative has enhanced patient experience and operational efficiency within the hospital.



BEST USE OF INNOVATIVE TECHNOLOGY AWARD

Care Companion: Jackie Bryan & John Sheridan - Milford Care Centre

The Care Companion is a novel call bell system featuring a wide surface paddle sensitive to minimal contact by the patient, designed for patients with complex neurological disorders. Implementing the Care Companion in the palliative care setting has significantly improved patients' quality of life, providing a reliable means of calling for assistance and enhancing patient autonomy.



BEST HOSPITAL AVOIDANCE AWARD

Avoiding ED - ANP Chest Pain Assessment in the Community: Shirley Ingram, ANP, Tallaght University Hospital, Cardiology Nursing Department

The community chest pain clinic provides an alternative to ED visits for non-acute chest pain, reducing hospital strain and providing timely, specialist care. Over three years, the clinic has significantly reduced GP chest pain referrals to the ED and provided effective care management.



BEST PRODUCTIVITY AWARD

Redesigning the Nurse Assessment Form to Release Time to Care: Julie Grennell, Project Manager - Mater Misericordiae University Hospital

The redesign of the nursing assessment form has streamlined the documentation process, saving time and improving patient care. The new form is shorter, more intuitive, and easier to digitize, enhancing workflow and sustainability.

ENGAGEMENT

Each year, the HSE Spark Programme takes pride in expanding our network of engaged clinicians, building impactful partnerships, and informing both frontline staff and policymakers about our work. Our engagement efforts bring us across the country — both in person and online — as we present, host, and deliver keynotes at conferences, grand rounds, lectures, launches, and a range of other events.

In 2024, the National Nursing and Midwifery Fellow for Innovation participated in a number of key events, providing valuable opportunities to engage with clinical colleagues and senior leadership across the health service.



PROFESSIONAL DEVELOPMENT

HSE Spark's professional development offerings have evolved significantly over time, growing in both breadth and accessibility to meet the diverse needs of health and social care staff across the system.

From focused 'bootcamps' to online Design Thinking workshops and from education bursaries to immersive professional fellowships, Spark now offers a wide-ranging suite of skill development opportunities. These opportunities are designed to equip frontline staff at all levels with the knowledge, confidence, and tools to lead change—ensuring that innovation is not only encouraged but truly accessible to all.

NATIONAL INNOVATION FELLOWSHIP PROGRAMME

Each year, the HSE Spark Innovation Programme identifies and supports talented individuals from across the clinical disciplines represented by NDTP, ONMSD, and HSCP who share our commitment to advancing innovation at the frontline of health and social care in Ireland. The HSE Spark National Innovation Fellowship provides clinical staff already working within the health and social system with a unique opportunity to take part in an immersive, 'action learning' environment. Fellows gain hands-on experience in healthcare innovation while delivering a dynamic programme that empowers clinicians across the system to explore and engage in innovative practice.

The Fellowship Programme stands out in its delivery model, offering a structured yet flexible approach to professional development. Fellows follow a dedicated pathway that builds their capabilities in both health and social care innovation and leadership, equipping them with the tools to design and implement effective innovation programmes within the system.

This supportive and adaptive learning environment allows Fellows to align the programme with their own clinical interests and individual skillsets, ensuring that their contributions continue to shape and evolve the Fellowship year on year. Through this approach, Spark fosters a culture of continuous learning and innovation, driven by those who know the system best—its frontline staff.

EDUCATION BURSARIES

In 2024, HSE Spark Innovation Programme offered a number of bursaries to frontline health and social care professionals seeking to expand their skills in areas related to innovation. We experience huge interest in the bursary call, with over 130 applications. Twenty bursaries were awarded to frontline clinicians to undertake the micro-credential in Healthcare Innovation at the Royal College of Surgeons. Additionally, six bursaries were awarded to frontline health and social care professionals to undertake the professional diploma in Service design in National College of Art and Design.

We were proud to support this year's cohort, empowering professionals to deepen their understanding of this pivotal discipline. This investment not only strengthens individual professional development, but also contributes to improving the quality, accessibility, and patient experience of care across the system. Spark recognises the transformative potential of innovation and Human-Centred Design and remains committed to enabling access for dedicated health and social care staff to learn, grow, and lead meaningful change.

EXTERNAL AWARDS & RECOGNITION 2024

2024 proved to be another successful year for health and social care teams and Designers engaged with the HSE Spark Programme. We are always delighted to see the hard work of our engaged community being recognised inside and outside of the health and social care organisation. We are privileged to support Clinicians, Designers and Healthcare Innovation Leaders to address complex challenges in their day to day work. Their far reaching acknowledgement and recognition is a testament to the impact they are having on patients and staff across the health service in Ireland. This year the HSE Spark Programme was also acknowledged for the contribution it makes to engagement and education of frontline health and social care teams with Spark shortlisting for a prestigious award at the Irish Healthcare Awards.

IRISH HEALTHCARE AWARDS 2024

The HSE Spark Innovation Programme was honoured to be shortlisted for three prestigious awards at the Irish Healthcare Awards 2024:



Best Nursing & Midwifery Project of the Year (Winner): Nurse-Led Integrating Forensic Photography into SATU Services to Enhance Patient Care, Sexual Assault Treatment Unit, Rotunda Hospital & HSE Spark Innovation Programme

We are thrilled to announce that the Sexual Assault Treatment Unit (SATU) at the Rotunda Hospital, in collaboration with the HSE Spark Innovation Programme, won the award for Best Nursing & Midwifery Project of the Year. The project, led by Spark National Nursing & Midwifery Innovation Fellow for Innovation Catherine Marsh, integrates forensic photography into SATU services to reduce patient stress, shorten visit lengths, and provide trauma-informed care. This innovation aims to minimise interactions during a crisis and lessen the burden on other agencies.

Catherine's dedication has significantly advanced healthcare practices, earning her well-deserved recognition.

Innovation in Healthcare and Medicine (shortlisted): Muma Postnatal Hub, St. Luke's General Hospital, Kilkenny & HSE Spark Innovation Programme

Commenced in November 2023, the Muma Postnatal Hub is a groundbreaking multidisciplinary support service for new mothers and their partners. Using a human-centred design approach, the hub aims to tackle physical and mental health challenges through early intervention and access to specialists in midwifery and women's health physiotherapy. The hub provides access to midwives via mobile phone and social media, as well as in-person support such as clinical assessments, listening sessions, feeding support, and peer support. Key features include the Muma Menu booklet, Instagram page, drop-in appointments, peer support groups, and weekend services. The initiative has shown significant improvements in patient care and service efficiency, with high engagement and positive feedback from users.



In 2024, the HSE Spark Innovation Programme continued to play a vital role in empowering the nursing and midwifery professions to lead innovation within the Irish health system. The programme's growing reach, funding, and recognition are driving tangible improvements in patient care, professional development, and system-wide transformation. The following sections outline key impact areas, with a particular focus on the expanding footprint of nursing and midwifery-led innovation.

IMPACT AREA 1: Growing Visibility

Throughout 2024, visibility of the Spark Programme continued to grow, particularly among senior health system leaders. Nursing and midwifery-led innovations were prominently featured at national events, including the Spark Summit, where several nurses and midwives received Innovation Awards for their outstanding contributions to service transformation. These recognitions have reinforced the role of nursing and midwifery in delivering frontline innovation and have further embedded Spark into the strategic conversation around health service reform.

IMPACT AREA 2: Growing Investment

2024 saw a notable rise in applications from nurses and midwives to Spark Seed, Spark Impact and Spark productivity boost call, reflecting increased engagement with innovation opportunities. In response, funding allocated to nursing and midwifery-led projects increased by over 272% in 2024 compared to the previous year €850,090.84 in 2024 compared to €228,300 in 2023), enabling more projects to move from concept to implementation. This expanded investment supports a growing number of high-impact initiatives aligned with national healthcare priorities, further validating the leadership role of nurses and midwives in system innovation.

IMPACT AREA 3: Delivering Better Services

Nurses and midwives continue to drive service-level improvements through Spark-supported initiatives. In 2024, more projects reached implementation stage than ever before, improving patient care, experience, and outcomes. These initiatives, ranging from digital tools and new models of care to process redesigns, are delivering measurable impact. The report highlights several of these success stories and the clinicians behind them, showcasing how innovation can thrive when enabled at the frontline.

IMPACT AREA 4: Research and Rigor

Spark's commitment to evaluation and research remains a distinguishing feature of the programme. This year, an increasing number of nursing and midwifery-led projects have integrated formal evaluation methods, contributing to the evidence base for innovation in healthcare. The programme continues to collaborate with academic partners to ensure rigorous, real-world learning. Nurses and midwives involved in Spark also actively shape programme design, ensuring its ongoing relevance and responsiveness to frontline needs.

IMPACT AREA 5: Building the 'Workforce of the future'

Through education bursaries, training in human-centred design, and practical innovation opportunities, Spark is equipping nurses and midwives with future-facing skills that are increasingly essential in a complex health environment. These opportunities are not only improving service delivery but also helping retain and motivate a dynamic, agile nursing and midwifery workforce. Spark's contribution to career development is aligned with the national goal of building a diverse, skilled, and empowered public health workforce.

IMPACT AREA 6: Improving Staff Experience

Nurses and midwives consistently report that engaging with Spark improves their experience of work by providing opportunities to influence change, solve problems, and think creatively. Evaluations in 2024 show a continued trend of high satisfaction, with participants citing Spark as a catalyst for confidence, leadership, and personal growth. Their testimonials throughout this report illustrate how innovation can turn everyday challenges into platforms for professional fulfilment and system improvement.

IMPACT AREA 7: Contributing to the Strategic Direction of the Organisation

As Spark continues to support nurses and midwives in Advanced Practice and leadership roles, by up skilling them in service design and human centred design principles. Training in innovation and service design equips these professionals to lead service development in ways that are patient-centred, evidence-based, and scalable. This approach not only supports their professional development but also positions them as key drivers in the strategic evolution of healthcare services. It ensures that their work enhances patient quality of life and meets the complex demands of Advanced Practice.

THE YEAR AHEAD

As 2024 draws to a close, we are stepping into 2025 with renewed ambition and energy, building on the achievements of the past year and looking to expand the scope and impact of innovation across nursing and midwifery practice.

In the year ahead, we will continue to prioritise Design-Led and Design-Informed Innovation, aligning our strategy with the evolving organisational structure of the HSE and the transition to Health Regions. These developments will allow us to strengthen local engagement and ensure innovation is embedded into how services are designed and delivered, particularly with the insights and leadership of nurses and midwives at the centre.



Throughout 2024, my Fellowship facilitated new opportunities for innovation in clinical care, most notably leadership on a collaborative project in SATU Rotunda. This initiative, developed in partnership between SATU Rotunda and the HSE Spark Innovation Programme, went on to win the Irish Healthcare Award for Best Nursing and Midwifery Project of the Year 2024, a major national recognition of the impact nurse-led innovation can have on healthcare systems and, more importantly, on patients' lives.

Looking ahead, we are excited to launch a new series of CPD opportunities tailored for advance nurse and midwifery practitioners (registered and candidates), and frontline healthcare clinicians supported by academic partnerships and targeted learning in innovation methodologies. Our research focus will deepen, giving nurses and midwives the frameworks and evidence they need to translate ideas into practice with confidence.

Internally, we remain committed to advocating for the provision of protected time for innovation across the workforce. We recognise that time, space, and support are essential if frontline staff are to bring their ideas to life and contribute meaningfully to change.

As always, it is the creativity, courage, and commitment of our nurses and midwives that continue to inspire us. We look forward to another year of transformation, collaboration, and shared learning, and to supporting the continued success of all those leading innovation in practice.

Ms Catherine Marsh

ONMSD National Nursing and Midwifery Fellow for Innovation



A TOTAL OF
€850,091

**WAS OFFERED OUT TO
NURSE/MIDWIFE SPECIFIC
LED PROJECTS.**

(This does not include projects that had nurses/midwives as part of the overall team).

At HSE Spark Innovation, we offered more than financial support to projects.









In 2024, nursing and midwifery projects benefitted from:

- FUNDING
- EDUCATION
- MENTORSHIP
- SIGNPOSTING
- ADVICE

	Name	Role	Service/County	Initiative	Title of Project	Support /number of euro given/ Offered out	
1	Emily Naylor	ICU Nurse Educator	Intensive Care Unit, St James's Hospital, Dublin	Impact 2024	A digital platform to enhancing the learning of nurses in Critical Care.	€89,910	● ● ● ● ●
2	Lisa Joyce	Tissue Viability Clinical Nurse Specialist	Mater Misericordiae University Hospital, Dublin	Impact 2024	Pressure Relief	€68,559	● ● ● ● ●
3	Anna Marie Kiernan	Advance Nurse Practitioner Pain Management	Pain Management Centre, Croom Orthopedic Hospital, ULHG, HSE MidWest	Impact 2024	Virtually Pain Free	€20,000	● ● ● ● ●
4	Suzanne Marie Egan	Clinical Nurse Specialist, Pancreas and biliary diseases	Tallaght University Hospital	Impact 2024	Digitally enabled Patient Initiated Review (PIR) in Chronic Pancreatitis (CP): a new paradigm for Outpatient management of Chronic Illness	€65,011	● ● ● ● ●
5	Kathleen Greenough	Clinical Nurse Manager 2	Paediatrics Outpatients, Women's and Children's Directorate, Letterkenny University Hospital	Impact 2024	Find the Vein to Ease the Pain	€8,610	● ● ● ● ●
6	Suzanne Marie Egan (co-lead Prof Paul Ridgway)	Clinical Nurse Specialist Pancreas and Biliary Diseases	Department of Upper GI Surgery, Tallaght University Hospital (Region Dublin Midlands)	Productivity 2024	Digitally enabled Patient Initiated Review (PIR): pivoting (the success of SmartCP in Chronic Pancreatitis template) to the Outpatient management of other Chronic Illnesses	€63,000	● ● ● ● ●
7	Adebusola Adenike Owokole	Clinical Nurse Manager 2	Ophthalmology OPD, Lough Derg Suite, UL Hospital Nenagh, Tipperary	Productivity 2024	Enhancing Nenagh Hospital Ophthalmology OPD Efficiency through Advanced Equipment Acquisition	€57,817.84	● ● ● ● ●
8	Carolyn O'Reilly	Staff Nurse	Outpatient Antibiotic Therapy team (OPAT), St James Hospital, Dublin	Productivity 2024	Nurse Led PICC line insertion service - optimizing patient flow	€40,435	● ● ● ● ●

	Name	Role	Service/County	Initiative	Title of Project	Support /number of euro given/ Offered out	
9	Claire Best	CNS Liver transplant/ Hepatobiliary	Nation Liver Transplant Centre, St Vincent's University Hospital, Dublin	Productivity 2024	Improving Liver Transplant Outcomes Intraoperatively	€55,000	
10	Margaruite O'Connor and Maria Campion	IPC Clinical Nurse Manager 3, Clinical Nurse Manager 2 OPD	Out patients services (OPD), St John's Hospital, Limerick	Productivity 2024	The vein finder for a very busy phlebotomy service	€9,532.50	
11	Jo Taylor	Midwife. Rotunda Hospital	Delivery Suite, The Rotunda Hospital Dublin	Productivity 2024	Introduction of HCG to Ireland	€43,114	
12	Siobhan Chacko	Clinical Nurse Manager 2,	St James Hospital, Dublin	Productivity 2024	Scaling a Co-Created Bespoke Patient Hygiene Trolley for Critical Care in Ireland	€49,630	
13	Anne Marie O'Shea	Advanced Nurse Practitioner (Adult Respiratory)	Midland Regional Hospital, Portlaoise Laois	Productivity 2024	# FeNO Focus-Empowering Asthma Care	€12,238.50	
14	Sinead Boyd	Assistant Director Of Nursing	Patient Flow Department, Midland Regional Hospital, Tullamore, Offaly	Productivity 2024	Improving the Flow	€19,999	
15	Deirdre Scanlon	Clinical Nurse Manager 2	Sligo University Hospital, Sligo	Productivity 2024	Point of care testing equipment for warfarin clinic	€10,000	
16	Julie Grennell	Project Facilitator, Mater Transformation	Mater Misericordiae University Hospital Dublin	Productivity 2024	DigiFlow	€53,500	
17	Sue Paffrath	Candidate Advanced Nurse Practitioner (CKD), Renal services	St James's Hospital, Dublin	Productivity 2024	Renal Palliative Supportive Care Clinic	€20,000	
18	Amy Carroll	Assistant Director of Midwifery	Maternity Services, St Luke's Hospital, Kilkenny	Productivity 2024	Using digital innovation and human-centred design to reduce postoperative surgical site complications for women post c section	€ 28,000	
19	Ciara Liston	Advanced Nurse Practitioner - Glaucoma	Eye Outpatients Royal Victoria Eye and Ear Hospital, Dublin	Productivity 2024	Nurse Led Ophthalmic Laser	€3,000	
20	Anna Maire Kiernan	Advanced Nurse Practitioner Pain Management	Pain Management Centre, Croom Orthopedic Hospital, ULHG, HSE MidWest	Bursary for NCAD Prof Dip in Service Design	n/a	€2,200	
21	Brid Byrne	Clinical Nurse Manager 2	St James Emergency Department, Dublin	Bursary for Innovation Healthcare RCSI	n/a	€1,000	
22	Carol Doherty	Nurse Practice Development Co-ordinator	HSE Disability Services, Sligo/ Leitrim	Bursary for Innovation Healthcare RCSI	n/a	€1,000	
23	Bernie Higgins	Assistant Director of Public Health	Department of Health Protection, Limerick	Bursary for Innovation Healthcare RCSI	n/a	€1,000	
24	Michael Gibbons	Advanced Nurse Practitioner - Displaced Populations	Louth Meath Mental Health Services	Bursary for Innovation Healthcare RCSI	n/a	€1,000	
25	Debra Daly	RGN/PHN Gneeveguilla Health Centre	Gneeveguilla Health Centre, Kerry	Bursary for Innovation Healthcare RCSI	n/a	€1,000	
26	Minimol George	Clinical Midwife Manager 3	Women's Health Unit at the Rotunda Hospital Dublin	Bursary for Innovation Healthcare RCSI	n/a	€1,000	

	Name	Role	Service/County	Initiative	Title of Project	Support /number of euro given/ Offered out	
27	Maeve O'Brien	Community Nurse	Wellmount Health Centre, Wellmount Park, Finglas, Dublin Northwest	Bursary for Innovation Healthcare RCSI	n/a	€1,000	
28	Catherine Marsh	Nursing & Midwifery Fellow for Innovation	Spark Innovation Programme, Dublin	Bursary for Innovation Healthcare RCSI	n/a	€1,000	
29	Helen Fenn/ Netty Coyle/ Ailin O'Dea	Clinical Nurse Manager3	OPD, St James Hospital Dublin	Seed	Supporting people with additional needs while attending outpatients appointments	Consultation with designer €1,200	
30	Niamh O'Sullivan	Assistant Director of Nursing for Adolescent and Young Adult Cancer	Children's Health Ireland and St James's Hospital, Dublin	Seed	A-Y-A2WorkTogether	Consultation with designer €1,200	
31	Amy Carroll	Assistant Director of Midwifery	Maternity Services, St Lukes Hospital, Kilkenny	Bright Spark Awards	Best Hospital/Community Integration Project	n/a	
32	Antoinette Doherty	Advance Nurse Practitioner	The CARE virtual ward Letterkenny University Hospital Donegal	Bright Spark Awards	Care- Community and Acute Respiratory Excellence for COPD Patient in Donegal	n/a	
33	Jackie Bryan & John Sheridan	Clinical Nurse Manager 2	Milford Care Centre Cork	Bright Spark Awards	Care Compassion	n/a	
34	Pauline Chapman and Geraldine Crilly	Clinical Placement Coordinators	UL Hospitals Group, University Hospital Limerick	Bright Spark Awards	Great Minds Don't Think Alike	n/a	
35	Shirley Ingram	Advance Nurse Practitioner Cardiology	Tallaght University Hospital, Dublin	Bright Spark Awards	Avoiding ED; ANP Chest Pain Assessment in the Community	n/a	
36	Julie Grennell	Project Facilitator, Mater Transformation	Mater Misericordiae University Hospital, Dublin	Bright Spark Awards	Redesigning the nurse assessment form to release time to care	n/a	
37	Githin Mohan Kallukuzhyil Mohan Das	Respiratory Staff Nurse	Respiratory Department University Hospital Galway	Seed	Inhaler Insight	€3,000	
38	Seana Giles	Clinical Skills Facilitator Emergency Department	Emergency Department Midlands Regional Hospital, Mullingar, Westmeath	Seed	Pre-Alert Optimisation Plan	€3,000	
39	Deirdre Gallagher	Clinical Placement Coordinator (For Undergraduate Nursing Students)	St Vincent's University Hospital, Dublin	Seed	A centralised digital platform for Undergraduate Student Nurses	€3,000	
40	Aoife Grey	Public Health Nurse	Department of Public Health, Laois	Seed	Child Health Liaison Referrals and NNBS Metrics	€3,000	
41	Una Rogers	Clinical Midwifery Manager 2 -	Community Midwifery Galway University Hospital	Seed	Hypnobirthing Antenatal Education. Midwife led care - delivered by midwives	€3,000	
42	Brendan Kilroy	Clinical Nurse Manager 2	Day Hospital, Mental Health Service For Older Persons, St Vincent's University Hospital, Dublin	Seed	Garden Project	€3,000	
43	Hermi Lo	Clinical Nurse Specialist	Respiratory Assessment Unit St James's Hospital, Dublin	Seed	RespiLink Magnet Cards	€3,000	
44	Nitu John	Clinical Nurse Manager 2	Midland Regional Hospital, Portlaoise	Seed	Can I stay a little longer with my baby?	€3,000	
45	Maire McAuliffe	Clinical Nurse Manager 3	ICU St James Hospital, Dublin	Seed	Sound of the Heartbeat	€3,000	

	Name	Role	Service/County	Initiative	Title of Project	Support /number of euro given/ Offered out	
46	Ciaran Cuddihy	Practice Development Facilitator	(Mental Health) Merlin Park Hospital, Galway	Seed	The Virtual Reality Self Soothe Experience	€5,000	
47	Elaine Murphy	Acting Assistant Director of Public Health	Public Health Nursing Department, Kilkenny	Seed	DIARIES	€5,000	
48	Wendy White Fitzpatrick	Practice Development Coordinator	Midlands Regional Hospital Tullamore, Offaly	Seed	Mobile education	€5,000	
49	Sinead Horgan	Director of Nursing - Surgical Site infection surveillance, Deteriorating patient & vaccinations	HSE South West, Cork	Seed	Preparing for your surgery - bathing	€5,000	
50	Lisa Joyce	Project Manager, Mater Transformation	Mater Misericordiae University Hospital Dublin	Seed	Derma Diary	€3,000	
51	Anju Menon & Elaine Forde	Clinical Placement Co-ordinator Clinical Nurse Manager 2 / Elaine Forde Patient Advocacy Liaison Manager	Cork University Hospital, Cork	Seed	CUH Way finder -Improving patient hospital experience through interactive kiosks supported by app and hospital orientation video	€3,000	
52	Christine Pucillo & Deirdra Richardson	Clinical Nurse Specialist /Clinical Midwife Specialist, Forensic Nurse examiners	Sexual Assault Treatment Unit, Rotunda Hospital, Dublin	Impact	Enhancing dignity, human centred approach to forensic photography	€26,000	
53	Jo Taylor	Fetal Monitoring Midwife	Delivery Suite, The Rotunda Hospital	Productivity	Introduction of HCG to Ireland	€43,114	



ONMSD



HSE Spark







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Altranais & Cnáimhseachais

Office of the Nursing &
Midwifery Services Director



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