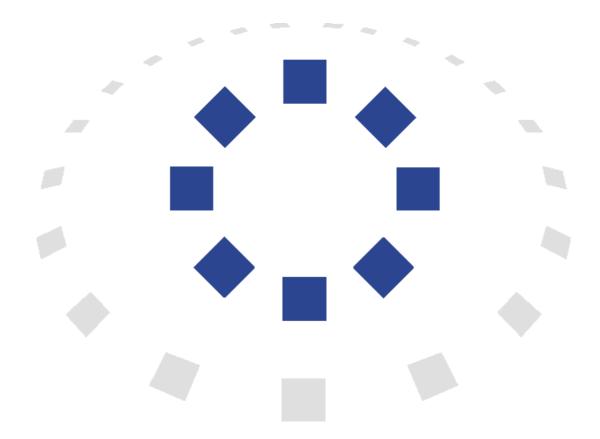


# Annual Report and Accounts 2001



# National Council for the Professional Development of Nursing and Midwifery

### Mission Statement of the National Council

The Council exists to promote and develop the professional role of nurses and midwives in order to ensure the delivery of quality nursing and midwifery care to patients/clients in a changing healthcare environment.

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## National Council Members

Liam Dunbar	Executive Chairperson	
Valerie Small	General Nursing	Emergency Nurse Practitioner, St James' Hospital, Dublin
Maura Nash	Mental Handicap Nursing	Chief Executive, COPE Foundation, Cork
Pearse Finegan	Psychiatric Nursing	Chief Nursing Officer,
		St Mary's Hospital, Castlebar
Antoinette Doocey	Public Health Nursing	Regional Director of Services to Older People, Community Services Programme, NEHB
Aveen Murray	Sick Children's Nursing	Assistant Director of Nursing,
		Our Lady's Hospital, Crumlin
Patrick Hume	Care of the Elderly	Area Co-ordinator,
		Services for Older People, NWHB, Letterkenny
Anne Marie Moran	Nurse Tutor	Course Co-ordinator,
		School of Nursing Studies, GMIT, Castlebar
Kathryn Mc Quillan	Midwifery	Manager,
		Delivery Ward, NMH, Dublin
Jim Hough	An Bord Altranais	Principal Tutor (retired),
		SHB, Waterford
Eileen Kelly	An Bord Altranais	Co-ordinator of In-Service and Continuing Education, CUH, Cork
Mary Mc Carthy	Senior Nurse Manager	Director of Nursing, AMNCH, Dublin
Marie Keane	Health Services Employers Agency	Director of Nursing,
		Beaumont Hospital, Dublin
Hazel Daniels	Health Services Employers Agency	Director of Nursing, Waterford Regional Hospital
Peta Taaffe (resigned June 2001)	Dept of Health & Children	Chief Nursing Officer, Dept of Health and Children, Dublin
Teresa Cody*	Dept of Health & Children	Assistant Principal Officer, Nursing Policy Division, Dept of Health and Children, Dublin



Michael Boland	Medical Practitioner	Director, Postgraduate Resource Centre, Irish College of General Practitioners, Dublin
Pearl Treacy	Third Level Institutions (NUI)	Professor of Nursing, School of Nursing and Midwifery, UCD
Cecily Begley	Third Level Institutions (non-NUI)	Director, School of Nursing and Midwifery Studies, TCD
Gerry McTaggart	Third Level Institutions (IT/RTC sector)	Director of Nursing Studies, School of Science, Dundalk IT

\* Replaced Bernard Carey in January 2001.

## Staff of the National Council

Chief Executive Officer	Yvonne O'Shea, RGN, RM, RNT, BA, MSc (Econ)
Head of Professional Development and Continuing Education	Kathleen Mac Lellan, RGN, Dip Couns, MSc, PhD
Professional Development Officers	Mary Farrelly, RPN, RGN, BNS, MMedSc (Nursing) Christine Hughes, RMHN, RGN, RNT, BA, MEd Sarah Condell, RGN, RM, RNT, BNS, MA Georgina Farren, RGN, RM, BNS (Hons), MSc (Midwifery)
Facilitator for Continuing Education	Sheila Doyle, RGN, RM, MSc
Head of Management Services	Helen Bohan
Administrative Officers	Kate Brennan Jackie Lillis



### **Executive Chairperson's Statement**

In accordance with Statutory Instrument (SI No 376 of 1999), the National Council for the Professional Development of Nursing and Midwifery presents to the Minister for Health and Children its Report and Accounts for the year ended 31 December 2001. This is our first Report and it incorporates the activities of the National Council during 2000, prior to the appointment of professional staff.

The National Council was created directly as a result of the recommendations of the Commission on Nursing. Our first meeting took place in January 2000 and the work of the National Council during 2000 concentrated on developing definitions of the Clinical Nurse Specialist (CNS) and Clinical Midwife Specialist (CMS) and on defining the pathways for confirmation into these posts. During that year, funding was agreed for the creation of a management structure with the Department of Health and Children and the National Council made its first executive appointments at the beginning of 2001.

The creation of meaningful and rewarding clinical career pathways was one of the most important recommendations to emerge from the Commission on Nursing. The National Council was given a significant role in implementing the recommendations of the Commission in this area. As a key element of this, the National Council has confirmed over 1,100 nurses and midwives as Clinical Nurse Specialists or Clinical Midwife Specialists by the end of 2001.

These appointments were made under what is known as the Immediate Pathway. This was aimed at reviewing as a matter of urgency the position of nurses in many specialist positions throughout the country and, in line with an agreed set of criteria, confirming them as specialists provided they met the general conditions of appointment and a specific post had been created in the health board or hospital to which they could be appointed.

The National Council has now moved beyond the Immediate Pathway to the Intermediate Pathway. This offers a rich development opportunity to Nurse Managers and General Managers to create CNS and CMS posts in line with emerging service needs.



The National Council is working closely with the Nursing and Midwifery Planning and Development Units in the strategic development of posts for Advanced Nurse Practitioners and Advanced Midwife Practitioners. This is a developmental process and significant progress has already been made.

I wish to thank Mr Micheàl Martin, TD, Minister for Health and Children; the Nursing Policy Division of the Department of Heath and Children; professional and representative bodies and individuals in nursing and midwifery who have supported and assisted the National Council in its endeavours.

I wish to express my appreciation and thanks to my colleagues on the National Council for their support, commitment and effort over the past two years. On their behalf, I would like to pay tribute to our executive staff for their enthusiasm and hard work in advancing our objectives.

We are at the start of the process of bringing to fruition the work of the Commission on Nursing in the area of clinical career pathways. Much work has already been done and the future will bring more developments that will open up opportunities for nurses and midwives committed to developing and enhancing their clinical practice in line with the needs of the service and in a way that brings them rich career rewards.

Liam Dunbar Executive Chairperson



### Chief Executive Officer's Report

The year 2001 was one of intense activity within the National Council, a year in which the key functions of the National Council were given practical expression for the first time, with the appointment of an executive team. I would like to offer a brief overview of some of the major highlights:

- At the beginning of the year, one of the key tasks of the National Council was to begin the process of providing guidance and support on the development of Clinical Nurse Specialist/Clinical Midwife Specialist (CNS/CMS) and Advanced Nurse Practitioner/Advanced Midwife Practitioner (ANP/AMP) posts. The Clinical Nurse/Midwife Specialist — Intermediate Pathway document was published in April 2001, outlining the criteria and processes to be applied in relation to these posts.
- In May, the National Council published the Framework for the Establishment of Advanced Nurse Practitioner and Advanced Midwife Practitioner Posts. The National Council believes that every nurse and midwife on the register should understand what is involved in the development of Nurse and Midwife Practitioners and have the opportunity to consider the implications of this development for their own

clinical career pathway.

The publication of the Framework is intended to give a renewed impetus to the further development of autonomous clinical practitioners in nursing and midwifery capable of providing pioneering professional and clinical leadership.

- The National Council places a high value on partnership with the Nursing and Midwifery Planning and Development Units (NMPDUs). For that reason, as the Directors of these units were appointed, regular meetings were organised to build a solid platform of communication and cooperation. During the year eleven workshops were held in the regions involving Directors of Nursing and other healthcare management professionals. These workshops will continue on a twice-yearly basis.
- The National Council has a very important role in supporting continuing education activities in partnership with the NMPDUs. Criteria and processes for the allocation



of additional funding to continuing education programmes were published in February 2001. To date, we have approved a large number of such programmes. Developing them and giving them practical expression has required a considerable amount of work on part of the National Council and the Directors of the NMPDUs and in the short space of time available the achievements have been substantial.

- This report gives details of the many courses, projects and programmes that have been funded by the National Council throughout the country. These programmes are for the benefit of all nurses and midwives. A large number of nurses and midwives will benefit from these programmes in every branch of the profession. In 2002, we look forward to further developing this aspect of our work in close cooperation with our colleagues in the NMPDUs.
- The National Council is also jointly responsible with An Bord Altranais for the Nurse and Midwife Prescribing Project, which will be developed over the next three years and promises to have far reaching consequences for all nurses and midwives.
- The year concluded with our first national conference, which was launched in Dublin Castle on 20 November and was formally opened by Ms Mary Hanafin, TD, Minister of State at the Department of Health and Children. Over 800 nurses participated. The theme of the two-day conference was the strategic role of nurses and midwives in the development of the service of the future.

The contribution of nursing and midwifery to the future development of the health services will be greatly enhanced by the emergence of a vibrant group of confident professionals.

The National Council looks forward to another busy year in 2002.

Yvonne O'Shea Chief Executive Officer

### Establishment of the National Council

The Commission on Nursing<sup>1</sup>, through its consultations with nurses, midwives and other interested parties on issues pertaining to professional development, became aware of the importance of continuing education to the quality of services offered to patients and the development and growth of professional nursing and midwifery (6.1). In particular, the Commission on Nursing supported the need for:

- guidance and direction in relation to the development of specialist nursing and midwifery posts and post-registration educational programmes offered to nurses and midwives (6.12);
- an ordered and coherent approach to the progression of specialisation and the development of a clinical career pathway for nursing and midwifery (6.24); and
- a coherent framework for the development of specialist nursing [and midwifery] education programmes (6.45) and other post-registration nursing [and midwifery] education (6.50).

To this end, it recommended that "the Minister [for Health and Children] establish an independent statutory agency with responsibility for post-registration development of nursing and midwifery ... to be called the National Council for the Professional Development of Nursing and Midwifery" (6.12).

The National Council was established the following year on foot of a Statutory Instrument (SI No 376, 30 November 1999) from the Minister for Health and Children, then Mr Brian Cowen, TD, and entitled The National Council for the Professional Development of Nursing and Midwifery (Establishment) Order, 1999 (see Appendix 1).

The inaugural meeting of the National Council was held on 17 January 2000.

1. Government of Ireland (1998) Report of the Commission on Nursing: A Blueprint for the Future. Dublin: Stationery Office.



## The Role and Functions of the National Council

As stated in the Statutory Instrument (Section 4), the functions of the National Council are:

- 1. To monitor the on-going development of nursing and midwifery specialities, taking into account changes in practice and service need;
- 2. To formulate guidelines for the assistance of health boards and other relevant bodies in the creation of specialist nursing and midwifery posts;
- 3. To support additional developments in continuing nurse education by health boards and voluntary organisations;
- 4. To assist health service providers by setting guidelines for the selection of nurses and midwives who might apply for financial support in seeking opportunities to pursue further education;
- 5. To publish an annual report on its activities, including the disbursement of monies by the Council.

These functions reflect five of those identified by the Commission on Nursing (6.14). In addition the functions listed below will be vested in the National Council, following the enactment of new legislation:

- The determination of the appropriate level of qualification and experience for entry into specialist nursing and midwifery practice;
- The accreditation of specialist nursing and midwifery courses for the purpose of Clinical Nurse Specialist/Clinical Midwife Special (CNS/CMS) and Advanced Nurse Practitioner/Advanced Midwife Practitioner (ANP/AMP) appointments; and
- The accreditation of post-registration courses.

# **Activities Report**

### Clinical Nurse Specialist/ Clinical Midwife Specialist Posts and Career Pathway

At the inaugural meeting of the National Council on 17 January 2000, sub-committees were set up to produce definitions of the Clinical Nurses Specialist/Clinical Midwife Specialist (CNS/CMS) and the Advanced Nurse Practitioner/Advanced Midwife Practitioner (ANP/AMP), as recommended by the Commission on Nursing (6.32-6.34), the respective core concepts of each grade and the establishment of CNS/CMS and ANP/AMP posts (Commission on Nursing, 6.56-6.60).

Priority was given to providing a definition of the CNS/CMS, which would act as a benchmark for such posts in general, paediatric, psychiatric and mental handicap nursing and midwifery. The following definition of the CNS/CMS role was agreed by the National Council and circulated to all Chief Executives, Directors of Nursing and Midwifery, Chief Nursing Officers, Directors of Public Health Nursing and the Nursing Alliance in May 2000:

"A nurse or midwife specialist in clinical practice has undertaken formal recognised postregistration education relevant to his/her area of specialist practice at higher diploma level. Such formal education is underpinned by extensive experience and clinical expertise in the relevant specialist area. The area of specialty is a defined area of nursing or midwifery practice that requires application of specialty focused knowledge and skills, which are both in demand and required to improve the quality of client/patient care. This specialist practice will encompass a major clinical focus, which comprises assessment, planning, delivery and evaluation of care given to patients/clients and their families in hospital, community and outpatient settings. The specialist nurse or midwife will work closely with medical and para-medical colleagues and may make alterations in prescribed clinical options along agreed protocol driven guidelines. The specialist nurse or midwife will participate in nursing research and audit and act as a consultant in education and clinical practice to nursing/midwifery colleagues and the wider multidisciplinary team."

The Immediate, Intermediate and Future Career Pathways were also developed, outlining the required levels of experience and educational preparation for CNSs/CMSs (Commission on Nursing, 6.33, 6.56-6.60). The criteria for approval of CNSs/CMSs under the Immediate Career Pathway were designed with reference to paragraphs 6.57 and 6.58 of the *Report of the Commission on Nursing*, and with the capacity to confirm in post nurses and midwives with (a) extensive experience in the specialist area and a higher diploma in a relevant specialist programme, (b) extensive experience (ie, a minimum of five years' post-registration nursing experience) and a specialist certificate, and (c) extensive experience (ie, greater than five years'



experience in a particular specialist role/post) with other post-registration education or none.

A job description or profile would also be taken into consideration. The application form for the immediate pathway, or Aid to Managers, Specialist Nurses & Midwives, was developed and circulated to all CEOs, Directors of Nursing, the Nursing Alliance and the Monitoring Committee.

Criteria for the Intermediate Career Pathway were developed with reference to paragraphs 6.59 and 6.60 of the *Report of the Commission on Nursing*, among others. Under this pathway both the post and the person would have to meet the criteria of the National Council (Clinical Nurse/Midwife Specialists — Intermediate Pathway, April 2001, p4). These criteria were drawn from the core concepts of the role of the CNS/CMS (see box below).

### Core Concepts of the Role of the Clinical Nurse Specialist/ Clinical Midwife Specialist

Clinical Focus: The role of the CNS/CMS must have a strong patient focus whereby the specialty defines itself as nursing [or midwifery] and subscribes to the overall purpose, functions and ethical standards of nursing ... The clinical practice role may be divided into two categories, direct and indirect care ... Direct care comprises the assessment, planning, delivery and evaluation of care to patients and their families, indirect care relates to activities that influence others in their provision of direct care.

Patient Advocate: The CNS/CMS role involves communication, negotiation and representation of the client/patient values and decisions in collaboration with other professionals and community resource providers.

Education and Training: The CNS/CMS remit for education and training consists of structured and impromptu educational opportunities to facilitate staff development and patient education ... Each CNS[/CMS] is responsible for his/her continuing education through formal and informal educational opportunities, thus ensuring continued clinical credibility amongst nursing[/midwifery], medical and paramedical colleagues.

Audit and Research: Audit of current nursing[/midwifery] practice and evaluation of improvements in the quality of patient care are essential. The CNS/CMS must keep up to date with current relevant research to ensure evidence-based practice and research utilisation. The CNS/CMS must contribute to nursing research, which is relevant to his/her particular area of practice.

Consultant: Inter- and intra-disciplinary consultations both internal and external are recognised as part of the contribution of the [CNS/CMS] to the promotion of improved patient management.

Key differences in the criteria for the person include the requirement for the person to be registered in the division in which the post is (being) established (except in exceptional circumstances), to have a minimum of five years' post-registration experience (including two years in the specialist area), and to hold or give an undertaking to obtain a relevant higher/post-graduate diploma or higher qualification. Processing of CNS/CMS posts created or vacated under the intermediate pathway would be carried out at a regional level in closer co-operation between the Directors of Nursing/Midwifery (and/or other relevant person) and the Directors of the Nursing and Midwifery Planning and Development Units (NMPDU).

It was envisaged that this process would ensure that a cohesive plan for the regional development of specialist posts would be put forward. Under the Future Career Pathway the CNS/CMS would require the same clinical experience as for the intermediate pathway, but would be expected to hold a higher/post-graduate diploma in clinical practice prior to taking up a specialist post.

### Processing of Applications under the Immediate Pathway

Applications for approval of CNS/CMS posts under the Immediate Pathway were processed by the executive staff, with all posts confirmed by the National Council. A database was designed to enable the National Council to analyse the applications on the basis of geographical spread, division of nursing and nursing specialty. By the end of 2001 a total of 1,111 posts were approved (see Table below).

# CNS/CMS Posts Approved under the Immediate Pathway in 2000-01

Division of Nursing	Number
General	592
Mental Health/Psychiatric	371 *
Midwifery	27
Sick Children	52
Mental Handicap	69
Public Health	0
Total	1,111†

\* Figure includes 198 Community Mental Health Nurses † Total includes posts approved in 2000



### Processing of Applications Under the Intermediate Pathway

The document Clinical Nurse/Midwife Specialists — Intermediate Pathway was published in April 2001 and processing of applications under the Intermediate Pathway commenced on 1 May. The Nursing and Midwifery Planning and Development Units assumed responsibility for processing applications under this pathway. However, the National Council Executive processed these applications where no unit had been set up and advised staff in the established units as required. An Aid to Developing Job Descriptions/Profiles was produced in July for the assistance of the Directors of the units, and since that time has been issued to nurse/midwife managers and applicants on request and published in the newsletter (Issue 4, Winter 2001).

## Advanced Nurse Practitioner / Advanced Midwife Practitioner Posts

The ANP/AMP sub-committee of the National Council commenced work on the definition and core concepts (see Box, page 19) of the ANP/AMP in 2000. The definition is as follows:

"Advanced nursing and midwifery practice is carried out by autonomous, experienced practitioners who are competent, accountable and responsible for their own practice.

"They are highly experienced in clinical practice and are educated to masters degree level (or higher). The post-graduate programme must be in nursing/midwifery or an area which is highly relevant to the specialist field of practice (educational preparation must include substantial clinical modular component(s) pertaining to the relevant area of specialist practice).

"ANPs/AMPs promote wellness, offer healthcare interventions and advocate health lifestyle choices for patients/clients, their families and carers in a wide variety of settings in collaboration with other healthcare professionals, according to agreed scope of practice guidelines. They utilise sophisticated clinical nursing/midwifery knowledge and critical thinking skills to independently provide optimum patient/client care through case-load management of acute and/or chronic illness. Advanced nursing/midwifery practice is grounded in the theory and practice of nursing/midwifery and incorporates nursing/midwifery and other related research, management and leadership theories and skills in order to encourage a collegiate, multidisciplinary approach to quality patient/client care. ANP/AMP roles are developed in response to patient/client need and healthcare service requirements at local, national and international level.

"ANPs/AMPs must have a vision of areas of nursing/midwifery practice that can be developed beyond the current scope of nursing/midwifery practice and a commitment to the development of these areas."

### Framework for the Establishment of Advanced Nurse Practitioner and Advanced Midwife Practitioner Posts

The ANP/AMP sub-committee continued work on the document Framework for the Establishment of Advanced Nurse Practitioner and Advanced Midwife Practitioner Posts, which was published in May 2001.



### Core Concepts of the Advanced Nurse Practitioner /Advanced Midwife Practitioner

Autonomy in Clinical Practice: An autonomous ANP/AMP is accountable and responsible for advanced levels of decision making which occur through management of specific patient/client caseload. ANPs/AMPs may conduct comprehensive health assessment and demonstrate expert skill in the diagnosis and treatment of acute and/or chronic illness from within a collaboratively agreed scope of practice framework alongside other healthcare professionals. The crucial factor in determining advanced nursing/midwifery practice however is the level of decision making and responsibility rather than the nature or difficulty of the task undertaken ... "When nursing [or midwifery] knowledge and experience continuously inform a practitioner's decision making, even though some parts of the role may overlap the medical [or other healthcare professional] role, then that may be said to be advanced nursing [or midwifery] practice."

Pioneering Professional and Clinical Leadership: ANPs/AMPs are pioneers and clinical leaders in that they may initiate and implement changes in healthcare service in response to patient/client need and service demand. They must have a vision of areas of nursing/midwifery practice that can be developed beyond the current scope of nursing/midwifery practice and a commitment to the development of these areas. They provide new and additional health services to many communities in collaboration with other healthcare professionals to meet a growing need that is identified both locally and nationally by healthcare management and governmental organisations. ANPs/AMPs participate in educating nursing/midwifery staff, and other healthcare professional through role modelling, mentoring, sharing and facilitating the exchanges of knowledge both in the classroom, the clinical area and the wider community.

Expert Practitioners: Expert practitioners demonstrate practical and theoretical knowledge and critical thinking skills that are acknowledged by their peers as exemplary. They also demonstrate the ability to articulate and rationalise the concept of advanced practice. Education must be at masters degree level (or higher) in a programme relevant to the area of specialist practice and which encompasses a major clinical component. This post-graduate education will maximise pre- and post-registration nursing/midwifery curricula to enable the ANP/AMP to assimilate a wide range of knowledge and understanding which is applied to clinical practice.

Researcher: ANPs/AMPs are required to initiate and co-ordinate nursing/midwifery audit and research. They identify and integrate nursing/midwifery research in areas of the healthcare environment that can incorporate best evidence based practice to meet patient/client and service need. They are required to carry out nursing/midwifery research which contributes to quality patient/client care and which advanced nursing/midwifery and health policy development, implementation and evaluation. They demonstrate accountability by initiating and participating in audit of their practice. The application of evidence based practice, audit and research will inform and evaluate practice and thus contribute to the professional body of nursing/midwifery knowledge both nationally and internationally.

This document describes in detail the process for the establishment of ANP/AMP posts. The process comprises two parts, namely (1) approval of the site preparation and job description and (2) accreditation of the ANP/AMP. The criteria for the ANP/AMP incorporate important elements of the National Council's definition and core concepts of the role regarding educational preparation, clinical experience (ie, seven years' post-registration experience, including five years' in the specialist area) and level of practice.

Application for approval of the site preparation and job description and accreditation of the ANP/AMP will be made by the Director of Nursing/Midwifery (and/or other relevant person) to the National Council via the Nursing and Midwifery Planning and Development Unit. Guidelines for the job description and person specification for the ANP/AMP, the establishment of an ANP/AMP accreditation committee and the composition of ANP/AMP portfolio are included in the Framework document. Copies of the document were distributed to health service providers and other interested parties. It was also made available on the website.

### First Approval of Site Preparation and Job Description for Advanced Nurse Practitioner Post

The first application for approval of an ANP post in emergency nursing was received from St James's Hospital, Dublin. The National Council approved the site preparation and job description. The second part of the approval process (ie, accreditation of the appointed person) continues in 2002.

### **Educational Programmes for ANP/AMP Roles**

A sub-group of the National Council was set up to undertake research into the standards and processes for the accreditation of educational programmes aimed at preparing nurses and midwives for ANP/AMP roles. The Commission on Nursing had envisaged that third-level institutes, in consultation with health service providers, would prepare curricula for master's degree programmes, which would prepare nurses for positions as ANPs/AMPs (6.47). It recommended that the education providers of such programmes submit their curricula to the National Council for accreditation in order to ensure that the requirements of the National Council for professional recognition as an ANP/AMP would be met.



# Nursing and Midwifery Planning and Development Units

The National Council met with the Directors of the Nursing and Midwifery Planning and Development Units (NMPDUs) on various occasions throughout the year. These units were established in accordance with recommendations of the Commission on Nursing (6.20-6.22). Their recommended functions are as follows:

- Strategic planning and quality assurance of nursing and midwifery services in a health board area;
- Co-ordinating the delivery of nursing and midwifery services and improving co-operation between health board and voluntary bodies in the delivery of nursing and midwifery services;
- Liaising with centres of nursing education in the provision of continuing education for nurses within the health board area;
- Working in partnership with the Chief Nursing Officer in the Department of Health and Children in planning/policy development of nursing and midwifery issues; and
- Assisting in improving internal communications with nurses and midwives in a health board area.

The NMPDUs also have responsibility for overseeing the detailed provision of continuing nursing and midwifery education within a health board area and a role in fostering nursing and midwifery research at health board level (Commission on Nursing, 6.21). They are also involved in the creation of and processing of applications for CNS/CMS and ANP/AMP posts, and in the processing of applications for additional funding for continuing education programmes at health board level (see section on Continuing Education).

The National Council met the Directors of the NMPDUs both as a group and on an individual basis in their own health board areas. The regional meetings were attended by Directors of Nursing/Midwifery and/or their appointed deputies. Information was provided on the functions of the National Council, the Clinical Career Pathway and work in progress.

# **Continuing Education**

The criteria and processes for the allocation of funding for continuing education were developed and agreed early in the year. The document Criteria and Process for the Allocation of Additional Funding for Continuing Education was published in February. The criteria state that the programme will:

- constitute a valuable learning experience and make a meaningful contribution to the professional development of the nurse/midwife involved
- contribute to the development of the knowledge, skills and attitudes of the nurse/midwife involved.
- be part of the strategic development of the nursing and midwifery services provided in the area and as such relate to the needs of the service addressed within the service plan and to health policy priorities.
- enhance nursing and midwifery practice, patient/client care, patient/client education and/or the administration of nursing and midwifery practice.

In addition the programme may be part of a programme designed to enhance nursing, midwifery and relevant health research. Activities eligible for funding will include formal educational programmes, seminars, conferences, workshops and courses accredited by the National Council. Priority will be given to programmes designed to enhance equity of access to educational opportunities and to provide development opportunities in areas that would not otherwise be viable or that would not be funded by other agencies.

A facilitator was appointed to assist the Directors of the Nursing and Midwifery Planning and Development Units in the preparation of submissions for funding for continuing education programmes. A sub-group of the National Council (the Continuing Education sub-group) was set up to make decisions regarding the suitability of each application for funding. A brief description of all continuing education programmes to which the National Council allocated funding is included in Appendix 2.



# Nurse and Midwife Prescribing Project

The Nursing and Midwife Prescribing Project is being undertaken and funded by the National Council in partnership with An Bord Altranais. The purpose of the project is to review the involvement of nurses and midwives in the prescribing of medical preparations, with a view to producing prescribing guidelines.

The first meeting of participants from the National Council and from An Bord Altranais took place on 14 March 2001. The terms of reference were reviewed, and a budget, project plan and members of the Committee were agreed. The National Council is represented by Marie Keane, Pearse Finegan, Kathryn Mc Quillan, Yvonne O'Shea and Kathleen Mac Lellan. The Project Officer and Project Assistant were appointed in September 2001.

### Terms of Reference

The terms of the reference of the project are as follows:

- · Review of current practice, identifying relevant issues
- · Review of appropriate international literature and experience
- Review of national and international legislation related to nurse and midwife prescribing
- Review of Guidance to Nurses and Midwives on the Administration of Medical Preparations (An Bord Altranais 2000a)
- Review of intra- and inter-professional boundaries and their implications for nurse and midwife prescribing
- · Consideration of circumstances in which nurses and midwives might prescribe
- Identification of pilot sites suitable for the initiation of nurse and midwife prescribing
- Consideration of documentation necessary to support nurse and midwife prescribing
- · Initiation and evaluation of nurse and midwife prescribing in pilot sites
- Produce detailed guidelines including a framework for nurse and midwife prescribing where appropriate.

## **Communication and Contact**

# First National Conference : "The Development of Nursing and Midwifery in Ireland — Building on the Blueprint"

The launch of the first National Conference of the National Council was hosted by the Minister for Health and Children, Micheàl Martin, TD, and opened by the Minister of State at the Department of Health and Children, Mary Hanafin, TD, on 20 November 2001 at Dublin Castle. The title, theme and content of the conference (ie, the strategic contribution of nurses and midwives to the health services of the future) reflected the progress made by the profession since the Commission on Nursing laid the foundations for the structures that are currently being established.

The speakers and chairpersons included representatives from the Department of Health and Children, the Health Research Board, the health boards, experts in nursing education, directors of the Nursing and Midwifery Planning and Development Units, and expert and specialist practitioners. Poster presentations of a commendably high standard were on display and prizes were awarded on the basis of appropriateness of content, visual presentation, and clarity of text.

### Website

The National Council's website (www.ncnm.ie) went live on 28 March 2001. All National Council documents can be viewed on and downloaded from the website. Special interest groups in nursing and midwifery are invited to set up web pages on the site. By the end of the year almost 7,500 visits to the website had been recorded. Work was begun on a web-based list directory of courses, including specialist nursing courses and courses of relevance and/or interest to nurses and midwives (Report of the Commission on Nursing, 6.15). Heads of the third level schools of nursing and midwifery were asked to verify, comment on and amend details.

### Newsletter

The National Council produces a quarterly newsletter that is distributed to all nurses and midwives on the Register. It is also sent to relevant health service personnel and organisations, higher education institutions and international nursing/midwifery organisations. The newsletter is also available on the National Council's website.

### Presentations

The following presentations were made during the year by the executive staff:

- "The Role and Function of the National Council" to the Practice Nurse Association, 2 May 2001
- "The Role and Function of the National Council" to the Psychiatric Nurses Association, 11 May 2001
- "The Role and Function of the National Council and the Clinical Career Pathway" to SIPTU, 15 May 2001
- "The Role and Function of the National Council" to the Clinical Nurse Specialist Group, Our Lady's Hospital for Sick Children, Crumlin, 6 June 2001
- "The Role and Function of the National Council" to Matrons of Elderly Care, MWHB, 23 July 2001
- "The Role and Function of the National Council" to the National Federation of Voluntary Bodies, 4 September 2001
- "The Role and Function of the National Council" to Course Co-ordinators, Mater Misericordiae Hospital, 10 September 2001
- "The National Council and the Clinical Career Pathway" to students undertaking the BNS (Practice Development), RCSI, 2 October 2001
- "The Role and Function of the National Council" to the Irish Association of Oncology Nurses Annual Conference, 13 October 2001
- "Clinical Nurse Specialist Role Development: Relevant Issues" to the Clinical Nurse Specialist Role Development Group, Our Lady of Lourdes Hospital, Drogheda, 8 November 2001
- "The National Council and the Clinical Career Pathway" to the Daughters of Charity, St Vincent's Centre, Dublin, 12 November 2001
- "The National Council and the Clinical Career Pathway" to the Brothers of Charity Services, Galway, 5 December 2001

### **Publications**

- Criteria and Processes for the Allocation of Additional Funding for Continuing Education by the National Council (February 2001)
- CNS/CMS Intermediate Pathway (April 2001)
- Framework for the Establishment of Advanced Nurse Practitioner and Advanced Midwife Practitioner Posts (May 2001)
- Aid to Developing Job Descriptions/Profiles for Clinical Nurse/Midwife Specialist Posts (July 2001)

### Working with the Profession

Since the National Council was set up, its members and/or members of the executive staff have initiated and been involved in projects and consultations with a variety of professional bodies. These include:

- · Directors of the Nursing and Midwifery Planning and Development Units
- · Health Research Board
- Consultative Forum of the Health Strategy
- Paediatric Nursing Advisory Forum
- Irish Nurses Organisation
- Dept of Health and Children's Commission on Nursing Monitoring Committee
- Association of Irish Nurse Managers
- Practice Nurses Association
- Psychiatric Nurses Association
- Service Industry, Professional and Technical Union (SIPTU)
- External Validating Group of St Anne's Service Drugs Policy

The executive staff have advised individual nurses and midwives, Directors of Nursing/Midwifery, Directors of the NMPDUs, Human Resource Officers and other interested parties on a number of issues, including personal career advice, continuing education options, National Council processes and procedures, and professional development.

REPORT AND FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2001

### Audit Committee

Liam Dunbar Patrick Hume Teresa Cody

Chief Executive Officer Yvonne O' Shea

#### **Auditors**

Deloitte & Touche Chartered Accountants Deloitte & Touche House Earlsfort Terrace Dublin 2

### **Business Address**

6-7 Manor Street Business Park Manor Street Dublin 7

### Statement of Audit Committee's Responsibilities

In accordance with the rules of the National Council, the Audit Committee are responsible for keeping proper books of account which disclose with reasonable accuracy, at any time, the financial position of the Council and for the preparation of the financial statements for each financial year which give a true and fair view of the state of the affairs of the Council and of the surplus or deficit of the Council for that year. In preparing those financial statements, the Audit Committee are required to:

- · select suitable accounting policies and then apply them consistently;
- make judgements and estimates that are reasonable and prudent; and
- prepare the financial statements on the going concern basis unless it is inappropriate to assume that the Council will continue its activities.

The Audit Committee are responsible for safeguarding the assets of the National Council and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.



### Independent Auditors' Report to the Members of National Council for the Professional Development of Nursing and Midwifery

We have audited the financial statements of National Council for the Professional Development of Nursing and Midwifery for the year ended 31 December 2001 which comprise the Income and Expenditure Account, the Balance Sheet and the related notes 1 to 4. These financial statements have been prepared under the accounting policies set out therein.

### Respective Responsibilities of Audit Committee and Auditors

The Audit Committee are responsible for preparing the financial statements. Our responsibilities, as independent auditors, are established in Ireland by auditing standards as promulgated by the Auditing Practices Board in Ireland and by our profession's ethical guidance.

We report to you our opinion as to whether the financial statements give a true and fair view. We also report to you whether in our opinion: proper books of account have been kept by the Council: whether we have obtained all the information and explanations necessary for the purpose of our audit and whether the Council's balance sheet and its income and expenditure account are in agreement with the books of account.

### **Basis of Opinion**

We conducted our audit in accordance with auditing standards issued by the Auditing Practices Board. An audit includes examination, on a test basis, of evidence relevant to the amounts and disclosures in the financial statements. It also includes an assessment of the significant estimates and judgements made by the Audit Committee in the preparation of the financial statements, and whether the accounting policies are appropriate to the organisation's circumstances, consistently applied and adequately disclosed.

We planned and performed our audit so as to obtain all the information and explanations which we considered necessary in order to provide us with sufficient evidence to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or other irregularity or error.

> DELOITTE & TOUCHE Chartered Accountants and Registered Auditors Dublin Date: 27 May 2002

# Statement of Accounting Policies for the Year Ended 31 December 2001

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

### Accounting Convention

The financial statements are prepared under the historical cost convention.

### **Basis of Preparation**

Allocations received and receivable from the Department of Health and Children are credited to the Income and Expenditure Account on the basis of the allocated amount notified by the Department of Health and Children to the Council in each financial year.

Expenditure is included in the financial statements on the accruals basis.

### **Fixed Assets**

Fixed assets are stated at cost less accumulated depreciation.

All revenue expenditure on assets is capitalised. All revenue expenditure thus capitalised is written off to the General Fund Account in the year in which it is incurred.

### **Depreciation of Tangible Assets**

Tangible fixed assets are recorded at cost.

Depreciation is calculated to write off the fixed assets over their useful lives at the following annual rates:

Computers	25% Straight Line
Telephone System	12.5% Straight Line
Office Equipment	12.5% Straight Line
Fixtures & Fittings	
- OPW/Manor Street	12.5% Straight Line

### Income and Expenditure Account for the Year Ended 31 December 2001

	2001
Schedule	IR£
Income Department of Health & Children Funding	2,485,367
Expenditure 1 & 2	(2,485,367)
RESULT FOR THE YEAR	-
Income and expenditure account brought forward	-
Income and expenditure account carried forward	-

With the exception of fixed asset funding and depreciation dealt with through the General Fund, all recognised gains and losses for the year ended 31 December 2001 have been included in the Income and Expenditure Account. The result for the year arises from continuing operations.

The financial statements were approved by the directors on 27 May 2002 and signed on its behalf by:

Mr W.P. Dunbar Mr Patrick Hume Ms Teresa Cody

Audit Committee

### Balance Sheet as at 31 December 2001

		2001
	Notes	IR£
FIXED ASSETS		
Tangible assets	1	148,170
CURRENT ASSETS		
Debtors	2	156,891
CREDITORS		
(Amount falling due within one year)	3	(156,891)
NET CURRENT ASSET		
NET CORRENT ASSET		-
NET ASSET		148,170
REPRESENTED BY:		
Income and expenditure account		-
General Fund Account	4	148,170
		148,170

The financial statements were approved by the directors on 27 May 2002 and signed on its behalf by:

Mr W.P. Dunbar Mr Patrick Hume Ms Teresa Cody

Audit Committee

### Notes to the Financial Statements for the Year Ended 31 December 2001

1. Tangible Assets

1.		Computers	Telephone System	Office Equipment	Furniture & Fittings (OPW/Manor Street)	Total
		IR£	IR£	IR£	IR£	IR£
	Cost Additions	48,327	16,985	22,084	88,845	176,241
	At 31 December 2001	48,327	16,985	22,084	88,845	176,241
	Depreciation					
	Charge for the year	12,082	2,123	11,106	2,760	28,071
	At 31 December 2001	12,082	2,123	11,106	2,760	28,071
	Net book values					
	At 31 December 2001	36,245	14,862	10,978	86,085	148,170
2.	Debtors					
	(Amounts falling due wit	hin one year)				2001 IR£
	Department of Health &	Children				156,891
					_	
3.	Creditors					
	(Amounts falling due wit	hin one year)				2001
	Trade Creditors					IR£ 143,124
	Accruals					13,767
					_	156,891
4.	General Fund Account	t				2001
						IR£
	At 1 January 2001		. –			-
	Fixed asset additions ex Depreciation for the yea	•	come and Ex	xpenaiture A	ccount	176,241 (28,071)
		I				· · · · · · · · · · · · · · · · · · ·
	At 31 December 2001					148,170

# Additional Information Not Covered by the Independent Auditors' Report

Schedule 1:

Operational Expenditure for the Year Ended 31 December 2001

	2001
	IR£
OPERATIONAL EXPENDITURE	
Staff	266,835
Accommodation Costs	23,579
Council Travel & Expenses	32,375
Staff Travel Expenses	6,199
Telephone	23,659
Postage	18,440
Printing & Stationery	77,417
Newsletter Production	146,860
Newsletter Postage	76,817
Recruitment & Training	30,279
Professional Fees	6,708
Computer Support	7,068
Internet & Web Page Support	3,768
Conference Expenses	43,372
Regional Workshops	10,460
Subscriptions & Books	6,015
Bank Charges	36
Miscellaneous	7,208
Prescribing Project	18,077
	805,172



### Schedule 2:

Other Expenditure for the Year Ended 31 December 2001

	2001 IR£
SET UP COSTS	
Computers	48,327
Telephone System	16,985
Equipment	22,084
Moving Expenses	2,466
Launch	478
Website Development	9,384
	99,724
FURNITURE & FITTINGS (OPW/MANOR STREET)	
Furniture & Fittings (OPW/Manor Street)	88,845
CONTINUING EDUCATION PROGRAMMES	
Eastern Regional Health Authority	139,248
Southern Health Board	337,308
South Eastern Health Board	306,948
Western Health Board	188,736
Mid-Western Health Board	2,004
North Western Health Board	118,800
Midlands Health Board	183,684
North Eastern Health Board	214,896
	1,491,624

# **APPENDICES**

## Appendix 1

Statutory Instrument (SI No 376 of 1999)

#### The National Council for the Professional Development of Nursing and Midwifery (Establishment) Order, 1999

The Minister for Health and Children in exercise of the powers conferred on him by Sections 3 to 6 of the Health (Corporate Bodies) Act, 1961 (No. 27 of 1961) as amended by Section 22 of the Health (Amendment) Act No. 3, 1996 and adapted by the Health (Alteration of Name of Department and Title of Minister) Order (S.I. No. 308 of 1997) hereby orders as follows:

- This Order may be cited as the National Council for the Professional Development of Nursing & Midwifery (Establishment) Order 1999.
- 2. In this Order:

"the Council" means National Council for the Professional Development of Nursing & Midwifery established by this Order;

"the Chairperson" means the Chairperson for the time being of the Council;

"the Minister" means the Minister for Health and Children;

- (1) A body to be known as the National Council for the Professional Development of Nursing & Midwifery
  - (2) The Council shall be a body corporate with perpetual succession and a seal and with power to sue and to be sued in its corporate name and to hold land.
- 4. The functions of the Council shall be:
  - (a) monitor the on-going development of nursing and midwifery specialities, taking into account, changes in practice and service need;
  - (b) to formulate guidelines for the assistance of health boards and other relevant bodies in the cre ation of specialist nursing and midwifery posts;
  - (c) to support additional development in continuing nurse education by health boards and voluntary organisation;
  - (d) to assist health service providers by setting guideline for the selection of nurses and midwives who might apply for financial support in seeking opportunities to pursue further education;
  - (e) to publish an annual report on its activities, including the disbursement of monies by the Council.
- 5. (1) The Council shall consist of twenty members who shall be appointed by the Minister as follows;
  - (a) seven shall be registered nurses, one from each of the following areas: general nursing, mental handicap nursing, psychiatric nursing, public health nursing, sick children's nursing, care of the elderly, and a nurse tutor, each of whom must be of high professional standing with experience of advanced practice;
  - (b) one shall be a registered midwife of high professional standing with experience of advanced practice;
  - (c) two shall be members of An Bord Altranais nominated by An Bord Altranais;
  - (d) one person shall be appointed following consultation with the Office for Health Management;
  - (e) one shall be a senior nurse manager appointed following consultation with the appropriate

professional bodies;

- (f) two persons shall be appointed following consultation with the Health Service Employers Agency;
- (g) two shall be officers of the Department of Health and Children, one of whom shall be the Chief Nursing Officer at the Department;
- (h) one shall be a medical practitioner appointed following consultation with the Royal College of Surgeons in Ireland, the Royal College of Physicians of Ireland, the Irish College of General Practitioners and the Royal College of Psychiatrists in Ireland;
- (i) three shall be nurses or midwives appointed following consultation with third-level institutes, one of whom shall be the Head of a Department of Nursing in a NUI University, one shall be the Head of a Department of Nursing in a non- NUI University, and one shall be the Head of a Department of Nursing in an Institute of Technology or a Regional Technical College.
- (2) (a) The Minister shall appoint a Chairperson from amongst the members of the first Council established pursuant to this Order. The Chairperson of each subsequent Council shall be elected by members of that Council.
  - (b) Each Chairperson shall hold office for a period of five years from the date of appointment.
- (3) The term of office of a member of the Council shall be for a period of five years from the date of appointment, as may be specified by the Minister when appointing him or her and he or she shall hold office for the period for which he or she is appointed unless he or she sooner dies, resigns or ceases to be a member in accordance with Article 5 of this Order.
- (4) Members of the Council shall be limited to serving two consecutive terms, with the exception that half of the membership of the first Council appointed by the Minister pursuant to this Order shall be limited to serving one term of office.
- (5) Whenever a casual vacancy occurs among the members of the Council, the Council shall forthwith notify the Minister who shall, as soon as is convenient, appoint a person to fill such vacancy in accordance with Article 5 (1) of this Order, and any person so appointed shall serve as a member of the Council for the unexpired period of the term of office of the person whom he or she replaces.
- (6) A member of the Council may resign his or her membership by giving notice in writing signed by him or her to the Council, but the resignation shall not become effective until the meeting of the Council next held after receipt of the notice of resignation.
- (7) A member of the Council may at any time be removed from membership by the Minister, if he or she no longer fulfils the criteria for membership set out in Article 5 (1) of this Order, or in the Minister's opinion, the member has become incapable through ill-health of performing his or her functions, or has committed stated misbehaviour, or fails to attend meetings, or his or her removal appears to the Minister to be necessary for the effective performance by the Council of the functions of the Council.
- 6. The quorum for a meeting of the Council shall be eight.
- 7. The Council shall hold such and so many meetings as may be necessary for the performance of its functions.
- 8. Save as is otherwise provided by any order, including this Order, the Council may regulate by

standing orders or otherwise, its procedure and business.

- The proceedings of the Council shall not be invalidated by any vacancy or vacancies among its members or by any defect in the appointment of the Council or any member thereof.
- 10. (1)The Chairperson may at any time call a meeting of the Council.
  - (2) If the Chairperson fails, neglects or refuses to call a meeting of the Council after a requisition for that purpose, signed by eight members of the Council has been presented to him or her, any eight members of the Council may forthwith on that refusal, call a meeting of the Council, such meeting not to be held until subsequent to the expiry of a notice period of five working days commencing on the day of such refusal.
- 11. At a meeting of the Council:

(1) the Chairperson shall, if he or she is present, be Chairperson of the meeting.

- (2) If and so long as the Chairperson is not present, the members of the Council who are present shall choose one of their number to be Chairperson of the meeting.
- 12. Minutes of the proceedings of each meeting of the Council shall be kept and shall be verified by the Chairperson of the next ensuing meeting.
- 13. The names of the members present at a meeting of the Council shall be recorded in the records of the proceedings of the Council.
- 14. (1)A person other than the Chairperson shall not receive any remuneration for acting as a member of the Council. The Chairperson shall receive such remuneration for acting as Chairperson of the Council as may from time to time be determined by the Minister.
  - (2) Members of the Council may be paid travelling and subsistence allowances in accordance with such scale as may from time to time be approved by the Minister.
- 15. (1)All acts of the Council and all questions coming or arising before the Council may be done and decided by a majority of such members of the Council as are present and vote at a meeting of the Council.
  - (2) In the case of equality of votes on any question arising at a meeting of the Council, the Chairperson of the meeting shall have a second or casting vote.
  - (3) A memorandum signed by all the members of the Council shall be effective for all purposes as a resolution of the Council passed at a meeting duly convened, held and constituted.
- 16. (1) The Council may establish committees whose functions shall be to assist and advise the Council in relation to the performance of its functions.
  - (2) The membership of such committees may include persons who are not members of the Council.
  - (3) Any committee so appointed shall act subject to such directives as may be given by the Council, and any expenditure of monies by such committee shall be subject to the approval of the Council.
  - (4) A member of a committee established under this article may be removed from membership at any time by the Council.
  - (5) The Council may at any time dissolve a committee appointed under this article.

- (6) The acts of a committee established under this article shall be subject to confirmation by the Council unless the Council dispenses with the necessity of such confirmation.
- (7) The Council may regulate the procedure of a committee established under this article but, subject to any such regulation, a committee established under this article may regulate its own procedure.
- (8) A member of a committee established under this article shall not receive any remuneration for acting as a member of the committee, but may be paid such travelling and subsistence allowances as may be approved by the Minister.
- 17. (1)The Minister may approve a non-capital determination out of monies provided by the Oireachtas.
- 18. (1) The Council shall keep all proper and usual accounts of all monies received or expended by the Council including an income and expenditure account and balance sheet and, in particular, shall keep all such special accounts as the Minister may from time to time direct.
  - (2) The financial year of the Council shall be the period of twelve months ending on the 31<sup>st</sup> day of December in any year and for the purposes of this provision the period commencing on the date of this Order and ending on the 31<sup>st</sup> December, 1999, shall be deemed to be a financial year.
  - (3) A statement of accounts of the Council for each financial year shall be prepared and after such preparation be subject to audit by the Comptroller and Auditor General under Section (5) (First Schedule) of the Comptroller and Auditor General (Amendment) Act 1993.
- (1) The Council shall not later than 30<sup>th</sup> June in each year, make a report to the Minister of its activities during the preceding year.
  - (2) The Council shall submit to the Minister such information regarding the performance of its functions as the Minister may from time to time request.
- 20. (1)There shall be a chief officer of the Council who shall be called "Chief Executive".
  - (2) The Chief Executive shall be appointed by the Council and shall hold office for such period and upon such terms and conditions (other than terms and conditions relating to remuneration and allowances for expenses) as the Council may, with the approval of the Minister, determine from time to time.
  - (3) The terms and conditions relating to the remuneration and allowances for expenses of the Chief Executive shall be such as may be determined from time to time by the Minister.
  - (4) The Chief Executive shall carry on and control generally the administration and business of the Council and perform such other functions as the Council may determine from time to time.
  - (5) The Chief Executive shall not be a member of the Council but shall be entitled to attend at all Council meetings unless the Council otherwise decides.
- 21. (1)The Council may, subject to the consent of the Minister, appoint such and so many employees as the Council may, from time to time, think proper and in appointing any such employees, the Council shall comply with any directions given by the Minister relating to the procedure to be followed.

- (2) The Council shall, subject to the consent of the Minister, determine the remuneration and conditions of service of its employees.
- (3) The Chief Executive shall, from time to time, assign such duties as he/she considers appropriate to each employee of the Council and each such employee shall perform the duties so assigned to him or her.
- (4) Permanent employees of the Council shall be subject to normal public service retirement regulations.
- (5) The Minister may, whenever and so often as he or she thinks fit, declare that any of the powers conferred on the Council by this Article shall be exercisable only with the consent of the Minister, and whenever any such declaration is in force, the said powers may, in relation to any office or employment to which the declaration applies, be exercised only with such consent.
- 22. Subject to the prior approval of the Minister, the Council may from time to time engage such consultants or advisers as it may consider necessary for the performance of its functions, and any fees due to a consultant or adviser engaged under this article shall be paid by the Council out of monies at its disposal.
- 23. (1)The Council shall, as soon as may be after the establishment day, provide itself with a seal.
  - (2) The seal of the Council shall be authenticated by the signature of the Chairperson of the Council or some other member of the Council authorised by the Council to act in that behalf, and by the signature of an employee of the Council authorised by the Council to act in that behalf.
  - (3) All Courts shall take notice of the seal of the Council, and every document purporting to be an instrument made by the Council and to be sealed with the seal (purporting to be authenticated in accordance with sub-article (2) of this article) of the Council shall be received in evidence and be deemed to be such instrument without proof, unless the contrary is shown.
- 24. (1)A member of the Council who is either directly or indirectly interested in any company or concern with which the Council proposes to make any contract, or in any contract which the Council proposes to make, shall disclose or cause to be disclosed to the Council the fact and nature of such interest at the meeting of the Council at which the question of entering into such a contract is first considered or, if he has no such interest at the time, as soon as he has acquired such interest in the proposed contract or, if made, in the contract.
  - (2) A disclosure under the preceding sub-article shall be recorded in the records of the Council.
  - (3) Where a member of the Council has an interest (to which sub-article (a) of this articles relates) in a proposed contract or in a contract (if made), the member, at a meeting of the Council
    - (a) shall take no part in any deliberations relating to the contract or proposed contract, except to such extent as the Chairperson man of the meeting may permit.
    - (b) shall not vote upon any proposed decision relating to the contract or proposed contract, and
    - (c) shall, for the purposes of articles 14(1) and 14(2) of this Order, be deemed not to be present while the contract or proposed contract is being deliberated or voted upon.
  - (4) Where the Minister is satisfied that a member of the Council has failed to comply with any requirement of sub-article (1) or (3) of this article, he may, if he thinks fit, remove that member from membership of the Council, and, in a case where a person is removed from office pursuant to this sub-article, he shall henceforth be disqualified from membership of the Council.



- 25. A person shall not, without the consent of the Council, disclose any information obtained by him while performing duties as a member or employee of, or a consultant or adviser to, the Council.
- 26. For the purpose of the performance of its functions:
  - (1) (a) The Council shall not borrow money without the priorconsent of the Minister.
    - (b) The borrowing of monies by the Council shall be subject to such terms and conditions (if any) as may be specified by the Minister.
  - (2) (a) The Council may acquire land or buildings subject to the general directions given by the Minister.
    - (b) The Council may, subject to any general directions given by the Minister sell, exchange, let or otherwise dispose of any land or buildings vested in it.
    - (c) The Council may charge fees for services it provides, including for consultancy services, for publications it produces and for attendance at events it organises.
- 27. Subject to the approval of the Minister:
  - (1) The Council may accept gifts of money, land and other property upon such trusts and conditions, if any, as may be specified by the donor.
  - (2) The Council may not accept a gift if the conditions attached by the donor to its acceptance are not consistent with the functions of the Council.
  - (3) Any funds of the Council, being a gift or the proceeds of a gift to it, may, subject to any terms and conditions of the gift, be invested in any manner in which a trustee is empowered by law to invest trust funds.
- 28. The Council may invest any of its funds (not being funds to which article 27(3) applies) in any manger in which a trustee is empowered by law to invest trust funds.

Given under the Official Seal of the Minister for Health and Children this  $30^{th}$  day of November, 1999

Brian Cowen MINISTER FOR HEALTH AND CHILDREN

#### EXPLANATORY NOTE

(This note is not part of the Instrument and does not purport to be a legal interpretation).

The effect of this Order is to establish under the Health (Corporate Bodies) Act 1961 as amended a body to be known as the National Council for the Professional Development of Nursing and Midwifery.

# Appendix 2

### Continuing Education Programmes Allocated Additional Funding in 2001

Title of Programme	Funding Allocated	Outline of Programme
Eastern Regional H	lealth Au	uthority
Advanced Nursing Practice Module, Master of Medical Science (Nursing) IR£8,000	(E10,158) Curriculum	development for the advanced nursing practice module within the clinical strand of the Degree of Master of Medical Science (Nursing).
HONESCA: An Assessment Scale for Rating Mental Health Needs of Children and Adolescents	IR£5,757 (E7,310)	A one-day conference intended to promote an understand- ing of "HONESCA", an assessment tool for assessing the mental health needs of children and adolescents.
Introduction to Clinical Audit	IR£39,535 (E50,199)	The purpose of this programme is to introduce clinical audit within the mental health services. To facilitate this, QUASAR, a software package for continuous quality improvement (CQI), will be utilised.
Leading an Empowered Organisation IR£3,000	(E3,809) A two-day pro-	gramme providing participants with an introduction to empowerment, management and leadership techniques.
Management Development Programme IR£3,680	(E4,673) A programme	addressing the key competencies of front-line management and aimed at management staff, including CNM Is, CNM IIs, CNM IIIs and senior staff nurses.
Management for CNM IIs	IR£3,030 (E3,847)	A programme to be provided for CNM IIs and focused on facilitating development of management skills.
Management for Staff Nurses	IR£2,650 (E3,365)	A programme to be provided for staff nurses and focused on facilitating development of clinical management skills.
Nursing Information and Continuing Education Resource	IR£73,596 (E93,448)	A two-year project aimed at developing a web-based nursing information and educational resource.

# Midland Health Board

Breast and Cervical Screening for Healthcare Professionals	IR£27,414 (E34,809)	A programme for practice nurses and aimed at developing their skills in breast and cervical screening.
Caring for Patients with Dementia	IR£4,000 (E5,079)	A one-day conference looking at the meaning of 'dementia' and the services available, and exploring options beyond the medical model, namely a holistic, psychosocial approach to care.
Change Management in the Workplace	IR£10,056 (E12,768)	A programme addressing the competencies required by individuals who will be facilitators of change in the workplace.



Title of Programme	Funding Allocated	Outline of Programme
Identification, Prevention and Management of Post-Natal Depression: Training for Trainers	IR£7,460 (E9,472)	A two-day research-based training package for trainers working with pre- and post-natal women.
Initiation Programme for Health Service Managers (CNM 1)	IR£67,173 (E85,292)	A programme supporting CNM 1 grades in the development of the management competencies identified by the Office for Health Management and required to make the transition from a predominantly clinical role to a managerial role.
Project to Support Development and Clinical Effectiveness in Community Mental Health Nursing	IR£16,285.40 (E20,678)	A partnership project (with the SEHB) supporting 10 psychiatric nurses as they pursue an education pro- gramme designed to prepare them to provide comprehen- sive mental health care, including the introduction of nurse-led
clinics and the development of CNS posts. Regional Practice Development Project	for Gerontological Nursing	IR£48,000 (E60,947)
Service Planning for Nurse Managers	IR£3,294 (E4,182)	Nurse managers with their broad range of skills need to become increasingly involved in the service planning process. The programme will identify the background to health service planning at national, health board and local function/institution level. A number of service planning frameworks will be presented.
Mid Western Health	Board	
Keeping Ahead of the National Agenda	IR£2,000 (E2,539)	This one-day conference was provided to foster a greater understanding of service planning, empowerment, quality, accreditation and cultural issues in nursing and to foster a network of nursing information/discussion in the Clare Health Services.
North Eastern Healt	h Board	k
Breast and Cervical Screening for Health Professionals	IR£62,650 (E79,549)	The objective of this programme is to develop practice nurses' skills to be competent to deliver breast and cervical screening in their practice settings.
Exploring Developments and Empowering the Nurse Manager of the Future — Irish Nurse Management Network National Conference	IR£2,645 (E3,358)	This conference provided a forum for dissemination of information on issues relevant to middle nurse managers/assistant director grades.
Project to Develop Graduate/Higher Diploma Specialist Nursing/Midwifery Programme	IR£80,832 (E102,635)	The health service providers in the NEHB intend to devel- op in conjunction with Dundalk Institute of Technology and the Higher Education and Training Awards Council (HETAC) an appropriate framework for postgraduate level modules. This framework will be flexible enough to cater for nurses from all disciplines and will specify how nurses can achieve graduate/higher diploma level qualification.

Title of Programme	Funding Allocated	Outline of Programme
Initiation Programme for Health Service Managers (CNM I)	IR£68,769 (E87,319)	This programme focuses on the nurse management competencies as published by the Office for Health Management. The programme will provide support to CNM 1 grades to develop skills to make the transition from a predominantly clinical role to a managerial role.
North Western Heal	th Boai	rd
Behaviours that Challenge	IR£4,550 (E5,777)	This one-day seminar on challenging behaviour aims to provide a review of clients with autism and challenging behaviour, case studies involving clients with challenging behaviour and approaches to working with challenging behaviour.
Care of Patients Following Rape and Sexual Assault	IR£11,000 (E13,967)	This two-day multidisciplinary conference was held on 15 and 16 October 2001 and provided a comprehensive overview of the immediate reception and care, and subsequent medical-legal examination of the adult or child presenting as a result of rape/sexual assault.
Facilitator to Develop the Curriculum for a Higher Diploma in Nursing Studies (Community Nursing)	IR£33,000 (E41,901)	The NWHB intends to commence the Higher Diploma in Nursing Studies (Community Nursing) on a modular basis open to all disciplines of nursing. It is proposed to put a facilitator in place for two years to develop the curriculum, prepare the sites, support the students and assist at vali- dation of the programme.
Family Planning and Reproductive Sexual Health	IR£12,000 (E15,237)	This is a stand-alone module of the Diploma in Midwifery from Queens University, Belfast, which provides both the theory and practical experience of family planning and reproductive sexual health. It is envisaged that a comprehensive Well Woman/Man and Family Planning service will be made available by practice nurses in all GP surgeries as an outcome of this module.
Patient-Centred Care Project	IR£10,240 (\13,002)	This one year programme is a personal and professional development programme. The overall aim of the programme is to introduce sustainable patient-centred care in an acute setting.
Regional Practice Development Project of Gerontological Nursing	IR£48,000 (\60,947)	The three-year programme aims to regionally develop and enhance gerontological nursing practice within a planned framework which is relevant to service needs. The facilitator will be the driver for practice development. The role will seek to enhance service provision in line with consumer needs and be a mechanism of inter-relationship between the user of the service and the health service providers.

## South Eastern Health Board

Advanced Life Support in Obstetrics

IR£24,000 (\30,474) This programme is provided to ensure that midwives can effectively and efficiently respond to obstetric emergencies in a well planned and co-ordinated manner.



Title of Programme	Funding Allocated	Outline of Programme
Caring for Patients with Dementia	IR£3,380 (\4,292)	This one-day conference will look at the meaning of 'dementia,' the services available and explore options beyond the medical model, namely a holistic, psychosocial approach to care.
Clinical Audit Initiative in Mental Health Nursing	IR£20,150 (\25,585)	This programme aims to address the training needs of the staff involved with the SEHB Mental Health Services Quality Assurance Strategy, particularly in regard to quality assurance and clinical audit. It is proposed to utilise the QUASAR audit system.
Clinical Supervision Project: Public Health Nursing	IR£40,160 (\50,993)	The programme is a project to examine a model of clinical supervision appropriate for public health nursing.
Managing the Change Process for the Integration of Carlow/ Kilkenny Mental Health Services	IR£8,725 (\11,078)	This nine-month programme aims to manage the change process for the integration of the Carlow/Kilkenny mental health services and the establishment of a department of acute psychiatry at St. Luke's Hospital, Kilkenny.
Midwifery Management Development Programme	IR£17,000 (\21,585)	This programme will enable midwifery managers to develop and maintain management competencies to effectively manage the maternity services.
Project to Support Development and Clinical Effectiveness in Community Mental Health Nursing	IR£40,713 (\51,695)	The SEHB has pursued an integrated and comprehensive community-based mental health service. This project proposes that twenty-five psychiatric nurses pursue an education programme to prepare them to provide compre- hensive mental health care including the introduction of nurse-led clinics and the development of CNS posts. This is a partnership project with the MHB.
Project to Support and Enhance CNS/CMS in Professional Role	IR£61,124 (\77,611)	The aim of this two-year project is to evaluate and clarify the role of the CNS/CMS. The core concepts of the specialist as defined by the National Council will be used as a framework for evaluation and on-going development.
Project to Support the Establishment of a Post-graduate Diploma in Gerontological Nursing	IR£20,500 (\26,030)	The SEHB intends to commence the Post-graduate Diploma in Gerontological Nursing as an outreach programme with Trinity College and St. James's Hospital, Dublin. This programme aims to support a facilitator to aid site preparation and the development of a similar Post- graduate Diploma in Gerontological Nursing in conjunction with Waterford Institute of Technology.
Regional Practice Development Project for Gerontological Nursing	IR£48,000 (\60,947)	This three-year programme aims to regionally develop and enhance gerontological nursing practice within a planned framework which is relevant to service needs. The facilitator will be the driver for practice development. The role will seek to enhance service provision in line with consumer needs and be a mechanism of inter-relationship between the user of the service and the health service providers.

Title of Programme	Funding Allocated	Outline of Programme
Southern Health Bo	ard	
Advanced Life Support in Obstetrics (ALSO)	IR£25,200 (E31,997)	This programme is provided to ensure that midwives can effectively and efficiently respond to obstetric emergencies in well planned co-ordinated manner.
Caring for Patients with Dementia	IR£3,960 (E5,028)	A one-day conference, which will look at the meaning of 'dementia,' the services available and explore options beyond the medical model, namely a holistic, psychosocial approach to care.
Certificate in Behaviour Therapy for Nurses	IR£23,200 (E29,458)	This one-year programme addresses within a health care context, behavioural and cognitive aspects of assessment, intervention and rehabilitation for patients with psychiatric illness or a learning disability.
Developing Change Champions in the Workplace	IR£27,793 (E35,290)	This programme will address the competencies required by individuals who will be facilitators and champions of change in their own workplace.
Effective Brief Therapy for Depression	IR£3,842 (E4,878)	This one-day programme aims to support practitioners to review the cognitive, behavioural and solution focused approaches for depression.
Facilitator to Establish a Module in Emergency Advanced Practice as Part of a Master's Degree Programme or as a Stand-Alone Module	IR£40,000 (E50,790)	The SHB intends to commence a Master's degree pro- gramme for ANPs in UCC, Department of Nursing Studies. Funding is provided for a facilitator to develop a curriculum and to prepare the clinical site for an ANP mod- ule in emergency nursing.
Higher Diploma in General Practice Nursing	IR£40,000 (E50,790)	This programme is designed to provide practice nurses with the essential theoretical, practical, social, cultural, ethical and research knowledge and skills to practice within multidisciplinary teams in the primary care setting, and as part of an integrated community nursing service. The funding provided for this two-year programme is to provide seed funding for a course co-ordinator involved in curriculum development and site preparation.
How to Do Effective Counselling	IR£4,139 (E5,255)	This one-day programme is designed to give practitioners an overview of core counselling skills in order to make them more effective in their work.
Identification, Prevention and Management of Post-Natal Depression: Training for Trainers	IR£6,650 (E8,444)	A two-day research based-training package for trainers working with pre- and post-natal women. Post-natal depression affects between 10 and 15% of women in the first post-natal year. Prevention and early detection of women at risk is vital for positive health outcomes.



Title of Programme	Funding Allocated	Outline of Programme
Initiation Programme for Health Service Managers (CNM1)	IR£72,618 (E92,206)	This programme focuses on the nurse management competencies as published by the Office for Health Management. The programme will provide support to CNM 1 grades to develop skills to make the transition from a predominantly clinical role to a managerial role.
Link Nurses' Continence Promotion Programme	IR£13,875 (E17,618)	This programme is designed to address the competencies required by the participants to initiate, develop, manage and change practices towards a continence promotion culture. The focus will be on the prevention, rehabilitative or curative approach.
Parenthood Facilitators Course	IR£2,280 (E2,895)	This programme will enable participants to facilitate antenatal and parenthood programmes for clients. Emphasis will be placed on a consumer-friendly and flexi- ble approach that meets the needs of client and partner.
Promotion of Evidence Based Practice and Research Awareness	IR£9,600 (E12,189)	The overall aim of this programme is to prepare nurses and midwives to improve their research awareness and ability to access information, and to become more independent learners.
Regional Practice Development Project for Gerontological Nursing	IR£50,000 (E63,487)	This three-year programme aims to regionally develop and enhance gerontological nursing practice within a planned framework which is relevant to service needs. The facilitator will be the driver for practice development. The role will seek to enhance service provision in line with consumer needs and be a mechanism of inter-relationship between the user of the service and the health service providers.
Service Planning for Nurse Managers	IR£3,871 (E4,915)	This programme will identify the background to health serv- ice planning at national, health board and local function/institution level. A number of service planning frameworks will be presented.
Teaching, Learning and Assessing in Clinical Practice for RGNs and RMs	IR£2,000 (E2,540)	This programme offers nurses and midwives the opportunity to develop their knowledge, skills and attitudes to facilitate the teaching-learning process and to assess learning effectively in the clinical area.
Understanding and Stopping Addictive Behaviour	IR£4,139 (E5,255)	This one-day programme presents an essential overview of a wide variety of addictive behaviours, what they have in common and describes in detail the most successful ways of breaking patterns of addiction rapidly with psychotherapy.
Understanding Anxiety and Managing It Without Drugs	IR£4,139 (E5,255)	This one-day programme aims to provide practitioners with the knowledge and skills to reduce anxiety.

Title of Programme	Funding Allocated	Outline of Programme
Western Health Bo	ard	
Dealing with Challenging Behaviours in Mental Health	IR£25,000 (E31,743)	This project focuses on bringing together theory and practice in order to help practitioners make sense of behaviours and the associated psychopathology of mentally disordered patients/clients, so that better care and treatment programmes can be delivered.
Joint INO/RCN Clinical Leadership Programme	IR£58,000 (E73,645)	This programme aims to assist PHNs to develop patient-centred leadership strategies. The programme involves developing a personal development plan, team building strategies and leadership skills.
Project for Curriculum Development for the Higher Diploma in Mental Health Nursing	IR£9,000 (E11,428)	This proposal is to provide seed funding to fund a facilitator for three months for curriculum development to review and develop the current five-week programme in mental health nursing (NUIG) in order that it can become accredited as three modules of a Higher Diploma in Mental Health Nursing.
Project for Curriculum Development for the Higher Diploma in Public Health Nursing	IR£9,000 (E11,428)	This proposal is to provide seed funding to fund a facilitator for three months for curriculum development for the Higher Diploma in Public Health Nursing (NUIG). The programme will be developed in a modular format with a view to extending its availability to community nurses, practice nurses and learning disability nurses.
Regional Practice Development Project	IR£87,729 (E111,393)	The programme aims to regionally develop and enhance nursing practice within a planned framework which is relevant to service needs. This is a two-year project with appointed facilitators to drive, negotiate, consult, create, plan, and evaluate a practice development programme to regionally enhance and develop nursing.