



Annual Report 2004



Annual Report 2004



Irish Nurses Organisation

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Notice of Meeting

Notice is hereby given that the 86th Annual Delegate Conference of the Irish Nurses Organisation will be held on Wednesday, Thursday and Friday 4, 5 and 6 May 2005, in the Gleneagle Hotel, Killarney.

Wednesday, 4 May: 3.30pm to 6.30pm (private session)

- 1 Registration
- 2 Ecumenical Prayer Service
- 3 Invocation
- 4 Branch Roll Call
- 5 Appointment of Tellers
- 6 Adoption of Standing Orders Committee Report No. 1
- 7 Minutes of Annual Delegate Conference 2004
- 8 Adoption of Accounts for period 1 January 2004 to 31 December 2004.
- 9 Adoption of Budget – 1 January 2006 to 31 December 2006 (to be taken with Motion No. 1 – Organisational)
- 10 Appointment of Auditors
- 11 Debate on Motions Group 1 Organisational.

Thursday, 5 May: 9.00am to 6.00pm

- 12 Adoption of Standing Order Committee Report No. 2
- 13 Debate on Motions
 - Professional
 - Industrial
 - Educational
 - Social Policy
- 14 Presentation of Awards
- 15 Panel Discussion and Open Floor Debate – The Role of the Healthcare Assistant
- 16 Debate on professional motions numbers 13, 14, 15 and 16 regarding the role of the healthcare assistant
- 17 Address by Kevin Kelly, Acting Chief Executive Officer, Health Service Executive

Friday, 6 May: 9.00am to 4.30pm

- 18 Adoption of Standing Orders Committee Report No. 3
- 19 Debate on motions continued
- 20 Address to conference by Mary Harney TD, Tanaiste and Minister for Health and Children followed by Presidential Address by Madeline Spiers, RGN
- 21 Questions to the Tanaiste
- 22 Formal closure.



Liam Doran

General Secretary

- Presentation of awards at 5.00pm on Thursday, 5 May
- Trade Exhibition on Thursday afternoon and Friday, 5 and 6 May
- Address by Kevin Kelly, Acting Chief Executive Officer, Health Service Executive – Thursday, 5 May
- Address by Mary Harney TD, Tanaiste and Minister for Health and Children at 3.00pm on Friday, 6 May
- Presidential Address by Madeline Spiers, RGN at 3.30pm on Friday, 6 May
- The Annual Gala Dinner will take place on Friday, 6 May, at 7.30pm for 8.00pm

President's Foreword



Madeline Spiers

Colleagues

It gives me great pleasure to present the Annual Report of the Irish Nurses Organisation for 2004. This is the first report since my election at the 2004 annual conference, and I would like to thank all of you for your support, both prior to my election and subsequently. I am aware that the role of President, within the INO, is a significant one and carries with it great responsibilities.

I would particularly like to thank Ann Martin, 1st Vice-President, for her knowledge and passion about nursing and midwifery. I would also like to acknowledge the support and insightful input of Margo Flavin, our 2nd Vice-President, and the commitment and hard work of all of my colleagues on the Executive Council.



Outgoing president and incoming first vice-president, Ann Martin, hands over the presidential chain to Madeline Spiers after elected as INO president

I also want to record my appreciation to the General Secretary, Liam Doran, and all of the Organisation's staff, for their dedication, commitment and hard work.

The range of challenges facing both the Irish health service, and nurses and midwives in particular, remains formidable. We, as nurses and midwives, have, in the last 12 months, faced a deconstruction of the health system and we have yet to witness the impact of these new structures. The HSE is in its infancy and I do not believe significant changes will occur until these structures have had time to bed down. The challenge to the INO is to ensure that our voice is heard within the reformed health system.

The ongoing issue of nursing/midwifery shortages and retention still dominate the daily reality of working within the health system. The policy of employment ceilings, in critical areas across the nursing and midwifery spectrum, continues to cause real problems. Perhaps the most obvious of these is the ongoing crisis in our accident and emergency departments which have been receiving much public

attention. We have consistently warned since 2002, that there will be no new nursing graduates in 2005. It is with regret that more effort was not made in 2004 to retain Irish educated nurses and midwives within our public health service.

The nursing/midwifery shortage has been addressed, somewhat, by overseas recruitment, which has resulted in significant numbers of overseas nurses contributing valuably to our health services. This can only be viewed as a short term solution as they too are attracted to the better pay and conditions offered in other countries. However, we are a long way from having adequate nurse/patient ratios which it appears, from international research, are key mechanisms in attracting nurses and midwives back into the service.

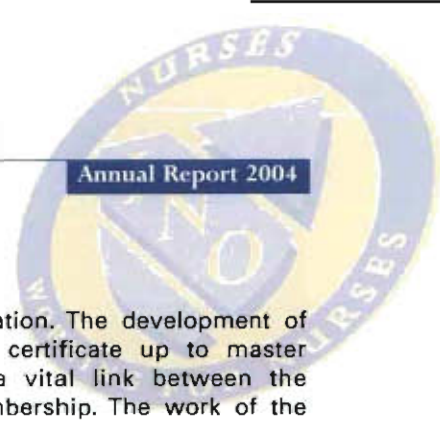
One of the significant IR issues through the year was the Organisation's rejection of phase two of Sustaining Progress. However, as it was accepted by ICTU, to which we are affiliated as an Organisation, we decided, following consultation with members and activists, to accept the majority will of ICTU. This whole area is under constant review. In particular our legitimate demands for a 35-hour week, the removal of the pay anomaly which resulted in registered nurses being paid significantly less than less qualified healthcare workers, and our substantive claim for parity with other degree level health professionals remain alive, active and our major priority.

In the past year we finally saw engagement, with health service management, on the implementation of the European Working Time Directive (EWTD). This directive, which will significantly change the attendance patterns of NCHDs, has the potential to radically alter the working practices of clinical nurses and midwives. In 2004 we only began this process but I know this issue, which involves examination of the extended role, scope of practice and the role of the healthcare assistant, will be a second priority issue in 2005.

2004 finally saw the INO moving into the Whitworth Building, a culmination of many years hard work by previous Executives. I would like to extend my heartfelt thanks to them. While the building provides a strong base for the Organisation, our real strength lies in the branch structure, which requires further consolidation. A union's strength lies in its membership and that is why the Executive Council has decided to carry out a full review of membership participation at branch and section level during 2005.

One of the most enjoyable aspects of my term to date has been meeting members throughout the country in their place of work. While every workplace shares the issues raised previously, each also has its own unique set of challenges which our members deal with daily, while continuing to provide levels of care in spite of these huge obstacles.

As nurses and midwives we need to contribute more



publicly to the debate within the healthcare system. We need to find ways of repositioning the two professions within that complex arena. Only nurses and midwives can be knowledgeable about nursing and midwifery needs. In order to give the political establishment, and in particular, the Department of Health and Children, a better understanding of the nature of nursing and midwifery, we need greater visibility and we need ways of realigning ourselves within the healthcare system that empowers us to seize new opportunities and develop nursing and midwifery practice.

We have, as nurses and midwives, much more to offer than we are currently able to contribute. Nursing and midwifery will only move forward when we speak outside the comfort zone. We need to articulate our vision and concerns for what we, as professionals, can and must contribute to the health and well-being of our society.

On the social policy front the Organisation remains very active in a number of areas, including identifying the current status of all policies and policy documents identified as a direct result of an ADC motion. This work will continue during 2005.

The Organisation continues to develop services to all our members. The success of our two websites – www.ino.ie and www.nurse2nurse.ie, continues unabated which is just one of the huge success stories of 2004.

The Professional Development Centre continues to grow and provide a wide range of workshops and

seminars for the Organisation. The development of ongoing education from certificate up to master degree programmes is a vital link between the Organisation and its membership. The work of the Professional Development Centre clearly separates us from the services that are provided by any other organisation and we will continue to develop this area so that every nurse and midwife can access the full range of necessary services within the INO.

I wish to sincerely thank all branch officers, section officers and nurse representatives for their stoicism, support and continued effort on behalf of the Organisation. The INO is truly indebted to these wonderful people. There is no doubt that without their commitment and continuing involvement as activists this would be a very hard road to travel.

Finally may I extend my sympathies to the family and friends of members of the Organisation who died in the past year. I would also like to extend my sympathies to any staff and their families who may have suffered bereavement during 2004.

I now commend this annual report to you which reflects another very busy year for the Irish Nurses Organisation.

Madeline Spiers

President

Executive Council 2004/2006



The new Executive Council of the INO along with several staff members, from back left: Clare Treacy; Raymond Boyle; Alan Batt; Joe Hoolan; Ursula Morgan; Mary Walsh; Teresa Hayes; Joan McDermott; Ursula Paine; Catherine Doyle; Dorothy Mullarkey; and from front left: Gervaise Maher; Collette Lynskey; Kay Garvey; Sheila Dickson; Liam Doran; Madeline Spiers; Ann Martin; Joan Tobin; Winifred Collier; Ethel Leonard; and Marie Gilligan. Council members absent from picture: Margo Flavin, Jo Tully and Deirdre Daly

Office Bearers

| | | |
|----------------------------|------------------------|---|
| President: | Madeline Spiers | <i>Senior Staff Nurse, Theatre, St Columcille's Hospital, Loughlinstown</i> |
| 1st Vice-President: | Ann Martin | <i>Clinical Midwife Manager, University College Hospital, Galway</i> |
| 2nd Vice-President: | Margo Flavin | <i>Clinical Nurse Manager, Waterford Regional Hospital</i> |

Clinical (16 seats)

| | | |
|-------------------------|-----------------------------|--|
| Raymond Boyle | <i>Acting CNM2</i> | <i>Cavan General Hospital</i> |
| Winifred Collier | <i>CNM2</i> | <i>Lusk Community Unit, Co Dublin</i> |
| Sheila Dickson | <i>Staff Nurse</i> | <i>St Columbanus Home, Killarney</i> |
| Catherine Doyle | <i>CNM2 (CNS)</i> | <i>St Vincent's Centre, Lisnagry</i> |
| Kay Garvey | <i>Clinical/Staff Nurse</i> | <i>MIDOC, Mullingar</i> |
| Teresa Hayes | <i>CNM2</i> | <i>Adelaide & Meath Hospital, Tallaght</i> |
| Joe Hoolan | <i>Staff Nurse</i> | <i>Midland Regional Hospital, Portlaoise</i> |
| Ethel Leonard | <i>Acting CNM3</i> | <i>Portiuncula Hospital, Ballinasloe</i> |
| Collette Lynskey | <i>Staff Nurse</i> | <i>University College Hospital, Galway</i> |
| Ursula Morgan | <i>Staff Nurse</i> | <i>Roscommon County Hospital</i> |
| Ursula Paine | <i>CNM1</i> | <i>Hospital of the Assumption, Thurles</i> |
| Jo Tully | <i>Staff Nurse</i> | <i>St James's Hospital, Dublin</i> |
| Mary Walsh | <i>Staff Nurse</i> | <i>Sligo General Hospital</i> |

Administration (3 seats)

| | | |
|-----------------------|---|--|
| Marie Gilligan | <i>Nurse Practice Development Co-Ordinate (ADoN)</i> | <i>Cregg House, Sligo</i> |
| Joan McDermott | <i>Director of Nursing</i> | <i>D'Alton Community Nursing Unit, Claremorris</i> |
| Joan Tobin | <i>Assistant Director of Nursing (Night Superintendent)</i> | <i>Waterford Regional Hospital</i> |

Education (2 seats)

| | | |
|-----------------------|--|----------------------------------|
| Deirdre Daly | <i>Principal Midwife Tutor</i> | <i>Rotunda Hospital, Dublin</i> |
| Gervaise Maher | <i>Former Director, Centre for Nurse Education</i> | <i>Beaumont Hospital, Dublin</i> |

Student (1 reserved seat)

| | | |
|------------------|----------------------|--|
| Alan Batt | <i>Student Nurse</i> | <i>South Infirmary/Victoria Hospital, Cork</i> |
|------------------|----------------------|--|

Introduction



Liam Doran,
General Secretary, INO

2004 will be recalled as yet another memorable, active and intense year for the Organisation's members, branch/section officers, nurse representatives and staff as the INO was again to the fore, at local, regional and national level, on all issues of concern to our members and to the health service in general.

In historical terms the year will be particularly remembered as the year that the Organisation formally moved into its new headquarters, The Whitworth Building. While the details of this move will appear later, the event undoubtedly marked the Organisation's continued growth and development as we now have a headquarters which offers much greater opportunities to serve the needs of our growing membership.

During 2004 the Organisation's membership also continued to increase and, at the close of the year, was almost 31,000. This continued growth in membership is a tangible demonstration of the work of activists, all over the country, who continue to ensure that almost five out of every six practising nurses/midwives are members of the INO. This continued growth in membership has, as in years past, brought with it its own challenges as to how the Organisation should properly service its members, and how to further develop our full range of industrial relations, professional, educational and developmental services now demanded by students and practising nurses and midwives.

This report, which will act as an historical record of the Organisation's activities through the year, will detail, in the following pages, all of the major issues and events in which the Organisation was involved.

Branch Officers/Section Officers/Nurse Representatives

At this stage I wish to begin this annual report by placing on record, on behalf of the Executive Council and staff, our sincere appreciation and thanks to all branch and section officers and nurse representatives for their continued activities on behalf of the Organisation. We now have over 43 branches and 25 separate sections,

with other special interest groups, all of which can only function as a result of the excellent voluntary effort given by our key activists.

I salute all of these valued members and look forward to working with them as we continue to grow and develop the Irish Nurses Organisation during 2005 and beyond.

New Headquarters – The Whitworth Building



The record should show that Monday, 26 April 2004, was the date on which the Organisation formally opened for business in our new head office, The Whitworth Building, North Brunswick Street, Dublin 7.

The new headquarters, which is almost 17,000 sq. ft. in size, offers the space and facilities which will allow the Organisation to service our growing membership with even greater efficiency and effectiveness.

The Whitworth Building, which was formally part of the Richmond Hospital Complex, was completely refurbished following its purchase in February 2003.

The end result is very much improved facilities which include a large boardroom, a large conference room, classrooms, a larger research and library department,



enhanced storage facilities and enlarged office space. The new headquarters also offers onsite car parking which is of such assistance to members who are attending for meetings, study days and other events and activities organised by the Organisation.

I wish to stress again, as we have consistently done so since the building was opened, that the INO headquarters belongs to the members. In that context every member is invited to come and visit us and see the services and facilities which are now available to everyone.

Our move to our new headquarters has already stimulated an increase in the number of programmes, seminars and workshops which, of itself, means that INO members are visiting their headquarters in greater numbers than ever before.

The Whitworth Building is a headquarters of which every member should be very proud. It is a tangible demonstration of the Organisation's growth since its early days, and stands as testimony to the work and effort of members, activists and staff who have worked, on the Organisation's behalf, over the last 86 years.

Organisational Developments

85th Annual Delegate Conference

In Killarney on 5, 6 and 7 May 2004, the Organisation held its 85th Annual Delegate Conference which was again packed with debate and discussion reflecting all areas of concern to our growing membership.

Over 340 delegates gathered, over the three days, and actively participated in debates on topics of interest through motions, workshops and presentations.

In particular this year's annual conference covered the following:

Election of new President

The 85th Annual Conference also saw the election of Madeline Spiers, RGN, as President of the Irish Nurses Organisation for the period 2004 - 2006.

Madeline, who works as a Theatre Staff Nurse in St Columcille's Hospital, Loughlinstown, Co Dublin, succeeded Ann Martin, RGN, RM, who had acted as President following the untimely death, in office, of Clare Spillane in June 2003.

1st Vice-President/Treasurer

Ann C Martin, Clinical Midwife Manager 1, University College Hospital, Galway, was elected to the office of 1st Vice-President/Treasurer following an election at the annual conference.

2nd Vice-President

Margo Flavin, Clinical Nurse Manager 2, Eye Theatre, Waterford Regional Hospital, was elected to the office of 2nd Vice-President at the annual conference.

The Presidential address, by Ann Martin, outgoing President, concentrated on the changing nature, of nursing and midwifery practice, and the implications, for nurses and midwives, of the health service reform programme.

A panel debate took place under the heading 'Funding the Irish Health Service – The Options and the Challenges', on Thursday afternoon, 6 May 2004, involving:

- Micheál Martin TD, Minister for Health and Children;
- Olivia Mitchell, Fine Gael Health Spokesperson;
- Liz McManus, Labour Party Health Spokesperson;
- Maev-Ann Wren, Author; and
- Jim Power, Economist.

The panel was chaired by Fergal Bowers, health journalist and now RTE health correspondent.

The debate, which lasted over two hours, provoked strong reaction from the attending delegates, with many challenging questions being tabled toward all of the politicians present.

The conference also debated over 70 motions, submitted by branches/sections and the Executive Council, which gives direction to the Organisation's agenda for the following 12 months.

The conference also debated, and adopted, a formal strategy document on the funding arrangements for national sections, which will determine how section activity, both operational and strategic, is funded into the future.

The conference agenda also included the following noteworthy events:

Gobnait O'Connell Award for Outstanding Service



Bridie Reilly, St Joseph's Hospital, Longford pictured with Kevin O'Connor, INO IRO, after receiving the Gobnait O'Connell Award in recognition of her work on behalf of INO members in the frontline. The Award is presented annually in memory of deceased former INO IRO, Gobnait O'Connell, in recognition of her contribution to nursing and midwifery in Ireland

Bridie Reilly, Clinical Nurse Manager 1, St Joseph's Hospital, Longford, was the recipient of the fourth

Gobnait O'Connell Award, which is presented for outstanding service, to an activist within the Organisation.

The award, which is presented annually in memory of our deceased former IRO and Ministerial Advisor, Gobnait O'Connell, was given to Bridie in recognition of her commitment, interest and activity, on behalf of the Organisation, at branch level, over many years.

PJ Madden Research Award



Pictured is Fidel Taguinod, Overseas Nurses Section Delegate, receiving the INO Research Award sponsored by CJ Coleman & Co Ltd from INO President Ann Martin.

This award was won by Fidel Taguinod for his study entitled 'Experiences of Overseas Nurses Recruited in the Irish Health Services'.

The award was presented jointly by Ann Martin, Acting President, and Nancy Layton-Cook, from CJ Coleman and Company Ltd.

Executive Council

The Executive Council of the Organisation, in keeping with rule, held 11 ordinary meetings, and one special meeting, during the year under review.

2004 also saw a new Executive Council elected, following the usual biennial postal ballot of all members, and took up office immediately on the close of the 85th Annual Delegate Conference and will remain in office for the period May 2004 to May 2006.

The membership of the current Executive Council is detailed elsewhere in this report.

At its first meeting, held in June, the incoming Executive, as it is required to do under rule, elected the following members to the Finance and General Purposes Committee:

- Madeline Spiers, President;
- Ann Martin, 1st Vice-President;
- Margo Flavin, 2nd Vice-President;
- Winifred Collier;

- Joan McDermott;
- Joan Tobin;
- Mary Walsh.

The Council also decided to re-establish its other three standing committees namely:

- Industrial;
- Nursing and Midwifery Education and Practice;
- Social Policy.

Industrial Committee

Chaired by Margo Flavin, 2nd Vice-President, and under the guidance of Dave Hughes, Deputy General Secretary, the Industrial Committee concentrated upon the following issues:

- Motions forwarded to it by annual conference;
- Monitoring of national IR issues including grading claims;
- Ongoing review of the problems in A&E departments due to overcrowding.

Nursing and Midwifery Education and Practice Committee

Chaired by Ann Martin, 1st Vice-President, and under the guidance of Annette Kennedy, Director of Professional Development, the work of the Nursing and Midwifery Education and Practice Committee is detailed elsewhere but was significantly influenced by the issue of healthcare assistants and their relationship to the registered nurse.

Social Policy Committee

Chaired by Sheila Dickson, Executive Council, and under the guidance of Clare Treacy, Director of Organisation and Social Policy, the work of the Social Policy Committee is detailed elsewhere in this report.

Executive Council – Major Policy Initiatives

In addition to the work of the committees, the Executive Council, at a special meeting in September, also decided that it would prioritise the following:

Branch Development

The Executive Council decided one of its key priorities, would be the need to redevelop the Organisation's branch structures arising from the changed attendance patterns at meetings and demands of the membership.

In particular the Council focused upon the need to create and sustain the proper balance between hospital/community/section and branch involvement with the key issue being the need to retain the collective effort and strength of members regardless of their specialist area or particular discipline.

Nursing/Midwifery Shortages

The Executive also reviewed, on an ongoing basis, the issues and difficulties arising from the continued shortage of nurses and midwives.

In particular the Executive Council repeatedly sought initiatives, from the Department of Health and Children, regarding the fact that there would be no qualifying group, in 2005, and, therefore, there was a need to bring forward emergency measures to retain 2003/2004 graduates in the Irish health service.

Notwithstanding this obvious reality, the Department of Health and Children, through the Health Service Employers Agency, pointedly refused to discuss and agree targeted incentives aimed at recruiting and retaining nurses/midwives in the Irish public health service throughout 2004.

The seriousness of this situation was confirmed, in late 2004, when a survey, carried out by the Organisation, confirmed the following:

- 20% of qualifying nurses, in 2004, were offered no employment at all by the Irish health service;
- 62% of qualifying nurses, who were offered employment, were only offered short term relief/locum/fixed term contract positions;
- 38% of those offered employment were only offered positions for less than six months.

The results of this survey were brought to the attention of the Tánaiste and Minister for Health and Children, Mary Harney, and she indicated, at a meeting before the end of 2004, that she would consider the establishment of a special working group to examine and report upon retention initiatives for nurses and midwives.

Health Reform Programme

The Executive Council also spent significant periods monitoring the health reform programme and, in particular, its potential impact upon the nursing and midwifery professions.

As the year progressed frustration grew arising from the failure, as part of the reform programme, to establish and maintain a nursing and midwifery presence at corporate level, in the new central unitary structure, the Health Service Executive (HSE).

European Working Time Directive

The Executive Council also spent significant periods reviewing the process, to be agreed with health service employers, to assess, measure and value the changed role of nurses and midwives arising from the European Working Time Directive and the consequential changed attendance patterns of non-consultant hospital doctors.

In November 2004 agreement was finally reached on the establishment of a nursing and midwifery sub-group, with representatives of both the INO and management, which would examine and report on issues as advised,

by the National Implementation Group (NIG) for the European Working Time Directive, including:

- Areas and issues relating to the scope of practice of nurses and midwives arising from the EWTD implementation process which will require a basis in legislation;
- All measures/issues arising from extending the role of the staff nurse/staff midwife;
- Measures deemed necessary to facilitate the process of creating additional nursing and midwifery posts, including nurse/midwife specialist posts and nurse/midwife advanced practitioner posts, in sufficient numbers to meet the need for altered roles and functions that may arise from the EWTD;
- Skill mix issues related to EWTD implementation where further clarification regarding scope of practice and delegation is required from the appropriate professional regulatory bodies;
- Other issues which may be referred to it by the National Implementation Group.

The President, three members of the Executive Council and senior members of the secretariat have been assigned to this sub-group which will work right through 2005.

A&E Overcrowding

The Executive also spent considerable time, in addition to the work of the Industrial Committee, in reviewing the difficulties for members and patients arising from the continuing severe overcrowding in the country's A&E departments.

In the context of this issue the Council sanctioned a high profile campaign aimed at highlighting, on a daily basis, the numbers of patients on trolleys and the failure of managements, at hospital level, to aggressively deal with the issue.

This issue is covered in greater detail in the IR section of this report.

Social Policy Development

The Executive Council has also decided to further prioritise the development of strong policies in social and allied areas, within which nurses and midwives might seek to influence policy, resource allocation and change.

Special Meeting – Clonmel

On 9 March 2004, the Executive Council held its March meeting in the Town Hall Chambers in Clonmel following an invitation by the Mayor of Clonmel, Alderman Phil Prendergast.

Ms Prendergast was a past member of the INO Executive and continues to be actively involved with the Organisation in relation to St Joseph's Hospital, Clonmel.



INO President, Ann Martin with Mayor of Clonmel, Phil Prendergast (front right), who hosted a meeting of the INO Executive Council in Clonmel last month. Also pictured are (back, l-r): Maire Corry; Anne Guiry; Celine Dunphy; Tony Fitzpatrick, INO IRO; Siobhan Kelly; Joan Tobin and Margo Flavin.

Mayor Prendergast had issued the invitation as a gesture to mark her election as Mayor and the Executive, through its President, Ann Martin, was delighted to accept.

The occasion was marked with the presentation, by the Mayor, of a framed certificate which now hangs on the wall of the new headquarters.

National Branch/Section Officers meeting

The annual meeting of all branch and section officers, together with the representatives of the large Dublin hospitals took place on

The meeting, which was attended by over 120 key activists, reviewed in detail the feedback from the regional meetings, which had taken place in October, on the Organisation's continued approach/involvement in the second module of Sustaining Progress.

The meeting endorsed the recommendation, from the Executive Council, that the Organisation should continue to remain within the process and the matter should be further reviewed at the annual delegate conference in May 2005.

The meeting also reviewed progress on implementing motions adopted at the 2004 annual conference and received an update on the implications for nurses and midwives arising from the health service reform programme.

It was agreed that this national meeting should become an annual event as it is an effective communication resource.

New Minister for Health and Children

Mary Harney TD, Tanaiste was nominated by the Taoiseach as the new Minister for Health and Children on 29 September 2004.

Immediately upon her appointment the Organisation wrote to Ms Harney and submitted policy documents on the following:

- The nursing and midwifery involvement in the health service reform programme;
- Measures to aid retention of nurses and midwives in the Irish health service;
- Measures to alleviate overcrowding in A&E departments.

Ms Harney attended a special A&E Workshop, held in INO head office on 4 November 2004, and gave very explicit commitments with regard to how she felt the role of the nurse and midwife should evolve at specialist and practitioner level.

In addition the Organisation met, on two occasions before the end of 2004 with the Tánaiste and Minister for Health and Children, to raise and discuss ongoing issues, arising from the above reports, which continue to be a cause of great concern.

Department of Health and Children

During 2004 the Organisation had continuous contact with the Department of Health and Children and, in particular, the Nursing Policy Unit and the Personnel and Management Division.

The details of the main issues discussed, with the Nursing Policy Unit, are covered elsewhere in this report.

However, in addition to these ongoing contacts, the Organisation also had a series of discussions with senior officials in the Department regarding the health service reform programme and, in particular, its implications for the Nursing Policy Unit arising from the reform of the Department itself.

At the close of year these discussions were ongoing and the Organisation's position could be summarised as follows:

- That the Chief Nursing Officer should be a member of the Management Advisory Committee (MAC);
- That the unit should be staffed, with experienced nurses/midwives, from the various disciplines, who could advise, as appropriate, other divisions within the Department with regard to policy analysis, development and evaluation.

Further discussions on this important issue, were expected to take place in the first half of 2005.

Midwifery and Paediatric Expert Group

The outgoing Minister for Health and Children, Micheál Martin TD, following announcement at our 2004 annual delegate conference, appointed the establishment of an expert group to study and make recommendations upon

the transfer of midwifery and paediatric nurse education into the third level sector.

This group, under the chairpersonship of Siobhan O'Halloran, met on a number of occasions, from September through until December 2004, and finalised its report prior to the end of the year.

The report contains a number of recommendations including:

- That undergraduate degree programmes should be commenced in midwifery and an integrated RGN/RSCN programme, commencing in 2005;
- That post-reg programmes, both in midwifery and paediatrics, should be transferred to the third level sector in 2005;
- That midwifery and paediatric nurse teachers, should be transferred to the university sector on the same terms and conditions as those which applied to general, mental handicap and psychiatric nurse teachers in 2002;
- That full incremental credit should be given to all post-registration students;
- That the midwifery post-reg programme should be shortened to 18 months and the paediatric post-reg programme should be shortened to 12 months in 2005.

The report, which also contains a number of other complementary recommendations, was presented to the Tanaiste just before Christmas.

At the close of the year the Organisation was awaiting a response from the Tanaiste to this important report, which would complete the education revolution commenced in 2002 arising from the Commission on Nursing.

Special Working Group on the Role of the Registered Nurse Intellectual Disability

Throughout 2004 discussions continued, within the working group, on the future role of the registered nurse intellectual disability (RNID).

The INO had sought further discussions, within the group, following rejection of the group's first report by the RNID section of the Organisation.

Further discussions were particularly sought with regard to:

- Reporting relationships;
- Delegation of duties;
- Creation of nurse specialist/practitioner posts;
- The role of the RNID in the education of the severe and profound person.

These discussions proved particularly difficult right

through 2004, and practically no progress had been made at the end of the year with regard to the key issues identified.

At the end of 2004, agreement had been reached with the employers that every effort would be made to complete the process, leading to a further ballot of members in the first half of 2005.

Irish Congress of Trade Unions (ICTU) – Key Developments

The General Secretary, Liam Doran, and Clare Treacy, Director of Organisation and Social Policy, continued to sit on the ICTU Executive during 2004.

The major issue, arising from the Organisation's affiliation to ICTU, was the negotiation of the second phase of the social agreement Sustaining Progress which took place in June 2004.

The details of this national agreement are covered in the Industrial Relations Review section, so suffice to say at this juncture, that the Organisation's membership, following recommendation by the Executive, rejected the terms negotiated and voted against ratification of the agreement at a special ICTU delegate conference which took place in September 2004.

Following ratification of the agreement by the vast majority of affiliated unions, the Organisation undertook, on a regional basis, a nationwide consultation process with branch officers/activists.

These meetings confirmed a deep rooted anger and frustration about the restrictive nature of the current social agreement, but did not indicate, at that time, a willingness of members to initiate and sustain a campaign of resistance against the national agreement.

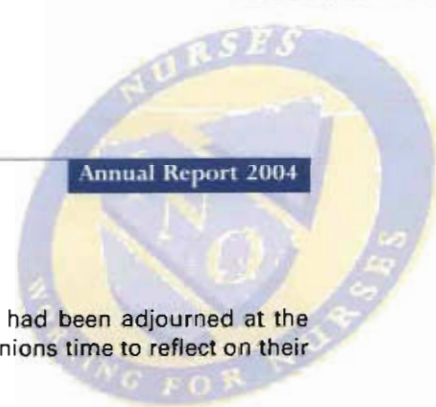
At the annual meeting in November 2004 of branch/section officers and nurse representatives (large Dublin hospitals) it was decided, on the recommendation of the Executive Council, to continue working within the terms of the current agreement with the whole situation being reviewed at the 2005 Annual Delegate Conference.

An Bord Altranais

In 2004 the Organisation had a series of contacts with An Bord Altranais, to discuss a range of issues and matters of concern.

In particular the Organisation, at the end of the year, was in ongoing contact with An Bord on the following issues:

- During 2004 we consistently sought to highlight the overtly legalistic nature of the fitness to practise process and the failure of An Bord, within this process, to afford equal rights and status to a respondent to an allegation of professional misconduct. At the end of the year a response was awaited to our observations which included the escalating legal costs now involved in the process;



- At the end of 2004 the Organisation was advised that An Bord had changed its rules, without consultation and agreement, with regard to the eligibility for entry to the Higher Diploma in Public Health Nursing.

This has evoked a very strong response, from the differing disciplines of membership, and the Organisation has commenced discussions with the Chief Executive Officer of An Bord on the matter.

The Organisation also sought, during 2004, clarification from An Bord with regard to important areas of nursing/midwifery practice including:

- The use of seclusion;
- Issues arising from delegation;
- Limited prescribing and diagnosing.

At the end of 2004 these issues remained under discussion and the Organisation, through the Executive Council, continued to express concern over An Bord's approach to a range of issues.

National Council for the Professional Development of Nursing and Midwifery

In 2004 the Organisation had a number of contacts, with the National Council to discuss various issues of concern. These included:

- The failure of the Council to accept and process applications from public health nurses for designation as clinical nurse specialists;
- The overall speed with regard to the creation of nurse specialist and practitioner posts arising from the Commission on Nursing report;
- The implications, for the National Council, arising from the health service reform programme and the stated intention, of government, to remove the statutory board under which the National Council functions.

Psychiatric Nurses Association (PNA) – Possible Amalgamation

Throughout 2004 the Organisation held ongoing discussions, with the Psychiatric Nurses Association (PNA) regarding the possible amalgamation of the two organisations.

As part of these discussions significant agreement had been reached with regard to the possible divisional structure that would exist within any new union.

At the end of 2004, while significant progress had been made on the project, difficulties still remained with regard to key issues including branch funding and the creation of management structures to complement the divisional structure of any new union.

In view of this, discussions had been adjourned at the end of 2004, to allow both unions time to reflect on their respective positions.

International Nurses Day

The INO, as an affiliate of the International Council of Nurses (ICN), participated in International Nurses Day which had, as its theme:

'Nurses: Working with the Poor: Against Poverty'.

In highlighting the event, which took place on 12 May 2004, the ICN made the following critical observations:

- 1.2 billion people do not have access to safe water;
- 24,000 die every day from hunger – most of these are children;
- 70% of the world's poor are female;
- 54 countries are poorer today than in 1990;
- 50% of the world's population live on less than \$2 per day.

International Day of the Midwife – 5 May 2004

The INO, as part of its affiliation to the International Confederation of Midwives (ICM) acknowledged the International Day of the Midwife which took place on 5 May 2004.

The theme for this important event was:

'Midwives – A Voice for Healthy Families'.

The object of the day was to raise the profile of midwives as advocates for healthy women, healthy babies and healthy nations.

Hilary Marchant

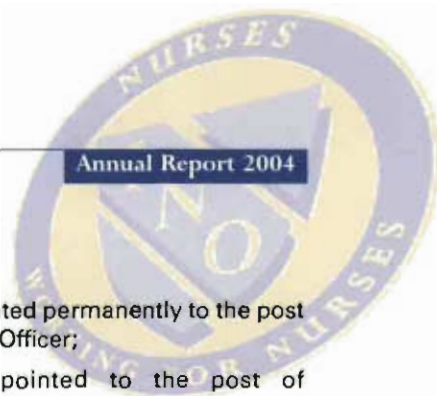
The President, Executive Council, members and staff of the INO extended their deepest sympathies and condolences to the family and friends of the Organisation's former Deputy General Secretary, Hilary Marchant, who died on Thursday, 18 April 2004.

Hilary had been a tremendous advocate for nurses and midwives and had dedicated her working life to advancing the professional and educational aspects of best clinical practice.

Her death was a loss to the professions of nursing and midwifery and she will always be remembered fondly by everyone in the Irish Nurses Organisation.

PJ Madden

On Friday, 14 May 2004, PJ Madden, former General Secretary of the INO, was ordained a Roman Catholic



Priest at a ceremony in New Orleans in the United States.

PJ, who served as General Secretary from 1987 to 1998, will serve as a Parish Priest in the diocese of New Orleans.

PJ said his first Mass in Ireland in Palmerstown, Co Dublin, on Friday, 21 May 2004 to a congregation which included

many members of the INO who had worked with him over the years.

The Organisation, his past colleagues and friends, wish Fr PJ happiness, contentment and fulfilment in his new calling.

Staffing

The following staffing changes took place during the year under review:

- Claire Cluxton was appointed to the permanent post of Office Manager;
- Karen Buckley was appointed to the permanent, part-time post of Administrative Support Officer, Limerick Office;
- Lorraine Monaghan was appointed to the permanent post of Assistant Information Officer;
- Jacinta Moyles was appointed permanently to the post of Administrative Support Officer;
- Stuart McNeill was appointed to the post of Maintenance Officer;
- Edita Stasitiena (full-time) and Jurate Jakubonyte (part-time) were appointed as household staff;
- Sinead Maher resigned from her post as a member of the Administrative Support staff.

Arising from the decision to increase the number of Industrial Relations Officers, due to the growth in membership, the following IRO appointments/changes took place:

- Liz Curran was appointed as IRO to the South Eastern region;
- Claire Mahon was appointed as locum IRO, to the South Eastern region, for the period October 2004 - April 2005;
- Mary Fogarty, IRO, transferred to the Mid-West region;
- Edward Mathews, IRO, transferred to the Dublin Northern Area;
- Tony Fitzpatrick, IRO, transferred to the North East region;
- Patsy Doyle, IRO, transferred to the Southern region based in the Cork Office;
- Anna Malone was appointed, part-time, to the post of nurse representative (Limerick City).

Industrial Relations Review 2004



Dave Hughes, Deputy
General Secretary, INO

Overview

'Frustrating' is the word which best summarises the INO's experience of the year 2004 in the Irish health services. It was a year in which, in spite of major efforts on the part of local representatives, industrial relations officers and national officials, many issues remained unresolved at its end and the problems of previous years were revisited and, in some cases, amplified.

Sustaining Progress, the social partnership agreement which comprehends pay and industrial peace in the Irish economy, had come into effect from 1 July 2003. It is undoubtedly the most restrictive pay agreement ever entered into by the Irish trade union movement. It provided for reasonable pay increases and the implementation of the Benchmarking Body's report, but many members during the year questioned the validity of such agreements which applied one solution to all and rendered those groups experiencing relative disadvantage in pay terms or under pressure from change or management cutbacks totally reliant on procedures to resolve their difficulties. Those procedures were all too often overburdened from pressure of work or frustration by employer prevarication to provide real solutions. Ultimately in instances where issues did eventually reach the final stage of procedure in a full Labour Court hearing, the employers always argued, regardless of the size of the claim, that it was a cost-increasing claim and, therefore, prohibited under Sustaining Progress. Some occasions found the Court receptive to that argument regardless of the merit of the claim. There was, however, some evidence that that approach may have been wearing thin with the Court towards the end of the year as a number of Labour Court recommendations began to emerge with positive outcomes towards the Organisation.

More frustrating still was the experience of having exhausted all procedures and achieved a successful outcome, either by way of recommendation or binding determination, only to find that the employer failed to implement, in spite of having agreed to do so. This was the case in relation to the implementation of a binding Labour Court determination for the payment of arrears of acting up allowances on premium pay which had been issued in January 2003. It was also the case in relation to two student public health nurses who had received a favourable adjudication report relating to sponsorship for their Higher Diploma in Public Health Nursing late in 2003 and for an agreement reached in 2000 with regard to the appropriate nurse management structures in bands 3, 4 and 5 hospitals. The Organisation found itself having to refer all of these issues back to the LRC, recommencing the entire procedure in an attempt to have the original

agreements implemented. Registered nurses in intellectual disability (RNID) who became the victims of an anomaly created by the Benchmarking Body's report which saw them paid less than social care workers who worked alongside and reported to, in many instances, the RNID and who were less specialised and not required to have a degree, also found Sustaining Progress to be a stonewall impenetrable by the inequity of their situation. The three word employer defence, 'cost increasing claim', was sufficient for the Labour Court to say that they must wait for the next Benchmarking Body to deal with their issue as a priority. The claim for a reduction in working hours which had been acknowledged by the Labour Court as being legitimate as far back as 1980 had previously fallen victim to the same argument as the Labour Court saw it as its duty to uphold the national agreement.

Public health nurses who were also dealt an unexplained and cruel anomaly, which saw them separated from all clinical nurse specialists in terms of salary scale by the Benchmarking Body, chose a different but equally difficult process to address their anomaly. The Commission on Nursing report had declared all public health nurses as being equivalent to clinical nurse specialists and the National Council for Nursing and Midwifery assured public health nurses that there was no need for them to have their individual status recognised. Yet in the face of individual applicants which came subsequent to benchmarking, the Health Service Employers Agency sought to interfere with the statutory body's right to confirm such status in their attempt to ensure that such an illogical anomaly could not be addressed. The Organisation is seeking that the Courts of Law would declare such interference *ultra vires* and an inappropriate meddling in the affairs of a professional body.

Under Sustaining Progress the Organisation has stuck strictly with the terms of the agreement and refrained from taking or threatening industrial action. However, the failure of employers to implement agreements and the taking for granted of the industrial peace provided by the agreement had led to a growing feeling among many members that employers had squandered the peace and stability provided by the first phase of Sustaining Progress and even though in the year 2004 it provided for accumulative 7% in phased pay increases itself along with half of the percentage increase awarded to each grade under benchmarking (a minimum of 11% to all nursing grades). Delegates to the ADC in 2004 voiced caution about any automatic drift into a second module of Sustaining Progress without serious commitment being shown by the employers to resolving outstanding anomalies and dealing with the ongoing problems in the health service, including overcrowding in Accident and Emergency Departments.

The INO, as part of the Congress of Trade Unions,

participated in the re-negotiation of the second module of Sustaining Progress during the month of June. The outcome of these tedious negotiations was that Module 2 provided for 1% from 1 June 2005, 1% from 1 December 2005 and 2% from 1 June 2006, with the final phase of benchmarking increases also being applied in June 2005. The conditions attaching to those pay increases were a continuation of the highly restrictive conditions which had applied under Phase 1, including the prohibition on industrial action and cost increasing claims. All pay increases, once again, were subject to performance verification on the modernisation and change agenda. The re-negotiated Module 2 did not provide any additional remedy for the grades which had suffered anomalies under benchmarking other than to state that those grades should be prioritised in a new benchmarking exercise, the terms of reference for which must be agreed before July 2005, with the Benchmarking Body due to issue its report in the second half of 2007. The question with regard to when any such awards would be implemented has been left for any new social agreement which would succeed the current Sustaining Progress.

The Executive Council, at its July meeting, considered Module 2 of Sustaining Progress and decided to recommend rejection to our membership. The Executive spelt out its reasons for recommending rejection as being:

- The failure of the agreement to deal realistically with the anomaly which allowed child care workers to be paid more than nurses;
- The failure of the agreement to allow consideration of the claim for nurses and midwives to have a reduction in the working week;
- The continued failure by employers to implement agreements;
- The interference by the HSEA in the professional issue of clinical nurse specialisms for public health nurses;
- The failure to implement the government's own health strategy;
- The failure to resolve continuing and ongoing problems in A&E departments.

In the event, the INO membership took the lead from their Executive Council and voted by a 4 to 1 majority to reject Module 2 of Sustaining Progress. This mandated delegates to the special ICTU conference held in September, to vote against the revised agreement. However, in spite of the opposition of the INO and a number of other significant unions, the majority of Congress unions voted to accept and continue with Sustaining Progress. Consequently the agreement continues and the restrictions imposed on pursuing claims remain absolute and leave only Benchmarking 2 as the agreed protocol for processing

claims relating to pay and conditions of employment which are cost increasing.

Accident and Emergency Departments

2004 witnessed a deepening of the crisis of overcrowding in our A&E departments. Hardly a week went by throughout the year when there were not significant numbers of people waiting on trolleys overnight and even over weekends in such departments.

The INO was to the forefront in highlighting the dilemma of patients and the lack of dignity caused by such humiliating conditions and, in spite of a sustained information campaign with the media and relentless representations to the employers, a certain fatigue set into the media coverage of it and almost an acceptance of it on the part of the public, that such overcrowding is to be the norm, had emerged. The employers were loud in their sympathy but slow in taking action and the remedial measures negotiated in 2002 were whittled back in the face of government imposed ceilings on the numbers of employees in the health service, forced reductions in those numbers and a tightening of resources in a renewed sense of fiscal rectitude. The staffing report had been prolonged and when it ultimately issued there was severe procrastination as the Department of Health and Children could give no commitments regarding the funding of its implementation.

Likewise the CAPITA Consultants report on bed management became the subject of endless steering committee meetings designed to delay the cost of any implementation. Even the grading of the head of bed management became such a contentious issue that it was forced through the full rigour of the LRC and Labour Court on two occasions and had not been resolved by the end of the year.

Spontaneous protests by patients' relatives at the Mater Hospital brought the issue into sharp focus again in the month of October and coincided with the appointment of the Tanaiste, Mary Harney TD, as Minister for Health and Children. The renewed protest and focusing on the issue, along with the appointment of the Tanaiste as Minister for Health and Children, brought hope that the necessary resources might be invested in the health service to alleviate such chronic problems. Indeed the Minister, shortly after taking office, declared that the resolution of A&E problems was her top priority, that the current situation was unacceptable and that she would ensure that it would significantly improve within a year.

Following the estimates in December the Tanaiste and Minister for Health and Children issued a ten-point plan tackling the A&E problem which was cautiously welcomed by the Organisation although there was scepticism about whether it alone could effectively deal with the problem unless the health strategy and the additional 3,000 acute beds which it promised was

implemented. As the year came to an end there was no sign of any improvement in the A&E situation and, in fact, it appeared to be getting worse.

Parental Leave

The INO claim for improvements in parental leave was agreed in January 2004. The agreed changes allowed for parents to take parental leave in respect of children up to the age of eight (it had previously been five) and in the case of a child with disability, up to the age of 16 years. The changes became effective from 1 January 2004. In common with other agreements there was difficulty having the actual improvements rolled out and some employers denied the existence of the agreement even though it had been registered with the National Joint Council.

Serious Physical Assault Scheme

As a result of campaigning by nursing unions, the government had entered into a commitment to revise the scheme relating to serious physical assault in the health service. A working group dealing with psychiatric nurses, under the chair of Tom McGrath (former Labour Court Chairman), produced a report and recommended a no fault compensation type scheme for those nurses. Difficulties arose, however, when, through the National Joint Council, the INO and other unions sought a commitment from the official side that the same scheme would apply to all health care workers. Even though there was a written commitment from the then Minister for Health and Children to the implementation of such a scheme to all, the employer side prevaricated on the issue for the entire year and at the end of the year had still not made a commitment to implement the recommended scheme.

Dignity at Work Policy

Although agreed in 2003, the launch of the Dignity at Work Policy, which had been planned for February 2004, had to be postponed because of the twin developments of the chief executive's body, HEBE, producing what appeared to be an alternative to it as a "manual for the establishment and conduct of committees of enquiry" and an attempt by the IHCA to write in a caveat which would effectively have prevented the policy from being used in complaints involving consultant doctors. The Organisation refused to sign the document or participate in the launch as it had effectively been changed from that which was agreed in 2003. Ultimately the original agreement was honoured and the Dignity at Work Policy was launched covering all employees and employers in the health service. It was widely welcomed by all sides in the health service and supported through National Partnership Forum funding and enthusiastically promoted throughout the employments.

Student Public Health Nurses

The ongoing failure of the Department of Health and Children to honour the agreement of 2000, regarding

the sponsorship of student public health nurses, was processed through the Labour Court during the year 2004. Although clearly in breach of its original agreement, the Department would not budge at the LRC conciliation conferences, and 32 of the 124 students who participated in the year 2003/2004 Higher Diploma in Public Health Nursing had to self fund their studies which are full time and, in many cases, they tried to combine work and studies at the expense of social and family life. By the time the matter finally reached the Labour Court many of the students had completed their course and all students had acquired full time employment as public health nurses. The Labour Court issued its finding on 29 November and comprehensively found in favour of the Organisation and the student public health nurses. Significantly the Court said that the Department of Health and Children must honour, in full, its original agreement and that it required the agreement of the INO before it could make any changes to it.

In keeping with previous practice, the employers at the end of the year had still failed to pay the outstanding monies due under this agreement and the Organisation continued to pursue them for it.

Theatre Managers

Following protracted discussions through the LRC, theatre managers were eventually upgraded in accordance with a previously achieved adjudicator's report. As a result of the upgrading theatre managers in hospitals where directors of nursing in Band 1 are now graded as assistant directors of nursing, while those in Band 2 (with some exceptions) are graded as CNM3. Theatre managers in Band 3 hospitals are graded CNM2. The exceptions in the Band 2 are in hospitals where the posts were already graded at assistant director level and these did not change. The circular giving effect to the agreement issued in October 2004 and the agreement was backdated to April 2003.

Claim for the Application of Location Allowances in Radiology Departments

After three Labour Relations Commission conciliation conferences, during which the employer side held out the prospect of making an offer for the application of a location allowance to nurses working in radiology departments, ultimately no offer was made. The matter is now being referred to a full hearing of the Labour Court. The handling of this claim by the employers was quite contemptible and showed little regard for the valuable work carried out by radiology nurses or understanding of what is involved in working at such locations. The refusal to apply location allowance to nurses deserving of it in radiology departments was consistent with the employers' total rejection of all claims for the extension of location allowances in the areas of general nursing and midwifery. The radiology nurses claim will now be presented to the Labour Court in 2005.

Claim for Application of Location and Specialist Allowances to Grades above CNM2

This claim was heard by the Labour Court and was the subject of a recommendation, which asked the parties to re-examine the differentials in an attempt to see whether agreement could be reached based on the employers' original proposal, that they could consider the application of allowances to CNM3s, if a guarantee was given that no claims would be lodged for other grades above. Such a proposition was unacceptable to the INO, as the application of the allowance to CNM3s would then render assistant director grade in non-band 1 hospitals lower paid. Ultimately, when the matter was referred back to the LRC and conciliation, the employers, after two conciliation conferences, withdrew from their original position declaring that there was no longer any justification for applying allowances to grades above CNM2 and insisting that the matter go back before the Labour Court for a final decision.

Other National Claims

Other national claims lodged and pursued during 2004 which are still in process relate to the following grades:

- Bed managers;
- Out of hours nurse managers;
- Directors of public health nursing;
- Directors in Band 5 hospitals.

Equality Claims

The year 2004 commenced and ended with successful equality claims pursued by INO on behalf of its members. The year also saw the presentation of a comprehensive appeal on the superannuation parity claim with psychiatric nurses to the Labour Court.

The year opened with a determination from the Labour Court overturning a previous Equality Officer's finding into an allegation into sex discrimination in a case involving a competition for a director of nursing run by the South Eastern Health Board. The claimant had been an assistant director of nursing at the particular hospital for approximately two years prior to the holding of the competition for director of nursing in March 2004. During her time as assistant director she had acted in place of the director of nursing on numerous occasions and even, subsequent to the interview which had determined her unsuitable for the position, continued to act for the director for almost a further year. The Court found that although the claimant had acted as director of nursing and could be presumed, therefore, to have some competency for the position, the successful candidate who was a male had obtained substantially higher marks than her for experiences in positions which had no direct relevance to the post in question. The Court gave high significance to the fact that the interview board met on the morning of the interviews and considered the CVs

of both applicants before they devised a marking system. The marking system itself was heavily weighted towards core and special competencies which are subjective and in this case which seemed designed based on the written CV of the male candidate.

In its conclusions the Court found that, on the basis of the evidence before it, it was satisfied that the selection process was conducted in a manner which fell short of the standards of objectivity, fairness and good practice than could reasonably be expected. They awarded €45,000 in compensation to the claimant.

As the year was coming to a end an Equality Office finally issued a finding that an assistant director of nursing at a Band 2 hospital in the Eastern region, who held responsibility for a psychiatric unit among others at that hospital, was entitled to equal pay with assistant directors of nursing mental health who worked in the same health board area. The assistant director involved in the case had been appointed to the grade of non-Band 1 assistant director in 1999. Her areas of responsibility comprehended a number of units in the hospital including the psychiatric service. The employer argued that because she had been appointed assistant director of nursing to the hospital in general, she was not entitled to be paid the rate applicable to assistant directors of nursing mental health. The INO, on behalf of the member concerned, alleged that the failure to apply from the date of appointment, the mental health assistant director rate of pay, which is substantially higher, amounted to gender discrimination. The Equality Officer agreed and awarded equal pay to the assistant director in question with retrospective affect for three years.

Significantly in this case the Health Service Employers Agency conceded that the work of assistant directors non-Band 1 was equal to that of assistant directors in mental health. As a result of this successful finding and the concession that the work is of equal value, we were considering at the end of year lodging a claim on behalf of all assistant directors for equality of pay with mental health assistant directors.

A decision was awaited at the end of the year from the Labour Court in respect of an appeal on behalf of general nurses and midwives in the claim for equality of treatment with regard to pension with psychiatric nurses.

Under regulations, which were valid until April 2004, nurses working in areas covered by the Mental Treatment Act were entitled to two years service for every one year served over 20 years. This effectively allowed the psychiatric nurse working in such areas to retire at age 55 with a full pension. The claim was for equal treatment in respect of nurses and midwives. Originally rejected by an Equality Officer, the appeal was finally heard by the Labour Court in the autumn of 2004. The Organisation made a comprehensive appeal, citing all relevant Irish and European precedents which

were relevant and strongly contesting that the obligation lay on the employer to demonstrate objective justification for the difference afforded to the predominantly female groups of nurses and midwives. The full submission was made available to all members through the INO's website and the outcome, when eventually issued by the Labour Court, will be published in the WIN – World of Irish Nursing and Midwifery.

Basic and advanced training courses for nurse representatives were held throughout the year both regionally and from head office in Dublin. In addition the Organisation ran two courses for nurse representatives who are members of partnership committees. The partnership courses hosted by the INO were co-funded with the National Partnership Forum through monies provided under the Action Plan for People Management.

Agency Rate Review

The INO recommended rates for nurses were reviewed by the Organisation and a new card issued effective from 1 July. The adjustment to the rates reflected the pay movements due under Sustaining Progress and Benchmarking over the 12 months to July 2005, when the next review will take place. A general increase of 3% applied to all rates.

Individual Cases

Industrial relations officers successfully pursued through Rights Commissioners, the LRC, Labour Court and Equality Tribunal cases on behalf of members throughout the year. They were also involved in detailed negotiations on modernisation and change and claims in respect of staffing levels throughout the year. The commitment and dedication of the industrial relations officers is shown by the long hours they work and deep commitment which they bring to the task. They work hard at building the organisational structure in the workplace and provide support to the local branch representatives. Brief reports from each region are included in this annual report.

Conclusion

2004 was another difficult year for nurses and midwives. The changing demography of our nation is producing many varied and challenging circumstances to nurses and midwives working at the coalface, day in, day out. While greatly appreciated by patients and clients of the service, it is all too often the experience of our members that their contribution, although the most essential to the provision of a quality health service, is the least recognised or acknowledged by their employers. The taking for granted of nurses and midwives because of their commitment to their patients is an all too often feature of our Irish health service. Irish nurses and midwives have shown themselves to be powerful advocates in the interests of their patients. Many now have come to realise that they must be equally assertive in advocating on behalf of their own professions and colleagues.

A growing number of nurses have become active, participative members in local branch structures and at their workplaces. The development of such nurse representatives at ward level is essential in the building and maintaining of a strong INO. The nurse representative is the eyes and ears of the wider membership and keeps the Organisation's leadership in tune with the needs and wishes of our members. Based on the strength of those local representatives, many gains were made for nurses and midwives in the middle and late 90s, culminating in the agreement following the strike of 1999, which yielded many significant and long lasting benefits for members. If employers have become complacent and lapsed into the old attitude of taking INO members for granted then it is our nurse representatives and the strength they bring to the Organisation which will ultimately arrest that situation. The Organisation's Executive Council and leadership greatly appreciate selfless dedication and generosity displayed by all nurse representatives throughout the year 2004 in spite of the many pressures faced and the often hostile environment within which they carry out their duties.

Regional Round-Up (IROs)



Eastern Region – East Coast Area Health Board *Philip McAnenly*

Following LRC Conciliation, the INO reached agreement with management that all temporary nurses with three years service or more would be upgraded to permanent status without an interview.

An INO member formerly employed at St Colman's Hospital, Rathdrum was awarded €16,000 for indirect discrimination following the board's failure to appoint her to a permanent part-time position. The board insisted that our member could only access a permanent post if she was prepared to work full-time. The board appealed this decision to the Labour Court, but settled for a substantially higher figure prior to the hearing.

The LRC Research and Advisory Services have been engaged to improve and ensure good IR. This has resulted in the establishment of joint working groups which has improved consultation with our members.

A Rights Commissioner decision has recognised the entitlement of a PHN to incremental credit for CNM experience.

St Vincent's University Hospital: A&E members following chronic overcrowding in their A&E department delivered a number of change initiatives which helped to ease the crisis, e.g. opening of a discharge lounge, improved staffing levels and skill mix.

Labour Court recommendation has recognised the

entitlement of a nurse to incremental credit for SEN service gained in the UK health service.

Mount Carmel Hospital: Members fought a successful dispute which resulted from management attempting to introduce a model of performance appraisal without consultation.

St Michael's Hospital, Dun Laoghaire: Members successfully prevented efforts by management to limit job-sharing opportunities to the CNM grades. Following referral of this matter to the Director of Equality Investigations and Rights Commissioners Service, management's plans were aborted.

Leopardstown Park Hospital: Following intervention by the INO, efforts by management to dismiss all nurses in employment over 65 years of age were successfully resisted. Efforts to introduce a clocking in/out system were also averted.

National Rehabilitation Hospital, Dun Laoghaire: The LRC Research and Advisory Services have been engaged in an effort to promote and ensure improved IR. This has resulted in joint working groups developing a bank system for overtime work resulting in improved staffing levels and skill-mix.



Eastern Region – Northern Area Health Board Edward Matthews

St Joseph's, Clonsilla: A group of eight nurses at St Joseph's, Clonsilla brought a claim for breach of the Payment of Wages Act, 1991 to the Rights Commissioner Service in March. The claim for breach of the legislation was not successful, but of significance was an award of €300 each for the distress caused to the members by the manner of the removal of an overpayment from their wages.

Cappagh Orthopaedic Hospital: Also in March, part-time and job-sharing nurses at Cappagh were successful in negotiating a settlement with management for incorrect public holiday entitlements. The agreement allowed for four days pay for each year, retrospective to 1998 to each nurse. In addition, correct public holiday entitlements were implemented for job-sharing and part-time nurses.

Verville Retreat: March saw the final chapter in the employment of nurses at Verville Retreat Ltd. This company was managed by the Northern Area Health Board and dissolved without any regard to transfer of undertakings regulations. An independent facilitator was appointed to broker an agreement with the INO on behalf of the Northern Area Health Board/ERHA. This concluded with lump sum payments of up to €20,000 (gross) per member and permanent positions within the Northern Area Health Board being secured.

Northern Area Health Board: An agreement was reached with the director of human resources to release an INO representative for 20 hours each week

to carry out union work. George Jefferies, an A&E nurse at James Connolly Memorial Hospital, was nominated but was unable to take up this new role due to other commitments.

James Connolly Memorial Hospital: In July, a Rights Commissioner ruled in favour of a member when an award of €750 was made for a breach of the career break scheme. The Northern Area Health Board delayed the return of a nurse to work from career break because of the embargo placed on recruitment and a cap placed on employment ceiling in the public sector.

This year has seen the commissioning of significant sections of the new hospital. The facility was initially dogged by a plethora of technical faults. However towards the end of the year, our members finally had the opportunity to work in the new building.

Children's University Hospital, Temple Street: A dispute involving the refusal of management at this hospital to pay a location allowance to nurses working in the renal dialysis unit for children, has been resolved. Management had refused to pay the allowance, contending that the ward in question was a mixed ward, and consequently should not attract a location allowance. Following negotiations, members who provide such a specialised and dedicated service, have been awarded the allowance.

Ballymun Health Centre: Following extensive representation from the INO, the Northern Area Health Board has committed to an extensive programme of renovation in the existing Ballymun Health Centre. Renovations are absolutely necessary, given the intolerable conditions under which members have had to work for a number of years. While members continue to work in these conditions, a new state-of-the-art health centre lies idle across the road in the new Ballymun Civic Centre. We have been instructed by the Northern Area Health Board that the €9m required to fit out this new facility has not been released by the Department of Health and Children. We continue our efforts to lobby the department to release the required funding.

Army Nursing Service: INO members within the Army Nursing Service this year voted unanimously to accept a Labour Court recommendation concerning compensation for ongoing loss of premia pay within this service. The unanimous acceptance of the Labour Court proposals have seen quite significant amounts of compensation paid to our members in their December pay cheque.

Continuing A&E Crisis in the Northern Area: As has been the case for a number of years now, our members continue the struggle to provide services within A&E departments. Although discussions have continued at both a national and regional level to try and improve the situation, we are saddened to report that the only discernable result is a deterioration in working conditions. We have reached record levels of

overcrowding in both Beaumont Hospital and James Connolly Memorial Hospital, although management purport themselves to be taking all necessary actions to address the problem, our members have once again reached breaking point. We are continuing our representations to management at all levels in an attempt to provide impetus for a system-wide solution. However, it remains a distinct possibility that our members may mobilise once again to force complacent managers and colleagues to commit to immediate action for immediate solutions.



Eastern Region – South West Area Health Board,
Phil Ni Sheaghdha
St James's Hospital, Our Lady's Hospital for Sick Children, Peamount Hospital, Our Lady's Hospice, Harolds Cross, Cheeverstown House Ltd., Moore Abbey

St James's Hospital: Overtime for ward areas: In December 2004 following protracted negotiations the INO secured an agreement in relation to implementation of overtime agreement in all of the hospital locations.

Our Lady's Hospice, Harolds Cross: The INO represented a member who was dissatisfied with the outcome of an internal enquiry into complaints against her to the Rights Commissioner Service. The hearing was held on 19 November 2004. The claim was conceded in full to the INO.



Nurses protest over lack of staff at Moore Abbey Centre, Monasterevin with Phil Ni Sheaghdha, INO IRO (second from right)

Mooreabbey, Monasterevin: The INO claim regarding staffing levels was the subject of a Labour Court hearing on 3 December 2004. The recommendation was issued on 14 December 2004. The Labour Court recommended that:

- 14 vacant nursing posts be immediately filled;
- Strong consideration should be given to recruitment of RGNs if RMHN were not available;

- Agency nurses be used to cover for statutory and non-statutory leave;
- Any further staffing level has to be conducted by agreement with the INO regarding the person to conduct it and terms of reference.

South Western Health Board Area: Agreement finally reached in relation to staffing levels for care of the elderly.

All nursing rosters are to include a provision for 20% cover for annual leave and other leave, i.e. for every four nurses an additional replacement of one nurse must be employed. Commitments were given that any vacant nursing post would not be filled by employing care assistants. Commitments were also given that no service expansion would take place until staffing levels improved.

Meath Community Unit: Disturbance compensation achieved for nurses who moved into new community unit in November. All nursing staff received two additional annual leave days.

St Mary's Community Unit: A disturbance payment of €260 net per person and two additional annual leave days negotiated by INO for staff that have to relocate to Meath Community Unit for 26 weeks to allow refurbishment of St Mary's Unit.

Assault at Work: INO member working in SWAHB, who was denied access to the Assault at Work Scheme, had this decision overturned following an INO referral to an independent third party. Her inclusion in this scheme allows her to benefit from full pay with premium while absent from the workplace for six months following the assault.

Diageo/Guinness Ireland: An INO member represented in relation to unfair treatment due to part-time worker status.

The INO secured a positive recommendation at the Rights Commissioner hearing. This was appealed to the Labour Court by the employer and the Labour Court ruled in favour of INO member also.

The employer appealed this recommendation to the High Court but settled with the INO member for a substantial figure on the day.

Unfair Dismissal: The INO secured a settlement of €48,000 for an INO member employed in the private sector, who was dismissed from employment by her employer. This settlement was achieved at a Rights Commissioner hearing and ruling was made that the member had been wrongfully dismissed.

Qualification Allowance: An INO member sought application of qualification allowance to 1999, from her public service employer. This was denied to her as the particular qualification was not on the original list of qualifying allowances. The claim was referred to the Rights Commissioner Service by the INO and a settlement of €5,600 was achieved for the member personal to holder.

Agency Nurse: An INO member referred a case of alleged non-payment of salary to the Rights Commissioner Service. The INO represented the member at a hearing on 15 December 2004. A settlement of €2,900 was agreed, based on annual leave payment and underpayment for bank holidays.



Midland Health Board Region Kevin O'Connor

Midland Regional Hospital Portlaoise, Paediatric Unit: April 2004 saw the opening of the new 25 bedded state of the art Paediatric Unit at the Midland Regional Hospital, Portlaoise. Following nearly a year of protracted negotiations

a successful outcome was achieved. The agreement sees the whole-time equivalent posts for the new unit being increased from the existing 14.4 to 28.4 to achieve a staff complement of seven, six and five over a 24-hour period on the new unit. During the negotiations a disturbance claim was put forward and agreed in principle by hospital management. This has now been followed by a formal claim being lodged in writing. It is hoped to negotiate this disturbance allowance and bring it to closure during the course of 2005.

Theatre: Negotiations continue with regard to staffing levels, for theatre on call, and related matters.

Midland Regional Hospital – Tullamore – Regional Oncology In-Patient Unit: Staffing levels have now been agreed for this new 12 bedded unit but sanction involving formal approval was still awaited at the end of 2004.

New Hospital: During 2004, despite numerous requests, no negotiations have taken place, with the INO or any staff body, regarding the staffing levels for the new facility which will be completed shortly.

Care of the Elderly Facilities – Birr Community Nursing Unit: Following very protracted and very adversarial negotiations an agreement was finally reached in early July 2004 with regard to the opening of Birr Community Nursing Unit.

The INO is disappointed with the outcome of the negotiations as they failed to achieve the opening of the full 90 beds within this facility. The opening of 70 beds has been achieved which is no increase in the previous service provided at that location.

St Joseph's Care Centre Longford: At the end of 2004 the Organisation was awaiting the publication of the Edna Cobain Staffing Review which should include recommendations for additional staff.

Midland Regional Hospital, Mullingar: Issues which arose during 2004 included:

- the staffing and structure of the SCUBU unit;
- the opening and staffing of a 12-bedded observation ward;

- miscellaneous health and safety issues within the complex.

The Irish Blood Transfusion Service: During the course of 2004 negotiations continued on a claim by the INO for proper nursing hierarchy career structure within the IBTS. In July a claim was formally lodged on the IBTS and was referred to the Labour Court for a recommendation regarding a lump sum payment for changes in work practices with regard to the introduction of the new computer tracking system for blood known as Progesa.

The Labour Court has made a recommendation in favour of INO members.

St Francis Private Hospital, Ballinderry, Mullingar: During the course of 2004 serious IR issues arose in the theatre department of St Francis Private Hospital, Mullingar. These IR issues centred around the fact that there is a high demand for the theatre services of this private hospital by a great number of consultant surgeons.

The INO have notified the employer that the workload contravenes legislation and that arrangements must be adjusted to ensure staff work within the requirements of the Organisation of Working Time Act.

AMNCH/Tallaght Hospital – Individual Cases: Throughout the course of 2004 there has been a sharp rise in the number of individual cases being processed through industrial relations at AMNCH/Tallaght Hospital.

Accident and Emergency Department: The main focal point of AMNCH/Tallaght Hospital still remains to be the Accident and Emergency Department. This department has seen numbers reach crisis point within the department on a number of occasions throughout 2004. This culminated in a major crisis on 20 September 2004 when a number of between 63 and 69 patients on trolleys were noted on that date. This crisis was further exacerbated when nursing staff and personnel were threatened by a patient and family members. This culminated in the INO instructing all its members to withdraw from the floor leaving a skeleton staff to provide emergency cover. This action was taken under the Health & Safety Act, sections 6 and 9 but was construed by hospital management as industrial action and reported as such to the HSEA. Following a meeting between the HSEA, AMNCH/Tallaght Hospital Management and the INO, a roadmap for a way forward was negotiated with agreement being reached on set procedures and designated contact persons being put in place for future crisis events. It was also agreed at this forum that an independent company would be employed to conduct a risk management of the A&E services with regard to producing a report which could be acted upon by AMNCH/Tallaght Hospital.

Coombe Women's Hospital: During 2004 the INO made strenuous efforts to develop improved procedures, with hospital management, which would more speedily address individual and collective issues affecting members within the hospital.

It is hoped this will lead to improved workplace relations in 2005.



**Mid-Western Health Board Region
Mary Fogarty**

St John's Hospital, Limerick – Third Nurse On-Call: The Organisation has pursued a long-standing claim in this hospital for a third nurse on-call for all out-of-hours surgical procedures. This was subject to a Labour Court hearing in

2003, and during 2004 an independent review has verified our claim for the requirement of a third nurse during all substantial surgical procedures out-of-hours.

Fixed Term Work Regularised: Following representations from this Organisation under the provisions of the newly enacted Protection of Employees (Fixed Term Work Act), a member had her fixed term contract regularised to a contract of indefinite duration. This is particularly noteworthy as the employers had failed to adhere to their obligations and failed to renew our member's contract in a timely fashion.

Brothers of Charity Service, Limerick: This service refused to implement the provisions of the Serious Physical Assault at Work Scheme to a number of members who were assaulted in the course of their duties. The failure to implement the scheme was based on an excessively restrictive and unrealistic interpretation of the definition of serious assault. However, following representation from this Organisation, the service applied in full the provisions of the scheme to ensure our members were at no loss of pay or loss of time under the Sick Leave Scheme.

Irish Blood Transfusion Service: A member within the Irish Blood Transfusion Service, Limerick received €2,000 compensation, following a Labour Court hearing concerning the abrupt removal of subsistence payments which our member had been led to believe would be paid in her place of employment.

Registered General Nurses in the Community: This Organisation pursued a claim for the payment of subsistence to RGNs in the community in the Mid-West region. The board had failed to pay subsistence rates to RGNs discharging duties in the community, while they paid the rates to other employees working in the community in the region. Following representation from the Organisation and a conciliation conference, we were successful in obtaining payment of subsistence to RGNs in the community on an ongoing basis and with retrospection to January 2003.

Ambulance Nurses, Co Clare: It came to the attention of this Organisation during 2004 that a group of ambulance nurses in Co Clare had not been paid holiday premium for approximately four years. Following representation from the Organisation, we were successful in obtaining

payment of the holiday premium on an ongoing basis and with four years retrospection.

Ennis General Hospital: The presence of high risk patients within in-patient wards in Ennis General Hospital was of significant concern to our members during 2004. Although our members were ultimately committed to providing care for these patients, they were extremely concerned regarding their own safety. Despite persistent representation from local representatives in the hospital, management had refused to put in place any additional staffing or security structures in the presence of high risk patients. However, following strenuous and repeated representation from the Organisation, it was agreed that a "special" would be provided when a nurse determined that a patient was high risk. This advent allows our members to provide the care required by patients in a safe environment.

Miford Hospice: Our members working in this service have long fought a battle with management for parity with the public service. They provide a most essential and unique service within the Mid-Western region and the majority of their activities are funded by the Mid-Western Health Board. However, despite the provision of funding by the Mid-Western Health Board, management within this service consistently deny our members parity with nurses working in the public health service. The latest chapter in this battle was a claim lodged by the Organisation for parity in areas such as unsocial hours premia, payment of full Saturday allowance, parity of sick pay scheme provisions, payment of subsistence to the homecare team and parity of qualifying conditions for accessing the senior staff nurse grade. This claim, as with all others, was vehemently rejected by management of the service. However, in the course of our representations this year, the Organisation has managed to achieve payment of the full unsocial hours premia and payment of the full Saturday allowance. Representations continue on outstanding issues.

Hospital of the Assumption, Thurles: Members working in this hospital had availed of a paid night duty break for over 20 years. In 2004 management attempted to unilaterally withdraw the paid break and consequently to amend the working roster. Management claimed that our members had taken this break without the knowledge of their supervisors. This claim by management was made against the backdrop, once again, of a 20 year practice. Our members stood firm in rejecting management's attempts to withdraw the paid night duty break, which it must be noted, is an industrial standard for shift workers. The members' position was vindicated in a Labour Court recommendation, which acknowledged that the practice was so well established in the hospital, that it could not be unilaterally withdrawn by management, therefore, our members continue to enjoy a paid night duty break as a result of their solidarity in the face of management dictatorial behaviour.



**North Eastern Health Board,
Mater Hospital, Mater Private
Hospital, Bon Secours Hospital
and St Michael's House, Ballymun
Tony Fitzpatrick**

***Our Lady of Lourdes Hospital,
Drogheda:***

- Upgrading of two CNM1 posts in the neonatal unit.
- Labour Court victory (LCR17941) on the cessation of midwifery cover in the obstetric theatre and maintenance of agreed staffing levels on the labour ward. Despite the successful outcome from the Labour Court the board has failed to implement its recommendation citing non-availability of funding and staff ceiling.
- IRO Patsy Doyle has been supporting, liaising, advising and representing midwife members attending the enquiry into the practices of an obstetrician at the hospital.
- Members working in the outpatients department commenced working under protest due to the failure of management to provide adequate resources, facilities or staff to meet the demands being placed upon the service. These increased demands have been caused by the centralisation of orthopaedic and surgical services within the northeast to the Drogheda site.
- Ongoing discussions regarding enhanced management structures and staffing levels within the ICU/HDU/CCU area continue.
- The board has commenced a midwifery-led service within the maternity unit, however the midwifery staff have not occupied the new unit for deliveries due to a lack of staffing. Ante-natal classes and home visits are taking place. We have indicated that staff will not be occupying the new unit until adequate staffing is in place. This requires the provision of 12 full time equivalent midwives to meet the demands upon the service.
- Accident and emergency overcrowding continues unabated. The main reason for this problem is the failure to provide adequate bed capacity within the hospital and the board placing the 'cart before the horse' with regard to the centralisation of services provided within the northeast.

Cavan General Hospital:

- Upgrading for nurses into management positions.
- INO submission to the steering group regarding Cavan/Monaghan hospital services
- The INO continues to pursue management for the conversion of a large number of temporary staff to permanency. Completed applications have been submitted by management to central recruitment in Kells in the summer of 2004. However, the board continues to procrastinate and delay conversion.

- **A&E Overcrowding:** This was a significantly bad year with regard to overcrowding in the A&E department. This was due to Monaghan General Hospital being off call and the increased population and demographic changes within the Cavan area. Cavan General Hospital, built in 1987, has failed to secure any finance for additional capital expenditure. Submissions have been made to the Departments of Health and Children and Finance seeking funding with the provision of 19 additional beds, a HDU and additional theatres. Micheál Martin, Minister for Health, approved the 19 additional beds, however progress with the department has been slow to date. Cavan has a small A&E department with six cubicles, however, up to 20 patients are cared for in trolleys in the corridors adjoining A&E. Management have finally agreed to put in place an escalation policy with all the stakeholders involved. This Organisation has been pursuing alternatives such as a holding bay and discharge lounge which are currently under consideration.

Monaghan General Hospital:

- The INO continues to give its full support for the campaign to retain services at the hospital. Monaghan is to return to full on-call medical service in January 2005.
- Structural development has taken place of the emergency department within Monaghan General Hospital which is to open fully in early 2005. Management have confirmed the provision of an excess of nine whole time equivalent (WTE) nursing posts for this new service with the provision of shift leaders as per the national A&E agreement 2002.
- Management have agreed to a full staffing review of all the wards within the hospital to be carried out by Edna Cobain.

Louth County Hospital, Dundalk:

- High profile campaign led by the Irish Nurses Organisation into the retention of an on-call consultant surgical service in the hospital. Agreement has been reached via a consultative forum, set up under partnership for joint surgical services between Our Lady of Lourdes Hospital and the Louth County Hospital. A key to agreement on this issue is the provision of senior registrar surgical cover between 12pm and 8am as well as surgical SHO cover. A&E services are to remain *in situ*.
- Rights Commissioner recommendation in favour of nurse who was compulsorily redeployed

Community Services NEHB:

- Full implementation of Labour Court recommendation on subsistence for public health nurses and community registered general nurses retrospective to January 2002.
- Successful campaign to lobby return of medical officers to develop mental checks for seven to nine month old babies.

- LRC agreement to establish local working group to explore options with regard to clerical cover for public health nurses and community RGNs in Cavan/Monaghan area.

Care of Elderly NEHB:

- LRC agreement for the provision of 11 whole time equivalent staff nurse posts in St Joseph's Hospital, Trim, St Oliver Plunkett, Dundalk and the Boyne View, Drogheda. This was required to address excessive work loads experienced by the staff working in these units. This is seen as the first step with the LRC to reconvene in six months once implementation has occurred.
- Successful campaign to action permanency for long-term temporary nurses.

St Mary's Hospital, Drumcar:

- Labour Court victory recommending a clear time frame for the implementation of seven clinical nurse specialist posts.
- Difficulties regarding the application of the revised Serious Assault at Work Scheme has been referred to the Rights Commissioner Service.

Mater Hospital:

- Implementation of night duty to replace theatre on-call within the theatre department. This ensures the upgrading of six CNM1 posts.
- A&E overcrowding continues to be a significant problem in this hospital with numbers of admitted patients in the department ranging from 19 to 28.

St Michael's House:

- CNM2 x 2 upgrades for night duty
- CNM1 upgrades up by 22 with retrospection to November 2000.



North Western Health Board Region Noel Treanor

2004 was another busy year and the constraints of Sustaining Progress were felt acutely in many areas, but mainly in the care of the elderly environment. A campaign for increased nurse staffing numbers in Arus Carolan, Mohill took us unsuccessfully to the Labour Court, although there were certainly some improvements made. This campaign continues into 2005. The sense of grievance in this area was reciprocated through many of the smaller community hospitals and nursing units where claims for additional staffing were being processed. The difficulty on recruiting into such areas only compounds the issues.

Again, the A&E departments have had a rough time, with no end in sight to their issues. Activists in Letterkenny in particular have been very skillful in

keeping their profile high in the local media. On a positive note, there has been an increase in nursing staff in both Sligo and Letterkenny A&Es in 2004.

PPARS was introduced into the North West in the summer. 'Poorly planned' and 'shambolic' are two of the adjectives used to describe the roll out. There has been a significant amount of engagement with the board but concerns remain in both the application and interpretation of the system.

Membership has increased in 2004 and there has been both basic and advanced reps courses jointly held between the West and North West. The activists on the ground continue to be the heart of the Organisation, and with the progression of the partnership projects, their knowledge and ability is as crucial as ever.



Southern Health Board Region Michael Dineen/ Patsy Doyle

Cork University Hospital: Following protracted negotiations which took the greater

part of the year, this Organisation succeeded in re-negotiating elements of the national theatre on-call package which are more beneficial to all our members working within theatre in Cork University Hospital. This was of particular significance to staff working in cardiac theatre as it allowed them retain days in lieu of weekend on-call.

Within Cork University Hospital general management had sought to implement at best a 50% replacement ratio for sick leave. Following referral of the matter to the Labour Relations Commission full cover has been restored.

- Additional staff provided for Ward 1A night duty;
- Maintenance of CNM2 posts in accident and emergency;
- Additional night duty posts for accident and emergency;
- Negotiations underway on the proposed opening of new accident and emergency department.

Bon Secours Hospital, Cork: Succeeded in attaining additional CNM1 posts – 14 in total. Upgrade of night sisters to assistant director of nursing with retrospection.

Day Care Coordinators: We had sought the upgrade of staff nurses working in day care facilities to that of CNM2. Following a number of Labour Relations Commission conciliation conferences, management conceded that they should be upgraded to CNM1 with retrospection to 1 January 2004.

Mercy University Hospital: Negotiated an enhanced theatre on-call arrangement similar to that agreed in

Cork University Hospital which is more beneficial to our members.

Kerry General Hospital: Additional staff appointed to the accident and emergency following change in admission process.

Listowel Community Hospital: Provision of additional nursing staff. Unified maternity services.

Maintenance of payment of overtime rates for additional hours worked regardless of one's contracted hours as had been the established practice for a number of years.

St Patrick's Fermoy: INO involvement in working to improve staff relations on the complex.



South Eastern Health Board Region

Liz Curran/Claire Mahon

Extended Opening of Theatre Recovery, Waterford Regional Hospital:

A Conciliation conference took place in the Labour Relations Commission on 25 August 2004 regarding the extending of the opening hours of the theatre recovery unit. Agreement has been reached that the recovery room will extend its opening time by one hour until 6.30pm Monday-Friday. The new roster has been put in place for a trial period. This trial has been extended at the request of our members.

Amalgamation of Our Lady's Hospital, Cashel & South Tipperary General Hospital: Meetings have commenced with management in relation to the amalgamation of Our Lady's Hospital, Cashel and St Joseph's Hospital, Clonmel now called South Tipperary General, with a target date for the amalgamation of services being March 2005 (its target dates in the past have failed to come to fruition). Local partnership groups have been set up to ease the transition of services.

Regional Public Health Nurses: The INO balloted its members in the South East region on a proposal agreed between the INO and management, regarding church holidays. This agreement will provide public health nurses with four additional days of annual leave in lieu of church holidays. Public health nurses are then expected to work as normal on the church holidays as they fall. The ballot has concluded and has been accepted by the membership.

Wexford General Hospital: A review of the security at this hospital was undertaken as a result of an incident last August. To date, there is still limited security provided to the service. Our members continue to work under protest in relation to this incident and overcrowding of the A&E department.

The hospital continues to experience a bed crisis, despite the promise of funding for additional beds. The INO continues to highlight this issue.

St Patrick's Hospital, Waterford: Final resolution has been achieved in relation to planned annual leave. Four permanent nurse conversions have been guaranteed, these posts are currently being processed.

District Hospital, Carlow: The district hospital in Carlow is to open its new unit with an additional four nursing posts.

Permanent Conversions: A fifth conversion process was agreed with management. This ensured that all nurses who had one year's service up to 31 December 2003 were eligible for conversion to permanency or have 4,000 hours in the last six years. However, it is necessary that if a vacancy arises on a panel, either through retirement, natural wastage etc. for them to move along the panel. With the initiatives regarding planned leave, it is hoped that we can get a large number of staff converted to permanency. The last conversion panel that took place in 2002 has now been exhausted and all centres enduring hundreds of temporary staff have been converted to permanency in the South East.

Continuing A&E Crisis in the South East Region: As has been the case for a number of years now, our members continue the struggle to provide services within A&E departments nationally. Although discussions have continued at both a national and regional level to try and improve the situation, we are saddened to report that the only discernible result is a deterioration in working conditions. We have reached record levels of overcrowding in both Wexford General and South Tipperary General Hospital. Although management purport themselves to be taking all necessary actions to address the problem, our members have once again reached breaking point. We are continuing our representations to senior management and through the A&E Forum in an attempt to provide impetus for a system-wide solution. However, it remains a distinct possibility that our members may mobilise once again to force complacent managers and colleagues to commit to immediate action for immediate solutions.

Maternity: There is an on-going shortage of midwives within the South East. We continue to make representation to management at all levels within the region to implement initiatives which may in some way help to encourage recruitment within this group of nurses.



Western Health Board Region

Noreen Muldoon

Plunkett Home CNU, Boyle, Co Roscommon: Following protracted negotiations a staffing level review was carried out at Plunkett Home by the Nursing and Midwifery Planning and Development Unit under the auspices of the LRC.

An additional CNM1 x 1, staff nurses x 12.5, care assistants x 12.5 was recommended.

It was agreed that there would be a phased five year implementation of the report.

In July 2004 it was agreed to appoint :

- CNM1 by confined competition with consequential filling of the vacant staff nurse post;
- Staff nurses x 3;
- Care staff x 2.

The palliative care unit opened when the new staff were put in place. In addition the existing extra temporary 2.7 staff nurses on night duty are remaining. This gives an extra staff nurse and care attendant on duty each day.

We will be meeting with senior management again within the early weeks of 2005 to discuss the next phase.

Galway Regional Hospitals – UCHG & MPRH – Transfer to Trauma

The Department of Health and Children allocated €11 million to UCHG for the opening of the new trauma/orthopaedic unit and intensive care. This service is being transferred from Merlin Park Regional Hospital to University College Hospital Galway and it is envisaged to take place in April/May 2005.

The unit will consist of an in-patient ward, OPD, two theatres, plaster room etc.

Some of the nursing staff have indicated their interest in transferring to UCHG from Merlin Park whilst others have no interest.

Some issues surrounding this include:

- Loss of earnings for theatre staff as a result of the on call requirement being reduced;
- Travel to UCHG as opposed to MPRH for those transferring;

Janet Hughes has been appointed as facilitator to deal with these and all issues pertaining to this project.

Mayo General Hospital: The Orthopaedic Unit at Mayo General Hospital scheduled to open in July 2004 was deferred until September 2004. Following negotiations and a public demonstration, the nursing and other staff appointed to commence work in July were facilitated and limited orthopaedic procedures were carried out. The unit then opened in September 2004 on a phased basis with trauma-orthopaedic introduced in early January 2005.

The nursing complement was appointed from both internal and external competitions and/or transfers. Training and education is ongoing for nursing staff in all areas of the unit.

The plaster room staff in the new plaster room are currently being trained by the CNM2 from the Merlin Park Regional Hospital Plaster Room, who is a former member of Executive Council.

Genito-Urinary Medicine: The GUM clinic is being transferred from community care to acute services at UCHG. Our members have been employed there for 20 years on a sessional basis. We have negotiated for them to be appointed to permanent positions, retaining their enhanced sessional rates of pay, and having all the terms and conditions applicable to their permanent appointment.

PHNs & RGNs (Community): Following the intervention of the LRC, the INO was successful in attaining mobile phones with hands-free car kits for all PHNs and RGNs in the region.

Again we were successful following the intervention of the LRC in having subsistence paid to the community RGNs.

PHNs – Redeployment/Transfer: The INO has been successful in discontinuing the practice of PHNs having to interview for redeployment or transfer within their own area or region. This practice had been the norm for some years. We had been negotiating since 2002 to stop this. The following has now been agreed:

- A PHN makes an expression of interest in writing for a move to another named area;
- When a vacancy arises the place is offered to the person longest on the list for the vacant area;
- Should there be more than one applicant on the same day the place is offered to the PHN longest in the community care area as a PHN.

Roscommon County Hospital: A new state of the art A&E department opened in January 2004. The INO however could not cooperate with the opening of the full unit as no additional nursing staff were allocated for additional resources.

Finance has now been allocated to the hospital for the employment of an additional 6.5 nursing staff to the A&E department and the closed area will open on the appointment of these nurses. No date has yet been agreed.

Galway Hospice Foundation: The Galway Hospice reopened in August 2004. It had been closed to new admissions for over 15 months, following complaints made by the palliative care consultant. An investigation was carried out. Prior to reopening a director of nursing was appointed and nursing staff had an opportunity to devise new policies and protocols. It opened on a phased basis and now has seven of the 12 beds opened.

Organisation and Social Policy



Clare Treacy,
Director of Organisation
and Social Policy, INO

The committee, chaired by Sheila Dickson, and attended by the Director of Organisation and Social Policy met on a monthly basis throughout the year. The committee includes the President Madeline Spiers, Jo Tully, Kay Garvey, Ursula Morgan and Raymond Boyle. The agenda was mainly influenced by the social policy motions from last years ADC, and included the following issues;

- Participation in a TV documentary on migrant nurses in Ireland titled 'South Circular';
- Attendance at ICTU Women's Conference, and presentation of a motion on nurse:patient ratios from a health and safety perspective;
- Endorsement of an ICTU policy on lesbian, gay, bisexual guidelines for the workplace;
- Co-ordination of two seminars in the 'Funding of the Health Service';
- Submission on obesity;
- Contribution to survey by Age Action Ireland;
- Endorsement of Breastfeeding Guidelines, and Domestic Violence Guidelines from ICTU;
- Participation in the National Action Plan against Racism;
- Ongoing projects include;
 - Development of position paper on Suicide Prevention in conjunction with the Psychiatric Nurses Association;
- Development of policy on Whistleblowing. Initial work commenced on this project. Its main aim is to provide protection for nurse/midwife who reports a matter to the appropriate authority, in good faith.

Other activities are detailed below.

Funding of the Health Care System

A two day seminar was held in the INO Headquarters on the controversial issue of Health Care Funding. Award winning journalist Maev-Ann Wren and social policy researcher Dr Jane Pillinger were the key note speakers. The seminar was attended by nurse activists from around the country, together with Executive Council members. It is envisaged that a comprehensive discussion document will be available for presentation at a members seminar during 2005.

Smoking Ban

The INO along with other trade unions and ICTU, played

a very active role in campaigning for the smoking ban. We advocated that all workers were entitled to work in a safe and healthy environment, which was free from avoidable exposure to harmful substances. The INO views this as a public health issue and as first line health workers our members see, on a daily basis, the long-term negative effects of smoking. The workplace ban is a proactive measure to improve the health status for the community at large and we welcome it.

Gender Pay Gap (GAP)

The GAP project was initiated by ICTU and funded under the Equality for Women measure (Department of Justice, Equality and Law Reform). It commenced in 2001 and was completed in December 2004.

The rationale behind the project was that a paradigm shift was needed in trade union activities and in the workplace in order to deliver gender equality in employment for women workers. Despite the fact that legislation has existed since 1975 to outlaw wage discrimination on the grounds of sex, national research by the ESRI pointed to the fact that women working in Ireland were;

- On average paid 15% less than their male counterparts
- Under-represented at higher levels in the workplace.
- Occupationally segregated
- Have reduced labour market attachment

Clare Treacy represented the INO on the steering committee and as part of the project, she presented a paper to a national conference 'Bridging the Gap' on the under-representation of female nurses in management grades within the health system. Further information about this project can be found on www.ictu.ie

Multicultural Award

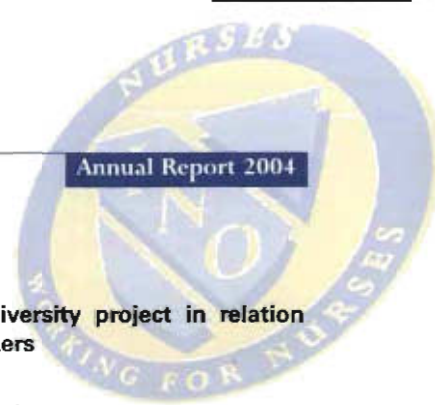
The INO overseas nurses section won a prestigious MAMA Award (Metro Eireann Media and Multicultural Award) in recognition of the work which the INO has done to successfully integrate overseas nurses and midwives into the Irish health care setting. In particular, the campaign to allow the spouses of nurses to work in Ireland was seen as significant.

Submissions and Conferences

The Director of Organisation and Social Policy and the INO Social Policy Committee made a number of submissions throughout the year, and was represented at a number of conferences.

Power Partnership – Guest lecturer in Maynooth University on a programme to empower women.

Naas General Hospital – Cultural event - Guest lecturer



on cultural diversity – from an INO perspective.

Bridging the Gap Conference – Invited speaker on the gender pay gap in Nursing

Representation of INO at ICTU forums in relation to child care, cultural diversity and anti-racism, Equality clauses, gender representation, pregnancy discrimination, gay and lesbian rights, and the recent Disability Bill

Submission to the Department of Health in relation to Cancer Strategy.

Submission to National Economic and Social Forum on Care for Older People.

Participation in Oxford University project in relation to migrant health care workers

Fitness to practise

This area continues to grow. In 2004 there were 15 new cases of nurses being reported to An Bord Altranais under fitness to practise. Eight of these matters did not proceed to a full hearing. All other matters will proceed to a full hearing under Section 38 of the Nurses Act.

In addition to this we had six hearings in 2004 of matters that were notified in 2002 and 2003. This resulted in three nurses being removed from the Nurses Register.

Professional Development Centre



Annette Kennedy,
Director of Professional
Development, INO

Overview

The Professional Development Centre was set up in 1997 in the Mews Building of 11 Fitzwilliam Place with the objective of providing members access to continuing professional development by means of workshops, conferences, accredited programmes and collaborative work with third level colleges as well as European and international networks including

PCN (Standing Committee of Nurses in the EU), ICN (International Council of Nurses), WENR (European Nurse Researcher Group), WHO (World Health Organisation) and IAC (International Advisory Council).

The Professional Development Centre also provides information, library facilities, web based resources through N2N and the INO website. The expansion of the INO led to the move to our current headquarters in May 2004 in the Whitworth Building.

The Whitworth Building provides members with state of the art facilities in terms of meeting rooms, education and training rooms, conference and library facilities and the most up-to-date IT and video conferencing facilities. Branch meetings, section meetings, adhoc meetings, workshops and conferences for approximately 80 people can now be held in our new headquarters. The PDC is very proud of its achievements over the past seven years. Over 11,000 nurses and midwives have attended one of 642 education programmes provided over the last seven years.

In May 2004, the INO was proud to host the first European Symposium on 'Nurses' and Midwives' Contribution to Health Policy in Europe' with EU Commissioner David Byrne. In October 2004 Harriet Sergeant, author of *Managing not to Manage – Management in the NHS* gave a presentation to the Directors and Assistant Directors section.

PDC Objectives 2005 are to:

- Develop new communication channels for meetings and education by means of innovative internet links and video conferencing to provide members with increased access to INO activities and meetings;
- Develop new European and international links in order to provide a greater variety of continuing professional development programmes;
- Continue to work with equivalent European organisations in order to provide members with information on new trends in health care and nursing and midwifery services;
- Continue participation on European issues which affect patients' care and how nurses and midwives deliver care;

- Continue expansion in research fields both on a national and international level to support evidence based nursing and midwifery practice;
- Build a European research network in order to unify health, nursing and midwifery research evidence through N2N and WENR website. (The INO currently hosts the WENR website).

Statistics for PDC 2004

Internal workshops: 1,181 attended over a 10 month period which showed a comparative increase of 35% (the PDC was closed for two months during the move to the new HQ).

External workshops: 502 attended – an increase of 102% from 2003.

Workshops are listed on the INO website and advertised in *WIN – The World of Irish Nursing and Midwifery* every month. The areas the workshops cover include:

- Clinical;
- Management;
- Professional Issues;
- Research and Evidence Based Practice;
- Work-Life Balance;
- Information Technology.



At the recent midwives conference in Dundalk were (l-r): student midwives Lorraine Flynn and Mary McKenna, Our Lady of Lourdes Hospital, Drogheda; Melanie McKay and Donna Loughran, Queen's University, Belfast; and Nora Gallagher, Our Lady of Lourdes Hospital, Drogheda

Midwives conference: 215 attended

Operating theatre nurses conference: 137 attended

Occupational health nurses conference: 93 attended

New courses are continuously be developed and offered to members.

'Managing not to Manage' Presentation by Harriet Sergeant to Directors and Assistant Directors of Nursing Section

Harriet Sergeant, author of *Managing not to Manage – Management in the NHS* was invited to the Irish Nurses Organisation headquarters in Dublin to give a presentation on her research to directors and assistant directors of nursing on 21 October 2004. Her report



Harriet Sergeant (left) author of 'Managing not to Manage - Management in the NHS' with Annette Kennedy at a presentation given by Harriet on her report to the Directors of Nursing Section

takes a fresh look at management in the National Health Service in the UK and is based on extensive interviews and research over an 11 month period in six different hospitals both in London and in the rural West Country. Harriet interviewed chairmen, chief executives, middle managers, consultants, matrons, sisters, nurses, porters, cleaners and of course patients. Harriet sat in on management meetings and shadowed front-line staff. She also did volunteer work in her local hospital.

Harriet is currently following up this research with an examination of nurses and nursing. Whilst in Dublin she shadowed a director of nursing in one of the large Dublin hospitals as part of her research. Harriet's presentation to the directors of nursing was realistic and insightful. It described the lack of efficiency in the NHS from which the Irish health service should learn.

INO Symposium 'Nurses' and Midwives' Contribution to Health Policy in Europe'

An INO Symposium, 'Nurses' and Midwives' Contribution to Health Policy in Europe' took place on 11 June in the new INO headquarters. EU Commissioner David Byrne made a presentation on 'Health Perspectives in a Newly Enlarged Europe' and Ria von Bonninghausen, President of the European

Standing Committee of Nurses, presented to the Commissioner two EU policy documents: *International Nurse Recruitment* and *Medical Sharps Injuries*. Other guest speakers included: Stephen McMahon, Chairperson of the Irish Patients Association, who spoke on 'New Europe bound together on a foundation of Patients' Rights', and Anne-Marie Ryan, Chief Education Officer in An Bord Altranais, who presented on 'Supporting Nursing and Midwifery Standards of Education across and Enlarged EU'. The debate that ensued focused on the challenges and issues that arise for health systems, arising from the free movement of millions of people who will enjoy automatic access to the host country's health service. In particular the need for minimum standards, transparency of professional qualifications and equality of access were debated. The symposium proved to be a thought provoking discussion on issues that affect every citizen of the European Union.

In her presentation, Annette Kennedy, Director of Professional Development, stressed how nurses and midwives need to influence European policy. EU Directives will affect nurses and midwives, not only in education but in our roles and functions, our conditions of services and the way in which nurses and midwives deliver patient care.

Certificate in Health Service Management INO/University of Limerick - Distance Learning Programme

This Distance Learning programme continues to be highly successful. During the academic year of 2003-2004 a total of 41 students undertook and graduated from the University of Limerick study centre. Graduation took place in the University of Limerick on 21 December, 2004.

Diploma in Health Services Management INO/University of Limerick - Distance Learning Programme

The 2003-2004 cohort of students undertaking the Diploma in health services management in UL this academic year was 42 - an equally high number to last year. Many students are now progressing from this



At the Symposium on Nurses and Midwives Contribution to Health Policy in Europe were from left: Annette Kennedy, INO director of professional development; Ria von Bonninghausen, president of the Standing Committee of Nurses of the EU; Commissioner David Byrne; Modeline Spiers, INO president; Stephen McMahon, chairman of the IPA; Ann Marie Ryan, chief education officer with An Bord Altranais; and Liam Doran, INO general secretary

diploma programme to the degree programme, and are very pleased to be afforded the opportunity to do so. Graduates from the diploma course commence the degree programme in the second year.

Room Hire

Several organisations hired our conference facilities over the past few months. They include the following: ESB, Partnership Rep Training Group and the Irish Heart Foundation.

Nurse Education and Nursing Midwifery Practice Committee

Motions referred to this committee relate to both professional and educational issues. Many of the issues form part of a broader remit involving the industrial relations arena and are currently being discussed, debated or negotiated in many different forms.

The issues include: the health service reform, roles and structures for directors of nursing and midwifery, accident and emergency services, nurse/midwifery led-units, the role of statutory bodies, Nurses and Midwives Bill, staffing levels and skill mix, clinical competence, scope of practice, clinical nurse/midwife specialist, advanced nurse/midwife practitioner, nurse/midwifery education, funding of courses. A six month update was given to members at the National Branch and Section Officers meeting in November 2004.

New Educational Developments

Bachelor of Nursing Studies in Community Nursing Degree

The INO has been in negotiation with Dublin City University and is delighted to announce that a Bachelor of Nursing Studies in Community Nursing Degree Course (BNSCM) is now available specifically directed for nurses working in the community. A meeting was held with community RGN section on Saturday, 16 October in INO HQ and nurse lecturers from DCU presented the BNSCM course and access course to attendees. They informed members how they can undertake this degree course through access programmes and previous education.

Honours BA Degree in Health Services Management INO/University of Limerick – Distance Learning Programme

This new four year programme is aimed at the managerial competencies required by nursing managers in health service organisations and focuses on developing core competencies. This management degree programme is now in its third year. The first 12 students will be graduating in September 2006. There are 28 students currently undertaking the second year programme and 18 students in their first year.

International Section Activities

HOHNEU: The INO 3rd Steering Group Meeting

(HOHNEU) was held on 18 and 19 November at INO head office, and we welcomed two new partners, namely Slovenia and Poland.

The principal discussion was around the success of the bid to the Leonardo da Vinci Fund which has resulted in HOHNEU receiving 75% of the Leonardo da Vinci sponsorship. The purpose of the funding is to set up an OHN Distance Learning Programme, specific to occupational health nursing at a Degree/Masters level. An initial strategy was discussed, with each partner taking responsibility to source and produce a module of the programme. The module which Ireland will be responsible for in conjunction with Poland is 'Health Promotion'.

An initial outline of a module was put together and the funding has been divided up on a pro rata basis, based on input and output.

The next meeting of the Steering Group is in March 2005 in Slovenia and each partner must produce an outline of the module allocated to them. Each partner is responsible for managing their own budget and an accurate paper trail must be produced.

EORNAC – The 4th Congress of the European Operating Room Nurses Association

This will be held on 25 to 28 May 2006. The theme of the Congress will be *Perioperative Care: On the Shores of Excellence*. The local planning committee has met several times with Ovation, the conference organising company, and indeed with the organising committee of EORNA to plan, design and print the first and second announcements, which will be circulated within the next couple of months.

Department of Health and Children

DoHC 7.63 Staffing Levels/Skill Mix Working Group

This group was set up by the Department of Health and Children under the auspices of the Commission on Nursing recommendation 7.63. The committee has met on four occasions over the last year with the objective to "examine the development of appropriate systems to determine nursing staffing levels". The INO requested a midwifery representative be nominated to the committee. Mary Higgins, chairperson of midwives section, was nominated. Staffing systems both nationally and internationally were received and a number of presentations were made to the committee in relation to different systems. Currently a report is being written documenting the funding in relation to systems determining nursing/midwifery staffing levels and making recommendations on this issue.

Rostered Year Programme

A number of meetings took place between the INO and the Department of Health and Children in regard to the difficulties for both students and staff in the clinical area during clinical placements. The problems identified by the INO were:

- The limited amount of time allocated to clinical placements in advance of the rostered year. It could have been as low as 18 weeks depending on when the students commenced the rostered year;
- The service requirement that rostered students operate at the level of third year students, despite the lack of experience and in many cases no previous experience in some areas, including specialist areas, prior to being rostered;
- The fluctuating nature of student numbers in the clinical area. The ratio recommended in the Deloitte and Touche report was 2:1 in line with the Diploma Programme, however the report did highlight practical difficulties in its implementation.

The Department of Health and Children agreed with the seriousness of the INO's concerns and a two-step solution was implemented to try and resolve the immediate difficulties.

It involves retaining the 12-month rostered year for the existing cohort of students but moving to a 34 week (excluding annual leave) for the 2005 intake and subsequent intakes.

2002, 2003 and 2004 intakes: Given the service implications of altering programmed arrangements it is proposed that the rostered placement for these groups of students continue as scheduled. The proposed student-staff replacement ratio for the existing cohort of students (2002-2004 intakes) will be 3.5:1 (this will be funded as an annualised figure but will allow service providers sufficient leeway on the ground to apply varying ratios over the course of the year). Students will be salaried for the entire 12 month period.

2005 intake and subsequent intakes: The rostered placement will be reduced to 34 weeks for the 2005 intake onwards (excluding annual leave) with a replacement ratio of 2:1. In order to maximise the overall amount of clinical experience available in advance of the rostered placement, the rostered placement (or internship) for the 2005 intake and subsequent intakes will move to the end of the programme, finishing in week 52 of the fourth year.

An Bord Altranais also approved a revised set of requirements and standards with a significant reduction in specialist placement requirements.

Nursing and Midwifery in the Community

The INO had major difficulties with the first draft of the Nursing and Midwifery in the Community strategy and communicated its concerns to the Department of

Health and Children. Discussions emerged between the INO and the Department of Health and Children and a review of the strategy was taking place, however the current status of the strategy is unknown.

Nursing and Midwifery Research Committee

This committee was set up with the objective of implementing the recommendations of the National Research Strategy. The committee works under the auspices of the Health Research Board and the National Council for the Professional Development of Nursing and Midwifery. It is currently implementing strategies and developing research priorities in the short, medium and long term for nursing and midwifery. The committee is identifying strategic alliances with international agencies, seeking additional funding for nursing and midwifery research activities including finance for postgraduate, doctoral and post-doctoral studies, developing nursing and midwifery research units/programmes within higher education institutions and research links between health service agencies and higher education institutions as well as developing a database of nursing/midwifery research.

The Standing Committee of Nurses of the EU (PCN)

The Standing Committee of Nurses of the EU represents over 1.2 million nurses and is the independent European voice of the profession. It consists of members from the National Nurses Associations from 26 European countries. It provides a broad platform for developing policy and practice in Europe on all areas which affect nursing, including education, working conditions, mobility of nurses, workforce planning and public health. The committee lobbies and advises experts in the EU and European Council as well as national governments on all issues pertinent to the delivery of patient care.

Currently PCN is focusing on the development of a major strategy in relation to the following areas:

- Mutual recognition of professional qualification;
- Care for older persons;
- Mobility of nurses and workforce planning;
- The services and European Working Time Directive;
- Euthanasia;
- Pensions;
- Nursing leadership/governance.

Other areas that PCN is continuing to lobby on include:

- Patient safety;
- Reuse of medical devices;
- Sharps injuries;

- Environment and health;
- Bologna Agreement (Third level education).

Position statements have been developed by PCN on many of these issues. PCN has agreed on a new Constitution which allows for a name change that more appropriately reflects its work and membership. The committee will be entitled 'European Federation of Nurse Associations (EFN)'. The new Constitution will also allow for associate countries currently outside the European Union to become full members following the fulfilment of certain criteria. The organisation has also purchased a new premises which is close to the European Parliament in Brussels. This will allow for greater flexibility in terms of meetings, lobby work and research.

This committee is imperative at a European level as it allows nurses to contribute to EU health policy and the delivery of patient/client care and EU Directives in relation to health, education, environmental services, which will directly or indirectly affect how nurses work and deliver services in member states.

Return to Nursing/Midwifery Practice Course Steering Committee

The return to nursing and midwifery practice project is a result of a conjoint funding bid on behalf of the Directors of Nursing and Midwifery Planning and Development Units to the National Council for the Professional Development of Nursing and Midwifery in 2003. The overall aim of the project is to develop common national principles for the content and delivery of such programmes in the future, ensuring equity of provision and access for nurses/midwives wishing to return to any area. A national steering committee has been established to oversee the project and a project manager, Frances Neilan, was appointed in August 2004 for 10 months to lead the initiative. The steering committee includes wide representation from within the profession – the Department of Health and Children, An Bord Altranais, Health Service Providers, Centres of Nurse Education, National Council for Professional Development of Nursing and Midwifery, the Irish Nurses Organisation and the Nursing and Midwifery Planning and Development Units, and key personnel involved in the return to practice project.

Nurses and midwives who wish to return to practice have been identified as a target group to address the current shortage of nurses/midwives in the health service. Return to practice courses are currently being delivered in most health boards. Courses vary in duration and content.

This project seeks to achieve the objectives of standardisation where possible, in recruitment and selection processes, course design, duration, content,

evaluation, competency assessment frameworks and value for money.

Annette Kennedy, Director of Professional Development is a member of the following national committees:

- DoHC 7.63 Staffing Levels/Skill Mix Working Group;
- DoHC Nursing and Midwifery Research Committee;
- An Bord Altranais five Points of Registration;
- ERHA Return to Nursing/Midwifery Practice Course Steering Committee;
- The Role of Nurses/Midwives in the Examination of Sexual Assault Victims Committee;
- Institute of Public Administration;
- UCD Governing Authority Body;
- UCD Research Ethics Committee.

International Developments/Events

Health First Europe – Sharps Injuries

The Irish Nurses Organisation was invited by Health First Europe to participate in an EU lobbying initiative on World Aids Day, 1 December 2004. It is estimated that 1 million sharps injuries are suffered by healthcare workers in Europe each year and research shows that 49.5% of sharps injuries in Ireland are suffered by nurses. (*'Occupational Sharps Injuries in a Dublin Teaching Hospital' (Beaumont Hospital), Irish Medical Journal May 2003, Volume 96 Number 5*). In suffering an injury from a contaminated needle, the risk of transmission of infections is 1 in 3 healthcare workers for hepatitis B, 1 in 30 for hepatitis C and 1 in 300 for HIV. Independent studies show that the majority of these potentially fatal injuries can be avoided using a combination of training, safer working practices and medical technology incorporating safety features.

To ensure that the applicable preventative measures are consistently applied across the EU, to protect our healthcare workers, requires action from the European Commission to provide a legislative linkage between the requirements and compliance with applicable worker safety directives. Health First Europe is an alliance of patients, healthcare workers, academics, experts and industry which was set up to provide a platform for the healthcare sector. Health First Europe coordinated representatives, both medical and nursing, from across Europe to speak with MEPs from their respective countries.

Annette Kennedy met with Marian Harkin MEP, Kathy Sinnott MEP and Michael O'Connor, Assistant to Mary Lou MacDonald MEP, and highlighted the importance of influencing a new EU Directive on Health and Safety

in the Workplace to ensure that nurses and midwives are protected and that it is required by law that the safest equipment is used in all environments. The three meetings with the Irish MEPs proved very successful and each agreed to vote in favour of proposed changes to the draft Directive which would ensure safest practice for all healthcare workers.

Annette Kennedy also presented Mary Harney, Tanaiste and Minister for Health and Children, with the European Report on health sharps injuries.

Annette Kennedy, Director of Professional Development, is a member of the following international committees:

- PCN, The Standing Committee of European Nurses;
- WENR, European Nurse Researcher Group;
- ICN, International Council of Nurses;
- IAC, International Advisory Council;
- WHO/EFNNMA, World Health Organisation/
European Forum of National Nursing Associations.

WENR

Annette Kennedy represents the INO as the Irish NNA (National Nursing Association) on this committee and is a member of the steering group. The group meets once a year in a host member country and holds a biannual conference. This conference was held in Lisbon between the 5 and 10 October 2004. A number of Irish nurses presented papers at this conference. The INO currently hosts the WENR website and is working with other member countries to develop capacity building of nursing research in Europe. The INO, on behalf of WENR, developed a questionnaire in relation to research activities in the 25 member countries. This has been analysed and will be on a new reorganised website. The next meeting of this group will be in Dublin in the INO HQ in July. The INO hopes to involve research stakeholders in Ireland in this meeting to expand collaborative work of the group.

ANCC International Advisory Council

The American Nurses Credentialing Centre founded the International Advisory Council in 2002 to advise ANCC Board of Directors on international business matters. The ANCC Board believes that a disciplined approach to the development of global programmatic activities requires the guidance of experienced individuals who are internationally renowned market leaders and willing to provide the ANCC governing bodies with expertise upon which sound organisational decisions are based. Annette Kennedy was invited to become a member of this council and it holds teleconferences on a quarterly basis. The Advisory Council is discussing credentialing nursing practice in hospital settings internationally, in line with

magnet credentialing standards. Several countries outside the US have become involved in the ANCC credentialing programme namely the UK, Rochdale Trust and New Zealand.

The European Forum of National Nursing and Midwifery Associations and WHO

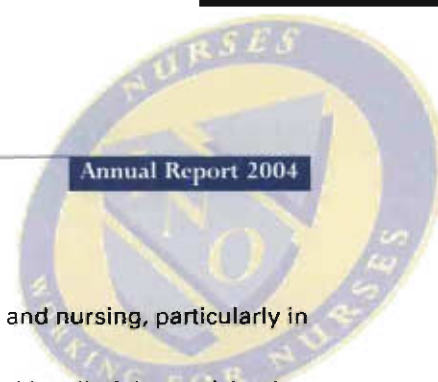
The 8th Annual Meeting of the European Forum of National Nursing and Midwifery Associations and WHO took place in Macedonia in June 2004. The main focus of the annual meeting of the Forum was mental health, a key priority area of the WHO Regional Office for Europe.

The annual meeting was attended by representatives and observers of nursing and midwifery associations from 24 WHO European Member states. Annette Kennedy represented Ireland and the Irish Nurses Organisation sponsored the National Association of Medical Nurses of Belarus to participate at this meeting.

The meeting comprised of two components; the first one focused on the business of the Forum and the second provided technical discussions on a draft Statement on Mental Health. This statement represents an issue of global importance to the Associations and it served as an input to the meeting of Ministers on Mental Health in Helsinki in January 2005. The following are some of the key issues from the Forum statement:

- Recognising the substantial burden of mental health disorders on individuals, families and communities, and that such problems increase mortality; cause significant disability; and increase the risk of social exclusion;
- Recognising the effect of early detection/intervention of nurses and midwives in working with/supporting individuals and families in preventing, promoting and managing mental ill health;
- Consciousness that general nursing and midwifery programmes do not always prepare nurses and midwives to respond to the mental health needs of their parents and that there is a need to ensure that the mental health component/content in the education programmes of nurses and midwives is strengthened;
- Consciousness that many mental health nurses themselves experience stigma and discrimination;
- Aware that many countries have a shortage of nurses and midwives available for mental health care and that many nurses leave low and middle income countries to work in high income countries.

The next EFNNMA and WHO annual meeting takes place in Copenhagen in March 2005 and Ireland will be represented at this meeting by Madeline Spiers and Annette Kennedy.



ICN Workforce Forum

The 2004 ICN Workforce Forum met in Wellington, New Zealand in September 2004. The Forum discussed a range of issues affecting nursing throughout the world and the topics included significant developments in pay and conditions of nurses, pay equity, issues relating to diversity/migration, staffing ratios and working hours.

The objective of the Forum is to stimulate thinking and enhance learning and develop strategies to address nurse's workplace concerns. The Forum identifies trends in nursing pay and negotiating frameworks and seeks to determine nurses short, medium and long term priority in the area of socio economic welfare.

The Forum also supports international partnerships for

the advancement of nurses and nursing, particularly in developing countries.

Written papers are submitted by all of the participating countries and the 2004 Forum received papers from the Irish Nurses Organisation, the American Nurses Association, the Canadian Nurses Association, the Danish Nurses Association, the German Nurses Association, the Icelandic Nurses Association, the Japanese Nurses Association, New Zealand Nurses Organisation, the Swedish Association of Health Professionals and the Royal College of Nurses, Great Britain. The Forum in recent years has developed and is trying to perfect two international surveys. The first relates to nurses wages and their context and the second relates to the nursing workforce profile of the participant countries. The results of these surveys are available from the ICN.

Online and Information Technology

INO website

- Total number of visits to INO website *www.ino.ie* in 2004 was almost 4 million
- INO website is referenced in over 9,000 internet pages globally
- 45% of traffic to INO website is from outside Ireland with UK, USA and Australia leading.

The INO website now in its eighth year has continued to prove to be a great success, both at home and abroad. The INO website is updated on a daily basis with the latest news and happenings in the world of nursing and health care. Members who visit the website at *www.ino.ie* are provided with a broad range of information about all of the INO services. A new look INO website went live in December 2004, giving members an even easier website to navigate and find all the information required. An analysis of statistics for *www.ino.ie* for 2004 found that there have been almost 4 million visits in 2004. INO website is referenced in over 9000 internet pages globally – 45% of the visitors to INO website are from outside Ireland with UK, USA and Australian visitors leading. Even in the absence of major industrial issues involving the Organisation the traffic to the website has still risen compared with 2002 and 2003.

Nurse2Nurse (N2N)

- Total number of visits to N2N 2004 was 1.3 Million
- New users registered on N2N for 2004 stands at 1,605
- Total user population = 15,000

www.nurse2nurse.ie is the website/one-stop shop for up-to-date education and research information for nurses/midwives in Ireland. N2N content is comprehensive, credible, convenient and current and provides INO members with the opportunity to search for information from work, home or from any location where the nurse/midwife has internet access. *www.nurse2nurse.ie* has received acclamation from many individual nurses/organisations for its user friendliness, presentation of up-to-date information and its options for accessing a host of nursing/midwifery related information. N2N is the only website of its kind in Europe.

N2N attracts new members to INO

N2N is attracting many new members to the INO with no less than 1,500 new students joining the INO since September 2004. Nurses/midwives who have returned to college or who are continuing their studies are joining the INO to use the services offered on N2N and to use the INO library. The INO library is now seen as one of the most forward thinking libraries in the Irish Health/Nursing Libraries Association for its work and development of N2N.

The team at N2N are presently working on the final stages of the new design and layout for the N2N website,

in order to make the website even more user-friendly and to reduce the administrative burden to publish new material all the time. It is hoped that version 2 of N2N will appear online in March 2005.

@Nurse.ie – updated email – with new features

INO members are moving ahead of all other professionals with their own professional email address *@nurse* & *@midwife.ie*. In February 2003 a free email service for Irish nurses and midwives was launched. In August 2004 an updated version of this email service went live, giving our members access to a host of new features including the possibility to upload documents and access these documents wherever or whenever they have internet access. This innovative step gives every nurse and midwife in the country the opportunity to have an *@nurse.ie* or *@midwife.ie* email address via *www.nurse2nurse.ie*. As of December 2004 there are over 4000 active users while there are about 1200 dormant users (have an email account but are not using it regularly). The number of emails passing through the system was ever increasing during Oct-Dec 2004. Over 205,000 emails were processed. With new and exciting personal information management features it is hoped that 2005 will see a massive growth in the usage of email services. INO will also be introducing *studentnurse.ie* email and information services for 1,100 nursing students, and so far over 500 registration requests have been received.

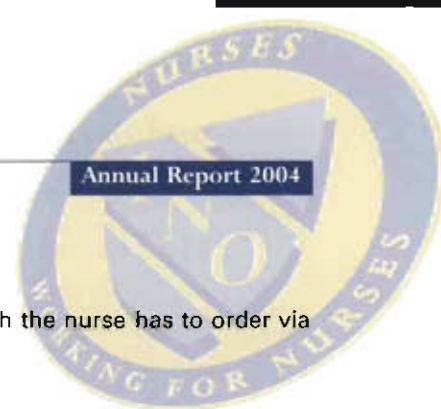
Library

The Library & Information Service continued to be developed during the past 12 months. The move to our new building and library has created many new opportunities and challenges for the staff. The extra space in the new library has allowed for the expansion of the library's book, report and journal collection. As can be seen from the figures below, there has been a decrease in the number of members visiting the library. The library staff are currently developing a marketing strategy to encourage members to make full use of the library services.

The library now holds a very comprehensive range of nursing, healthcare and industrial relations material including:

- 85 journal titles
- 28 e-journals
- 5,500 books, reports & official publications
- Directories
- Newsletters
- Online databases

Services offered by the INO Library during 2004 included:



Journal Collection

The library provides access to a comprehensive journal collection with subscriptions to all the core nursing/medical and industrial relations journals along with online access for all members to our electronic journals collection. The electronic journal collection has been increased during the course of the year.

Computerised Services

Access to a host of online reference databases:

- Cumulative Index to Nursing & Allied Health (CINAHL)
- Medline (Clinical)
- The British Nursing Index
- Cochrane Library (evidence-based research, some full text)
- OECD Health Data 2002 – (a comparative analysis of 29 countries).

Free online connection to CINAHL, British Nursing Index and full-text journal literature was provided for every member during November 2002 via www.nurse2nurse.ie.

Book Collection

The library has a comprehensive collection of books and reports on nursing, allied health, industrial relations and related areas.

With the move to our new library giving us much needed extra space it has been possible to add many new publications to the collection. The library staff are at present in the process of upgrading the library catalogue system which will allow all staff and members to view and search the library catalogue.

The library continues to support the Office for Health Management's e-learning project 'Online Nurse Manager's Competency Assessment Tool and Personal Development Pack' for front, middle and top level nursing management, by holding a comprehensive collection of books/videos in all areas of management. All of the material referenced for this course is available for nurses using the competency assessment tools at the INO library.

Photocopying and Document Supply

While articles may be photocopied in the library, a postal photocopying service is also provided. All documents required by members not held in the INO library are available to members via the Irish Healthcare Journal Holdings Co-operative, The Nursing Union of Journals (UK) or British Library Document Supply Centre. A continuing phenomena for the library in the past 12 months has been the increase in the number of articles which nurses themselves are downloading from the full text material available online thereby cutting down on

the number of articles which the nurse has to order via the library.

Literature Searches

In serving our geographically dispersed membership, hundreds of literature searches are undertaken by library staff, for nurses and midwives who may otherwise not have the possibility of acquiring the information they require to complete their studies. Due to the online access to the nursing and medical databases, the number of literature searches carried out by the library staff has decreased.

There has been an increase in the number of queries, which are received from INO staff and Executive Council members.

Current Awareness Services

The *Current Awareness Bulletin* containing contents pages of all the journals received into the library during the previous month continues to be compiled monthly and circulated among the staff and members who subscribe to this service.

Other resources, such as the daily newspapers, journal articles and websites are scanned on a regular basis in order to keep staff and members up-to-date on current events and information. With an increase in the amount of full text information available on the internet, scanning websites has become increasingly important.

User Education

A number of workshops were held during the year on *Information & Library Skills*. The programme included: planning literature searches, journal literature, references and referencing, and practical sessions in the library.

There were also a number of weekend courses on *Introduction to Research for Nurses and Midwives*. This programme included the research process, methods of referencing, library skills and computerised information retrieval.

The library also facilitates tours of the library and its services to groups of nursing students. User education is offered on an ongoing basis to all nurses and midwives who visit the library.

WHO Statistics January-December 2004

While there were some concerns about moving to a new location and whether nurses would come in person to use our new library, this concern has been alleviated over the past few months, as the numbers of nurses visiting the library on a daily basis has increased significantly, with nurses from the various Dublin hospitals and universities plus nurses travelling from the country to visit the library.

The Library & Information Service has seen an increase



in the use of its services during the past year. The following statistics have been recorded from Jan 2004 to December 2004.

| | |
|---|--------------|
| Inter-library loans queries | 1,648 |
| (Including journal article INO photocopying requests received by telephone/post/fax/email) | 1,963 |
| Queries relating to Nurse2Nurse and other Online Services | 3,600 |
| Nurses and Midwives visiting the library | 400 |

Information Office

The information office continued in 2004 to provide a wide-ranging industrial relations information and research service to both members and staff of the INO. During the year requests for information and advice continued to grow. Indeed, over the last few years, queries have not only grown significantly in terms of numbers but also in terms of complexity. In order to meet these demands and to further enhance and develop the existing services provided by the information office, the INO appointed Lorraine Monaghan to the post of Assistant Information Officer. The information office continued in 2004 to provide a wide-ranging industrial relations information and research service to both members and staff of the INO.

As in previous years, the staff of the information office continued to utilise a wide range of mechanisms to communicate information directly to staff and members. These included the production of explanatory leaflets on employment legislation and employment rights, publication of information bulletins and booklets, the provision of a rights and entitlements section on the INO website, and the production of articles for inclusion in the INO journal, the *World of Irish Nursing*. In addition, the information office staff continued to support the training activities of the organisation.

Explanatory Leaflets

The information office produces an extensive range of explanatory leaflets on employment legislation and employment rights. The leaflets are regularly updated to take account of developments in both employment legislation and conditions of employment of nurses. In October 2004, the Maternity Protection (Amendment) Act was implemented, providing new and improved entitlements for pregnant women and breastfeeding mothers who are in employment. The information office produced an explanatory leaflet outlining the new entitlements and improvements.

Information Bulletins

During 2004, members and staff continued to be circulated with the Current Issues Bulletin, the Health & Safety Bulletin, and the Equality and Employment Law Bulletin. The Current Issues Bulletin was issued each month and circulated to staff and members of the executive council. The Health and Safety Bulletin and the Equality and Employment Law Bulletin were issued on a quarterly basis and were circulated to staff, members of the Executive Council, branch officers, section officers and nurse representatives.

INO Diary 2005

The INO 2005 diary was distributed to Executive Council members, branch officers, section officers, nurse representatives and staff. The 2005 diary contains up-to-date information on members' rights and entitlements at work, useful names and addresses, and details of the full range of services and benefits provided for INO members.

INO Desk Calendar 2005

The INO 2005 desk calendar was distributed to each member along with the December issue of the *World of Irish Nursing*. As in previous years, additional calendars were also distributed to branch officers, nurse representatives and section officers for display on nurse stations and other visible areas in their places of work. The calendar has proved to be very popular with members, not least because it provides easy access to the latest information on nurses' rights and entitlements at work.

Practice Nurse Booklet

The Information Guide for Practice Nurses providing details of the up-to-date pay and conditions of employment of Practice Nurses as recommended by the INO, was regularly reviewed and updated in 2004.

Training

The staff of the information office continued to support the INO's training activities, providing training in information skills and employment legislation to both INO staff and nurse/branch representatives.

INO Website – Rights and Entitlements Section

The Rights and Entitlements Section of the INO Website continues to be an important information resource for INO members and activists. It is compiled and maintained by the information office and is regularly updated to take account of developments in employment legislation and nurses' pay and conditions of employment.

National Section Reports



Mary Power,
Section Development
Officer, INO

Overview

Sections within the INO are national groupings of members either from a given field of practice or specific nursing or midwifery grade, who come together at regular intervals to share their knowledge and experience, bring forward joint work, campaign on issues of concern and pursue national claims relevant to all their sections membership.

We presently have 23 active sections within the organisation, with a small number of subgroups and focus groups aligned to their parent section. It is with great pleasure we welcome the formation of the following new national special interest groups.

The *Clinical Nurse/Midwife Specialist Section* was established in February 2004 and they are a peer group of nursing and midwifery specialists working together to enhance clinical expertise at national level.

The *Surgical – Medical Day Care National Section* also commenced their representative activities in February 2004. It is their objective to establish national standards/policies for this specialist area of practice as well as ensuring that this evolving area of patient care service operates to best practice guidelines.

The *Clinical Nurse/Midwife Manager Section* was successfully reactivated in the autumn of 2004 with their inaugural meeting held in January 2005.

The *Irish Orthopaedic Nurses Section* was established on 20 December and the section is open to all nurse members both working within this specialism as well as nurses who have an interest in orthopaedic care.

The *Extended Adult Day Care Service Subgroup* evolved from the overarching Care of the Older Person Section and their focus is on practice in the day care service and to promote nurses' involvement in ensuring patients' independence in daily living.

School Public Health Nurses recently formed their subgroup with the objective of reviewing their role within the evolving primary care setting, to standardising their current practices as well as considering the expansion of their professional remit.

Finally *Allocation Liaison Nurses* have established a national networking group, for members, under the auspices of the INO.

All the national sections are progressing their potential to be dedicated professional and educational groups with the aspiration of being focused and responsive at their meetings both to their specific members' requirements as well as influencing national nursing and midwifery policy developments.

The special interest groups continue to actively engage in the democratic process of the Annual delegate conference and 2004 saw their 15 motions being debated. There were a similar number of section delegates and observers at the ADC in Killarney.

The two support structures created to support and progress the national sections namely the *National Section Communication Group* and the *National Section Co-Ordination Group* continue to develop to enhance the communication structure both within the Organisation and between all the sections as well as monitor their efficiencies respectively. We are delighted to announce that Jennifer Bollard, Asst. Director of PHN was the winner of the poster competition. Jennifer's poster is now incorporated into the new INO section stand that will be utilised at all our many successful section conferences run throughout the year.



Winner of the INO Section poster competition, Jennifer Bollard, assistant director PHN, (left) being presented with her prize at the recent Section Annual Congress in INO headquarters with (centre) Madeleine Spiers, INO president and Mary Donohue, Alliance Nurses Agency, who sponsored the prize of €500.

A structured funding procedure document aimed at ensuring consistency and transparency as well as ease of operation was approved at ADC 2004 and is in the process of roll out among all the sections. This facility provides each section with a virtual budget of €1,000 annually for operational costs and €2,000 every two years for strategic/developmental work. All funding requests are made through the National Section Co-Ordination Group.

The Care of the Older Person Section launched their *Guidelines for Nurses in the Understanding and Prevention of Elder Abuse* at their October workshop. The guidelines are intended to provide an overall framework of best practice and to create an environment that fosters the prevention and protection against any form of abuse of older people.

A very successful nursing student recruitment campaign was run in September which resulted in the Organisation having a stand at the clubs and societies/open day at all higher education institutions where nurse education is being provided. We recruited

new nursing students as well as some of the more experienced which resulted in 1,100 joining the Organisation. This initiative was one of many proposed by the *Student Focus Group* who did significant work in the whole area of nursing student recruitment and retention.

We wish to record our real appreciation to all the National Section Officers and committed activists both incoming and outgoing who continue to support and work diligently with great enthusiasm in each of the 23 national sections.

Accident and Emergency Section

6 February - Heritage Hotel, Portlaoise

This meeting was well attended by members. The Hanley Report was discussed at length and the motion 'That any suggestion to downgrade the A&E services as a result of the Hanley Report must be firmly rejected and opposed vehemently' was agreed to be put forward at ADC in Killarney. Overcrowding in A&E departments was also addressed at this meeting. Kevin O'Connor IRO had just attended a meeting with the HSEA. Agreement had been reached for the immediate re-opening of 196 acute and non-acute beds in the ERHA region. This was a measure to help alleviate the overcrowding in A&E departments in the Dublin region.

13 May - INO Cork Office

- Mission statement was discussed and accepted by those present;
- Discussion on local policies and procedures;
- Role of shift leader was discussed.

6 September - Abbey Hotel Roscommon

- Shift leaders role - Kevin O'Connor to obtain job description from the HSEA;
- Security - report from HSEA on all A&Es had not been implemented in all hospitals.
- Overcrowding - risk factors due to overcrowding should be identified and members were encouraged to complete clinical risk forms. The 'stress level' survey carried out at Beaumont A&E was discussed and it was suggested that this survey should be carried out in other A&Es at national level.

4 November - INO Head Office

Mary Harney, An Tanaiste and Minister for Health and Children attended the AGM of this section. The section was delighted with her attendance and there was a great turnout of interested members.



Health Minister Mary Harney attending the INO A&E Section AGM. Also pictured are: INO President, Madeline Spiers and INO General Secretary, Liam Doran

Assistant Directors of Nursing/Public Health/Night Superintendents

Four section meetings took place during the year, and they were as follows:

- **January (Dublin):** Presentation on the findings of a national study on empowerment of nursing and midwives in Ireland - Anne Matthews, DCU;
- **April (Galway):** Presentations on the various reports on the health service and proposed reforms - Pádraig Prendergast, General Manager, Community Care Galway;
- **July (Waterford):** Presentation on the role of the clinical nurse in clinical directorate and the role of the CPC - Mary Dunnion, Director of Nursing, Mercy Hospital, Cork;
- **November (Dublin):** AGM Presentation - Caring for Managers, Conor Hannaway, Consultant.

These four presentations covered the subjects that were requested at the previous AGM. They facilitated open and often lively discussion forums with the sharing of knowledge on the professional and daily issues which affect us all. Meetings were well attended with widespread support for the meetings to continue to be held outside Dublin.

Recurring discussion at our meetings related to the increasingly various roles pitched at the ADON salary for pay scale purposes. This is resulting in escalating dissatisfaction with the Organisation by members. The committee has addressed this with David Hughes, Deputy General Secretary.

The section activities for the year have provided us with clear and concise knowledge of the numerous reports, taskforce studies and planning documents published. We hope that they are not gathering dust

on shelves. Present discussions suggest the year ahead is not going to be calm within the services we give.

Clinical Placement Co-ordinators Section

Student CPC ratios continue to be a matter of concern. We have been unable to establish a suggested national ratio because of the role differences of CPCs. One of the major incompatibilities that arose is some CPCs cover wide geographical areas and multiple placement locations and others do not. Another is where CPCs from various health service providers visit 'their students' at shared practice placement locations whilst other health service providers employ CPCs directly for these placements. The work load and quality of service we provide will almost certainly continue to be a matter of concern as the BSc course develops and the demands of the 'rostered' year hit home in the practice areas.

There are four meetings each year, three in Dublin and one held outside the city. This has been at the request of non-Dublin members because of accessibility. This year however the highest attendance was at the meeting in Tullamore. We are all under increasing pressures on our time so any suggestions that could expand the section and facilitate participation are welcome.

The items covered in the recent section newsletter are just some ways we can develop the section to meet the needs of the members:

- Workshops to meet CPCs training and education needs have been suggested at previous section meetings. It is envisaged that a workshop could take place on the same day as a section meeting;
- The CPC section webpage could be the perfect opportunity for a member with IT interests to develop their skills with support from the organisation as well as improving our communication;
- The annual delegate conference is an enlightening experience and an opportunity to have our voices heard nationally.

I hope that by development and participation, this section can grow thus enabling members to support and motivate each other and continue to provide a quality service.

Community General Nurse Section

2004 was a busy year for the CGN section. It commenced in January 2004 with a meeting in the Professional Development Centre on delivery of nursing and midwifery in the community with Annette Kennedy, Director of Professional Development.

This was followed by a written submission on the views and initiatives of the CGN section. The main objective for 2004 was to move education to the top of the agenda. I am happy to report at this point that the Bachelor of Nursing Degree (BNSCM) will commence in September 2005.

A very informative presentation was made by Christina Murphy on the degree program and another presentation on the access program was made by Michael McKeon, both of DCU at the AGM in October. Education issues have been the main theme at our meetings throughout the year.

At our Galway meeting we had a guest speaker, Niamh McClian, who is a Community General Nurse currently completing a Masters Degree in tissue viability. The theme of her talk was wound care and dressing selection, which proved to be a very valuable topic at the meeting and a lively discussion ensued.

In December a submission was made by the CGN section to the National Economic Social Forum (NESF) regarding Care of the Older Person.

Extended Adult Day Services Sub-Group (NEADSS)

A meeting for all interested members working in the area of day services was called in November 2003 in INO HQ. At this inaugural meeting it became apparent there were two distinct groups of nurses present; those who worked in day services for older people and those who worked in more acute day services. After a vote it was decided that these two groups would work separately and NEADSS was formed. NEADSS is aligned to the Care of the Older Person Section.

NEADSS met four times during this year in February, May, September and November.

NEADSS aims to:

- Promote awareness of this subgroup;
- Increase membership of this group;
- Continue as a viable group.

NEADSS objectives are to:

- Raise standards in adult day services;
- Share information on best practice;
- Generate generic policies/guidelines i.e. admission and discharge/transport;
- Job description;
- Scope of practice;
- Core care plans;
- Development of mission statements and philosophies of care;
- Peer support;
- Network.

Issues that arose within the group this year included:

- Attendance;
- Circulation of information;
- Communication;
- Extending group membership.

NEADSS – Work in Progress:

- Information sharing:
 - Current situation
 - Current practice
 - Care of older persons workshop
 - Alone elder abuse study day
- Development of group mission statement.

Hopes for 2005 include:

- Continue to increase membership;
- Attendance at meetings;
- Achieve aims and objectives.

Institute of Technology Nurses Association

The ITNA held its AGM on 11 June 2004. At this time the chairperson Mary Corr gave a report on the year ending June 2003 to June 2004. This time period is in accordance with term time in the colleges.

During this time the sub section met four times.

At the March meeting the educational aspect of this meeting was:

- An update on the latest emergency contraception - this was given by Aideen French from Belipharm Pharmaceuticals;
- An update on wound management, presented by Catriona from DJ;

At the June meeting the educational aspect was;

- A presentation on 'psoriasis management' was given by Siobhan Quinn from LEO Labs.
- Louis Nevin from WIT presented a video made by students titled 'Under the Influence'. This was based on alcohol habits, overindulging and its effects.

Plans for the year ahead will centre around professional development and educational matters. We will also work on getting accreditation for workshops/seminars attended.

Midwives Section (2004)

The section met four times during the year – September, December, January and June. On behalf of section members and myself I wish to thank the midwife teachers in Dublin, Limerick and Cork who hosted the meetings.

Annual Delegate Conference: At the ADC in May 2004 the chairperson represented the section. The motion proposed by the section regarding the development of midwifery led services was passed.

National Issues: The section made submissions to An Bord Altranais regarding the second draft of the revised Requirements and Standards for Midwife Registration Education Programmes and to UCD on the Five Points of Entry Research Project.

The draft NAMIC report was reviewed and suggestions, relating to midwifery were made.

The second attempt at the Poster Competition was very successful and a poster has been chosen. It is envisioned that it will be used at ADC and section conferences to promote the development of the sections.

Annual Joint Conference: The 11th Joint RCM/Midwives Section Conference was held in Dundalk in October 2004. As always it was well attended and enjoyed by the delegates and guests. This year the conference will take place in Armagh. There is a change of day on this occasion, the conference will be held on Wednesday 19 October. Sheila Hunt, a professor of midwifery and a well-known author, will be the keynote speaker.



Also at the midwifery conference were (l-r): students Jenny Eighan, Delia O'Brien and Geraldine Beime all from the Coombe Hospital, Dublin and Aoife Keogh, Rotunda Hospital, Dublin

The overall evaluation of the interactive sessions, run for the first time in 2004, was positive therefore this format continues this year.

International Confederation of Midwives: The English speaking European regional meeting took place in Dublin at the end of July. It was hosted by the INO and was a successful and well-attended occasion. In January there was a meeting of the English and French speaking regions to plan a united strategy for the Council meeting due to take place in Brisbane next July.

The Future: Section members continue to work to promote the development of midwifery in Ireland. At all times we are aware that the main focus of our efforts is women and their families. We want to have maternity services that are responsive to women's needs. The

section will continue to work in the coming years to achieve our aims.

Midwives Section Report 2003

(Omitted from Annual Report 2003)

The section met on four occasions during 2003. The officers also met and corresponded frequently to deal with matters related to midwifery and maternity services.

Annual Delegate Conference: At the annual delegate conference in May 2003 the secretary, Annette Keating, represented the section as the voting delegate. Margaret Crowley-Murphy the vice-chairperson attended as an observer. This was the first time that sections were formally represented at ADC. It was a significant step forward for all sections.

A booklet on the sections was launched at the ADC. The midwives section is included with information on its goals, its philosophy and the names of the officers contained therein.

Joint RCM/Midwives Section Annual Conference: The conference was held in Armagh and was well attended. Speakers from Ireland, the UK and the US presented challenging papers on midwifery and maternity services. The conference this year will be held at the Fairways Hotel in Dundalk on Thursday 14 October 2004.

International Confederation of Midwives: A regional meeting took place on 20 June 2003 in London. Karlene Davis, President of the Royal College of Midwives, hosted it. The proposed changes to the structure of the ICM engendered considerable discussion. At present Europe has five Regional Officers. If implemented the changes would reduce this number to one. The rationale for change is the need to have a small Executive to manage the day-to-day affairs of the ICM. The midwives section proposed that the present number of Regional Officers be retained and that each Officer sit on the Executive in rotation. According to the current constitution, Council would have to agree any changes. At present Deirdre Daly and Mary Higgins are the midwife section council members.

As part of the section's ICM action plan, a survey of maternity hospitals/units was undertaken. The aim of the survey was to find out how many midwives are working in Ireland. The response from the directors and managers surveyed was almost 100%.

The section made suggestions as to how an ICM Standing Committee on Midwifery Practice could be developed and managed.

Miscellaneous: The section made a submission to the Department of Health and Children on breastfeeding in Ireland and through our representation on the Midwifery Advisory Forum have endorsed the 2003 WHO recommendations on infant feeding.

The INO accepted the section's view that the Maternity Alliance should be supported in its protest march at the threatened closure of small maternity units. Deirdre Daly, International Officer, spoke at the march using an ICM position paper on normal pregnancy and birth to underpin her remarks.

The section also responded to a document from the North of Ireland Health Department on the development of midwife-led units.

I wish to place on record my thanks to midwife teachers for their hospitality during the year and to the midwifery directors and managers who responded to the survey carried out by the section.

Mary Higgins

Nurse Tutors and Clinical Teachers Section

It has been a challenging and exciting time for the section with regard to the transition of undergraduate nurse education to the third level sector, the establishment of centres of nurse education in the health service, the ongoing negotiations with regard to the transfer of post-registration nurse education to the third level sector and the forthcoming health reforms. I will present updates on each of these initiatives during this report.

The transition of undergraduate nurse education to higher education: This transition had now been successfully completed and the four year registration/degree programme is now in its third year. The rostered year report by Deloitte & Touche, has been published and the proposed rostering will commence in the coming year with appropriate amendments to An Bord Altranais Requirements and Standards reflecting the proposed changes. The INO has successfully negotiated that nurse lecturers in third level will have the opportunity to continue to be affiliated with the INO for professional and educational issues. This initiative continued to be pursued in the last year with lecturers being affiliated to the section.

The Centres of Nurse Education: The centres have now become established within the health service. There are 19 centres nationally. The Directors are all now appointed, however there are still some outstanding issues being progressed.

Transfer of Postgraduate Nurse Education: Formal negotiations have begun on the options that will apply to midwife and paediatric nurse tutors, arising from the proposed integration of these educational programmes into the third level sector in September 2005.

Amend section name and agree mission statement: This was one of the objectives for 2004 and a small working group was established co-ordinated by Mary

Power, to explore this issue. Following full consultation and discussion and a concluding presentation to the section, a new mission statement and a new name was agreed for the section in July 2004. The new name is: National Nursing/Midwifery Education Section.

Proposed priorities for the coming year:

- To ensure that the CN/MEs are fully operational with appropriate venues, staffing structures and funding.
- To secure the pivotal place of the centres of nurse/midwifery education as educational providers within the health service working in partnership and in collaboration with other relevant stakeholders/education providers.
- To secure the transfer of post-registration nursing education to third level.
- To implement the proposed integrated RGN/RSCN undergraduate programme.
- That the section representatives will participate in implementing a policy strategy on the future of centres of nurse/midwifery education with regard to the implementation of the proposed health reforms.
- To secure midwifery in-service education provision within the existing CNE structures or establish centres of midwifery education.
- To ensure that the referencing of current and previous nursing/midwifery awards are placed on the national framework of qualifications (NQAI)
- To ensure that all future nursing/midwifery awards are accredited and referenced to the (NQAI) framework.

The work of the section is evident and is indeed a great tribute to all involved, I have no doubt that the section will continue to grow and thrive, thus continuing to offer valuable contributions to the national educational agenda at this challenging time.

Occupational Health Nurses Section

Three evening meetings were held during 2004 and three/four conference organising committee meetings were also held.

Section Webpage: Sent information to INO for posting on OHN section webpage. Agenda for evening meetings now published on web.

Annual Delegate Conference: Submitted a motion which was proposed and carried: *'Be it resolved that every health service employer, who has an absence management policy in place, ensure the occupational health nurse/department has an input and be an active part of it'*.

FOHNEU: The INO hosted the 19th FOHNEU Board

meeting in Dublin in April. Members were invited to a reception with FOHNEU board members. As chair of the FOHNEU PR committee, work continues on the development of the FOHNEU website.

Consultation on Health & Safety Issues: Prepared a submission on manual handling regulations in consultation with the OHNAI.

HOHNEU: Annette Kennedy and Kathy Foy represented the INO at a meeting in Copenhagen in January 2004. Meeting held in Dublin in November has divided out work packages amongst the partners.

Goals for 2004:

- Set up a working group to look at applying for Advanced Nurse Practitioner status for OHNs
- Broaden audience of evening section meetings using teleconferencing facilities
- Submit articles to World of Irish Nursing
- Submit motion to ADC.

Operating Department Nurses Section

The aim of the section is to provide a forum and network of support, communication and continuing education for operating department nurses throughout Ireland. We have achieved these aims this year by organising four section meetings with educational components as well as organising a well-received annual conference in Killarney.

The section officers represented the section at a number of fora during the year namely:

- ADC in May in Killarney – Liz Waters
- National section officers workshop, 31 May – Liz Waters and Teresa Herity. Anne O'Brien attended as member of the national section co-ordinating group on which she has kindly agreed to stay until year end
- EORNAC local committee meetings throughout the year – Liz Waters
- Special regional meeting, 18 October – Sustaining Progress – Teresa Herity
- National meeting INO section officers, branch officers and nurse reps – November – Teresa Herity
- Special workshop on Funding the Irish Health Service two days October and November – Liz Waters
- National Association Theatre Nurses UK – national conference – Liz Waters

The ODN section continues to be represented at European level at EORNA by Anne O'Brien who is in her second term of office, and Caroline Higgins who comes to the end of her first term of office. Promotional and organisational work is ongoing in

preparation for EORNAC which will be hosted in Dublin 2006. Both reps report back to section members at each of our four meetings.

The goals set for the year 2004 included:

- Organise annual conference
- Hold four section meetings and AGM
- Continue EORNA representative
- Support the claim for three nurses per emergency operation.
- Nurse as first assistant position statement.
- Examine the possibility of donating to a theatre related charity.
- Monitor the implications of Hanley Report on the professional development of operating department nursing.
- Work on Irish recommendations for operating department nursing practice.

In March this year we lost a colleague and former chairperson Shelia Byrne to a long brave battle with cancer. May she Rest in Peace.

EORNA Report

Anne O'Brien and Caroline Higgins continue to represent the section at the European Forum. Meetings were attended in spring in Sweden and in November in Madrid.

EORNA has launched a new strategic working plan and the representatives partake in specific workgroups with relative objectives.

The current President, Ms Kristina Juntilla is in the chair for her sixth year, and the election for her replacement will take place at the Spring 2005 meeting. There have been two nominations – NATN (UK) and SORNA (Sweden). Some of the current workings of the EORNA groups this year include the following:

- An audit of post-basic nurse training in theatre has been completed in each member country
- The core curriculum is in the process of being updated - deadline Autumn 2005
- It is planned to launch a European peri-operative nurses day for 2006.

EORNA is represented at CEN by our colleague and board member from Cyprus. This is an important role as we have the only nurse input into this committee.

EORNA has agreed to initiate links with IFPN (International Federation of Peri-operative Nurses). This will commence at the spring 2005 meeting. One of the projects that will be approached by both groups is Aids.

Ireland are the hosts to the EORNAC 2006 Congress to

be held in Dublin in May of that year. Plans are at an advanced stage for this meeting and are progressing favourably. The second announcement is currently being drafted and the representatives will continue to promote this event throughout the year at home, at NATN and at the World Conference next year. The local committee for EORNAC comprises of the above EORNA reps, Liz Waters, Ann O'Callaghan and Maureen Flynn. Kathy Foy-Newman represents the INO.

Overseas Nurses Section

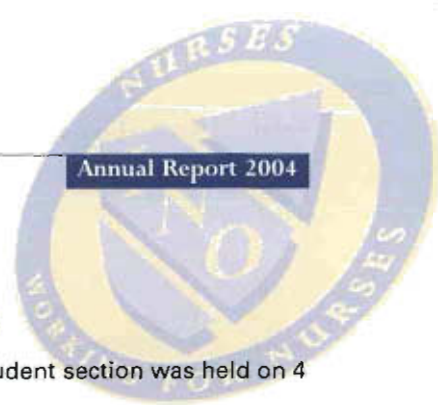
The formation of the section arose from the findings of the research commissioned by INO in 2003 which revealed that a section within the INO would provide a venue for overseas nurses to discuss, reflect and solve problems and issues unique to them.

The overseas nurses section aims to promote and facilitate integration of overseas nurses into the INO and the Irish health service. Since its formation in November 2003, the section has been one of the active groups within the INO. It encouraged more overseas nurses to become members of the INO and to participate in its activities. As a result, more of these nurses who came from outside the European Union became more informed of their rights and entitlements as migrant workers in Ireland.

The recent change in the legislation allowing the spouses of overseas nurses to legally work in Ireland was a clear victory for the section who untiringly lobbied for this initiative with other groups and with the INO itself. Although the effective application of this legislation still seems problematic for some, with some employers still not aware of this recent change, it nevertheless was a positive step to integrate migrants by entering the Irish labour force. This would have significant impact in encouraging the retention of overseas nurses within the Irish health service.

The section was also duly represented during the 2004 INO annual delegate conference. It passed a motion, which reflected the overseas nurses' capabilities and willingness to accept leadership and management responsibilities. This motion was widely supported and carried in the conference. The section is a dynamic group that clearly understands the issues facing the Organisation and all its members. With recruitment and retention of qualified nursing staff continuing to become a major problem in the Irish health service, it urges the Organisation to be more proactive in relation to overseas recruitment.

The section was also involved in a study exploring the experiences of overseas nurses within the Irish health service, which won the 2004 INO research award. The findings of this research will be disseminated soon and will hopefully provide a better understanding of the complex issues these nurses have to deal with in the workplace and in the wider Irish community. The section has been consistently linking with other non-



government organisations to influence policy changes in relation to issues concerning migration. At present, the group is preparing a submission to the Department of Justice, Equality and Law Reform regarding the government's plan to introduce a new Residency Bill this year.

The overseas nurses section is relatively new but has proven to be an effective tool in encouraging participation of overseas nurses in INO decision-making. A clear recognition of the section's achievement was the winning of the 2004 Metro Eireann Group Multi-Cultural Award, proof that the formation of the section, although controversial, was a positive move from the INO, and reflects the Organisation's recognition of increasing diversity in nursing and in Irish society.

Rehabilitation Nurses Section

The above section met on four occasions in 2004.

The main focus of the section throughout the year was to highlight that rehabilitation is not just the prerogative of those working in a specialised rehabilitation setting. The section firmly believe that rehabilitation is an intrinsic part of every nurse's role. To this end, the section organised a workshop open to all members of the organisation to explore this concept. Accreditation, the RCN framework, rehabilitation in acute care and community disability services – opportunities and potential were all looked at.

School Nurses Section

The section met three times during the year, incorporating a Saturday meeting with a view to seeing if this would increase attendance. Guest speakers throughout the year included Mental Health Ireland and AWARE. The section will now hold all their meetings in the new INO head office building.

Sudden Adult Death Syndrome was in the news a lot this year, and as a result it has been recommended that public venues should have an automated external defibrillator in an effort to prevent death with a cardiac arrest. With these AEDs comes CPR training, which is of benefit to us all.

The section would like to continue to raise their profile, and are committed to continuing to submit articles to the World of Irish Nursing and Midwifery for publication. They also met with the President Madeline Spiers during one of their meetings to head office. Madeline Spiers has offered to speak to the Minister for Health and children on behalf of the section, with the joint goal of having 'a nurse in every school'. The section would like to place on record their thanks to Joan Broderick outgoing officer, who has moved from school nursing to third level. We wish her the very best.

Student Section

The AGM of the national student section was held on 4 October 2004

The student section held three meetings during the year in various venues around Ireland, in the hope of encouraging student members to attend. At last year's AGM in Galway a special student recruitment focus group was established.

During the year we also focused on the issue of 'link-persons' and a list of such persons was compiled. It is hoped that this will help in identifying problems/difficulties experienced by student nurses around the country.

The section also put forward a motion at ADC in Killarney in May which was passed. It concerned the reimbursement of expenses on external placements taken by degree students. This item remains high on next year's agenda.

A student charter was also drawn up. It is hoped that this will be displayed in hospitals throughout the country and it can also be viewed on the INO website.

Surgical & Medical Day Care Section

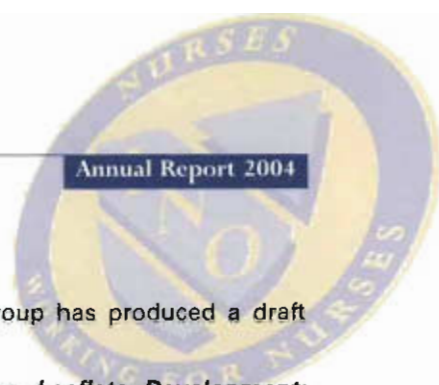
The inaugural meeting of this section was held in February 2004. A further two meetings were held during the year, one in Dublin and one in Navan, and culminated in the AGM held in November in Cork.

In her address to members at the AGM, the chairperson, Mary Fleming, spoke about the rationale for setting up the section. She stated that day care, both surgical and medical is expanding rapidly in Ireland with significant growth predicted in the coming years. Currently there are no standards set for the operation of day care surgical/medical units around the country or nowhere nationally to seek advice or guidance when setting up a new unit. The principal aim of the section is to address these issues and to provide not only a support group for all members, but to establish a set of Irish standards and policies, which can be applied nationally. Once the foundations are laid, a long-term aim of the section will be to develop a Higher Diploma in Surgical/Medical Nursing in Day Care.

The Mission Statement of the Section is: 'The INO National Surgical and Medical Day Services works to provide the highest quality holistic care to patients and carers, by encouraging high standards of professionalism, by providing members with opportunities to share information, by pursuing educational initiatives and by striving to achieve centres of excellence'.

Among the objectives of the section are to:

- Establish national standards for surgical and medical



day services by developing INO best practice national policies and guidelines.

- To establish competencies for all areas of practice.
- To formulate generic patient information leaflets suitable for adaptation for use in all units.
- To share information of mutual interest.
- To campaign nationally on all issues of joint concern related to surgical and medical day care.
- To network and form links nationally and internationally.

In the short time it has been established the section has attracted a membership of 55 people from a total of 32 hospitals with representation from all Health Board regions

Activities undertaken:

1. In order to address the objectives of the section, three sub-committees were set up, each of which is co-ordinated by a committee member.
 - (i) **Competency Assessment for Day Care:** Co-ordinated by Annette Hughes. Members from hospitals in the ERHA and Midlands participate. The group have produced a draft of competencies for pre-assessment.
 - (ii) **Policy Development for Day Care:** Co-ordinated by Noreen Flannelly. Members from hospitals in the North East and North West

participate. This group has produced a draft discharge policy.

- (iii) **Patient Information Leaflets Development:** Co-ordinated by Mary Fleming. Members from hospitals in the Southern, Mid-Western, Western and South Eastern Regions attend. A generic patient information leaflet has been developed and members are now working at applying the template.

2. To develop links at international level three members are being funded to attend the 6th International Congress on Ambulatory Surgery in Seville in April 2005.
3. There will be a presentation relevant to the section at each meeting in the new year.

Telephone Triage Nurses Section

Four meetings were held in 2004. Meeting venues were rotated nationally and were very well attended. Feedback from members regarding these meetings was very positive. The educational components and the networking opportunities proved very valuable to all.

We look ahead with eagerness to 2005, and strive to continue to meet the needs of our section members and endeavour to achieve our goals.

Press and Media



Ann Keating,
Media Relations Officer,
INO

The INO, as a matter of policy, seeks to highlight the views and policies of nurses and midwives in the media whenever and wherever possible. Throughout 2004 the Organisation was constantly in the news.

Overcrowding

The year began with headlines such as **'INO claims 200 were left waiting in A&E for beds'** (*Irish Times*, 8 January 2004). As the year neared its end the crisis was still in the headlines, for example, **'No bed available for road traffic accident victim'** (*Irish Examiner*, 1 December 2004). Indeed the A&E situation was in the news every month, with INO General Secretary, Liam Doran being quoted regularly in print and on TV and radio. The Organisation website (www.ino.ie) now has a 'trolley watch' where it provides a daily count of the number of patients waiting on trolleys in A&E departments throughout the country.

IRO Edward Mathews was interviewed on TV and many radio stations when the INO added support to the new group Patients Together which was set up by members of the public to protest against conditions in A&E departments.

Staff Shortages

Nursing and midwifery shortages were highlighted again – **'Incentives needed to solve staff shortages, say nurses'** (*Irish Examiner*, 9 January 2004) and also at year end in **'Shortages in nursing not tackled'** (*Irish Examiner*, 2 December 2004), which reported: "In a post budget statement, the INO said it was 'disappointed and frustrated' that the government had not brought forward initiatives to address the nursing and midwife retention crisis as proposed by the Organisation in its pre-budget submission."

When it was discovered that some health boards had a surplus in their budget accounts, INO IRO Noreen Muldoon was quoted under **'Nurses hit out on the surpluses – as health boards defend position'** (*Connacht Tribune*, 13 February 2004). IRO Tony Fitzpatrick was quoted in the *Nationalist and Munster Advertiser* (14 February 2004), again on health board surplus under the heading **'Hospital 'grossly understaffed' and 'patients at risk' claim'**.

Staff shortages in the northeast were in the news with IRO Patsy Doyle being quoted in the *Drogheda Independent* (10 March 2004) under the heading **'Nursing numbers must increase if elective surgery moves to Lourdes'**.

IRO Phil Ni Sheaghda was quoted on the front page of the *Leinster Leader* (Thursday 8 April, 2004) in a piece headed **'Now Naas Health Centre is hit by staff crisis'** as staff were forced to limit services. "The public are becoming disillusioned and the public health nurses cannot provide the kind of service they would like to provide."

Future Developments

A 'good news' story appeared in the *Irish Times* (12 April 2004) under the headline **'Nurses to be given power to prescribe range of medicines'**. However, the delay in allowing nurse prescribing which was recommended in the 1998 Commission on Nursing report was criticised by Liam Doran in the article.

In the *Evening Echo* (10 May 2004) – **'Midwife group calls for rural units'** – it was reported that: "Cork midwives have called for the establishment of midwife-led maternity units in this country so women can have a greater choice".

Promises, Promises

"Industrial action looming over 'flouted deals'" was a headline in the *Irish Independent* (7 May 2004) over a piece on delegates at the INO ADC accusing "health managers of openly flouting over 30 national agreements on a range of issues". INO Deputy General Secretary, Dave Hughes was interviewed widely on TV and radio on this issue during ADC.

The *Midland Tullamore Tribune* (31 July 2004) carried a front page story, **'Green Light for Birr Community Nursing Unit'** quoting IRO Kevin O'Connor: "While it was disappointing to note that only 70 of the 90 beds would be opened in the new transfer, the INO felt that they had enough guarantees from both the Midland Health Board and the Department of Health and Children to proceed with the opening".

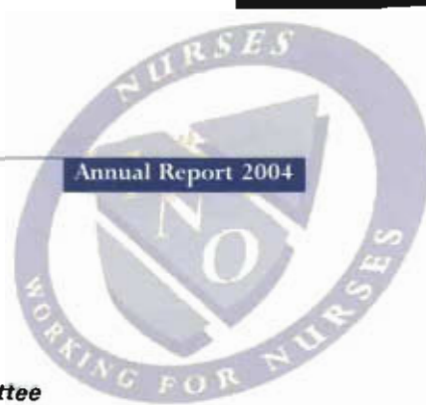
IRO Mary Fogarty was quoted in the *Clare Champion* (8 October 2004) on Ennis General Hospital, **'Nurses' union calls for promises to be kept'**. "We are calling on the Department of Health and Children to immediately appoint the extra staff to the accident and emergency department as per earlier assurance given to us".

The *Leitrim Observer* (12 May 2004) reported **'Nurses organisation wants service funding in North West'** with IRO Noel Treanor saying: "The current cap on recruiting staff, imposed by the Department of Finance, means that access to reasonable services, by people in the North West, is effectively being suppressed".

Health & Safety

In the *Kingdom Newspaper* (20 July 2004) under the heading **'Health board confirms 34 assaults on staff at Tralee General'**, IRO Michael Dineen said: "Despite being in the front line, nurses have a right to work in an 'appropriate and safe environment'".

Under the headline, **'Outbreak of vomiting bug in Dublin worsens'**, *The Irish Times* (4 December 2004) quoted IRO Philip McAnenly: "Over 30 patients were crowded each day into an A&E department designed for 10 to 12 trolleys.... We probably can't avoid some cases of the bug, but the problem wouldn't be as bad as it is if we didn't have the kind of cramped overcrowded conditions it thrives in".



Affiliations

The INO is affiliated to the following bodies:

National

- Irish Congress of Trade Unions
- Economic and Social Research Institute
- Irish Society for Quality in Healthcare
- Mental Health Association of Ireland
- National Association for Mentally Handicapped
- National Women's Council of Ireland
- Institute of Public Administration
- Irish Association for Industrial Relations
- Irish Labour Society
- Health Informatics Society of Ireland

The Organisation also sponsors the Open University Programme at the National College of Ireland, and contributes to the Economic and Social Research Fund Raising Campaign.

International

- International Council of Nurses (ICN)
- Nursing and Midwifery Forum of the World Health Organisation (WHO)
- Permanent Committee of Nurses in the EU (PCN)
- The Midwives Section of the INO is affiliated to the International Confederation of Midwives (ICM)
- The Operating Department Nurses Section is affiliated to the European Operating Room Nurses Association (EORNA)
- The Occupational Health Nurses Section is affiliated to the Federation of Occupational Health Nurses in the European Union (FOHNEU)
- European Healthcare Management Association
- Workgroup of European Nurse Researchers (WENR)
- ANCC International Advisory Council

INO Representation on Irish Congress of Trade Unions and Other Bodies

- **ICTU Executive Council**
Liam Doran, Clare Treacy
- **ICTU Public Services Committee**
Madeline Spiers, Liam Doran, Dave Hughes, Patsy Doyle, Phil Ní Sheaghda, Philip McAnenly, Mary Fogarty, Kevin O'Connor, Tony Fitzpatrick, Michael Dineen, Edward Matthews

- **ICTU Equality Network**
Clare Treacy
- **ICTU Third World Committee**
Liam Doran
- **ICTU Youth Committee**
Edward Mathews (Chairperson), Tony Fitzpatrick
- **ICTU Women's Committee**
Madeline Spiers, Clare Treacy (Secretary)
- **ICTU Health and Safety Committee**
Catherine Samuels
- **ICTU Retired Workers Committee**
Peg Nealon
- **ICTU Representatives on the following Bodies/Committees**
The Women's Health Council – Clare Treacy

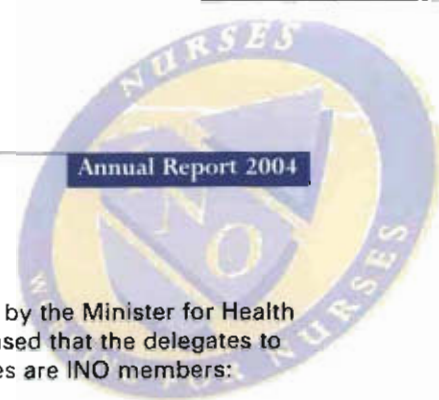
Other Bodies/Committees

National

- **National Council for the Professional Development of Nursing and Midwifery**
Nine INO members are on this Council
- **Monitoring Group**
(for the implementation of the Report of the Commission on Nursing)
Madeline Spiers, Deirdre Daly, Liam Doran, Dave Hughes
- **Office for Health Management**
(Professional Development for Nurse Management)
Annette Kennedy
- **National Implementation Committee**
Undergraduate degree programme
Annette Kennedy
- **Department of Health Advisory Group on Nurse Recruitment**
Liam Doran, Dave Hughes
- **National Women's Council**
Madeline Spiers, Bernie Smyth
- **Comhairle na nOspidéal**
Anne Cody
- **National Association for the Mentally Handicapped of Ireland**
Aine Enright

International

- **ICN Council of National Representatives**
Madeline Spiers, Annette Kennedy
- **ICN Remuneration Network**
Dave Hughes
- **Standing Committee of Nurses of EU (PCN)**
Annette Kennedy (Secretary)



- **European Forum of National Nursing and Midwifery Associations and WHO**

Madeline Spiers, Annette Kennedy

- **European Midwives Association**

Deirdre Daly

- **ANCC International Advisory Council**

Annette Kennedy

- **EU Advisory Committees on Training in Nursing and Training in Midwifery**

While delegates to these two Advisory Committees

are ultimately nominated by the Minister for Health and Children, we are pleased that the delegates to these advisory committees are INO members:

- **Nursing Committee**

Anne Carrigy, Director of Nursing, Mater Hospital;
Mary Hodson, Teacher, North Western Health Board.

- **Midwives Committee**

Maeve Dwyer, Director of Midwifery, National Maternity Hospital, Holles Street; Marie McInerney, Principal Midwifery Tutor, Regional Maternity Hospital, Limerick.

For the Record

Benevolent Fund

The Finance & General Purposes Committee continued to authorise payments from the INO Benevolent Fund to members, and retired members, who find themselves in difficult situations.

In February 2001 Friends First Finance Direct launched a unique personal loan offer for members of the INO. As part of this product Friends First have agreed to make a donation to the Benevolent Fund for each loan arranged. At the time of going to press Friends First had donated in excess of €57,000.

In 2002 MBNA launched the INO affinity credit card and to date this has resulted in over €19,000 being donated by MBNA to the Benevolent Fund.

Educational Loan Fund

The Organisation continued to grant interest-free loans, in accordance with the regulations of the fund, to members in 2004. The Organisation believes that this investment is of major significance in the ongoing development of the nursing and midwifery professions.

Irish Nurses Rest Association

Two members, from each of the following, are represented on the committee of the Irish Nurses Rest Association:

- Irish Nurses Organisation
- Irish Guild of Catholic Nurses
- Association of Irish Nurses Managers
- Superintendent Public Health Nurses Association.

Winifred Collier and Jo Tully, Executive Council, represent the INO.

The Association is open for applications from nurses in need of convalescence or a holiday, for a limited period, who are unable to defray all the expenses they may incur, or for the provision of grants to defray other expenses incurred in the purchase of a wheelchair or other necessary medical aid.

Publications

The World of Irish Nursing

The World of Irish Nursing, journal of the INO, which is published monthly, aims to cover a wide range of issues of interest to Irish nurses. This includes industrial relations news and ongoing developments within the INO, general nursing news, profiles, international news, features about innovation in nursing, clinical articles, education and research.

The journal also has an expanding classifieds section with nursing recruitment advertising and a comprehensive diary of events. Forthcoming courses organised by the

Professional Development Centre are featured each month.

The journal is produced in a full colour A4 format and is posted to members' preferred addresses. It continues to go from strength to strength and the feedback from the membership remains very positive.

The journal welcomes ideas and suggestions for articles and the editorial team at MedMedia is available to discuss these in detail with members.

Circulars

In addition to *WIN*, regular circulars to Branch Officers, Section Officers and Nurse Representatives were issued from the General Secretary and the officials to ensure that members were fully briefed on issues, as they developed, during the year.

Government Departments/ Other Bodies

We would like to formally thank the Minister for Health and Children, the Ministers of State, and Officials of the Department of Health and Children, for the courtesy shown to us during a very challenging year of negotiations and discussions. Thanks are also due to the many other government departments and bodies with whom we met during the last year including the Department of Enterprise and Employment, Health Board Officials, Health Agencies, Health Service Employers Agency, Labour Court Officers, Labour Relations Commission, IBEC, and the Officers of the Irish Congress of Trade Unions, An Bord Altranais and the National Council for the Professional Development of Nursing and Midwifery.

Press and Media

The Organisation continues to maintain a high media profile to promote the Organisation's policies and activities in the media. We would like to place on record our sincere gratitude for the media coverage in the last year.

Honorary Officers

It gives us great pleasure to place on record our deep appreciation to all our Honorary Officers and Nurse Representatives for their talent, time and commitment, and without whose excellent work the INO could not develop. To those currently in office and to those who have now resigned we are most grateful. A list of current officers can be found in Appendices I and II.

INO Staff

We wish to express appreciation of the very hard work and commitment of the staff, both at head office, and at regional level, during the year.

Appendix I: Branch Officers – Currently in Office

| BRANCH | CHAIRPERSON | VICE-CHAIRPERSON | SECRETARY | TREASURER |
|--------------------------------------|--|---|--|---|
| ATHLONE | Mary Nooney Athlone District Hospital Athlone, Co Westmeath | Teresa Guinan Athlone District Hospital Athlone, Co Westmeath | Patricia Hayes Loughloe House Athlone, Co Westmeath | Joan Scanlon St Hildas M'Cap Services Grace Park Athlone, Co Westmeath |
| ATHY/ BALTINGLASS | Michelle Wall St Vincent's Hospital Athy, Co Kildare | | Anne Ball St Vincent's Hospital Athy, Co Kildare | Philomena McNamara St Vincent's Hospital Athy, Co Kildare |
| BALLINA | Cora Barrett Ballina District Hospital Ballina, Co Mayo | Sheila McAndrew Ballina District Hospital Ballina, Co Mayo | Margaret O'Malley Arus Deirbhle Belmullet, Co Mayo | Kathleen Sheehan St Augustine's Welfare Home Ballina, Co Mayo |
| BALLINASLOE | Thomas Caulfield Portiuncula Hospital Ballinasloe, Co Galway | Bernadette Griffin Portiuncula Hospital Ballinasloe, Co Galway | Marguerite Dolan Stoney Road Eyrecourt, Co Galway | Mary Fallon Portiuncula Hospital Ballinasloe, Co Galway |
| BALLYSHANNON | Valerie McGonigle Sheil Hospital Ballyshannon, Co Donegal | Brid Curristin Donegal Town Community Hospital, Donegal Town | Pauline McIntyre Sheil Hospital Ballyshannon, Co Donegal | Elizabeth McGrath Sheil Hospital Ballyshannon, Co Donegal |
| BANTRY | Margaret Cronin Bantry General Hospital Bantry, Co Cork | | Aileen O'Donovan Bantry General Hospital Bantry, Co Cork | Mary O'Regan-Barsum Bantry General Hospital Bantry, Co Cork |
| CARLOW | Carmel Shannon Carlow District Hospital Carlow Town | Ellen A Burtchaell Carlow District Hospital Carlow Town | Kathleen McGarry Sacred Heart Home Carlow | Lorna Elmes Carlow District Hospital Carlow Town |
| CARNDONAGH | Maria McLaughlin Carndonagh Community Hospital, Carndonagh Co Donegal | Rita Doherty Glenmarkee Carndonagh Co Donegal | Geraldine Diver Carndonagh Community Hospital, Carndonagh Co Donegal | Margaret Mary Gilmore Carndonagh Community Hospital, Carndonagh Co Donegal |
| CASHEL (SEHB) | Mary Fanning Our Lady's Hospital Cashel, Co Tipperary | Claire Gleeson Our Lady's Hospital Cashel, Co Tipperary | Grainne Kiehy Our Lady's Hospital Cashel, Co Tipperary | Judy Lee Our Lady's Hospital Cashel, Co Tipperary |
| CASTLEBAR | Regina Durcan Mayo General Hospital Castlebar, Co Mayo | Catherine Walsh Sacred Heart Home Castlebar, Co Mayo | Jacinta Flynn Gurteen, Ballyhaunis Co Mayo | Mary Kelly Mayo General Hospital Castlebar, Co Mayo |
| CAVAN | Joan Kelly Cavan General Hospital Cavan | Ann McGauran Virginia Health Care Centre Virginia, Co Cavan | Patricia Allen Cavan General Hospital Cavan | Mary C Reilly Virginia Health Care Centre Virginia, Co Cavan |
| CLARE | Margaret Lynch Ennis General Hospital Ennis, Co Clare | Concepta K Lillis 'Copper Beech House' Ballyalla, Ennis, Co Clare | Arnold Arcaina St Joseph's Hospital Ennis, Co Clare | Josephine McGrath St Joseph's Hospital Ennis, Co Clare |
| CLONAKILTY/ SKIBBEREEN | Ann Josephine Harnedy Skibbereen District Hospital Skibbereen, Co Cork | | Margaret Pat Murphy Skibbereen District Hospital Skibbereen, Co Cork | |
| CLONMEL (SEHB) | David Clarke South Tipperary General Hospital Clonmel, Co Tipperary | | Antoinette Lewis South Tipperary General Hospital Clonmel, Co Tipperary | Maive Corry South Tipperary General Hospital Clonmel, Co Tipperary |
| CORK HEALTH BOARD BRANCH | Ellen Coughlan St Finbarr's Hospital Douglas Road, Cork | Julia Redmond St Finbarr's Hospital Douglas Road, Cork | Lorraine O'Connor Cork University Hospital Wilton, Cork | Martina Madden 24 Elmvale Court Wilton, Cork |
| CORK VOLUNTARY/ PRIVATE BRANCH | Gobnait Magner Mercy Hospital Grenville Place Cork | Elizabeth Hasse Brothers of Charity Lota, Glanmire Co Cork | Margaret Frahill Mercy Hospital Grenville Place Cork | Katherine Moylan St Joseph's Hospital Mount Desert, Lee Road Cork |
| DROGHEDA | Geraldine Horgan Our Lady of Lourdes Hospital Drogheda, Co Louth | Ejio O'Hare Our Lady of Lourdes Hospital Drogheda, Co Louth | Rosaleen Gilmore Boyne View Welfare Home Drogheda, Co Louth | Andrea McCabe Our Lady of Lourdes Hospital Drogheda, Co Louth |

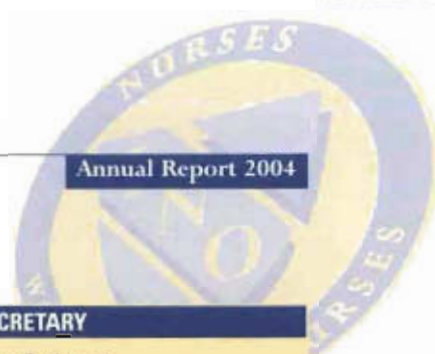


| BRANCH | CHAIRPERSON | VICE-CHAIRPERSON | SECRETARY | TREASURER |
|--------------------------|---|---|--|---|
| DUBLIN EAST COAST BRANCH | Madeline Spiers St Columcille's Hospital Loughlinstown Co Dublin | Marian P Hendrick Mount Carmel Hospital Braemor Park Churchtown, Dublin 14 | Bernadette Smyth St Columcille's Hospital Loughlinstown Co Dublin | Eileen Mary Kelly Clonskeagh Hospital Clonskeagh Dublin 6 |
| DUBLIN NORTHERN BRANCH | Anne Cody Mater Public Hospital Eccles Street, Dublin 7 | Mairead Lyons Beaumont Hospital Beaumont Road, Dublin 9 | Josephine Ryan St Joseph's Centre Clonsilla, Dublin 15 | Kay O'Carroll Bon Secours Hospital Glasnevin, Dublin 9 |
| DUBLIN SOUTH WEST BRANCH | Teresa Hayes Adelaide & Meath Hospital Tallaght, Dublin 24 | | Alan O'Riordan Adelaide & Meath Hospital Tallaght, Dublin 24 | Rosemarie Nolan 36 Roselawn Road Castleknock, Dublin 15 |
| DUNDALK | Geraldine McCabe Louth County Hospital Dublin Road Dundalk, Co Louth | Colette Vize Louth County Hospital Dublin Road Dundalk, Co Louth | | Collette Brennan Louth County Hospital Dublin Road Dundalk, Co Louth |
| GALWAY | Collette Lynskey Galway University College Hospital, Newcastle Road Galway | Maureen Lydon St Francis Nursing Unit Newcastle Co Galway | Andy Guerin National University of Ireland Galway City | Mary Esther Walsh Bon Secours Private Hospital, Renmore Galway |
| KILDARE/NAAS | Margaret Armstrong Naas General Hospital Naas, Co Kildare | Mary P Coonan Naas General Hospital Naas, Co Kildare | Derek Reilly Naas General Hospital Naas, Co Kildare | Edwina Elizabeth Weir Naas General Hospital Naas, Co Kildare |
| KILKENNY | Olive Cullen St Patrick's Centre Kells Road, Kilkenny | Helen Butler St Luke's General Hospital Kilkenny | Margaret Dalton Kilcreene Orthopaedic Hospital, Kilcreene Co Kilkenny | Martina McCormack St Patrick's Centre Kells Road, Kilkenny |
| KILLARNEY | Shelia Dickson St Columbanus Home Killarney Co Kerry | Mary Joy St Joseph's Nursing Home Ballykissane, Killorglin Co Kerry | Margaret Lawlor Killarney Community Hospital Killarney Co Kerry | Kathleen Pyne St Columbanus Home Killarney Co Kerry |
| LAOIS | Joe Hoolan Midland Regional Hospital Portlaoise, Co Laois | Caroline Overton Midland Regional Hospital Portlaoise, Co Laois | Bernie Parsons Midland Regional Hospital Portlaoise, Co Laois | Cora McGrath Midland Regional Hospital Portlaoise, Co Laois |
| LEITRIM | Sheila Carney St Patrick's Hospital Carrick-On-Shannon Co Leitrim | Irene Argue Drumharkin Glebe Cloone, Carrick-On-Shannon Co Leitrim | Maureen Guihen St Patrick's Hospital Carrick-On-Shannon Co Leitrim | Anne Marion Cox St Patrick's Hospital Carrick-On-Shannon Co Leitrim |
| LETTERKENNY | Teresa Cassidy Letterkenny General Hospital Letterkenny, Co Donegal | Mary Howley Chapel Road Dungloe, Co Donegal | Edel Peoples Letterkenny General Hospital Letterkenny, Co Donegal | Nuala Richardson Letterkenny General Hospital Letterkenny, Co Donegal |
| LIMERICK | Anna Malone 95 Lynwood Park St Patrick's Road, Limerick | Bridget Hayes Limerick Regional Hospital Dooradoyle, Co Limerick | Thomas Murphy St John's Hospital St John's Square, Limerick | Margaret Mary Hayes Limerick Regional Hospital Dooradoyle, Limerick |
| LONGFORD | Deirdre Carberry St Joseph's Hospital Longford | | Elizabeth Heaslip St Joseph's Hospital Longford | Mary Bridget Keegan St Joseph's Hospital Longford |
| MALLOW | Mary G Murphy 34 Castlegrove Mallow, Co Cork | | Mary J Ryan Mallow General Hospital Mallow, Co Cork | Ellen Feehan Mallow General Hospital Mallow, Co Cork |
| MEATH | Barbara A. O'Rourke Our Lady's Hospital Navan, Co Meath | Evelyn M Maguire St Joseph's Hospital Trim, Co Meath | Dympna Mary Fegan Our Lady's Hospital Navan, Co Meath | Grainne Coogan 27 Maple Drive Kells, Co Meath |
| MONAGHAN | Grainne O'Reilly Quiglough Ballinode, Co Monaghan | Mary Rose Craig Monaghan General Hospital Monaghan | Patricia Toal St Mary's Hospital Castleblaney, Co Monaghan | Margaret McAdam Monaghan General Hospital, Monaghan |

| BRANCH | CHAIRPERSON | VICE-CHAIRPERSON | SECRETARY | TREASURER |
|-------------------------|---|---|--|--|
| MULLINGAR | Ann Quinn St Mary's Hospital Mullingar, Co Westmeath | | Catherine Tormey Mullingar General Hospital Mullingar, Co Westmeath | Ann Farrell St Mary's Hospital Mullingar, Co Westmeath |
| OFFALY | Mary Quirke 144 Arden Vale Tullamore, Co Offaly | Mary Keane Tullamore General Hospital Tullamore, Co Offaly | Anne Dack Tullamore General Hospital Tullamore, Co Offaly | Marie McCafferkey Tullamore General Hospital Tullamore, Co Offaly |
| ROSCOMMON | Teresa Bruen Ishlawn, Ballaghaderreen Co Roscommon | Elizabeth Stephens Sacred Heart Home Roscommon | Eileen Kelly Sacred Heart Home Roscommon | Catherine Gallagher Roscommon County Hospital Roscommon |
| SLIGO | Anne McGowan Sligo General Hospital The Mall, Sligo | Ann Judge Sligo General Hospital The Mall, Sligo | Breda McHugh St John's Hospital Ballytivnan, Sligo | Mary Walsh Sligo General Hospital The Mall, Sligo |
| TIPPERARY NORTH MWHB | Ursula Paine Hospital of the Assumption Thurles Co Tipperary | Aileen Bourke 'Dunarra' Tyrone, Nenagh Co Tipperary | Mary B Tierney 'Lanespark House' Ballynonty, Thurles Co Tipperary | Mary Nevin Nenagh General Hospital Nenagh Co Tipperary |
| TRALEE | Veronica Houlihan Listowel District Hospital Listowel Co Kerry | Eileen Carmody The Old Bridge, Laharn Listowel Road, Tralee Co Kerry | Noirin Taylor Kerry General Hospital Tralee Co Kerry | Johanna Dillane Bon Secours Hospital Tralee Co Kerry |
| WATERFORD | Margaret Mary Flavin Waterford Regional Hospital Ardkeen, Waterford | Claire Mahon Waterford Regional Hospital Ardkeen, Waterford | Annette Gee St Patrick's Hospital John's Hill, Waterford | Mary McCormack-Sandison Waterford Regional Hospital Ardkeen, Waterford |
| WEXFORD | Hanna Nolan Wexford General Hospital Wexford | | Fiona Galvin Wexford General Hospital Wexford | Mary Kehoe Wexford General Hospital Wexford |
| WICKLOW | Marion Byrne Wicklow Town District Hospital, Wicklow | Mary Scanlon Wicklow Town District Hospital, Wicklow | Mary P Esmonde St Colman's Hospital Rathdrum, Co Wicklow | Nancy Grennan Wicklow Town District Hospital, Wicklow |

Appendix II – Section Officers – Currently in Office

| SECTION | CHAIRPERSON | VICE-CHAIRPERSON | SECRETARY |
|-------------------------------------|--|---|---|
| ACCIDENT & EMERGENCY | Margaret Furlong St Luke's General Hospital Kilkenny | Eilish Corcoran South Infirmary/Victoria Hospital Old Blackrock Road, Cork | Marie McCafferkey Tullamore General Hospital Tullamore, Co Offaly |
| ASSISTANT DIRECTORS OF NURSING | Colette Tarrant Our Lady's Hospital Crumlin, Dublin 12 | Helen Buckley Naas Hospital Co Kildare | Marie Hoey James Connolly Memorial Hospital Blanchardstown, Dublin 15 |
| CLINICAL NURSE MANAGER | Niamh Doyle Wexford General Hospital Wexford | Mary Gallagher Letterkenny General Hospital Co Donegal | Gaynor Codworth St Vincent's Hospital Athy, Co Kildare |
| CLINICAL NURSE SPECIALIST | Geraldine Hogan Naas General Hospital Naas, Co Kildare | Jacinta Mulhere St Vincent's Centre Navan Road, Dublin 7 | Margaret Sullivan Limerick Regional Hospital Dooradoyle, Limerick |
| CLINICAL PLACEMENT SECTION | Carolyn McLean Adelaide & Meath Hospital Tallaght, Dublin 24 | | Vanessa Roche Mater Public Hospital Eccles Street, Dublin 7 |
| COMMUNITY NURSES SECTION (RGNS) | Anne Cullen 7 Cherrygarth Mount Merrion, Co Dublin | | Sarah McKiernan 161 Hillside Greystones, Co Wicklow |
| DIRECTORS OF NURSING | | Evelyn Barry St Colman's Hospital Rathdrum, Co Wicklow | Breda Hayes St Mary's Hospital Dublin 20 |
| GP PRACTICE NURSE | Mary Cashen Benedine Nenagh, Co Tipperary | Berna Rackard "Carrickfoyle House" Barnstown, Co Wexford | Lorraine Dillon 40 Glencairn Walk Leopardstown, Dublin 18 |
| INTELLECTUAL DISABILITY | Marie Gilligan Cregg House Sligo | Thomas Ryan St Vincent's Centre Lisnagry, Co Limerick | Josephine Ryan St Joseph's Centre Clonsilla, Dublin 15 |
| MIDWIVES SECTION | Mary P. Higgins Erinville Maternity Hospital Western Road, Cork | Margaret Crowley-Murphy St Munchin's Maternity Hospital, Ennis Road, Limerick | Annette Keating St Finbarr's Hospital Douglas Road, Cork |
| NATIONAL CARE OF OLDER PERSON | Rosemarie Nolan 36 Roselawn Road Castleknock, Dublin 15 | Ann Coyne-Nevin St Patrick's Hospital John's Hill, Waterford | Mary Una Hayes Clonskeagh Hospital Clonskeagh, Dublin 6 |
| NATIONAL INTERVENTIONAL RADIOLOGY | Janet Choi Cork University Hospital Wilton, Cork | Clodagh Gowen South Infirmary/Victoria Hospital Old Blackrock Road, Cork | Maureen Woodnutt St James's Hospital James's Street, Dublin 8 |
| NURSE MIDWIFERY EDUCATION SECTION | Mary Cotter Adelaide & Meath Hospital Tallaght, Dublin 24 | Sara Raftery Temple Street Children's Hospital Temple Street, Dublin 1 | Gervaise Maher Beaumont Hospital Beaumont Road, Dublin 9 |
| OCCUPATIONAL HEALTH | Una Feeney c/o Eli Lilly Kinsale, Co Cork | Louise Fitzgerald "Trentherm" Nereuno Road Dalkey, Co Dublin | Mary Forde Bupa Ireland Ltd Ballina, Co Mayo |
| OPERATING DEPARTMENT NURSES SECTION | Elizabeth Waters Naas General Hospital Naas, Co Kildare | Teresa Herity Mater Public Hospital Eccles Street, Dublin 7 | Richard Marshall St Vincent's University Hospital Elm Park, Dublin 4 |
| ORTHOPAEDIC SECTION | Rosemary Masterson Cappagh Orthopaedic Hospital Finglas, Dublin 11 | Charlotte Hannon Sligo General Hospital The Mall, Sligo | Paula Devitt Merlin Park Hospital Merlin Park, Galway |
| OVERSEAS NURSES | Fidel Taguinod Mater Public Hospital Eccles Street Dublin 7 | Albert Ajani St Loman's Psychiatric Unit Adelaide & Meath Hospital Tallaght, Dublin 24 | Judith Tabuena St Vincent's Centre Lisnagry Co Limerick |



| SECTION | CHAIRPERSON | VICE-CHAIRPERSON | SECRETARY |
|----------------------------------|---|--|--|
| PHN SECTION | Eileen O'Farrell 57 The Park, Kingswood Heights Tallaght, Dublin 24 | Colette O'Sullivan Palm Cottage, Carhue Timoleague, Co Cork | Mary Redmond 99 Riddlesford, Kilruddery Bray, Co Wicklow |
| REHABILITATION NURSES SECTION | Ann Prescott St Mary's Hospital Phoenix Park Dublin 20 | Patricia Cormack Irish Wheelchair Association | Eva Wallace National Rehabilitation Hospital Rochestown Avenue Dun Laoghaire, Co Dublin |
| SCHOOL NURSES SECTION | Roslyn Garrett Kings Hospital School Palmerstown, Dublin 20 | | Irene Henebry 9 Kilsheelin Heights Castlecomer Road, Kilkenny |
| STUDENT SECTION | | James Geoghan Galway University College Hospital Newcastle Road, Galway | |
| SURGICAL/MEDICAL DAY CARE | Mary Fleming Mount Carmel Hospital Braemor Park, Churchtown Dublin 14 | Noreen Flannelly-Kinsella Our Lady's Hospital Navan, Co Meath | Annette Hughes Merrion Day Surgery 205 Merrion Road, Dublin 4 |
| TELEPHONE TRIAGE NURSES | Dorcas Collier Carlow Emergency Doctor c/o Carlow District Hospital Athy Road, Co Carlow | Margaret Curran Carlow Emergency Doctor c/o Carlow District Hospital Athy Road, Co Carlow | Mary Guerin-Lavin South Doc Call Centre c/o St Finan's Hospital Killarney, Co Kerry |

Appendix III: INO Secretariat – 2004

General Secretary:
Deputy General Secretary:
Director of Professional Development:
Director of Organisation & Social Policy:

Liam Doran MA BA RGN RMHN
Dave Hughes MA (Industrial Relations)
Annette Kennedy MSc BNS
Clare Treacy RGN RPN Dip IR Dip EO

Industrial Relations Staff

South West Area Health Board and other Dublin health agencies:
East Coast Area Health Board and other Dublin health agencies:
Northern Area Health Board and other Dublin health agencies:
Midland Region and some Dublin health agencies:
Mid-West Region:
North Eastern Region and some Dublin health service agencies:
North Western Region:
Southern Region:
South Eastern Region:

Phil Ní Sheaghdha RGN Dip IR & TU Studies
Philip McAnenly BA (Pers Mgt & IR) RGN RPN
Edward Mathews RNMH
Kevin O'Connor RGN RPN ROM
Mary Fogarty Dip Communications, RGN
Tony Fitzpatrick RGN Hdip A&E
Noel Treanor BA (Hons) RGN
Michael Dineen RPN, Patsy Doyle BSS RPN
Liz Curran (appointed July 2004)
Claire Mahon (locum: Oct 04-March 05 inclusive)
Noreen Muldoon RGN
Ann Keating
Colette Mullin BA IR & PM
Catherine Hopkins Teachers Dip IT, Dip IT
Lorraine Monaghan

Western Region:
Media Relations Officer:
Information & Research Executive (IR):
Assistant Information Officers:

Administration

Administration Manager:
Office Manager:
Acting Office Administrator:
Personal Assistant to General Secretary:
Personal Assistant to Deputy General Secretary:
Personal Assistant to Director of Social Policy:
Admin Support Staff: (HQ)

Dorothy Mullarkey Dip Management & IR
Claire Cluxton
Sinead Maher (resigned September 2003)
Michaela Ruane Teachers Dip IT
Martina Dunne
Noeleen Smith
Edel Bose
Phyllis Foody
Ann O'Brien
Jacinta Moyles
Kylie Matterson
Rosemary O'Sullivan
Karen Buckley (from January 2005)
Una O'Brien MIATI
Dolores Proudfoot
Sinead Loy
Angela Coffey
Kevin Downey
Marion Behan

Admin Support Staff (Cork):
Admin Support Staff (Limerick):
Accounts Manager:
Accounts Assistants:

Membership Services Officer:
Telephonist Receptionist:

Professional Development Centre

Education and Promotion Officer:
Course Co-ordinator:
Assistant Course Co-ordinator:
Research/Personal Assistant to Director of Professional Development:
Admin Support Staff:

Kathy Foy-Newman RSCN Dip IR, Dip PR
Marian Godley
Linda Doyle
Maria Moynihan
Helen O'Connell

Section Development

Section Development Officer:
Assistant Development Officer:
Admin Support Staff:

Mary Power MA RGN RM
Jean Carroll BA Psychology Dip BS
Geraldine McNamee (from February 2005)

Library

Librarian:
Assistant Librarian:
Library Assistant:

Muriel Haire Dip LIS
Niamh Adams MA BA HDip LIS
Rhona Ledwidge
Aileen Rohan Dip LIS

Maintenance/Housekeeping

Maintenance Officer:
Cleaner/Housekeeper:

Stuart McNeill
Edita Stasitiena
Jurate Jakubonyte (part-time)

Appendix IV: Salary scales applicable from Dec 1, 2004

Following application of 2% cost of living increase as provided for under Sustaining Progress

| Incremental point | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|--|--------|---|--------|--------|--------|--------|--------|--------|--------|--------|
| Student Nurse III | 21,285 | | | | | | | | | |
| Student Nurse (Degree students 12 month rostered placement) | 21,473 | | | | | | | | | |
| Student Nurse Mental Handicap (Degree students 12 month rostered placement) | 21,473 | | | | | | | | | |
| Post Registered Student Nurse | 23,023 | 24,396 | | | | | | | | |
| Student Midwife | 26,841 | | | | | | | | | |
| Student Paediatric Nurse | 26,841 | | | | | | | | | |
| Staff Nurse (including Registered Midwife, Registered Sick Children's Nurse, Registered Mental Handicap Nurse) | 26,841 | 28,184 | 29,530 | 30,875 | 32,214 | 33,371 | 34,531 | 35,686 | 36,843 | 37,978 |
| | | Long service increment after three years on maximum of scale | | | | | | | | 39,190 |
| Senior Staff Nurse/Midwife | 41,151 | | | | | | | | | |
| Dual Qualified Nurse (registered in any 2 of the 5 disciplines) | 30,360 | 32,373 | 33,447 | 34,273 | 35,184 | 36,396 | 37,576 | 39,315 | | |
| | | Long service increment after three years on maximum of scale | | | | | | | | 40,528 |
| Senior Dual Qualified Nurse | 42,555 | | | | | | | | | |
| Clinical Nurse/Midwife Manager 1 | 38,724 | 39,462 | 40,505 | 41,564 | 42,607 | 43,657 | 44,828 | 45,918 | | |
| Clinical Nurse/Midwife Manager 2/ Clinical Nurse/Midwife Specialist | 41,811 | 42,530 | 43,137 | 44,130 | 45,227 | 46,303 | 47,380 | 48,592 | 49,718 | |
| | | (plus allowance of €723 pa payable on a red-circled basis to Theatre/Night Sisters who were in posts on 5 Nov 1999) | | | | | | | | |
| Clinical Instructor | 43,545 | 44,275 | 44,816 | 45,819 | 46,830 | 47,921 | 49,018 | 50,113 | 51,207 | |
| Clinical Nurse/Midwife Manager 3 | 48,080 | 49,063 | 51,547 | 52,523 | 53,506 | 54,501 | | | | |
| Nurse Tutor | 49,321 | 50,012 | 50,700 | 51,393 | 52,083 | 52,776 | 53,463 | 54,157 | 54,848 | 55,539 |
| Principal Nurse Tutor | 51,690 | 52,695 | 53,612 | 56,479 | 57,482 | 58,425 | 59,605 | 61,186 | | |
| Student Public Health Nurse | 27,980 | | | | | | | | | |
| Public Health Nurse | 40,956 | 41,661 | 42,263 | 43,213 | 44,303 | 45,361 | 46,426 | 47,622 | 48,736 | |
| | | (plus allowance of €1,446 pa payable on a red-circled basis to staff who were in posts on 5 Nov 1999) | | | | | | | | |
| Asst. Dir. of Public Health Nursing | 48,084 | 50,812 | 51,933 | 52,965 | 54,009 | 55,437 | | | | |
| Director of Public Health Nursing | 56,331 | 57,592 | 58,857 | 60,119 | 61,382 | 62,651 | 63,911 | | | |
| Advanced Nurse Practitioner | 48,560 | 49,531 | 50,467 | 53,343 | 54,249 | 55,300 | 56,283 | 57,260 | 61,190 | |
| Assistant Director of Nursing (Band 1 hospitals) | 48,560 | 49,531 | 50,467 | 53,343 | 54,249 | 55,300 | 56,283 | 57,260 | 61,190 | |
| Assistant Director of Nursing (Non Band 1 hospitals) | 46,037 | 47,052 | 48,084 | 50,812 | 51,933 | 52,966 | 54,009 | 55,437 | | |
| Director, Nursing & Midwifery Planning & Dev Unit – ERHA | | 81,676 | | | | | | | | |
| Asst. Director, Nursing & Midwifery Planning & Dev Unit – ERHA | | 73,662 | | | | | | | | |
| Director, Nursing & Midwifery Plan & Dev Unit – Non ERHA health boards | | 73,662 | | | | | | | | |
| Director of Nursing/Matron Band 1 | 64,986 | 66,792 | 68,602 | 70,406 | 72,211 | 74,023 | 75,827 | | | |
| | | (plus performance related pay) | | | | | | | | |
| Director of Nursing/Matron Band 2 | 61,152 | 62,873 | 64,599 | 63,319 | 68,048 | 69,772 | 71,497 | | | |
| Director of Nursing/Matron Band 2A | 60,662 | 61,745 | 62,830 | 63,911 | 64,997 | 66,078 | 67,162 | | | |
| Director of Nursing/Matron Band 3 | 56,331 | 57,592 | 58,857 | 60,122 | 61,382 | 62,651 | 63,911 | | | |
| Director of Nursing/Matron Band 4 | 52,532 | 54,169 | 55,800 | 57,439 | 59,079 | 60,711 | 62,341 | | | |
| Director of Nursing/Matron Band 5 | 49,042 | 50,137 | 51,232 | 52,324 | 53,417 | 54,516 | 55,611 | | | |
| Director Centre of Nurse Education | 56,624 | 58,438 | 60,250 | 62,064 | 63,876 | 65,690 | 67,502 | 69,392 | | |

Location and Qualification Allowances applicable from 1 December 2004

Eligibility

Nurses eligible for payment of location/qualification allowances are Staff Nurses, Senior Staff Nurses, CNMs 1 & 2 (incl. Theatre Sisters). A nurse may benefit from either a qualification allowance or a location allowance when eligible – the higher of the two – when working on qualifying duties. Pro-rata arrangements apply to job-sharing and part-time staff.

| Grade | Nature of Allowance | |
|---|--|--------|
| Registered General Nurses | Employed on duties in the following locations: Accident & Emergency Depts, Theatre/OR, Intensive Care Units, Cancer/Oncology Units, Geriatric Units/Long-stay Hospital or Units in County Homes | €1,678 |
| Registered Nurses | Employed on duties in the following locations: Units for Severe and Profoundly Handicapped in Mental Handicap Services, Acute Admission Units in Mental Health Services, Secure Units in Mental Health Services, dedicated Care of the Elderly (excluding Day Care Centres) and Alzheimers Units in Mental Health Services and the Intellectual Disability Sector* (including Psycho-geriatric Wards, Elderly Mentally Infirm Units, Psychiatry of Later Life Services). (*Allowance effective from January 1, 2004.) | €1,678 |
| Registered Nurses | a) Employed on duties in specialist areas appropriate to the following qualifications where they hold the relevant qualifications: <ul style="list-style-type: none"> • Accident & Emergency Nursing Course • Anaesthetic Nursing Course • Behaviour Modification Course • Behavioural Therapy Course • Burns Nursing Course • Child & Adolescent Psychiatric Nursing Course • Coronary Care Course • Diabetic Nursing Course • Ear Nose & Throat Nursing Course • Forensic Psychiatric Nursing Course • Gerontological Nursing Course • Higher Diploma in Midwifery • Higher Diploma in Paediatrics • Infection Control Nursing Course • Intensive Care Nursing Course (incl. Paediatric Intensive Care & Special and Intensive Care of New Born) • Neurological/Neurosurgical Nursing Course • Operating Theatre Nursing Course (incl. Paediatric Op. Theatre) • Ophthalmic Nursing Course • Orthopaedic Nursing Course • Higher Diploma in Cardiovascular Nursing/Diabetes Nursing/ Oncological Nursing/Palliative Care Nursing/ Accident & Emergency Nursing • Rehabilitation Nursing Course • Renal Nursing Course • Stoma Care Nursing Course | €2,520 |
| Registered General Nurses | b) Holding recognised post-registration qualifications in midwifery or sick children's nursing and employed on duties appropriate to their qualification | €2,520 |
| All Public Health Nurses & Assistant Directors of Public Health Nursing | Receive Qualification Allowance of | €2,520 |

Dual Qualified Scale: Applies to nurses in possession of two of the five registered nursing qualifications or in training for the second qualification on 1 October, 1996. In the case of midwifery and sick children's nursing, the dual qualified scale is effective from 1 August, 1998. A staff nurse can only receive either a dual qualified scale or an allowance, whichever is the greater. The exceptions to this are:

- Nurses who were paid on the dual qualified scale on 1 October, 1996 and in receipt of a location allowance at 1 August, 1998 or eligible for a new location/qualification allowance from 31 March, 1999. In such cases the value of the location/qualification allowance is €1,259 which they receive in addition to their dual qualified scale;
- With effect from 26 November, 2003, nurses who are paid on the dual qualified scale and who then move to an area that attracts a location/qualification allowance will continue to be paid on the dual qualified scale and will also receive the abated value of the location/qualification allowance of €1,259. Payment of the allowance will cease if the nurse moves out of the qualifying area.

Other allowances applicable from 1 December 2004

| Grade | Nature of Allowance | |
|--|---|---------|
| Relevant Nursing Staff | Nurse Management Sub-structures – Special Allowance for weekends/public holidays | €2,687 |
| Psychiatric Nurses | Community Allowance | €3,875 |
| | Nurses assigned to Occupational Therapy (Qualified) | €3,371 |
| | Nurses assigned to Occupational Therapy (Unqualified) | €1,537 |
| Public Health Nurses | Island Inducement Allowance | €1,595 |
| Public Health Nurses | Fixed payment | €25.42 |
| Week-end Work | First call on Saturday and first call on Sunday | €33.74 |
| | Each subsequent call on Saturday and Sunday | €16.90 |
| | Payment in lieu of time off for Emergency work | €25.39 |
| Theatre Nurses who participate in the On-Call/standby Emergency Services | On-Call with Standby – Each Day | |
| | Monday to Friday | €38.24 |
| | Saturday | €49.11 |
| | Sunday and Public Holidays | €66.39 |
| | All of these figures based on a 12-hour period. Pro rata to apply after hours. | |
| | Call-Out Rate – Monday to Sunday | |
| | (a) Fee per operation per 2 hours (17.00-22.00 hours) | €38.24 |
| | (b) (i) Operation lasting more than 2 hours and up to 3 hours (17.00-22.00 hours) | €57.34 |
| | (ii) Operation lasting more than 4 hours and up to 5 hours | €95.58 |
| | (c) Fee per operation per hour (after 22.00 hours) | €38.24 |
| | On-Call without Standby | |
| | (a) Fee per operation, call-in without standby | €76.47 |
| | (b) Overruns from roster at normal overtime rates (no time back in lieu) | |
| | On-Call over Weekend | |
| | In situations where no rostered duty is available over the weekend, the following will apply on a pro-rata basis (i.e. appropriate rate divided by 12, then multiplied by number of hours available). No time back in lieu will apply. | |
| | Nurse Co-Ordinator Allowance | |
| | A shift allowance of €16.33 will be paid to a staff nurse who undertakes the role of formalising the reporting and accountability relationship with the Theatre Superintendent. The allowance only applies to a nurse who fulfils specified duties when called in (DoHC circular refers). | |
| Midwives providing Domiciliary Care under the Maternity and Infant Care Scheme | Fee per service | €112.39 |
| | Reduction with a/n visit is after 36th week of pregnancy | €7.00 |
| | Patient removed to hospital before onset of labour and not accompanied by midwife | €41.70 |
| | Patient removed to hospital before onset of labour and accompanied by midwife | €55.68 |
| | Patient removed to hospital after onset of labour and not accompanied by midwife | €69.78 |
| | Patient removed to hospital after onset of labour and accompanied by midwife | €83.48 |
| | Abortions and Miscarriages | €55.67 |
| Special Co-ordinator Allowance | | €3,900 |

Appendix V: INO Private Nurses Fees – (Emergency & General Nurses Section Effective July 1, 2004-June 30, 2005)

| | Mon—Fri Day | Mon—Fri Night | Saturday Day | Saturday Night | Sunday Day | Sunday Night | 25, 26 & 31 Dec Day & Night |
|-------------|----------------|------------------|-----------------|-------------------|---------------|-----------------|--------------------------------|
| Up to 4 Hrs | €96 | | €113 | | €145 | | €190 |
| 5 Hrs | €103 | | €122 | | €158 | | €224 |
| 6 Hrs | €117 | | €138 | | €181 | | €260 |
| 7 Hrs | €133 | | €155 | | €205 | | €294 |
| 8 Hrs | €148 | €162 | €171 | €181 | €229 | €237 | €329 |
| 9 Hrs | €155 | €171 | €180 | €194 | €240 | €252 | €364 |
| 10 Hrs | €175 | €194 | €201 | €217 | €264 | €284 | €398 |
| 11 Hrs | €194 | €214 | €222 | €241 | €287 | €316 | €433 |
| 12 Hrs | €212 | €237 | €243 | €266 | €311 | €347 | €468 |
| 13 Hrs | €233 | €259 | €264 | €290 | €335 | €379 | €503 |

| | |
|---|-----|
| ICU/CCU/A&E/Haemodialysis/Midwifery Theatre Allowance | 15% |
|---|-----|

- Nurses are advised to ensure that a Doctor is in attendance on cases in Private Homes to which they are called.
- Responsibility for payment of fees:
The person (employing authority or individual) who engages the nurse is responsible for the payment of his/her fees within one calendar month.
- Shift payments outlined are inclusive of statutory rest periods as per the Organisation of Working Time Act (1977).

| Twilight Shift 8 p.m. - 12 Midnight | | Escort Rates | | On-Call Fees | |
|-------------------------------------|------|----------------|--------|--------------|-----|
| Mon - Fri | €135 | 1st Hour | €59 | Mon - Fri | €67 |
| Saturday | €156 | 2nd - 8th Hour | €12.50 | Saturday | €74 |
| Sunday | €192 | After 8 Hours | €19 | Sunday | €81 |

- If called during a period of Theatre On-call/Sleep Over the full night duty rate (not the on-call allowance) should be paid from the time the on-call period started
- Private Industry Fee €28
- Patients insured under the VHI are covered up to a certain figure for the services of a special nurse in the home
- Nurses must send receipts to patients immediately on receipt of fees.

Appendix VI: Subsistence Rates

Subsistence (Normal) Rates:

| Class A (salary above €41,988 per annum) | |
|--|--------|
| | € |
| Night Allowance | 133.72 |
| Day Allowance 10 hours or more | 37.90 |
| Day Allowance 5 hours but less than 10 | 15.45 |

| Class B (salary €28,534 to €41,987) | |
|--|--------|
| | € |
| Night Allowance | 120.15 |
| Day Allowance 10 hours or more | 37.90 |
| Day Allowance 5 hours but less than 10 | 15.45 |

| Class C (salary €28,533 and under per annum) | |
|--|--------|
| | € |
| Night Allowance | 100.49 |
| Day Allowance 10 hours or more | 37.90 |
| Day Allowance 5 hours but less than 10 | 15.45 |

| Mileage Rates | | |
|-------------------------------------|-------------|--------------|
| Official Mileage in a Calendar year | up to 4,000 | 4,001 & over |
| | cent | cent |
| Engine capacity up to 1,200cc | 86.05 | 43.50 |
| Engine capacity 1,201cc to 1,500cc | 101.27 | 50.29 |
| Engine capacity 1,501cc and over | 120.26 | 56.40 |



Irish Nurses Organisation
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