

*NATIONAL COUNCIL FOR THE*  
**PROFESSIONAL DEVELOPMENT OF**  
**NURSING & MIDWIFERY**

newsletter  
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ISSUE

4



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"THE COUNCIL EXISTS TO PROMOTE AND DEVELOP THE PROFESSIONAL ROLE OF NURSES AND MIDWIVES IN ORDER TO ENSURE THE DELIVERY OF QUALITY NURSING AND MIDWIFERY CARE TO PATIENTS/CLIENTS IN A CHANGING HEALTHCARE ENVIRONMENT."



# editorial

**We are approaching the end of a year of intense activity within the National Council. It has been a year in which the key functions of the National Council have been given practical expression for the first time. It is appropriate therefore that some of this newsletter should be devoted to a reflection on some of these activities and achievements.**

The year began with the recruitment of the members of the executive staff of the National Council. In addition to my own role as Chief Executive, Kathleen Mac Lellan was appointed as Head of Professional Development, and Christine Hughes and Mary Farrelly were appointed as Professional Development Officers. During the year, Sarah Condell and Sheila Doyle provided support on a number of projects. As we approach the end of the year we have moved from the employment of temporary administrative support staff to full time members of the team with the appointment of Helen Bohan as Head of Management Services, and Jackie Lillis and Kate Brennan as Administrative Officers.

One of the key tasks we set ourselves at the beginning of the year was to begin the process of providing guidance and support on the development and appointment of Clinical Nurse Specialists/Clinical Midwife Specialists (CNS/CMS) and Advanced Nurse Practitioners/Advanced Midwife Practitioners. During the year we published a number of documents which outlined the criteria and processes to be applied. In this newsletter, we provide a summary of the key ideas that pertain in this area and provide simple guidelines regarding the appointment process.

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

As an aid to the further development of CNS/CMS posts, we are publishing in this newsletter a template for the development of job descriptions/job profiles for CNS and CMS. This document is a direct result of our discussions and cooperation with the Directors of the NMPDUs.

The National Council has a very important role in supporting additional continuing education activities in partnership with

the NMPDUs. To date, the National Council has approved a large number of additional continuing education programmes. Developing these programmes and giving them practical expression has required a considerable amount of work on the part of the National Council and the Directors of the NMPDUs. Everybody has had to hit the ground running on this one and, in the short space of time available since appointments were made, a considerable amount has been achieved. More details on the programmes approved will appear in the next edition of the newsletter in Spring 2002.

The National Council is also jointly responsible with An Bord Altranais for the Nurse and Midwife Prescribing Project. Details of this project, including its terms of reference, are contained in this newsletter. This project will be developed over the next three years and promises to have far reaching consequences for all nurses and midwives. Updates on progress will be provided throughout next year.

This year also witnessed the appearance of the website of the National Council, [www.ncnm.ie](http://www.ncnm.ie). Visitors to the website have been increasing in numbers. We have continued to update the site and to make new additions. In particular we have begun the process of building into the site a rich range of links to other relevant sites that should prove useful to nurses and midwives engaged in information gathering or formal research.

Finally, the year has concluded with our first national conference. The Minister of State at the Department of Health and Children, Mary Hanafin, formally opened the conference at Dublin Castle on 20 November. The theme of the conference was related to the publication of the Department of Health and Children's Strategy for Healthcare and examined the strategic role of nurses and midwives in the development of the services of the future. A more detailed summary of the conference is contained in this newsletter. The event itself was held over two days and involved the participation of over 800 nurses.

The National Council has now moved to its new permanent address. Stay tuned to our website for ongoing updates and information and we look forward to another busy year in 2002.

**Yvonne O'Shea**

Chief Executive Officer

# a message from the ceo – CLINICAL CAREER PATHWAYS AND CNS/CMS

**The National Council, which is a statutory body established on foot of Statutory Instrument No.376 of 1999 under the Health (Corporate Bodies) Act 1961, was created directly as a result of the recommendations of the Commission on Nursing. The first meeting of the National Council took place in January of 2000. The work of the National Council during 2000 concentrated on agreeing definitions of the Clinical Nurse Specialist (CNS) and Clinical Midwife Specialist (CMS) and on defining the pathways for confirmation into these posts. During that year funding was agreed for the creation of a management structure with the Department of Health and Children and the National Council made its first executive appointments at the beginning of 2001. We are, therefore, approaching the end of the first year of operations of the Executive of the National Council.**

The creation of meaningful and rewarding clinical career pathways was one of the most important recommendations to emerge from the Commission on Nursing. The National Council was given an important part to play in implementing the recommendations of the Commission in this area. As part of this, during this year the National Council has confirmed over 1,100 nurses and midwives as Clinical Nurse Specialists or Clinical Midwife Specialists. These appointments were made under what is known as the Immediate Pathway. This was aimed at reviewing as a matter of urgency the position of nurses in many specialist positions throughout the country and, in line with an agreed set of criteria, confirming them as specialists provided they met the general conditions of appointment and a specific post had been created in the health board or hospital to which they could be appointed.

The National Council has now moved beyond the Immediate Pathway to the Intermediate Pathway. An outline of the process involved in this pathway is contained in a summary framework published in this newsletter. This pathway offers a rich development opportunity to Nurse Managers and General Managers to create CNS and CMS posts in line with the developing needs of the service. Indeed it is open to them to identify these needs wherever they are in the service, to devise a job description for the post, to gain the agreement of the Nursing and Midwifery Planning and Development Units (NMPDUs) and to submit it for inclusion in the service plan of the hospital or health board. Thus, for

example, if a Director of Nursing or Midwifery identifies that a particular area under his/her control is becoming so complex that there is a need for clinical nurse or midwife specialists on each shift, he/she can use the Intermediate Pathway to create these posts in consultation with General Management and the NMPDUs. Once the posts are included in the service plan, advertisements can be placed and appointments made once the criteria for appointment have been met. These appointments are then submitted to the National Council, and are included in the national database maintained by the National Council for the purpose. In this way, senior nurses and midwives can be encouraged to stay in the clinical areas and to develop their careers in the specialist area of their choice. The Intermediate Pathway is designed to be a powerful, flexible and responsive mechanism for the resolution of service development needs in nursing and midwifery.

In addition to the creation of CNS and CMS posts, the National Council is working closely with the NMPDUs in the creation of posts for Advanced Nurse Practitioners and Advanced Midwife Practitioners. This is a developmental process and significant progress has already been made.

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

**Yvonne O'Shea**

Chief Executive Officer

The National Council for the Professional Development of  
Nursing and Midwifery

# FIRST NATIONAL CONFERENCE THE DEVELOPMENT OF NURSING AND MIDWIFERY IN IRELAND - BUILDING ON THE BLUEPRINT

## Nursing and Midwifery - A Strategic Focus: What is the Strategic Contribution of Nurses and Midwives to the Health Services of the Future?

The First National Conference of the National Council was opened by the Minister of State at the Department of Health and Children, Mary Hanafin, at Dublin Castle on 20 November 2001. The conference content was repeated over the two days (21-22 November) so that as many participants as possible could attend and meet the presenters. The conference was very well attended by nurses and midwives, from the clinical area, management, and education and from a variety of practice settings.

## Poster Presentations

Thank you to everyone who responded to our call for posters for our conference. Over forty presentations were made representing many of the divisions of the register and a wide geographical spread. Innovations in practice and service delivery, role development, and education for practitioners and patient/clients all featured. George Castledine judged the posters using the criteria of appropriateness of content, visual presentation, and clarity of text. The prize for best poster was awarded to Michael Veale and Eileen McKenna (Louth-Meath Mental Health Service) for the presentation entitled "Affective Disorder Nursing Service". The winners won a book token for the sum of £250. As the standard of entry was so high four runner-up prizes of £100 were awarded to the presenters of "Reducing Anxiety in Patients Undergoing Gynaecological Procedures" (St Joseph's Hospital, Clonmel), "Organisation of Nursing Care in a Residential Service for People with Intellectual Disabilities" (St Vincent's Centre, Navan Road, Dublin), "Development of Nurse-Led Services Within the Oncology Day Ward Setting" (St James' Hospital, Dublin), and "Wake-up Call - Make It Later!" (South Infirmary-Victoria Hospital Ltd, Cork). Congratulations to everyone who participated and we hope that many more of you are already preparing next year's entries.

## Speakers

- **Michael Kelly**, Secretary General, Department of Health and Children: *Strategy for the Health Services*
- **Frank Ahern**, Director, Personnel Management and Development, Department of Health and Children: *The Human Resource Development Implications of the Health Strategy*
- **George Castledine**, Professor and Consultant of General Nursing, University of Central England, Birmingham and Dudley Group of Hospitals, NHS Trust: *From Staff Nurse to Nurse Consultant - Developing Nursing and Midwifery Practice and Roles to Meet Health Service Needs, Opportunities and Challenges*
- **Shelley Dolan**, Nurse Consultant (Cancer), Critical Care, Royal Marsden Hospital, Oxford: *Nurse Consultants in the UK - the Current Picture*
- **Colum Bracken**, Director of the Nursing and Midwifery Planning and Development Unit, North Eastern Health Board: *Facilitating Change - The Role of the Nursing and Midwifery Planning and Development Units*
- **Kathleen Mac Lellan**, Head of Professional Development and Continuing Education, National Council: *Recent Developments in Nursing and Midwifery in Ireland*
- **Mary McCarthy**, Chief Nursing Officer, Department of Health and Children: *The Strategic Contribution of Nursing and Midwifery to the Development of the Health Service*
- **Mary Murray**, Clinical Nurse Specialist (Breast Care), St Vincent's University Hospital, Elm Park, Dublin: *The Clinical Nurse Specialist's Contribution to Patient Care*
- **Joan Phelan**, Director of the Nursing and Midwifery Planning and Development Unit, South Eastern Health Board: *Facilitating Change - The Role of the Nursing and Midwifery Planning and Development Units*
- **Anne Scott**, Professor of Nursing and Head of School of Nursing, Dublin City University: *Developing Education for Clinical Practice*
- **Valerie Small**, Emergency Nurse Practitioner, St James's Hospital, Dublin: *The Future of Advanced Practice in Ireland*

## Chairpersons

- **Ruth Barrington**, Chief Executive Officer, Health Research Board
- **Denis Doherty**, Chief Executive Officer, Midland Health Board
- **Laraine Joyce**, Deputy Director, Officer for Health Management
- **Yvonne O'Shea**, Chief Executive Officer, National Council

The speakers' abstracts and more photographs of the conference can be seen on our website ([www.ncnm.ie](http://www.ncnm.ie)).



Mary McCarthy, Chief Nurse, DOHC, Pearl Treacy, School of Nursing & Midwifery, UCD and Eileen Kelly, National Council member



Liam Dunbar, Executive Chairperson of the National Council, Mary Hanafin, Minister of State at the Department of Health and Children and Yvonne O'Shea, Chief Executive Officer of the National Council

# first national conference the development of nursing and midwifery in ireland - BUILDING ON THE BLUEPRINT



Siobhan O'Halloran, Michael Kelly, Maeve O'Connor



Maighread Quinn, Eamon Glacken, Irene O'Connor



Mary Dunnion and Catherine Killilea



Jim Hough and Aveen Murray



Yvonne O'Shea, Shelley Dolan, George Castledine, Kathleen Mac Lellan



Antoinette Doocey, Geraldine McCarthy, Kay O'Sullivan

# NURSE AND MIDWIFE PRESCRIBING PROJECT

The National Council, in partnership with An Bord Altranais, is currently reviewing the involvement of nurses and midwives in the prescribing of medical preparations. The project for this review commenced in September 2001 and the Steering Committee of the Prescribing Project held its first meeting on Thursday 6 December 2001. The project emerged from the review of the scope of practice for nursing and midwifery and the recommendations of the Commission on Nursing. It is envisaged that this project will extend over a three-year period.

## Terms of Reference

The terms of reference for the review of nurse and midwife prescribing are as follows:

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

## Appointment of Project Staff

**Kathleen Walsh** has been appointed Project Officer. She is a Registered General Nurse. She holds a Bachelor of Science in Nursing and has completed a Master of Science in Nursing - Acute Care Nurse Practitioner Programme at the University of Pennsylvania. Having previously worked as a Nurse Practitioner with prescriptive authority in the speciality of head and neck surgery, her most recent position was with the Department of Clinical Pharmacology at the Royal College of Surgeons in Ireland as a clinical research nurse.

**Denise Carroll** has been appointed Project Assistant. She is also a Registered General Nurse, having trained at Cork University Hospital. She was awarded a Bachelor in Social Science (Honours) degree from University College Dublin in 1995 and at present is writing her thesis for a Master of Science degree in Applied Social Research Methods, Trinity College, Dublin. She has a special interest in health research and has conducted studies for the European Institute of Women's Health and the South Western Area Health Board, ERHA.

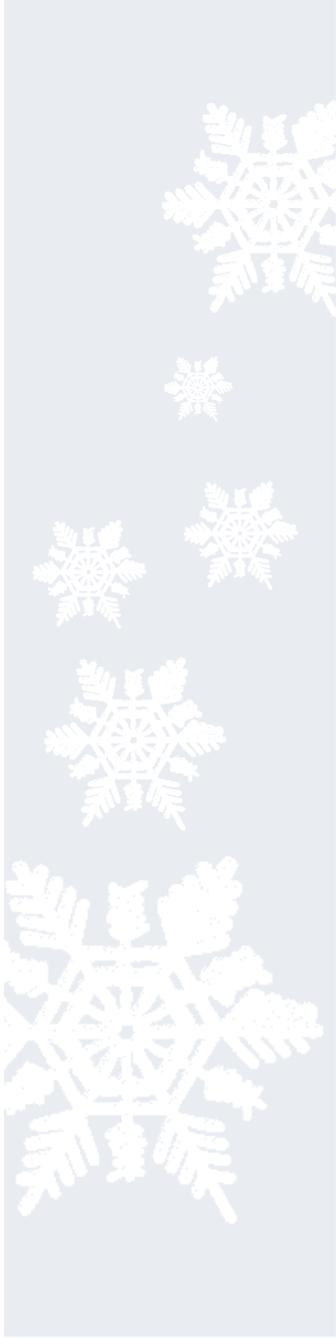
## Submissions and Comments

There will be a call for written submissions from all nurses, midwives and other interested parties in the near future. The project team encourages and welcomes all comments regarding this exciting and challenging project. In order to make your views known you can contact An Bord Altranais at 01 6398500 or e-mail the project team directly (kwalsh@nursingboard.ie or dcarroll@nursingboard.ie).

# aid to developing job descriptions/ profiles for clinical nurse specialist/ clinical midwife specialist posts

The National Council has devised an *Aid to Developing Job Descriptions/Profiles* in response to queries about the content and structure of job descriptions and profiles for Clinical Nurse Specialist/Clinical Midwife Specialist (CNS/CMS) posts. This Aid is intended to assist the relevant healthcare personnel in the formulation of CNS/CMS job descriptions/profiles and to facilitate greater consistency and clarity in their presentation and format, without stunting the creativity and individuality of any organisation. It is not intended to replace or take precedence over any existing format used by any healthcare provider or organisation.

Heading	Details to be included under each heading
<b>Job Title</b>	Clinical Nurse Specialist (+ title of speciality) Clinical Midwife Specialist (+ title of speciality) <i>The area of speciality is a defined area of nursing/midwifery practice requiring the application of specially focused knowledge and skills which are necessary to improve the quality of patient/client care (see the Report of the Commission on Nursing, 6.39, 6.40 and 6.41)</i>
<b>Grade</b>	Equivalent to Clinical Nurse Manager 2 (CNM2) <i>See the Report of the Commission on Nursing, 6.30</i>
<b>Whole Time Equivalent Hours</b>	<i>The person may be employed in a full-time capacity by the organisation, either full-time in the specialist role or part-time in the specialist role and part-time in another non-specialist role (see the Report of the Commission on Nursing, 6.36)</i>
<b>Reporting Relationship</b>	<ul style="list-style-type: none"> <li>Professionally accountable to Senior Nurse/Midwife Manager*</li> <li>Clinically accountable to Senior Nurse/Midwife Manager (or another named professional member of the healthcare team as appropriate)</li> </ul> <i>See the Report of the Commission on Nursing, 6.31</i>
<b>Location</b>	Department/Centre/Unit Hospital/Service/Organisation Health Board
<b>Background to Post</b>	<p><b>Generic</b></p> <p>Refer to recommendations of the Commission on Nursing concerning the clinical career pathway (6.26, 6.27, 6.28, 6.29, 6.33 and 6.37), <i>Clinical Nurse/Midwife Specialists – Intermediate Pathway</i> (National Council, April 2001) and other relevant documentation of the National Council</p> <p><b>Specific</b></p> <ul style="list-style-type: none"> <li>Evolution and development of nursing/midwifery roles in the specific clinical practice area</li> <li>Effect of policy changes on professional practice and health service provision (local/national/international)</li> <li>Geographical aspects of the service</li> <li>Demographics of the region/locality</li> <li>Service need addressed by post</li> </ul>
<b>Purpose of Post</b>	<p><b>Indicate:</b></p> <ul style="list-style-type: none"> <li>How the post (will) contribute(s) to optimal healthcare provision</li> <li>How the post (will) complement(s) the role of other members of the multidisciplinary health care team</li> </ul>
<b>Responsibilities</b>	<p><i>Core concepts of the National Council's definition of the CNS/CMS may be used as sub-headings</i></p> <p><b>Clinical Focus</b></p> <p>Indicate how responsibilities/tasks relate to specialist area</p>



*Direct care*

- Assessment, planning, delivery and evaluation of care to patients/clients and families – specific examples of assessment methods and aims of same, examples of interventions and their likely outcomes, etc
  - Details of patient/client case load – approximate numbers attended in own unit and in other settings (if appropriate), presenting conditions/diseases, etc
- Details of any nurse-led services/clinics, etc

*Indirect care*

Activities influencing others (members of the multidisciplinary team, family, other carers) – examples of these activities

**Patient/Client Advocate**

- Communicates, negotiates and represents patient/client values and decisions in collaboration with other professionals and community resource providers
- Elaborate on how this extends beyond that of a generic nurse/midwife

**Education and Training**

*Facilitates staff development and patient education*

Specify - grades of staff/members of multidisciplinary team for whom education/training programmes the CNS/CMS (will) provide(s) educational/training activities; other persons for whom the CNS/CMS (will) provide(s) education/training programmes (eg. patients/clients, family members, carers; support groups; professional associations, etc); types of education/training programmes (to be) provided by the CNS/CMS (ie. formal and informal activities)

*Opportunities for continuing education*

How the service/organisation will facilitate the CNS's/CMS's professional development

**Audit and Research**

The CNS/CMS should at the very least be delivering nursing care based on the best and most current evidence available

- Audits current nursing practice
- Evaluates improvements in the quality of patient care
- Contributes to nursing research relevant to the area of practice

**Consultant**

*Inter- and intra-disciplinary consultations, both internal and external, are recognised as part of the contribution of the CNS/CMS to the promotion of improved patient/client management*

Consults with and is a consultant to other nurses/midwives, including students and Public Health Nurses, and other healthcare professionals both within and outside of the service

**Other Points**

The job description should clearly indicate:

- to what extent the CNS/CMS is autonomous in his/her practice
- the CNS's/CMS's level of decision-making
- the settings in which the CNS/CMS provides a specialist service (specialist unit, out-patient department, other units within the hospital/service, etc)
- how and the extent to which patients/clients are referred to the CNS/CMS

**Functions**

*Specific functions relating to the job of the CNS/CMS should emerge from the job analysis process*

\* In the absence of a nursing/midwifery management structure there must be formal links established with an agreed nurse/midwife manager with regard to professional matters. This may be organised on a local basis as appropriate and could be through the Nursing and Midwifery Planning and Development Unit.

# CRITERIA FOR CLINICAL NURSE SPECIALIST/CLINICAL MIDWIFE SPECIALIST AND ADVANCED NURSE PRACTITIONER/ADVANCED MIDWIFE PRACTITIONER POSTS

## Clinical Nurse Specialists/Clinical Midwife Specialists (Intermediate Pathway)

The immediate career pathway closed on 30 April 2001. Since 1 May applications for approval of Clinical Nurse Specialist/Clinical Midwife Specialist (CNS/CMS) posts and persons have been and continue to be processed under the intermediate pathway. Posts created under this pathway must be approved by the Director of the Planning and Development Unit (NMPDU) prior to being advertised (vacant posts which were approved under the immediate pathway may be advertised directly). Applications under the intermediate pathway should be sent by the Director of Nursing/Midwifery (or other appropriate manager) to the Director of the NMPDU in the relevant health board. Where no Director of a NMPDU has been appointed, applications for approval may be sent directly to the National Council.

### Criteria for Clinical Nurse Specialist/Clinical Midwife Specialist Posts

1. The post must arise from an identified health service need.
2. The area of specialty is a defined area of nursing or midwifery practice requiring the application of specially focused knowledge and skills, which are necessary to improve the quality of patient/client care.
3. The post must have a major clinical focus, incorporating assessment, planning, delivery and evaluation of care given to patients/clients and their families in hospital, community and outpatient settings.
4. The post will allow for its holder to make alterations in prescribed clinical options.
5. The post will involve working closely with medical and paramedical colleagues.
6. The post requires participation in nursing/midwifery research and audit.
7. The post involves being an advocate for the patient/client.

8. The post involves being a consultant in education and clinical practice both to nursing/midwifery colleagues and the wider multidisciplinary team.
9. The reporting relationship on professional nursing and midwifery matters must be to a nursing/midwifery manager.\*

### Criteria for Clinical Nurse Specialists/Clinical Midwife Specialists

1. The person must be a registered nurse/midwife.
2. The person must be registered in the division in which the application is being made. *In exceptional circumstances, which must be individually appraised, this criterion may not apply.*
3. The person must have extensive experience and clinical expertise. i.e. a minimum of five years post-registration experience (following registration either in midwifery or in the division of nursing in which the application is being made) including a minimum of two years experience in the specialist area.
4. The person must be competent. i.e. the person must have the ability to practice safely and effectively fulfilling his/her professional responsibility within his/her scope of practice<sup>1</sup>.
5. The person must demonstrate evidence of continuing professional development.
6. The person must be educated to higher diploma level or above. If the appointed candidate is not educated to higher diploma level, he/she must undertake a contractual agreement to obtain a relevant higher diploma. Credit must be given for prior education, learning and experience.

### Vacant Clinical Nurse Specialist/Clinical Midwife Specialist Posts

Where a CNS/CMS post approved under either the immediate or intermediate pathway becomes vacant, the Director of Nursing/Midwifery must inform the Director of the NMPDU. He/she will then inform the National Council.



one of whose functions is to monitor the ongoing development of nursing and midwifery specialities.

## Advanced Nurse Practitioners/Advanced Midwife Practitioners

A number of applications for the establishment of Advanced Nurse Practitioner and Advanced Midwife Practitioner (ANP/AMP) posts are now being dealt with by the Directors of the NMPDUs and the National Council. The process for the establishment of these posts comprises two parts: (1) approval of site preparation and job description and (2) accreditation of the ANP/AMP.

### Criteria for Advanced Nurse Practitioners/Advanced Midwife Practitioners

The following criteria apply for accreditation as an ANP/AMP. An ANP/AMP must:

1. Be a registered nurse or midwife on An Bord Altranais' live register;
2. Be registered in the division of An Bord Altranais' register for which application is being made (in exceptional circumstances which must be individually appraised, this criterion may not apply);
3. Be educated to masters degree level (or higher). The post-graduate programme must be in nursing/midwifery or an area which is highly relevant to the specialist field of practice (educational preparation must include a substantial clinical modular component(s) pertaining to the relevant area of specialist practice);
4. Have a minimum of seven years post-registration experience, which includes five years experience in the chosen area of specialist practice;
5. Have substantive hours<sup>2</sup> at supervised advanced practice level<sup>3</sup>;

6. Have the competence to exercise higher levels of judgement, discretion and decision making in the clinical area above that expected of the nurse/midwife working at primary practice level or the clinical nurse/midwife specialist;
7. Demonstrate competencies relevant to context of practice: and
8. Provide evidence of continuing professional development.

Application for accreditation of an ANP/AMP may only be made when the site preparation and job description have been approved.

### Monitoring the Development of Advanced Nurse Practitioner/Advanced Midwife Practitioner Posts

The National Council is responsible for monitoring the development of ANP/AMP posts. The National Council will liaise and work in partnership with the Directors of Nursing/Midwifery and the Directors of the NMPDUs in this process. This will include review of geographic spread, national and local developments and appropriateness of ANP/AMP role development (Commission on Nursing 1999 6.62).

Copies of the full text of the *Clinical Nurse/Midwife Specialist – Intermediate Pathway and Framework for the Establishment of Advanced Nurse Practitioner and Advanced Midwife Practitioner Posts* documents (National Council for the Professional Development of Nursing and Midwifery, April 2001 and May 2001 respectively) and separate application forms can be obtained free of charge either on request from the National Council or the website ([www.ncnm.ie](http://www.ncnm.ie)).

\* See footnote on page 9.

- 1 An Bord Altranais (2000) *Scope of Nursing and Midwifery Practice Framework*. Dublin: An Bord Altranais.
- 2 The actual number of substantive hours will be decided on an individual basis by the accreditation committee.
- 3 Appropriate supervisors must be identified. These may include nurses, midwives, and/or other healthcare professionals.

# NURSING AND MIDWIFERY PLANNING AND DEVELOPMENT UNITS

## Regional Meetings, Autumn 2001

The executive staff of the National Council attended regional meetings with the Directors of the Nursing and Midwifery Planning and Development Units (NMPDUs) in six health board areas last autumn. These meetings were attended by Directors of Nursing, Midwifery and Public Health Nursing, Nursing Practice Development Co-ordinators, Principal Nurse Tutors, Practice Nurses and other practising nurses and midwives. The topics discussed at these meetings included Clinical Nurse Specialists/Clinical Midwife Specialist (CNS/CMS) posts, job descriptions/profiles for CNS/CMS posts, Advanced Nurse Practitioners/Advanced Midwife Practitioners (ANPs/AMPs), continuing education and joint projects, as well as topics of regional interest.

## Vacant Clinical Nurse Specialist/Clinical Midwife Specialist Posts

If and when a CNS/CMS post approved under either the immediate or intermediate pathway becomes vacant, the Director of Nursing/Midwifery informs the Director of the NMPDU. He/she will then pass this information on to the National Council, one of whose functions is to monitor the ongoing development of nursing and midwifery specialities.



Eithne Cusack, Sheila O'Malley and Ann Sheridan of the ERHA NMPDU



Colum Bracken, Anna Plunkett and Breege O'Neill at the NEHB meeting



Lisa Walsh and Pearse Finegan at the WHB NMPDU meeting



The meeting of the NWHB NMPDU

## **First Continuing Education Programmes Funded by the National Council**

The National Council has commenced funding continuing education programmes on a regional basis as part of its remit for the development of the profession. For further details of how to apply for funding check out our document *Criteria and Process for the Allocation of Additional Funding for Continuing Education* (February 2001).

## **Integrating Care for Women with Postnatal Depression and Development of a Service Strategy to Link Services and Care**

The Nursing and Midwifery Planning and Development Unit in the South Eastern Health Board has initiated this innovative programme which aims to promote a greater understanding of postnatal depression and establish integrated links to provide the care needed and early detection. The programme comprises a two day "train the trainer" course and two days development of a regional strategy to link services and care. Under this multidisciplinary "cascade training" programme forty healthcare professionals have already been trained as trainers and can now provide additional training in postnatal depression to all midwives, obstetricians, psychiatric nurses (hospital and community), psychiatrists, Public Health Nurses, practice nurses and general practitioners within the health board region.

## **Conference: Keeping Ahead of the National Agenda**

Joan Somers Meaney (Director of Nursing, Ennis General Hospital) organised this conference, which was attended by forty-five nurses in the Mid-Western Health Board. The day was rated as very informative and provided useful and practical information in relation to service planning, empowerment, quality, accreditation and cultural issues in nursing.

## **Website**

The National Council website continues to grow and develop. A number of specialist groups have availed of the option to advertise their associations on the website (see page 14). We continue to update our events section regularly and have set up a links page that provides links to websites of interest to a variety of nurses and midwives.

In the new year the National Council will provide via the website, free of charge, a Powerpoint presentation that will outline the role, functions and work of the National Council. This will assist in disseminating information about the National Council to nurses and midwives around the country and will serve as a resource for educational and professional development programmes.

Also in the new year the National Council will provide a web-based database of third level courses relevant to and of interest to nurses and midwives. This will be the first such database in Ireland and will provide valuable information for nurses and midwives interested in furthering their career and professional development.

## **Change of Address**

The National Council has now moved to its permanent office. You can contact us at:

**6-7 Manor Street Business Park  
Manor Street  
Dublin 7**

**E-mail: [admin@ncnm.ie](mailto:admin@ncnm.ie)**

**Website: [www.ncnm.ie](http://www.ncnm.ie)**

# SPECIALIST NURSING/ MIDWIFERY GROUPS

The growth of special interest groups in nursing and midwifery is a reflection of the importance that nurses and midwives are placing on developing professional practice. The National Council support the development of such groups by offering the following services on the website. Specialist nursing/midwifery groups can:

- have a website hosted by the National Council free of charge or
- have details of the group published on the National Council website

The Computers and Nursing Group (CAN) have availed of the opportunity to provide information about their activities on our website.

## COMPUTERS AND NURSING (CAN)

### Who are they?

CAN are a group of nurses working in the health care arena with an interest in information technology (IT) and the impact it may have on nursing. They operate on a voluntary capacity and are self-directed. The members represent various working environments such as clinical practice, nursing specialisms, practice development, and clinical and theoretical education.

### What are their aims?

- To promote and support the use of IT in underpinning the effective delivery of evidence based practice in various hospitals.
- To identify skill deficits and training requirements of the nursing staff in each hospital and assist in the design of effective responses to these needs.
- To encourage the sharing of information and promote good communication between nursing staff across a healthcare network in Ireland.

### What do they do?

- Promote information exchange with local, national and international nursing informatics groups by attending local and international conferences.
- Design and develop a nursing internet page. CAN have established their own webpage on Beaumont Hospital's website ([www.beaumont.ie](http://www.beaumont.ie)).
- Act as a resource/support for other nursing groups who may be implementing similar systems by illustrating on-line screen shots of nursing information systems.
- Provide a "grass roots" communications network locally in hospitals, thus providing vital information on the development of clinical information systems.
- Act as facilitators of change.
- Facilitate and promote the webpage associated with the group.

### How can I contact CAN?

You can contact any member of CAN by accessing the CAN web page ([www.beaumont.ie](http://www.beaumont.ie)) and using the e-mail addresses attached to each member or contact the IT nurses directly at Beaumont Hospital at (01) 8093365.

### How can I join?

Contact:

Pamela Henry

E-mail: [pamela.henry@beaumont.ie](mailto:pamela.henry@beaumont.ie)

or

Ide O'Shaughnessy

E-mail: [ide.oshaghnessy@beaumont.ie](mailto:ide.oshaghnessy@beaumont.ie)



# REVIEW of 2001

## January to March

- The Chief Executive Officer, the Head of Professional Development and Continuing Education and Professional Development Officers take up full-time executive posts
- Work continues on the Clinical Nurse Specialist/Clinical Midwife Specialist (CNS/CMS) document and processing of applications under the immediate pathway
- *Criteria and Process for the Allocation of Additional Funding for Continuing Education by the National Council* published (February 2001)
- First quarterly newsletter published

## April to June

- First of regular meetings with the Directors of the Nursing and Midwifery Planning and Development Units, both at national and regional level
- *Clinical Nurse/Midwife Specialists – Intermediate Pathway* published (April 2001)
- *Framework for the Establishment of Advanced Nurse Practitioner and Advanced Midwife Practitioner Posts* published (May 2001)

## July to September

- *Aid to Developing Job Descriptions/Profiles for Clinical Nurse/Midwife Specialist Posts* completed (July 2001)
- Autumn regional meetings commence

## October to December

- Autumn regional meetings continue
- First Annual Conference: "The Development of Nursing and Midwifery in Ireland - Building on the Blueprint", November
- National Council moves to permanent premises

Throughout the year the executive staff have delivered presentations on the role and functions of the National Council, the clinical career pathway and practice development to a number of groups and organisations, including specialist nursing groups, nurses undertaking continuing education programmes, organisations providing services for people with intellectual disabilities, and trades unions. The staff have also attended a number of conferences and seminars on topics of interest to and relevant to the development of nursing and midwifery.

*your winter calendar*

2001

**December**

S	T	W	T	F	S	S
31					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

**January**

S	T	W	T	F	S	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

2002

**February**

S	T	W	T	F	S	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28			

