Speech by the 
Minister for Health and Children 
Mr. Brian Cowen TD 
on the Publication of the 
Report of the Commission on Nursing 
16th September 1998 
Dublin Castle 

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Introduction

Ms Justice Carroll, members of the Commission and invited guests, I am delighted today to accept this very fine report from the Commission on Nursing. You, Judge Carroll, and the members of the Commission deserve our thanks for a job well done. Not only has the job been well done but the job has been done on time. I had expected your final report around this time and referred to this on a number of occasions when meeting nurses throughout the country. Delivering a report, as important as this, on time after a comprehensive examination of the subject is indeed an excellent achievement.

As the Minister with the ultimate responsibility for the Health Services, I am acutely aware that nurses account for a significant proportion of the total workforce. As the Commission's report says, the nursing profession is a cornerstone of the health services. I therefore view the publication of this report as a very significant event in terms of the 31,000 nurses who work within the public health service and for the future of the health services. I am also very aware that there had been a vacuum in the area of nursing over the last number of years, and that the absence of a major review of nursing in itself contributed to the feeling that nursing needed to move in a particular direction but that this direction had not been mapped out. This report being published today fills that void, and allows us to chart a steady course for the future development of nursing and midwifery within the health services.

The aim of the Report of the Commission on Nursing, A Blueprint for the Future, is to develop the profession of nursing. Its recommendations are designed to free the profession from controls, practices and attitudes that have held nursing and midwifery in check, and which have prevented it achieving its full potential in the health services and in society.

The Commission recommends a new framework to take the profession forward into a new century. In doing so, it has been careful to build on the strengths of Irish nursing and midwifery while at the same time emphasising the need for change. Take, for example, the education and
training of nurses and midwives. The Commission recommends that in future recruits to the profession be educated to degree level so that nurses and midwives can work more flexibly and autonomously and play a fuller part in the inter-disciplinary health care team. The Commission also paid particular attention to the creation of a specialist career structure, the absence of which has been a barrier to the development of nursing and midwifery. Its recommendations on the management of nursing, when implemented, will tap the talents and energies of our nurses and midwives in a way never achieved before.

The Commission recognises explicitly that nursing is a self-regulating profession. It recommends that the powers and composition of its regulatory body should reflect the profession’s responsibility for professional standards and for the protection of the public. The Commission has outlined a blueprint for the future, a liberating vision for nursing, midwifery and the health services. The challenge now, to all those affected by its recommendations, is to ensure that the blueprint becomes a reality.

I want to emphasise today that I am fully committed to the Commission’s vision for enhancing the role of nurses and midwives, and I welcome the blueprint for the development of the profession being published today. I know that many thousands of nurses responded to the Commission’s invitation to take part in consultative fora throughout the country. I know also that nurses and midwives have high expectations of the Commission’s report. I believe that the Commission’s report meets those expectations. I am aware that many nurses and midwives expressed doubt at the consultative fora about whether the Commission’s recommendations would be implemented.

I want to assure the profession here this evening that the Commission’s report will be acted upon, and that there is no question of it being consigned to a shelf in my Department to gather dust. This is a most important report, which has been compiled following a most comprehensive examination of the issues of concern to the profession and the
most extensive consultation process ever undertaken. As a demonstration of my commitment to bringing about the fundamental institutional and structural reforms recommended by the Commission, reforms which are so essential if the profession is to move forward in the direction envisaged by it, I wish here this evening to announce details of the specific measures that I am taking as an immediate response to the Commission’s report.

**Using the Partnership Model**

We, in Ireland, have benefited very significantly from the use of the Partnership Model at National level. The current agreement Partnership 2000 encourages us to bring this partnership model from the national level to the local level. It is my intention therefore, to invite the Trade Unions to join with me in the implementation of the report. Accordingly, I will be issuing invitations to the Trade Unions to work with my Department, the Health Services Employers Agency and the Health Boards and Voluntary Agencies on the implementation of this Report on an ongoing basis over a period of years. The actual implementation process will of necessity take several years to complete and a huge amount of work will have to be carried out if all of the 200 recommendations are to be implemented in a streamlined and effective manner. The Commission itself was critical of the haste with which the pre-registration diploma programme was put in place and has signalled that any further development in the nurse education process should be carried out over a period of years to ensure that any new programmes are put in place with the minimum amount of disruption. The Commission says that any transition will require careful planning and a forum of interested parties will have to be established to agree a strategy for the implementation of the new programme.

This is the first occasion on which the implementation of a major report like this is being dealt with by way of a partnership model. I am sure that the good will necessary from all sides will be forthcoming to ensure that this type of implementation process will come to be regarded as a new and better way of doing things in Ireland.
New Legislation to Amend the Nurses Act 1995

The Commission has recommended a number of reforms of the Nurses Act, 1985, which contains the current statutory framework for the regulation of the profession. These include changes in the membership, functions and procedures of An Bord Altranais. A review of the 1985 Act was already underway in my Department before the establishment of the Commission of Nursing but was suspended pending the deliberations of the Commission. Now that the Commission has reported, I intend to press ahead with the preparation of legislative proposals for amending the 1985 Act along the lines recommended in the report. I will be bringing these proposals before Government for consideration as quickly as I can.

I would like to avail of this opportunity to assure midwives that it is my firm intention that the new legislation will give statutory recognition to their distinct identity and focus. Full account will be taken of the recommendations made by the Commission for enabling midwifery to step out of the shadow and take its place centre stage in a modern regulatory framework.

Pre-Registration Nursing Education and Training

In the area of pre-registration nursing education and training, the current diploma based programme of three years duration has now replaced the old apprenticeship programme. The old apprenticeship programme was a fine programme for its day. It served nursing well. But quite honestly the old apprenticeship programme has gone past its sell by date. The Commission recommends that the current diploma model should be replaced by a four year degree programme, incorporating one year of employment with structured clinical placements in the health services, and that such a programme should be fully integrated into third level education. The Commission has recommended that I establish a Representative Forum, involving the third level institutions, schools of nursing, health services providers and An Bord Altranais with the objective of agreeing a strategy for the implementation of degree level education in time for the intake of nursing students in the year 2002. I am
delighted to say that I intend to have this Forum established immediately, and that it will be asked as a matter of urgency to agree a strategy for the implementation of the pre-registration nursing degree programmes.

Setting up of National Council for the Professional Development of Nursing and Midwifery

Over the last number of years, the development of the nursing profession has been limited by virtue of the absence of a clear clinical career pathway in nursing and midwifery. I am very keen to ensure that those nurses that are capable of working at the very highest levels are afforded the opportunity to develop their skills. I intend therefore to act immediately on the Commission's recommendation relating to the establishment of a National Council for the Professional Development of Nursing and Midwifery.

This new Council will have its own budget, and will give guidance and direction in relation to the development of specialist nursing and midwifery posts and post-registration educational programmes for nurses and midwives. I look forward to setting up this Council and I would hope that this Council and An Bord Altranais will work closely together on the development of specialisation in nursing and high quality post-registration education programmes.

Nursing and Midwifery Planning and Development Unit

One of the key recommendations is that a nursing and midwifery planning and development unit be established in each health board. These units would be responsible for strategic planning and quality assurance of nursing and midwifery services in the health board area, and would also be involved in co-ordinating the delivery of nursing and midwifery services and improving co-operation between health boards and voluntary bodies in the delivery of nursing and midwifery services. The units would also have a key role in vigorously promoting improved internal communications with nurses and midwives in any particular health board area. Because the Commission considers that this is an area requiring immediate attention, I am asking my Department to authorise
the establishment of planning and development units in each health board. Preliminary arrangements will be made over the next number of months to ensure that these units are established and functioning early in 1999.

The Strengthening of the Nursing Policy Division in the Department of Health and Children

The Commission's report contains a range of recommendations which would require the Department of Health and Children to examine various developments, improve certain situations and work actively with Health Agencies to develop and promote nursing and midwifery.

Last year a new Nursing Policy Division was established in the Department. The primary function of this Division is to ensure that there is an integrated and strengthened nursing function within the Department which will provide added impetus at this important stage in the development of nursing in this country. Ms Peta Taaffe, former Director of Nursing, St James's Hospital was appointed Chief Nursing Officer. There are currently a staff of 8 working in the Division.

In order to fulfil its role, it is essential that the Nursing Policy Division within my Department is strengthened. I accept the need for the appointment of nursing consultants and researchers on short term contracts to undertake specific projects as part of the development of an overall policy framework for nursing. My Department will be advertising for a number of these posts over the next few months.

Having regard to the difficulties in recruiting nurses being experienced by hospitals, I should mention that one of these researchers will be specifically engaged to study nursing needs for the coming years, and will also carry out research on the reasons why nurses are leaving nursing and where they are going.

I hope that such research, together with ongoing efforts to promote the profession as a career option among school leavers, will help to ensure the availability of nurses into the future.
More immediately, my officials are liaising with the Health Service Employers Agency, which is working with health service employers, with a view to determining whether any special short-term initiatives are required in relation to the recruitment and retention of nursing staff.

Greater Involvement of Nurses in the Management of Health Services

Since becoming Minister, I have indicated on a number of occasions that there is a need for the greater involvement of nurses and midwives in the management of the health services. I have also indicated that I intend to launch an initiative in the area of clinicians in management before the end of the year. I was anxious however, to ensure that this initiative did not take place without the full and active inclusion of our nursing workforce. For this reason I indicated that I would wait to see the final report of the Commission on Nursing before drawing together the various strands involved in the initiative for clinicians in management of hospitals. My Department will now be involved in plans to finalise this initiative and the recommendations of the Commission on Nursing will form an essential element of the policy on the future management of the hospital services. The formation of clinical directorates and other models of management, where doctors, nurses, paramedical grades and senior managers share in the running of the hospital services, has shown that when decisions are taken nearer the patient everybody is the better for that.

This will not be a simple transition as we have become accustomed to hospitals being run in a somewhat hierarchical and command and control way. Major changes in the way hospitals are managed will present challenges to all the people currently involved. Changes in the roles and functions of various people, such as Directors of Nursing and Consultants, will be required and much will depend on how they adapt to their new roles. I look forward to seeing Directors of Nursing relinquishing much of their operational authority and focusing more on strategic management of the nursing resource and contributing to the corporate policy of the hospital.
Industrial Relations Issues

The pay issues referred to in the Commission’s report will be addressed, in the context of public service pay policy generally, as set out in the Taoiseach’s address to the social partners last July. Discussions will be held at the appropriate time with the Public Service Committee of the Irish Congress of Trade Unions to progress these matters. This will provide the context for addressing the relevant issues relating to nurses.

Developments in Management Training

This is an appropriate occasion on which to refer to a number of major developments that have taken place in the management training area since I became Minister for Health and Children.

The Leadership Development Programme for Nurses is now up and running and doing very well.

A number of master classes have been held for Directors of Nursing and other Nurse Managers.

Management Development Programmes for Band 3 Directors of Nursing are beginning next week and management development programmes for bands 4 and 5 Directors of Nursing and Matrons have commenced.

Management Development Programme for Superintendents and Senior Public Health Nurses for the North Western and North Eastern Health Boards together with their cross border colleagues in Northern Ireland are commencing, and

A development programme for all nurses at Mullingar General Hospital has commenced.

The development of these courses came about as a result of the Interim Report of the Commission on Nursing. The courses represent a positive response to the call made by nurses to the Commission for a much greater investment in training and development to prepare nurses for senior positions within the health care system.
Some of these new programmes have been developed by the Office for Health Management in partnership with the Irish Nurses Organisation and with co-funding by the Irish Nurses Organisation and the Department of Health and Children. I have taken a great interest in these programmes and I hope that they are making a major contribution into the development of nurses as managers, not only within nursing but within the health services as a whole.

**Research in Nursing and Midwifery**

I welcome the importance the Commission attaches to the development of nursing and midwifery research at every level of the health services. Research into nursing and midwifery practice is only in its infancy in this country. However, it is a healthy infant and one which I intend to encourage and support. In particular, I would like to complement Bord Altranais for its initiative in awarding scholarships for nurses and midwives undertaking research at Ph.D. level. In these days of evidence-based practice, it is important that nursing techniques and outcomes are examined critically to ensure the highest standards of patient care and the most effective use of resources. The expansion of the academic departments of nursing in our third level colleges and universities and the recognition of specialist practice in nursing and midwifery, will underline the need for research and provide, in due course, the expertise for its expansion.

The Commission recommends that funding for nursing and midwifery research should be channelled through the Health Research Board, and that the Board take the initiative in supporting such research. I share the Commission's view on the importance of research for the future of nursing and midwifery. My officials will be working closely with the Health Research Board to ensure that this recommendation is implemented. In this context, the profession will be interested to note that Dr Ruth Barrington, who was my Department's representative on the Commission, will shortly take up a new appointment as Chief Executive Officer of the Health Research Board.
Monitoring Committee

I referred earlier to my intention to work in partnership with the Trade Unions on the implementation of the Report. I therefore propose to accept the Commission's recommendation that a monitoring committee be established under the aegis of my Department to monitor progress on the implementation.

This committee would be composed of representatives of the Department of Health and Children, An Bord Altranais, service providers and the four nursing unions. It is my intention to establish the committee within the next few weeks.

Conclusion

Ms Justice Carroll and members of the Commission, today marks the end of a particularly important piece of work insofar as you are concerned. However, for me, for my Department and the Health Agencies that work with me, it marks the beginning of a very important era in the development of nursing within the health services. I thank all the members of the Commission, and its secretariat, for the excellent work they have done in the production of such a fine document, which I have no doubt will stand the test of time. A special word of gratitude is due to those members of the Commission from outside the health services for their valuable contribution to the deliberations of the Commission. This is a splendid example of public service in the best sense of the word.

I especially want to express my sincere appreciation and that of the Government to you, Judge Carroll, for the skill with which you chaired the Commission and for your boundless energy in driving forward its work. We all owe you an enormous debt of gratitude for your commitment and dedication to the onerous task which you so willingly agreed to undertake. Your involvement, and the wonderful interest you have shown in every aspect of nursing and midwifery, is reflected in the very fine report that you have presented to me this evening.
I want to reiterate that it is not my intention to let this report sit on a shelf gathering dust but to have it implemented on an ongoing basis over a number of years, according as resources allow. It will be a working document, it will be a document that we will refer to as we do our day to day business, and it will be a document which we will use to make the types of changes you feel are necessary to move nursing into the early years of the next century.

What I have announced today by way of positive immediate action is an indication of my good will. It is an indication also that I intend to work on an ongoing basis with the Trade Unions and with the Health Agencies to ensure a steady, ongoing, momentum is maintained for the implementation of this excellent report. I would like to conclude by saying that I am most anxious that the Report of the Commission on Nursing be read by all nurses and midwives throughout the country. It is crucially important that they fully understand the context in which the Commission reached its conclusions, and the impact that the implementation of its recommendations will have on the future direction of their profession and the development of their role in the health services. The Commission’s report is all about tackling the underlying problems affecting the profession, rather than just the symptoms of those problems, and providing a secure basis for moving nursing forward into the next millennium. With the objective of ensuring that the general body of nurses and midwives are given an opportunity to study the Commission’s report, I am arranging for a copy of the report to be sent to every practising nurse and midwife in the public health sector over the coming weeks.

Thank You