Final Report

of the Empowerment of Nurses and Midwives Steering Group – An Agenda for Change

March 2004
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In early 2000 I had pleasure in establishing The Empowerment of Nurses and Midwives Steering Group. The group was formed in the spirit of partnership across the health service and comprised a broad spread of disciplines. The group held its first meeting on 14 March 2000. On that day I set the group the challenging tasks of changing mindsets and finding ways of giving nurses and midwives a meaningful role in the management of their services. I told the group members that there was no simple instant solution to these issues and that their participation in this group would represent the initiation of a process that would grow and develop over a period of years.

Some three and a half years later, I am delighted to present the Final Report of the Empowerment of Nurses and Midwives Steering Group – An Agenda for Change. Working within its terms of reference, the group has undertaken groundbreaking work in three important areas: the meaning of empowerment; personal and management development; and service planning.

Through the activities of the Steering Group and the dedication of nurse leaders and other professionals in organisations throughout Ireland, significant progress has been made. Lessons have been learned along the way and are included in this report and its ancillary reports: namely Nurses’ and Midwives’ Understanding and Experiences of Empowerment in Ireland and A Collection of Exemplars Illustrating Empowerment of Nurses and Midwives: Empowerment Narratives. During its lifetime the group also produced an educational video on service planning entitled Service Planning in Action (2001) which has been widely circulated throughout the health services, and Guidance on the Commissioning of Nursing Management Development Programmes for Front-Line and Middle-Level Nurse Managers. Two pilot development modules for directors of nursing and equivalent nursing management grades, entitled ‘Understanding and Managing Self’ have also been completed.

We have seen some fundamental changes in the health services during the lifetime of the Steering Group. Organisational reform was a key framework for change proposed in the National Health Strategy published in 2001. The challenges posed by Quality and Fairness: A Health System for You (2001) are significant, and in the health sector, where service delivery is almost completely dependent upon people, this will require new approaches to the management of those charged with service delivery. The Action Plan for People Management in the Health Service (2002)(APPM) is an essential piece of the jigsaw that is health reform. The Steering Group’s educational video, Service Planning in Action, referred to above, fits neatly in with Action 4.2 of the APPM which aims to increase staff involvement in service planning.

On 18 June 2003 the government announced the most extensive reform programme for the health system in over thirty years. The key elements of the programme include: the establishment of the Health Services Executive, organised on the basis of three core divisions – namely National Hospitals Office, Primary Community and Continuing Care Directorate, and National Shared Services Centre – and the modernisation of supporting processes (service planning, management reporting etc) to be in line with recognised international best practice. I believe that the Empowerment of Nurses and Midwives Steering Group has produced some extremely informative work in this area which will be of immense assistance in implementing the reform agenda. I would like to take this opportunity to commend the members of the Steering Group on a job well done. It is imperative that their work be continued through local ownership of the empowerment philosophy, and through a commitment to continued support from all strands of our health service.

Micheál Martin TD
Minister for Health and Children
I am delighted to present the Final Report of the Empowerment of Nurses and Midwives Steering Group – An Agenda for Change.

This report points to a positive future for nurses and midwives and demonstrates that the growth of nurses and midwives into empowered professionals is a natural progression in the development of nursing and midwifery in Ireland, and an essential element in structuring a confident, effective health service.

Through the activities of the Steering Group and Sub-groups on management development, service planning, and the meaning of empowerment, new visions and directions have been established.

The work of the Steering Group reflects the vision expressed in Quality and Fairness: A Health System for You (2001) and has regard for the relevant activities outlined in Action Plan for People Management in the Health Service (2002).

I would like to thank formally everyone involved, the Steering Group, Sub-groups, particularly nurses and midwives who participated in discussions, pilot programmes and the research process. By contributing to the work of this initiative, nurses and midwives have engaged in mapping their own future and most importantly in helping to build a system which provides the best possible care for patients.

Thanks are due to Gayle Garland for her advice and support and for her contribution to the completion of this final report, and to Geraldine McGrath for her organisational and secretarial support.

Finally a sincere expression of gratitude to the initial Chair, Frank Ahern, Assistant Secretary, Department of Health and Children (DoHC), whose commitment and belief helped to both motivate and drive the development of this project, thus making my role as Chair an easier one.

Mary McCarthy
Chief Nursing Officer
Chair of the Empowerment of Nurses and Midwives Steering Group
Steering Group members

Frank Ahern  Assistant Secretary, Department of Health and Children
– Chair (until July ’02)
Mary McCarthy  Chief Nursing Officer – Chair (from July ’02)
Jack Buckley  Director of Nursing, St Brendan’s Hospital, Dublin (until November ’02)
Liam Doran  General Secretary, Irish Nurses Organisation
Maureen Flynn  Divisional Nurse Manager, St Vincent’s University Hospital
Jenny Hogan  Professional Development Officer, National Council for the Professional Development of Nursing and Midwifery (co-opted January ’01)
Bridget Howley  General Manager, Galway Regional Hospitals
Ann Judge  Management and Organisation Development Specialist, Office for Health Management
Annette Kennedy  Director of Professional Development, Irish Nurses Organisation (co-opted February ’01)
Tim Kennelly  Chief Executive, St John’s Hospital, Limerick
Martin McDonald  Assistant CEO, Health Service Employers Agency
Seamus Murphy  Industrial Relations Officer, Psychiatric Nurses Association
Geraldine Murray  Divisional Nurse Manager, Galway Regional Hospitals
Gerry O’Dwyer  Deputy General Manager, Cork University Hospital Group
Siobhan O’Halloran  Project Adviser, Health Strategy National Implementation Committee
Patricia Owens  Assistant General Secretary, Impact, Dublin (replaced Christina Carney, January ’01)
Geraldine Regan  Director of Nursing, Our Lady’s Hospital for Sick Children, Crumlin
Susan Reilly  Assistant Principal Officer, Nursing Policy Division, Department of Health and Children
Gerry Reynolds  Clinical Nurse Manager 3 – Professional Advisory Group, SIPTU (replaced Oliver McDonagh, National Nursing Council, SIPTU)
Alan Smith  General Manager, Office for Health Management
J. Bernard Walsh  Consultant Physician, Robert Mayne Day Hospital and St James Hospital, Dublin
Audrey Wright  Clinical Nurse Manager 2, Tullamore Regional Hospital
Pat Harvey  CEO, North Western Health Board (until January ’03)
Pat Lyons  Former CEO, Beaumont Hospital (until July ’02)
John Owens  Consultant Psychiatrist, St Davnet’s Hospital, Monaghan (until April ’01)
Christina Carney  Assistant General Secretary, IMPACT (until January ’01)
Graihne Connolly  Head of Change Management, HSEA (until January ’01)
Geraldine McGrath  (Secretary) Assistant Human Resources Manager, St John’s Hospital, Limerick
1 Introduction

In March 2000, Micheál Martin TD, Minister for Health and Children, established the Empowerment of Nurses and Midwives Steering Group – An Agenda for Change to undertake strategic activities which would facilitate the meaningful involvement of nurses and midwives in the management of the services they provide. The formation of this high level steering group demonstrated commitment to the implementation of the recommendations made in the Report of the Commission on Nursing (1998) and the Labour Court of 31 August 1999 and 27 October 1999.

The Empowerment of Nurses and Midwives Steering Group recognised that the empowerment of nurses and midwives involves the commitment of nurses and midwives to maximising their personal contribution to patient care through education, development and partnership across professions. Empowerment also requires the commitment of organisations to create a supportive environment that values nurses and midwives, involves them in strategic and operational matters and creates opportunity for learning and changing. Empowerment in this context translates into effectiveness – personal effectiveness through the development of knowledge, skills and abilities, and organisational effectiveness in working equitably with others within complex modern organisations.

The Empowerment of Nurses and Midwives Steering Group – An Agenda for Change was formed in the spirit of partnership across the health service. Throughout its lifetime the Steering Group was widely representative of the nursing and medical professions and included general management, chief executives, and nursing union representatives. It was initially chaired by Frank Ahern, former Director, Personnel Management and Development, Department of Health and Children, and subsequently by Mary McCarthy, Chief Nursing Officer, Department of Health and Children.

The Steering Group convened on eighteen occasions in meetings held across the country. Some meetings were hosted by local health service provider organisations, and incorporated meetings with staff.
2 Terms of reference

The Empowerment of Nurses and Midwives Steering Group – An Agenda for Change worked within the following terms of reference.

• Working with the existing structures (for example partnership committees, clinicians in management initiatives, management structures in local agencies) to devise an agenda for change which will provide for nurses and midwives at all levels being involved in a meaningful way in the operational and strategic management of their respective health care institutions/service areas.

• To assist in driving forward the Clinicians in Management initiative with particular emphasis on nurses and midwives working nearest the patient.

• To devise strategies to allow the various groupings within the health service to work together in co-operation for the benefit of the patient.
3 Focusing activity

Early consultations with nurses and midwives by Steering Group members suggested several areas of activity that would encourage the meaningful involvement of nurses and midwives in the services they provide. Activities highlighted as priorities in the consultation process included:

- improving communications
- changing culture – creating a positive culture for effective contribution
- initiating nurse/midwife-led services
- involving nurses and midwives in planning
- increasing utilisation of current knowledge
- increasing consultation with nurses and midwives
- engaging and facilitating nurses and midwives to undertake personal development planning – specifically management development.

Sub-groups of the Steering Group were formed (see diagram below) with the view to achieving the widest impact in these priority areas. Four Sub-groups were formed around the key themes of the meaning of empowerment, management development, service planning and communication. The first three Sub-groups were intended to provide the main strategic focus for activity within health service settings, while the Communications Sub-group was to ensure that information was provided to nurses and midwives about the work of the Steering Group.

Each Sub-group identified terms of reference aligned with the Steering Group responsibilities and devised action plans to accomplish their specific priorities. Steering Group meetings ensured that the Sub-groups’ activities remained both interlinked and congruent, and also supported the accomplishment of the objectives set by the Department of Health and Children, principally ‘enhancing involvement of nurses and midwives in the operational and strategic management of their employing organisations’.

Sub-group structure of the Steering Group
4 Strategic interventions

Each Sub-group chose different strategies and methods suited to its terms of reference.

- The purpose of the **Meaning of Empowerment Sub-group** (see its final report in Appendix A) was defined as follows:

  to determine the meaning and understanding of empowerment from the perspective of nurses and midwives within the context of the public health services.

The Sub-group chose a multidimensional approach comprising a literature review, the commissioning of a national research study and the compilation of exemplars of existing best practice in applied empowerment. This multidimensional approach in itself represents best practice, in that it combines investigation and dissemination in a manner that provides opportunities for nurses and midwives to acquire knowledge and enhance practice. The literature review was designed to inform the Sub-group of the current state of knowledge about empowerment of clinical staff and the impact on patient care. A dearth of literature from the Irish perspective was reported, supporting the decision to conduct a national research study. Existing best practice exemplars illustrating some of the lessons learned and reflections on the empowerment embedded in each exemplar were compiled to serve as a resource of ideas and experiences designed to inspire nurses and midwives to empower themselves and their patients.

- The **Management Development Sub-group** (see its final report in Appendix B) was established to

  explore ways that nurses and midwives could be further empowered through management and personal development.

The Sub-group focused on diagnosing developmental needs, and commissioning and evaluating competency-based management and personal development programmes derived from the competencies identified in the *Report on Nursing Management Competencies* (Office for Health Management 2000). Personal and management development programmes targeted specifically at the competencies required in nursing and midwifery management were designed and piloted in order to prepare nurses and midwives for an enhanced role in the management of services they provide. Evaluation of these development programmes will help those who commission future development programmes to target resources for greatest effect.

- The **Service Planning Sub-group** (see its final report in Appendix C) agreed to

  devise a system and strategy which will further develop and expand the meaningful involvement of nurses and midwives at all levels in the service planning process. Service planning is taken to encompass all aspects of planning – services, budgets, human resources, equipment, maintenance and development.
The Service Planning Sub-group identified three priorities – to clarify what is meant by ‘service planning’, to devise ways to consistently and clearly communicate about service planning to nurses and midwives, and to develop ways in which nurses and midwives can be involved in the process. The decision was made to prepare and produce a video and a facilitation guide for use in workshops designed to educate nurses about the process of service planning locally and nationally. These educational resources were intended also to raise interest among nurses and midwives in becoming more involved in the planning process.

- The **Communications Sub-group** undertook the responsibility to distil the information emerging from the other three Sub-groups and to co-ordinate a communications plan for the duration of the term of the Empowerment of Nurses and Midwives Steering Group – An Agenda for Change. The work of this Sub-group varied throughout the life of the Steering Group, and is evidenced by the Bridges newsletter, articles, bulletins and summaries published in the professional and health service journals.

The diverse objectives evident across the above areas of activity called for different approaches. An interlinking framework highlighting the choices of strategic activity can be conceptualised diagrammatically as follows.
As the above model illustrates, the strategic interventions undertaken by the Sub-groups were both diverse and aligned. The Meaning of Empowerment Sub-group used the strategic actions of commissioning research, investigation and dissemination, as a model for its working. These interventions aligned well with the focus on discovery, specifically the discovery of the meaning of empowerment for nurses and midwives nationally. The Management Development Sub-group chose a developmental approach based on the accepted wisdom that people who are prepared through management and personal development programmes are more effective within their services. Evaluation of the development programmes captured best practice and informed the attributes of programmes for the future. The Service Planning Sub-group sought to create educational materials to support organisations committed to informing and involving nurses and midwives in the service planning process. The video and facilitators’ guide served two key purposes, information and motivation, by highlighting the involvement of nurses and midwives in service planning, and sharing the experiences of successful organisations. All of these approaches and interventions interlinked to achieve a common purpose – to empower nurses and midwives and in so doing enhance their effective management of patient/client care as well as their contribution to the management of services.
5 Key outcomes

The following are key outcomes resulting from the action plans and interventions of the Empowerment of Nurses and Midwives Steering Group - An Agenda for Change. As with the strategic interventions of the Sub-groups, the outcomes are also interlinked. The results illustrate a wealth of resources generated in the course of this work and now available to health professionals and service leaders committed to continuing the work started by the Steering Group.

• A national research project conducted between December 2000 and November 2002. Using literature review, focus group and survey methodology, the final report entitled *Nurses’ and Midwives’ Understanding and Experiences of Empowerment in Ireland* was published in September 2003. This report is available from the Department of Health and Children at www.doh.ie

• A collection of exemplars described by nurses and midwives across Ireland that document their experience of using the principles of empowerment to improve patient care. The resulting document entitled *A Collection of Exemplars Illustrating Empowerment of Nurses and Midwives: Empowerment Narratives* was published in September 2003. This publication is also available from the Department of Health and Children at www.doh.ie

• Two consecutive pilot programmes of management development for Clinical Nurse Managers 2 (CNM2), Clinical Nurse Managers 3 (CNM3), and Middle Nurse Managers undertaken in 2000/01 and 2001/02. In total, approximately 200 nurses and midwives participated in the two pilot programmes.

• A detailed training and development guide was published in 2002 based on the findings of a comprehensive and independent evaluation of the pilot development programmes entitled *Guidance on the Commissioning of Nursing Management Development Programmes – Front-Line and Middle-Level Nurse Managers*. This guide is available from the Office for Health Management at www.officeforhealthmanagement.ie.

• The piloting of the Leading an Empowered Organisation (LEO) Programme in three health boards in a co-funded arrangement to assess its appropriateness and robustness as a common core module in all Clinical Nurse Manager 1 management development programmes. An overall evaluation was conducted and the findings are available in the 2003 publication entitled *Report on an Evaluation Study of the Leading an Empowered Organisation (LEO) Programme for Clinical Nurse Managers 1*, also available at www.officeforhealthmanagement.ie.

• A consultation exercise designed to discover the development needs of the most senior levels of nursing and midwifery managers was published in book form in August 2003 entitled *Report on the Diagnostic Exercise for Directors of Nursing/Equivalent Nursing Management Grades*. This publication is also available from the Office for Health Management at www.officeforhealthmanagement.ie.

• Two pilot introductory development modules for directors of nursing and equivalent nursing management grades entitled ‘Understanding and Managing Self’ were commissioned and delivered at the end of 2003. An independent evaluation concluded in March 2004.
• An educational video on service planning entitled *Service Planning in Action (2001)*, available from the Health Services Employers Agency (HSEA) and widely circulated throughout the health services. This video has been used in the pilot management development programmes for CNM2s as well as within organisations.

• As a support to organisations providing staff training in service planning a publication entitled *Guidelines for Facilitating Training and Briefing Sessions on Service Planning* has been available since 2002 from the HSEA and may also be downloaded from their website www.hsea.ie.
6 Lessons learned

As with any series of activities undertaken over a long period of time, circumstances alter and unexpected situations arise. Challenges arising from these circumstances provide opportunities for learning which may not directly impact on the achievement of the desired objectives, but provide valuable experiences nonetheless. The following are observations, insights and experiences arising from the work of the individual Sub-groups and, subsequently, the Steering Group as a whole. These ‘lessons learned’ have contributed to the choice of recommendations made in the next section of this report.

- The literature review undertaken to illuminate the concept of empowerment in nursing and midwifery drew from international research and theories. However, it was found that there is a dearth of specific published literature on empowerment from an Irish perspective and this finding guided the Sub-group to commission original Irish research.

- Nursing practice development co-ordinators were found to be a key resource group in the identification and promotion of good practice in empowerment of nurses and midwives in Ireland.

- Judging from the workshop contributions, and the submissions from clinical practice, there is an abundance of exemplars of empowered practice in the Irish health service. Facilitating nurses to document and share their experiences of empowerment is a valuable source of inspiration and shared benefit.

- There is a complexity of issues that surround a nurse’s or midwife’s understanding and experiences of empowerment. Within the context of nursing and midwifery practice, the quality of interpersonal relationships, professional tensions, management and organisational factors and historical legacy all have an impact on the individual and collective experience of empowerment. The need for an enabling environment was highlighted; that is, one that provides for professional support, recognition, role clarity and patient focus.

- The research carried out indicates that further empowerment of nurses and midwives would contribute to the realisation of the vision expressed in Quality and Fairness: A Health System for You (2001) and the actions outlined in the Action Plan for People Management (2002).

- The evaluation of the pilot development programmes gave rise to a rigorous description of best practice in personal and management development for nurses and midwives in Ireland. This resulted not only in an assurance of cost efficiencies in the commissioning of these programmes, but led to the opportunity to publish guidelines, and other reports, that serve as templates for commissioning future development activity.

- Management Development Sub-group members personally visited each cohort of participants in the pilot programmes. This not only communicated support to the programme participants, but allowed for continuous refinement of the programme content and delivery to meet the learning needs of participants and the practical challenges of the role.

- The strategy and methodology for delivering personal and management development for nurses and midwives in Ireland were benchmarked against experiences internationally.
• Multidisciplinary involvement in the planning process, good communication through consultation and an effective mixture of managerial and clinical approaches are vital to the development of a shared vision of services.

• Due to the complexity of the issues related to service planning, achieving an integrated and fully participatory planning process operated by knowledgeable and experienced clinicians will require concerted action over a period of years.

• Notwithstanding the availability of corporate handbooks and educational materials on service planning, problems in relation to access to information are still reported.

• CNM2s play a pivotal role in the success of the empowerment of nurses and midwives and in the service planning process specifically. These nurses and midwives fulfil an interpretive role between the world of patient care and the demands of complex organisations.
7 Recommendations

Since the inception of the Empowerment of Nurses and Midwives Steering Group – An Agenda for Change, important policy documents have been published including the Health Service Reform Programme (June 2003) making the achievement of the Group’s objectives even more urgent. With the proposed reorganisation of the existing structures and the anticipated changing responsibilities, it is acknowledged by the Steering Group that while recommendations are assigned to specific organisations they may be affected by the restructuring programme.

The recommendations reflect the accumulated experience across the three Sub-groups and constitute the summary recommendations of the Steering Group.

The Empowerment of Nurses and Midwives Steering Group – An Agenda for Change recommends that

- there should be continued dissemination and development of best practice in relation to empowerment with particular reference to the report Nurses’ and Midwives’ Understanding and Experiences of Empowerment in Ireland (2003)
- a follow-up study on the meaning of empowerment should be carried out at an agreed interval with wide dissemination of best practices and learning.
- innovation in the implementation of best practice in nursing and midwifery should be recognised, encouraged and given adequate resources
- personal and management development for all nurse and midwife managers should be informed by the following three publications:
  - Guidance on the Commissioning of Nursing Management Development Programmes: Front-Line and Middle-Level Nurse Managers (June 2002)
- all nurse and midwife managers when making decisions about appropriate development interventions should explore such options with their line managers/employers
- nursing and midwifery planning and development units should have responsibility for carrying forward the work commenced by the Management Development Sub-group. Specifically, in relation to CNM3s and directors of nursing/equivalent nursing management grades, further management development programmes for CNM3s and modules entitled ‘Understanding and Managing Self’ for directors of nursing/equivalent nursing management grades should be commissioned on a national basis through the nursing and midwifery planning and development units in consultation with the Office for Health Management as the need arises, to ensure maximum cost effectiveness and efficiency
• the dedication of funds to the provision of further personal and management development interventions and programmes should be placed with the nursing and midwifery planning and development units

• the health service must recognise the need for continued emphasis on service planning as a key skill area for nurses and midwives

• nurses and midwives must be fully involved in service planning because of their pivotal role in the delivery of patient-centred care

• the evolution of service planning must become a true multidisciplinary activity

• full transparency and feedback must be an essential part of the service planning process

• local responsibility for continuing to prepare and engage nurses and midwives in service planning should be placed with the nursing and midwifery planning and development units in collaboration with the local provider organisations and in accordance with their service planning processes

• the role of nurse managers at all levels should continue to be developed through continuing education and management development to include the skills and knowledge needed for service planning. The inclusion of service planning as an element of undergraduate and postgraduate education for nurses and midwives must be supported

• nursing and midwifery planning and development units should conduct periodic assessments of the nature and depth of involvement of nurses and midwives in the service planning process to inform further strategies for involvement and engagement

• organisations should provide suitable resources to support the development and involvement of managers and staff in service planning. Particularly useful has been the provision of a resource person within organisations to support the development of service planning effectiveness. Further copies of the video and guidelines Service Planning in Action should be widely circulated.
8 Conclusion

Over the three and a half year term of the Empowerment of Nurses and Midwives Steering Group – An Agenda for Change, work has been undertaken in three important areas, namely the meaning of empowerment, personal and management development and service planning. These areas of focus were chosen because they promised a range of multifaceted yet complementary activities which would demonstrably enhance the involvement of nurses and midwives in the management of their organisations. In this way they were bound to progress the strategic priority of the Department of Health and Children to devise an agenda for change which would support nurses and midwives in having meaningful involvement in the management of the services they provide.

The Steering Group’s actions characterised a spirit of partnership through inclusive representation, wide consultation and the sharing of experience. Steering Group and Sub-group meetings were held across the country, hosted by health service provider organisations, to facilitate interaction between Steering Group members and the clinical staff in their patient care settings. Nurses and midwives from across the divisions of the nursing register engaged with medical colleagues, general management and nursing union representatives in collaborative and valuing relationships, providing a successful template for future endeavours.

The terms of reference of the Steering Group included the imperative to work within existing policy priorities, in collaboration with other stakeholders, to develop a sustainable methodology for achieving greater involvement for nurses and midwives in the management of the services in which they work. The obligations imposed by these terms of reference have been discharged through the choice of Sub-group priorities, the applied philosophy of co-operation and inclusion, and the numerous documented accomplishments.

Considerable progress has been made through the activities of the Steering Group and the dedication of nurse leaders and professionals in organisations throughout Ireland. Lessons have been learned along the way and have been included in this report to assist others to meet the challenges of the future. It is imperative that the work begun here will be continued through local ownership of the empowerment philosophy, and a commitment to continued support from all strands within the health service.
Appendix A

Final Report of the Meaning of Empowerment Sub-group

Introduction
Following an analysis of issues underpinning the empowerment of nurses and midwives in Ireland a Sub-group focusing on the meaning of empowerment was established by the Steering Group in May 2000. At the outset it was perceived that a clear understanding of what empowerment meant, from the perspective of those working closest to patients and clients, was necessary to ensure that the Steering Group appropriately addressed its terms of reference.

The Meaning of Empowerment Sub-group met on twenty-two occasions between 2000 and 2003. A progress report was prepared for each of the meetings.

Membership
- Geraldine Regan (Chair), Director of Nursing, Our Lady’s Hospital for Sick Children, Crumlin, Dublin 12
- Ann Judge, Management and Organisation Development Specialist, Office for Health Management, Dublin 2
- Audrey Wright, Clinical Nurse Manager 2, Tullamore Regional Hospital, Co Offaly
- Siobhán O’Halloran, Project Adviser, Health Strategy Implementation Team, Department of Health and Children, Dublin 2
- Maureen Flynn, Divisional Nurse Manager (Critical Care Services), St Vincent’s University Hospital, Dublin 4
- Seamus Murphy, Industrial Relations Officer, Psychiatric Nurses Association, Dublin 1
- John Owens, Consultant Psychiatrist, St Davnet’s Hospital, Co Monaghan (until 14 April 2001)

Op-opted members
- Gonne Barry, Public Health Nurse, Northern Area Health Board, Dublin 7
- Patricia Hughes, Maternity Services Manager, Cavan/Monaghan Hospital, Co Cavan

Terms of reference
The Sub-group’s purpose was to determine the meaning and understanding of empowerment from the perspective of nurses and midwives within the context of the public health services.

Context for the Sub-group activities
The Interim Report of the Commission on Nursing (1997) identified barriers to the involvement of nurses and midwives in the management of the health services which impacted on the sense of empowerment among nurses. Many historical issues such as hierarchical management structures
and traditional systems of nursing education led to a sense of dissatisfaction and frustration within the profession. This culminated in a national strike and a series of Labour Court judgments between 1997 and 2000. Section 7 of the Labour Court Recommendation (LCR) of 31 August 1999 pointed to the need to empower the nursing resource.

The court is aware of the considerable discontent and low morale in the profession due to the perception that nurses lack any real medical involvement or recognition and appreciation from their superiors, including some doctors and consultants (LCR, 16261).

The Labour Court subsequently recommended the establishment of the high-level Steering Group to devise an agenda for change to involve nurses at all levels in a meaningful way in the running of their healthcare institution (LCR, 16330). This Steering Group was established by the Minister for Health and Children in March 2000.

It became evident that the term empowerment could not be defined in a single way – the context in which the term is used clarifies its meaning. Empowerment is an abstract idea, which can be conceptualised as either a process or an outcome. Hence, the Meaning of Empowerment Sub-Group was established specifically to determine what nurses and midwives in Ireland understood by the term.

**Key activities and outcomes**

**Presentations/liaisons**

During its term the Sub-group met with/presented its activities to the following.
- Band three Directors of Nursing Group
- Catherine Elcoats, Deputy Chief of Clinical Governance in the National Health Service, UK
- Diploma Student Nurses, James Connolly Memorial Hospital, Blanchardstown, Dublin
- Directors of Nursing, South Eastern Health Board
- ENTRUST – Irish Clinical Nurse Managers, Annual Conference
- Irish Association of Directors of Nursing and Midwifery
- National Nursing and Midwifery Conference, Trinity College, Dublin
- Nurse Advisers, Department of Health and Children
- Nursing staff of the Mid-Western Health Board
- Psychiatric Nurses Association, Annual Conference
- Irish Nurse Practice Development Association

A multidimensional approach was adopted comprising a review of the literature, the commissioning of a national research study and a compilation of exemplars of existing best practice.

**Literature review**

The Meaning of Empowerment Sub-group commenced its work by exploring the meaning of the term empowerment as it pertained to nursing and midwifery. Sub-group members Ann Judge, Maureen Flynn and Siobhán O’Halloran reviewed the literature and examined best practice to
facilitate this explorative process by drawing on the work of international theorists and contemporary policy makers. While the Sub-group recognised that the *Report of the Commission on Nursing* (1998) was a key policy document, a dearth of specific literature on empowerment from an Irish perspective was reported. Following this initial exploration the Sub-group recommended that national research should be undertaken in the area of nursing and midwifery empowerment.

National research study

The Meaning of Empowerment Sub-group drafted the terms of reference for the national research study, and the intention was that the study would be commissioned by the Steering Group through the Health Research Board in order to

- explore the meaning of empowerment from the perspective of nurses and midwives
- identify nurses’ and midwives’ experience of empowerment
- identify factors which enhance nurses’ and midwives’ experience of empowerment
- identify factors which inhibit nurses’ and midwives’ experience of empowerment
- identify further opportunities for enabling the empowerment of nurses and midwives.

The selection process was chaired by the Health Research Board. A research team in the School of Nursing at Dublin City University, headed by Professor P. A. Scott, was awarded the research contract in March 2001. The study commenced in April 2001. The Meaning of Empowerment Sub-group monitored the progress of the study, including timely delivery of the agreed interim reports. The Sub-group also made regular presentations to the Steering Group on the progress of the research study. Siobhán O’Halloran acted as liaison between the Sub-group and the research team.

The national research study was carried out in three phases.

- **Phase 1.** Focus group discussions were arranged to elicit nurses’ and midwives’ views, understanding and experience of empowerment. An in-depth literature review was also undertaken.

- **Phase 2.** A national survey of nurses and midwives was carried out, which focused on nurses’ and midwives’ understanding and experiences of empowerment. This was undertaken to test the findings of the focus group discussions.

- **Phase 3.** The final report was completed in November 2002 and presented to the Steering Group. It was entitled *Nurses’ and Midwives’ Understanding and Experiences of Empowerment in Ireland.*

The research pointed to the complexity of the issues surrounding nurses’ and midwives’ understanding and experiences of empowerment. Themes such as interpersonal relations, professional issues, management and organisational factors, and the historical legacy emerged. So did the need for an enabling environment that could foster professional supports, recognise the evolving role of nurses and midwives within the health services, promote role clarity and cultivate patient/client advocacy and empowerment. In relation to professional preparedness – respondents perceived education, skills, knowledge of scope of practice and self-confidence as factors enhancing empowerment.
One of the most important points made in the research study was that an empowered nursing and midwifery workforce would contribute to the realisation of the vision of the Irish health strategy as published in *Quality and Fairness: A Health System for You* (2001). This strategy aims for the creation of an ‘empowered community receiving quality healthcare delivered by a highly committed and skilled workforce’. An empowered nursing and midwifery profession would also support the actions outlined in *Action Plan for People Management* (2002).

**Exploration of existing best practice**
In tandem with the national research study the Sub-group embarked on a process of identifying and highlighting existing good practice exemplars in terms of empowerment. Nursing practice development co-ordinators were identified as a key reference group to identify good practice exemplars. Two facilitated workshops were held with members of the national group. It soon became apparent that a wealth of examples already existed in Irish settings but few were documented. It was therefore considered important to make visible such exemplars.

A working definition of empowerment and a means of collecting the necessary data were agreed. In addition, criteria for the selection of exemplars of best practice suitable for publication were drawn up.

**Exemplars**
In October 2001 a ‘Call for Submissions’ and a ‘Protocol for Submission’ were sent to all directors of nursing/equivalent nursing management grades inviting submissions with a view to collating and publishing a booklet capturing exemplars of nursing/midwifery-led innovations to illustrate empowered practice in the Irish health services. One hundred and sixty-three submissions were received.

The next phase in the process was to enlist the skills of Dr Sheila Wright in her capacity as temporary Nursing Adviser to the Health Research Board. Her role was to evaluate all the submissions on the basis of their relevance to the criteria drawn up by the Meaning of Empowerment Sub-group. The major criterion for selection was clarity of description, demonstrating that the action taken had a definite aim, clearly stated, and had resulted in well defined outcomes that produced evidence/experience-based examples of empowerment.

The submissions included in the final selection for publication showed clear evidence of cooperation between nurses and midwives, and in some cases between nurses and other health professionals, in planning and carrying out initiatives. Those exemplars selected demonstrated a clear purpose, effectiveness in executing plans and success in evaluating outcomes. They comprised experiences which had implications for all team members, both in terms of job satisfaction and in personal development. Consideration was also given to terms used in the submissions. References to communication, collaboration, change, innovation, safety, cooperation, job satisfaction and quality were considered when scoring, as were allusions to assessment, support, patient-centered care, compliance and patient outcome.

relevant and effective interventions outlined in the submissions. 
All 163 submissions demonstrated elements of empowerment but ultimately it was agreed that forty-three would be published. These are representative of a diverse range of patient/client groups, the divisions of the Register of Nurses, geographical spread and different age categories.

The last stage in the process focused on ensuring uniformity in approach. To this end, the Centre for the Development of Nursing Policy and Practice, University of Leeds, was commissioned to compile and edit the empowerment exemplars using a narrative format. A wide range of practice was evident in the forty-three exemplars and from them it was clearly evident that empowerment was exercised through work in several important areas:

- empowerment of patients
- staff development
- nurse-led services
- practice development
- clinical quality improvement
- research and investigation.

In the publication *A Collection of Exemplars Illustrating Empowerment of Nurses and Midwives: Empowerment Narratives (2003)* each exemplar is presented in two parts. The first part describes the intent of the project or story, contains extracts illustrating some of the lessons learnt and comments on the empowerment embedded in the exemplar. The second part describes the projects themselves and provides contact details for the project leaders. This collection will give nurses and midwives a resource of ideas and experiences that will inspire their efforts to empower themselves and their patients.

Lessons learned
In addition to acknowledging the recommendations offered in the national research report by the DCU researchers, the Sub-group wishes to point to the following lessons learned in the process of its own work:

- it was important not to presume to know and understand the meaning of a concept from the perspective of others
- there was substantial benefit derived from commissioning an independent national (large scale) study on the empowerment of nurses and midwives
- it was advantageous to have current research on empowerment specific to the Irish context as a baseline for future research and development
- the collaboration between the committed research team and the knowledge and experience of the Sub-group members proved effective in developing a research process which is capable of informing policy developments
- the support of the Department of Health and Children and the willingness to commit resources to research were effective in advancing the agenda for change.

In conclusion, research undertaken from the Irish perspective has offered unique insights into the meaning of empowerment for nurses and midwives in Ireland. A commitment to continued investigation of the understanding of empowerment and its application is vital.
Recommendations

The Meaning of Empowerment Sub-group recommends that

- there should be continued dissemination and development of best practice in relation to empowerment with particular reference to the report *Nurses’ and Midwives’ Understanding and Experiences of Empowerment in Ireland* (2003)

- a follow-up study on the meaning of empowerment should be carried out after an agreed interval accompanied by wide dissemination of best practices and learning

- innovation in the implementation of best practice in nursing and midwifery should be recognised, encouraged and given adequate resources.
Appendix B

Final Report of the Management Development Sub-group

Introduction
The Management Development Sub-group was established to explore ways by which nurses and midwives could be further empowered through management and personal development.

The Sub-group met on twenty-eight occasions. Consultations took place with the following groups during the lifetime of the Sub-group.

- Representatives of Bands one to five, directors of nursing/equivalent nursing management grades
- Representatives from Saville and Holdsworth Ireland Ltd, and the Marketing Department, The Michael Smurfit Graduate School of Business, University College Dublin
- Prospective providers who had tendered for the various management development programmes for the diagnostic workshops for directors of nursing/equivalent nursing management grades
- Centre for the Development of Nursing Policy and Practice, University of Leeds, UK
- Centre for Creative Healthcare Management, Minneapolis, USA
- NHS National Nursing Leadership Programme, UK.
- Chief Nursing Officer, Department of Health and Children
- Representatives of the Irish Nurse Practice Development Association

Membership

- Ann Judge, Management and Organisation Development Specialist, Office for Health Management
- Annette Kennedy, Director of Professional Development, Irish Nurses Organisation
- Tim Kennelly, Chief Executive, St John’s Hospital, Limerick
- Geraldine Murray, Divisional Nurse Manager, Galway Regional Hospitals
- Alan Smith, General Manager, Office for Health Management
- Geraldine McGrath (Secretary), Assistant Human Resources Manager, St John’s Hospital, Limerick

Terms of Reference
The Sub-group’s agreed purpose was to explore ways in which nurses and midwives could be further empowered through management and personal development.
Objectives
The objective of the Sub-group was to commission and pilot management development initiatives and programmes that could make a significant contribution in empowering nurses and midwives to become more involved in the management of their services.

Context for the Sub-group activities
In order to comprehensively address the management development needs of nurses and midwives, the Sub-group’s approach to organisational change and organisational development was based on systems thinking and focused on outcomes. In particular, this meant that the management development initiatives had to be supported from the top. The emphasis on systematic change and continuous improvement incorporated action research so that learning took place as the programmes unfolded. This learning in turn was used to inform the next steps and so on. The Sub-group felt that the process had to be structured and planned and that an attempt at a quick fix solution was not the approach to adopt. The value and inter-dependency of people in professional team working was very much at the core of the approach, as were the overall service objectives of health services.

From the outset, the Sub-group actively pursued its task of exploring ways in which nurses and midwives could be further empowered through management and personal development. Prior to the Sub-group being established, the Office for Health Management had commenced a process of seeking tenders for the provision of management development programmes for CNM2s, CNM3s and middle nurse managers. In addition, the Office for Health Management had commissioned a study on the competencies required for all levels of nursing managers, which resulted in the publication of the report entitled *Report on Nursing Management Competencies* (2000). The Sub-group requested those who had submitted tenders for the management development programmes to re-submit their proposals reflecting the outcome of the competency study. It also decided that the *Report on Nursing Management Competencies* would inform and be a central focus of all its activities.

During the course of the Sub-group’s work *Action Plan for People Management in the Health Services* (2002) was published and due regard has been given for relevant themes outlined in that publication.

Key activities and outcomes
Management development programmes for CNM2s, CNM3s and middle nurse managers
The first pilot of the management development programmes for CNM2s, CNM3s and middle nurse managers commenced in November 2000 and concluded in June 2001. The Sub-group engaged two separate provider groups, SectorWide Europe Ltd and a consortium of The Institute of Public Administration (IPA), University of Leeds, University of York and University College Cork (UCC) to deliver the first set of pilot programmes. Parallel to the delivery of these programmes, a comprehensive and independent external evaluation was commissioned. Based on the findings of this evaluation and on the other learning points gleaned from the commissioning, planning and
delivery of the programmes, a detailed training/development specification was devised for the commissioning of a second pilot of these programmes prior to a final decision to recommend the programmes to the management in the health system for delivery by health agencies on an individual or conjoint basis.

Proposals for the second delivery of management development programmes were sought in mid-2001. As in the case of the first pilot, nominations were sought on a discipline-wide national basis, the aim of which was to ensure representative participation of all nurses across all disciplines. During October 2001 approximately 120 nursing and midwifery managers were offered places, and the programmes commenced in November 2001. The providers were a consortium of The Institute of Public Administration (IPA), University of Leeds, University of York and University College Cork (UCC). A further independent external evaluation was carried out at the end of the second set of pilot programmes which concluded in April 2002.

Particular emphasis was placed on the development programmes in respect of CNM2s, to reflect the development of their roles in recent years, focusing on the quality of patient care and their role in empowering staff at front-line management level. A total of 108 CNM2s completed the pilot management development programmes, 48 on the first pilot and 60 on the second pilot.

An important feature of the pilot management development programmes was that a member of the Sub-group visited and developed links with each cohort participating in the programmes. The participants indicated that they found the visits to be both supportive and helpful to them. The Sub-group also found this ongoing liaison/contact to be very beneficial and learning points were noted on an ongoing basis which helped to further refine the planning and content of subsequent delivery of the programmes.

Programme evaluations
The comprehensive evaluation of the first pilot programmes by SHL Ireland Ltd., produced a number of recommendations and these were incorporated into the second set of pilot programmes. In the interest of best practice, as well as in response to the comments received from participants, it was decided to undertake a short independent evaluation of the second set of programmes and, to this end, the UCD Marketing Development Department at The Michael Smurfit Graduate School of Business in UCD was commissioned to conduct the review. The findings confirmed the positive responses which the Sub-group members had received when attending sessions of the programmes. Following the delivery of the two sets of pilot programmes and separate evaluations, the Sub-group was satisfied that the content of the programmes was appropriate and sufficiently robust to recommend to the system for delivery by health agencies on an independent or conjoint basis.

Sharing best practice and supporting employers
Based on the independent evaluations and ongoing review by the Sub-group, detailed guidelines to help employers in the future in the commissioning of programmes for CNM2s and middle nurse managers were developed and issued to the system in June 2002 (Guidance on the Commissioning of Nursing Management Development Programmes for Front-Line and Middle-Level Nurse Managers). This document is available at www.officeforhealthmanagement.ie
The Sub-group is confident that these guidelines will equip employers with the necessary information and advice for commissioning quality management development programmes for front-line and middle-level nurse managers at a local level. Because the majority of CNM3s were included in the two pilot programmes, the Sub-group decided that future programmes for this grade should be commissioned at a national level as the need arises to ensure maximum cost effectiveness and efficiency in the approach adopted.

Pilot clinical leadership development programmes for CNM1s
The Sub-group entered into discussions with a number of agencies which had already embarked on, or had planned the delivery of management development programmes for CNM1s in their respective health board areas. The Sub-group recognised that individual health agencies were already providing management development programmes for CNM1s. The content and duration of these programmes varied and the Sub-group felt that while this diversity would be a feature of management development programmes for CNM1s on an ongoing basis, it would be beneficial to have a common core element in such programmes.

The LEO (Leading an Empowered Organisation) programme is widely recognised in the UK and USA for its quality and relevance in the development of nurse managers. Accordingly, the Sub-group agreed to co-fund the piloting of the LEO Programme, and this was facilitated by the Centre for Nursing Policy and Practice, University of Leeds, in the North Western Health Board, the Southern Health Board and the Western Health Board to assess its appropriateness and robustness as a core module in all CNM1 management development programmes. An overall evaluation was conducted at the programme’s conclusion and subsequently three months later with an evaluation tool designed to reflect the nursing management competencies for front-line nursing managers. The main findings in the Report on an Evaluation Study of the Leading an Empowered Organisation (LEO) Programme for CNM1s (2003), available at www.officeforhealthmanagement.ie, suggests that LEO fulfils its primary intent of serving as a vehicle for personal development of individual skills in empowering and leading others. However, it is not a substitute for a broad-based programme of management skill needed to develop the nursing management competencies identified for this level of nurse/midwife manager but it may be considered as a possible core element of such a broad-based programme.

Meeting the development needs of directors of nursing/equivalent nursing management grades
The overall vision of the Sub-group was the formulation of a development framework that would offer a seamless management development pathway from front-line to top-level nursing and midwifery management. To realise this vision, the Sub-group recognised that senior-level nursing and midwifery management represented an important group in the agenda for change. Hence a process for assessing the personal, management and leadership development needs of this top/senior-level group of nurse and midwife managers began.

As an initial step the Sub-group met with representatives of each band of directors of nursing/equivalent nursing management grades. A consensus emerged that a facilitated Diagnostic Exercise in workshop format for each band of directors of nursing/equivalent nursing management grades would be a key element in assessing their ongoing personal, management and leadership development needs.
The Sub-group invited prospective providers to submit proposals for the diagnostic exercise. The King’s Fund, London, was awarded the contract and the workshops were carried out during the period October 2002 to March 2003. A comprehensive report entitled *Report on the Diagnostic Exercise for Directors of Nursing/Equivalent Nursing Management Grades* was published in August 2003 and is available at www.officeforhealthmanagement.ie.

In general, the report identified a ‘Menu of Options’ approach for addressing the ongoing personal, management and leadership development needs of top-level nursing and midwifery managers within the multidisciplinary team. When making decisions about appropriate development interventions and in keeping with best practice, directors of nursing/equivalent nursing grades should explore such options with their line managers/employers.

Based on the overall analysis of the findings in this report an introductory module entitled ‘Understanding and Managing Self’ was delivered at the end of 2003. An independent evaluation concluded in March 2004.

**Benchmarking nursing leadership and management development initiatives internationally**

The Sub-group’s strategy and methodology for personal and management development for nurses and midwives in Ireland was benchmarked against experiences internationally. A high level of confidence in good practice can be attributed to the approach adopted and is validated by comments received in response to the request for international scrutiny.

These confirm the Sub-group’s belief that the strategy and methodology it has embraced during its lifetime is consistent with good practice in other countries, and will help to significantly advance the personal and management development agenda for all nursing and midwifery managers in Ireland.

In conclusion, the Sub-group has outlined a vision for a development pathway from front-line to top-level nursing management and has set up development interventions and programmes that can realise that vision. Ultimately though, the Sub-group’s aim is to empower nurses and midwives to own the personal, management and leadership development agenda themselves, and to do this in conjunction with their employers locally.
Recommendations

The Management Development Sub-group recommends that

• personal and management development for all nurse and midwife managers should be informed by the following three publications:

  Guidance on the Commissioning of Nursing Management Development Programmes for Front-Line and Middle-Level Nurse Managers (June 2002)


• all nurse and midwife managers when making decisions about appropriate development interventions should explore such options with their line managers/employers

• nursing and midwifery planning and development units should have responsibility for carrying forward the work commenced by the Management Development Sub-group. Specifically, in relation to CNM3s and directors of nursing/equivalent nursing management grades further management development programmes for CNM3s and modules entitled ‘Understanding and Managing Self’ for directors of nursing/equivalent nursing management grades should be commissioned on a national basis through the nursing and midwifery planning and development units in consultation with the Office for Health Management as the need arises, to ensure maximum cost effectiveness and efficiency

• The dedication of funds to the provision of further personal and management development interventions and programmes should be placed with the nursing and midwifery planning and development units.
Appendix C

Final Report of the Service Planning Sub-group

Introduction
The Service Planning Sub-group was formed to explore ways in which nurses and midwives could be further involved in the service planning process. It met for the first time on 23 May 2000 and met eleven times in total.

Membership
- Jenny Hogan, Professional Development Officer, National Council for the Professional Development of Nursing and Midwifery
- Bridget Howley, General Manager, Galway Regional Hospitals
- Martin McDonald, Assistant CEO, Health Service Employers Agency
- Gerry Reynolds, Clinical Nurse Manager 3, Professional Advisory Group, SIPTU
- Pat Harvey, CEO, North Western Health Board (until January ’03)
- Pat Lyons, former CEO, Beaumont Hospital (until July ’02)
- Maureen Flynn, Divisional Nurse Manager, St Vincents University Hospital (until March ’01)
- J. Bernard Walsh, Consultant Physician, Robert Mayne Day Hospital and St James Hospital, Dublin

Co-opted members
- Hazel Daniels, Director of Nursing, Waterford Regional Hospital
- Helen Rouine, Public Health Nurse, Limerick, Irish Nurses Organisation
- Bernie Lynch, Ward Sister, Beaumont Hospital, Irish Nurses Organisation

Terms of reference
The group’s terms of reference were agreed as follows.

To devise a system and strategy which will further develop and expand the meaningful involvement of nurses and midwives at all levels in the service planning process. As part of this strategy

- to clarify the concept of service planning and to effectively communicate this concept to nurses and midwives
- to develop ways in which nurses and midwives can be more fully involved in the service planning process.
Objectives
The Sub-group recognised that it was fundamental that nurses and midwives become involved in planning for the services they provide, and that they be viewed as legitimate stakeholders in the organisation. A mixture of managerial and clinical perspectives is a vital ingredient for success in developing a shared vision of services.

The objectives of the group were to

- agree operational definitions for key concepts used in service planning
- clarify current practice in respect of the level of involvement of nurses and midwives in the planning process
- articulate a vision for the future involvement for nurses and midwives in service planning
- consider service planning in different settings such as health boards, the voluntary sector, primary and secondary care facilities
- develop a strategic approach to increasing the involvement of nurses and midwives in service planning.

Context for the Sub-group activities
Under the provisions of Section 6 of the Health Amendment Act 1996 health boards are required within forty-two days of the receipt of their (financial) determination, to adopt and submit a service plan to the minister. The service plan must contain a programme/care group-based presentation of the board’s services. As part of the process each organisation also produces more detailed operational plans which do not form part of the formal service plan submitted to the minister.

Service planning is at present an annual process which involves the identification across the service of key priorities for the year, balancing what needs to be done with what can realistically be achieved within available resources. Because of differences in structure, systems and size between health agencies, there is some variation in the way the service planning process is undertaken. In order to produce a well-considered and appropriate service plan to the minister the process of service planning needs to become a continuing process throughout the year.

Since the Sub-group began its work, several important policy documents have been published that further support the need to emphasise service planning as a vital activity. Quality and Fairness: A Health System for You (2001) which defines the national health strategy provides as follows.

Accountability will be strengthened through further development of the Service Planning process. Health Boards will be responsible for driving change including a stronger focus on accountability linked to service plans, outputs and quality standards. As a result there will be an increased link between service planning and service provision. Steps are underway to move from annual to multi-annual budgeting and planning.

The National Partnership Agreement 2003-05, Sustaining Progress, outlines the plans for an integrated performance management approach across the health service. This document specifically recognises service planning as an integral part of the performance management model.
The model (of performance management) should encompass the integration of service planning, human resource planning and organisational goals with personal development (e.g. the roll out of competency frameworks, the provision of appropriate resources and personal development planning) leading directly to improved services to customers and the public.

The Sub-group noted that the *Partnership Action Plan 2002-05* provides for a continued priority focus on the issue of the engagement of staff in the service planning process.

**Key activities and outcomes**

**Educational video**

One of the objectives of the Sub-group was to clarify the concept of service planning in the context of the health service. Since the intention of service planning is to balance the priorities of patient care with the available resources, many factors must be considered. The social, political and financial contexts affect the professional and scientific provision of care. Thus, the concept of service planning was identified as encompassing all aspects of planning – services, budgets, human resources, equipment, maintenance and development.

The Sub-group recognised that because of the complexity of the issues related to service planning, achievement of the Sub-group objectives would require concerted action over a period of years. One of the first priorities was to ensure that those who needed to be involved in service planning were adequately prepared for the task. This meant the provision of information on the process of service planning within the health services. It also involved the engagement of nurses and midwives in the process through demonstrating the importance of the contribution of clinical professionals, and the potential benefits to patient care. It was decided to produce a video about service planning that would help to inform nurses and midwives about the process, and to motivate them to participate. The video would ideally begin the process of preparing nurses and midwives for effective involvement in service planning by highlighting the skills and knowledge needed.

The purpose of the video was therefore to educate and motivate nurses and midwives to become more involved in service planning. Specifically the goals of the video were

- to underscore the high value placed on the contribution of nurses and midwives to the planning and delivery of quality healthcare
- to highlight the significant role nurses and midwives need to play at all stages in the service planning process, from estimating and planning through implementation, service delivery, monitoring and audit
- to emphasise the need for a multidisciplinary approach to service planning and implementation, where information sharing and feedback are the norm
- to provide practical information on service planning such as
  - key features of service plans
  - who to involve in the process
  - stages in the process, including formulation of operational plans
  - how best to approach the different stages
  - how to encourage involvement in the process at all stages
to fit in with other educational/training components that may be developed on service planning.

The video was commissioned by the Health Service Employers Agency in association with the Institute of Public Administration and features staff working in various services in Galway, Monaghan, Waterford, Drogheda and Dublin. It was considered important that in addition to front-line nurses and midwives, leading representatives of management and the nursing unions should be featured in the production. This collection of individuals had the practical experience of successful involvement of service planning as well as a grasp of the policy context and credibility to engage the nurses and midwives viewing the video.

The video was released in 2002 and was widely circulated across the health service. It is reported to have been used in various management development programmes including by nurses and midwives participating in the management development programme for nurses in the CNM 2 role commissioned by the Management Development Sub-group of the Empowerment of Nurses and Midwives Steering Group – An Agenda for Change. Feedback on the video has been positive, and generally affirms the achievement of the intended goals.

Guidelines for training and briefing

The Sub-group, having recognised the requirement for additional support materials to be used in the preparation of nurses and midwives to effectively contribute to the service planning process, developed and published a booklet entitled Service Planning in Action: Guidelines for Facilitating Training and Briefing Sessions.

This booklet was compiled to support people who are facilitating training and briefing sessions on service planning to

- provide information on the context within which the service planning process is conducted
- create an awareness and understanding of the content and process of service planning
- emphasise the key role that nurses and midwives can play in the service planning process
- elicit commitment for the process and underline the value of participation for the patient, the profession, and the organisation
- deliver an effective experience to participants.

This guide is intended to be used by experienced facilitators to ensure that the key elements of educating nurses and midwives about service planning are included. The guidelines have been widely used and have prompted positive feedback.

Service planning is a priority for the health services so that it can deliver effective and accountable patient care. As a relatively new systematic process in the Irish health service, learning needs to be undertaken by many individuals. Initially the purview of management, it is now recognised that in order for healthcare provision to be truly responsive to patient need, clinical as well as managerial perspectives must be valued. Effective service planning requires skill in communication, analysis and prioritisation, as well as knowledge of patient care. Nurses and midwives are ideally suited to provide the knowledge of patient care and to utilise their skills of planning to ensure good decisions are made. While service planning is moving toward a multidisciplinary focus, the Sub-group considers that it remains important at this juncture to continue to encourage, support
and facilitate nurses and midwives in all dimensions of service planning. In making its recommendations the Sub-group recognises that notwithstanding the availability of corporate handbooks on the service planning process, educational support tools and video, and e-learning initiatives, widespread accessing of information on service planning by nurses and midwives remains problematic. Effective communications is central to the achievement of multidisciplinary service planning.

**Recommendations**

The Service Planning Sub-group recommends that

- the Health Service recognises the need for continued emphasis on service planning as a key skill area for nurses and midwives

- Nurses and midwives must be fully involved in service planning because of their pivotal role in the delivery of patient-centred care

- the evolution of service planning becomes a true multi-disciplinary activity

- full transparency and feedback must be an essential part of the service planning process

- local responsibility for continuing to prepare and engage nurses and midwives in service planning is placed with the nursing and midwifery planning and development units in collaboration with the local provider organisations and in accordance with their service planning processes

- the role of nurse managers at all levels continues to be developed to include the skills and knowledge needed for service planning through continuing education and management development. The inclusion of service planning as an element of undergraduate and postgraduate education for nurses and midwives is supported

- nursing and midwifery planning and development units should conduct periodic assessments of the nature and depth of involvement of nurses and midwives in the service planning process to inform further strategies for involvement and engagement

- organisations should provide suitable resources to support the development and involvement of managers and staff in service planning. Particularly useful has been the provision of a resource person within organisations to support the development of service planning effectiveness. Further copies of the video and the booklet *Service Planning in Action* should be widely circulated.
A Collection of Exemplars Illustrating Empowerment of Nurses and Midwives: Empowerment Narratives (2003), Dublin: Department of Health and Children


Buchan, J. (1999), ‘Magnetism in the NHS: forces of attraction’, Employing Nurses and Midwives, 8-9

Buchan, J. (1999), ‘Magnet and beacons for attracting nurses’, Employing Nurses and Midwives, 10-11


CPMR Discussion Paper 13, Service Planning in the Health Sector (www.irlgov/cpmr)


Evaluation Report of the Nursing Management Development Second Pilot Programmes, Smurfit Business College


Health (Amendment) Act (1996), Dublin: Stationery Office


Nurses’ and Midwives’ Understanding and Experiences of Empowerment in Ireland (2003), Dublin; Department of Health and Children


Recommendation No. LCR 16330 (1999), 27 October, Dublin: The Labour Court

Recommendation No. LCR 16261 (1999), 31 August, Dublin: The Labour Court


Scope of Practice for Nurses and Midwives (2000), Dublin: An Bord Altranais


