STRATEGY FOR THE OFFICE OF THE CHIEF NURSING OFFICER
2015-2017
The Irish health service has seen many challenges in recent years. It will continue to face challenges, so it is essential that nurses and midwives are supported by tangible and effective change like the appointment of the first Chief Nursing Officer (CNO) at the level of Assistant Secretary. This Government is committed to delivering sustainable and high quality health services through its programme of health service reform. Nurses and midwives, as the largest group of healthcare professionals in Ireland, are central to this reform process. They have a close relationship with health service users and are, therefore, uniquely placed to assess their needs. In addition, they interact with health service users at all stages of their lives and they promote health as well as providing care to the sick. It is vital, therefore, that their point of view is fully reflected in the development of future health policy.

Our well-educated, highly skilled and experienced nurses and midwives are a valuable resource to our health service. We must ensure that this resource is fully utilised and appropriately applied to optimise outcomes and impact. One of our challenges lies in building the confidence of each nurse and midwife to develop additional competencies and embrace new ways of working and innovative methods of service delivery.

The Office of the CNO has identified four strategic objectives, to be achieved by the end of 2017, which will optimise the roles of nurses and midwives and their contribution to the health service. Ultimately, this will help ensure that health service users receive the best care possible.

The publication of this Strategy represents the first step in the implementation of a suite of actions that will empower nurses and midwives as they continue to make a difference at the point at which the service user interacts with them.

Leo Varadkar TD
Minister for Health
I am pleased to introduce this first three-year Strategy for the Office of the CNO.

No one can deny that the last few years have been challenging for the health service and, in particular, for nurses and midwives. The challenges we continue to face include ensuring that a nursing and midwifery perspective is brought to bear on policy development; that nurses and midwives input to the development of health services; that nurses and midwives have the flexibility to cope with the demands of the health service and its users; and that the skills and experience of nurses and midwives are utilised to their full extent.

I believe it is vital that we now focus on the future and how we can improve the health service, for service users, through the work of nurses and midwives. The establishment of the Office of the CNO, as a Division of the Department of Health, is a great opportunity to shape nursing and midwifery policy around the needs of the health service.

The Office of the CNO cannot make the improvements it believes are necessary without a plan to implement and monitor specific relevant actions. This Strategy sets out these actions.

I am confident that by implementing this Strategy, the Office of the CNO will realise its vision of a future where the contribution of nurses and midwives to the achievement of national public health goals, in partnership with other health and social care professionals, is optimised through nursing and midwifery policy.

I look forward to working with all of our partners and stakeholders to achieve this aim.

Dr Siobhan O’Halloran
Chief Nursing Officer
Department of Health
In 2013, the Department of Health elevated the post of CNO to Assistant Secretary level. This was done to ensure that a nursing and midwifery perspective is brought to bear on the development of policy within the Department.

The Office of the CNO plays an important strategic and leadership role and provides professional policy direction and evidence based advice in relation to nursing and midwifery. The Office is built on a partnership model, with clinicians and civil servants working together to develop policy. The CNO is supported by specialist nursing and midwifery expertise from three Deputy CNOs. The three general areas for which the Deputy CNOs currently have respective responsibility are (i) Women's Health, Child Health and Welfare, and Primary Care Services; (ii) Nursing and Midwifery Policy and Legislation; and (iii) Clinical Governance and Practice.

The Department of Health is responsible for policy development and the Health Service Executive (HSE) is responsible for policy implementation and service delivery. Over time, the Office of the CNO, in partnership with the Office of the Nursing and Midwifery Services Director in the HSE, will develop a clinical innovation and integration portfolio intended to enhance scopes of practice, promote inter-disciplinary care and assist in the redesign of clinical services.

The current organisational structure of the Office is set out below.
1. STRATEGY FOR THE OFFICE OF THE CHIEF NURSING OFFICER

1.1 The purpose of this Strategy is to set a clear direction for the development of the Office of the CNO in response to the following specific strategic challenges:

- ensuring that the perspective of the nursing and midwifery professions is brought to bear on policy development;
- ensuring that the nursing and midwifery professions are as flexible as possible to cope with the ever changing health service and increased demands of health service users;
- ensuring that the professional skills and experience of nurses and midwives are utilised to their full extent; and
- ensuring that the input of the nursing and midwifery professions is taken into account in the development of health services.

1.2 These challenges will be addressed by the Office of the CNO through its four strategic objectives set out in section 5.

1.3 In addition, there are global challenges such as the shortage of nurses and midwives, the ageing nursing and midwifery workforce, and the optimisation of integrated working between nurses and midwives and other health and social care professionals.

1.4 The establishment of the Office of the CNO also presents strategic opportunities. The Office’s position at the intersection of Government, health service users and other partners and stakeholders means that it is uniquely placed to maximise nursing and midwifery policy development and implementation for the benefit of health service users.
1.5 Nurses and midwives are critical to the health service. The International Council of Nurses 2015 publication, *Nurses: A Force for Change: Care Effective, Cost Effective*, sums up the importance of nurses and midwives as follows:

“Because of their close interaction with patients/clients and their families in all settings, nurses help interpret people’s needs and expectations for health care. They are involved in decision-making at clinical practice level as well as in management. They use the results of research and trials to contribute to decisions on quality, cost-effective health care delivery. They conduct nursing and health research that contributes evidence to policy development. Because nurses are often coordinators of care provided by others, they contribute their knowledge and experience to strategic planning and the efficient utilisation of resources”.

1.6 The following figure shows the position of this Strategy in the context of overall policy:

1.7 A change programme for the Department of Health, entitled ‘Working Better Together’, has recently commenced. It is designed to deliver new, more effective ways of working and will inform the work of the Office of the CNO and the implementation of this Strategy.
2. VISION

The vision of the Office of the Chief Nursing Officer is a future where the contribution of nurses and midwives to the achievement of national public health goals, in partnership with other health and social care professionals, is optimised through policy development and implementation.

3. MISSION

The mission of the Office of the Chief Nursing Officer is to optimise the contribution of nursing and midwifery to health service priorities, in partnership with other health and social care professionals, and in the interests of service users, their families, and the wider community.
4. VALUES

4.1 The Office of the CNO has its own identity, purpose and values. It is, however, first and foremost an Office of the Department of Health. The Department, in turn, is part of the Civil Service. The values of the Office, therefore, are positioned within the context of the Civil Service but also reflect the uniqueness of the Office.

4.2 In 2014, the Government published the Civil Service Renewal Plan. The values set out in the Plan are as follows:

- a deep-rooted public service ethos of independence, integrity, impartiality, equality, fairness and respect;
- a culture of accountability, efficiency and value for money;
- the highest standards of professionalism, leadership and rigour.

4.3 The values that guide the Office of the CNO are aligned to the Civil Service values and are as follows:

<table>
<thead>
<tr>
<th>ACCOUNTABILITY</th>
<th>The Office will take responsibility for its activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>CARE</td>
<td>The Office will help to ensure that service users get the highest standard of nursing and midwifery care</td>
</tr>
<tr>
<td>COLLEGIALLY</td>
<td>The Office will work in a spirit of collaboration with stakeholders and partners</td>
</tr>
<tr>
<td>EXCELLENCE</td>
<td>The Office will maintain high standards in its activities</td>
</tr>
<tr>
<td>INTEGRITY</td>
<td>The Office will conduct its business honestly and ethically</td>
</tr>
<tr>
<td>SAFETY</td>
<td>The Office will strive to protect service users from harm within nursing and midwifery services</td>
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5. STRATEGIC OBJECTIVES

5.1 The Office of the CNO identified four strategic objectives that will be achieved by the end of 2017. The objectives are in response to specific strategic challenges and are informed by the Office’s Vision, Mission and Values.

5.2 These objectives are:

1. To provide expert policy input and direction to support government priorities and to optimise public investment in the health system;
2. To strengthen the role of nurses and midwives to optimise the scope of practice across the health service;
3. To enhance the impact\(^1\) of nurses and midwives and demonstrate this through the utilisation of robust data intelligence;
4. To enable nurses and midwives to serve as full partners in health care design and improvement by enhancing leadership, competency and opportunities.

5.3 The achievement of these objectives will help to ensure that the service user gets the best nursing and midwifery care possible.

5.4 The implementation of this Strategy is already well underway with the commencement of projects detailed in the Office’s programme of work for 2015 (each of which is linked to the Office’s strategic objectives). Although the lifetime of this Strategy is 2015–2017, its implementation will take place incrementally through the programme of work for each of the years covering the Strategy’s lifetime.

5.5 This Strategy is intended to be realistic and achievable. In keeping with this approach, it is vital that its success be monitored. This will be done by applying a project management approach to the implementation of the annual programme of work and assessing achievements at the end of 2015, 2016, and 2017, respectively. In 2016, nursing and midwifery Key Performance Indicators will be applied to measure outcomes and impacts.

5.6 The success of this Strategy will be measured, at the end of 2017, by the achievement of the four strategic objectives.

\(^1\) Impact refers to productivity, stability, capacity and capability.
6. PRIORITY ACTIONS

6.1 The priority actions of the Office of the CNO are informed by its strategic objectives. These are, and will continue to be, set out in each annual programme of work. The priority actions for 2015 are detailed below:

- A policy framework for staffing and skill mix for nursing (Phase I)
- A policy to provide direction on the future provision of nursing and midwifery services in the community to support the overall health reform programme
- A policy to provide direction on the future development of advanced and specialist nursing and midwifery practice within the context of the overall health reform programme
- A policy on key performance indicators to measure the outcome and impact of nursing and midwifery
- A position paper reaffirming the values of nursing and midwifery

6.2 The programmes of work for 2016 and 2017 will be prepared in due course and corresponding priority actions will be identified and developed at the end of 2015 and 2016, respectively.

7. STRATEGIC ENABLERS

7.1 The development of the Office of the Chief Nursing Officer must take place in a structured way to ensure that its objectives are achieved. The Office will be:

- **PERSON-CENTRED**: The ultimate aim of the Office is to best serve the service user
- **INNOVATIVE**: Confident to try new methods of working
- **FORWARD-THINKING**: Future-proofing the roles of nursing and midwifery to optimise impact for service users
- **OUTWARD-LOOKING**: Forging international connections to inform best-practice in nursing and midwifery
- **COLLABORATIVE**: Fostering productive relations with stakeholders and partners

7.2 In summary, we will utilise the expertise and experience of a network of stakeholders and partners to help shape and develop the roles of nurses and midwives to best meet the needs of the health service user. This will be done in the most efficient and effective way possible.
8. STAKEHOLDERS AND PARTNERS

8.1 Commensurate with the complexity of the Health Service, the Office of the CNO has a wide variety of stakeholders and partners. Obviously, the health service user is the ultimate focus of all of the activities of the Office but it would be very difficult to achieve the aims of the Office without the input of other stakeholders and partners.

8.2 The Office of the CNO lies at the intersection between health service users (patient advocacy groups, the public), Government (Minister, Minister of State, Department of Health, other Government Departments, etc.) and stakeholders and partners (Office of the Director of Nursing and Midwifery Services (HSE), HSE, Regulatory Bodies, Trade Unions, Staff Associations, Special Interest Groups, Representative Groups, Academic Partners, Nurses and Midwives, the Media).

8.3 The effective management of the Office’s relationships with its stakeholders and partners is very important. It is critical that the Office instigates a two-way flow of information with its stakeholders and partners as they constitute a vast repository of information and expertise. Ongoing and proactive consultation will be a prominent feature of engagement with stakeholders and partners.