



Bord Altranais agus Cnáimhseachais na hÉireann

> Nursing and Midwifery Board of Ireland

Environmental Analysis to inform Statement of Strategy

2023-2025

Introduction

The Nursing and Midwifery Board of Ireland (NMBI) has developed a Statement of Strategy 2023–2025 which sets out our strategic priorities for 2023–2025.

The Statement of Strategy was informed by an environmental analysis and extensive stakeholder engagement. This document sets out the organisational and environmental considerations which informed the strategy.

On 20 July 2022, we launched a public consultation seeking submissions to inform the development of the Strategy. For further details, please refer to our Statement of Strategy 2023-2025 Public Consultation Report.

Read the full Statement of Strategy 2023-2025 on www.nmbi.ie.

Environmental Analysis

What is happening in our organisation and our environment

Context setting: What our research, observations and consultation with our stakeholders has told us

NMBI's long-term strategic objectives are influenced and shaped by many factors so it is essential to explore the environment in which we currently operate to identify issues and plan how our regulatory model should respond to emerging challenges and opportunities. Through our research, analysis of our data and conversations with stakeholders, we have identified a number of key areas and issues that have shaped the strategic priorities we have identified for 2023-2025.

We are one part of a system-wide approach to public safety

NMBI works collaboratively with many different partners including the Department of Health, employers, managers, unions, educators, other regulatory bodies, representatives of people using services, and of course our registrants. We are one part of a wider environment that is focused on ensuring the safety of patients.

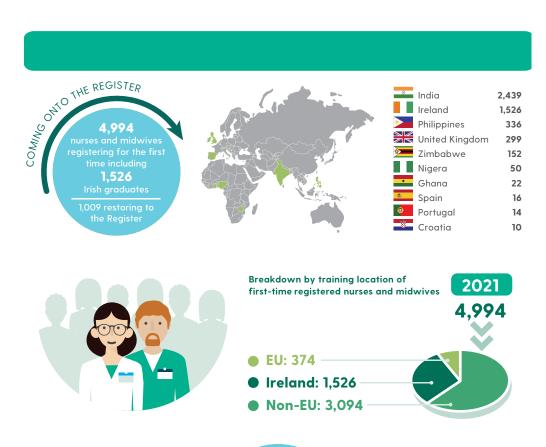
Our strategy is shaped by this and in addressing our strategic priorities we will partner to deliver on them and amplify their impact.

Diversification of nursing and midwifery talent, the service user population and care settings

Attracting, recruiting and retaining nursing and midwifery talent is critical not just to public safety but also to the wellbeing of our registrants. Lack of staff can make it difficult to practise safely and also increases burnout and attrition rates (Drennan, 2018).

In 2020, the European Commission estimated a shortfall of around 1 million health workers within the EU. The Department of Health has highlighted that emerging and accelerating global and regional shortages of healthcare professionals present a significant strategic risk to the effective functioning of the Irish health system. A shortfall in the health sector labour force is likely to be reflected in an increase in labour mobility and migration to meet growing demands in Ireland. In fact, we are seeing this trend rising already. The Health Service Executive (HSE) has increased strategic recruitment of internationally qualified professionals and this has been reflected in the increasing number of applications received by NMBI.

The diagram below depicts the numbers of nurses and midwives coming onto the NMBI Register in 2021. In 2021, 76% of new entrants to the NMBI Register came from abroad, with an 80:20 split non-EU to EU. Of those non-EU joiners, 90% come from India. This trend is set to continue to grow. As an agile regulator we need to respond and plan accordingly.



NMBI Register of Nurses and Midwives

All persons in Ireland who are registered to work in Ireland as a nurse or a midwife.

NMBI Register of Nurses and Midwives at end of 2021

82,208 persons

Everyone on the Register has had their nursing and/or midwifery qualification(s) recognised by NMBI

Pathways onto the Register

- a. Complete NMBI approved education programme
- b. Complete an education programme that is then recognised by NMBI
- c. Complete an education programme and a compensation measure that is approved by NMBI
- d. Other pathways to be explored and evaluated

We need to ensure that our processes are accessible to international applicants, as well as Irish applicants. We need to ensure that we make it as straightforward as possible to apply and deliver timely decisions so that we can respond to workforce needs and Ireland can remain competitive in attracting talent from overseas.

We also need to work with our partners to further develop supports to allow migrant nurses and midwives to ease their transition into Ireland and the Irish healthcare system. It is important to enable them to accelerate through the learning curve and advance in their careers.

Just as our nursing and midwifery registrant population is becoming more diverse, so too is the wider population. The most recent Census data (2022)¹ tells us there was net inward migration of more than 190,000 since the 2016 census. With diversification of the population, health professionals will be expected to be culturally competent to ensure effective support for all patients and service users.

Our registrants are also working in an increasingly wide variety of settings including acute and community settings, service user and non-service user facing roles, as well as public and private, industry, academic and corporate settings. This diversity presents exciting opportunities for registrants, as well as challenges. As the regulator, we need to ensure that our standards for education programmes, the distinctions between divisions on the Register and the guidance we provide better reflect this variety of practice settings and potential career paths.

¹ Census data (2022). Retrieved from https://www.cso.ie/en/releasesandpublications/ep/p-cpr/censusofpopulation2022-preliminaryresults/

Where our registrants are working

Leadership roles



Community



Nurse and Midwifery education



Acute hospitals



Long-term residential care facilities



GP practices



Primary care centres



Homes



Other



Independent



Academia



Industry (e.g. pharma)



Research



Health service models

Sláintecare is the Government's 10-year programme to transform our health and social care services. At its core is a community-based model of care and the strategic priority is the provision of an integrated healthcare model, with a focus on provision of early intervention and care through multidisciplinary community-based teams.² Changes in the nature and context of services will influence future skills and competences required by health professionals.³

The shift towards provision of care in the community, an increased emphasis on multidisciplinary working and shared team responsibility will likely see increased demand and evolving roles for health professionals. Professionals, including nurses and midwives, will be required to work across health and social care settings and support integrated models of care provision.⁴

The Government also has a 10-year National Maternity Strategy 'Creating A Better Future Together, 2016-2026', which maps out the future for maternity and neonatal care, to ensure that it will be safe, standardised, of high quality and offer a better experience and more choice to women and their families.

People are living longer and the needs of service users are becoming more complex (OECD, 2020). At the same time, automation and the delegation of some tasks to Health Care Assistants

(HCAs) means that a greater proportion of nursing and midwifery professionals' time is focused on meeting the ever-increasing complexity of care. As the regulator, we need to plan to support our registrants to work to the top of their license and flex their practice within their scope.

As the regulator, we will need to work with our partners to ensure that our standards for education programmes are evolving to support this new model of care. A practical example of this would be increasing community-based practice placements on the undergraduate education programmes to reflect the fact that an increasing proportion of graduates will be practising in these settings after graduation.

Crucially, this shift to a new model of care can only be enabled if professionals with the right skill, knowledge and competencies are available where and when they are needed. This requires national and local strategic workforce planning. The gathering, analysis and dissemination of data (in line with good governance and data protection to support public safety outcomes) is receiving increased attention by regulators in recognition of their role to inform strategic workforce planning.⁵ NMBI is no different and we acknowledge that we have a huge opportunity to support a well-functioning health system by sharing data appropriately to support strategic workforce planning. A practical example of this is sharing analysis of the data on our Register⁶. We can provide a view of not just numbers on divisions of the Register but also information on where they work and how many might retire in coming years, based on age profile. This information is invaluable as the health system tries to plan for and source talent.

Committee on the Future of Healthcare Sláintecare Report. Retrieved from: https://assets.gov.ie/22609/e68786c13e1b4d7daca89b495c506bb8.pdf

³ European Commission. Health workforce. Retrieved from: https://ec.europa.eu/health/workforce/overview_en

⁴ Medical Council Statement of Strategy. Retrieved from: https://www.medicalcouncil.ie/News-and-publications/Reports/Medical-Council-Statement-of-Strategy-2019-2023.pdf

Medical Workforce Intelligence Report. Retrieved from: https://www.medicalcouncil.ie/News-and-Publications/Publications/Medical-Workforce-Intelligence-Report-2018-Annual-Retention.pdf

⁶ NMBI State of the Register 2022. Retrieved from: https://www.nmbi.ie/Registration/State-of-the-Register-2022

Technology is also facilitating rapid change in healthcare models. Registrants will increasingly be required to be able to use new technologies and data in an ethical, safe and responsible manner. Increased automation means that some tasks may become redundant in time, while new areas of practice may emerge. In addition, advances in the use of assistive technology and artificial intelligence are likely to influence future health and social care provision.⁷

A Digital Roadmap for Nursing and Midwifery (2019)⁸ has been developed to facilitate national engagement on what actions need to happen for nursing and midwifery and to initiate and progress strategic and policy decisions about information and digital technology in nursing and midwifery. The development of digital health capabilities to support nurses and midwives was seen as a key enabling factor towards building a digital workplace. To address this need for the nursing and midwifery workforce, the Office of the Nursing and Midwifery Services Director (ONMSD) initiated the project to develop a Nursing and Midwifery Digital Health Capability Framework which was published in May 2022. As the regulator, we will leverage these insights to inform our education programme standards and requirements.

Expert Review Body report

In March 2022, the Minister for Health published the 'Report of the Expert Review Body on Nursing and Midwifery 2022 – A Pathway for developing and strengthening the role of the Nurse & Midwife'.

The terms of reference provided that the Expert Review Body 2022 would conduct a general review of nursing and midwifery, embracing the full spectrum of issues relating to scope and role, structure, operational flexibilities, management responsibilities, professional development and other measures designed to improve the quality and efficiency of service delivery in an integrated way.

NMBI made a detailed submission to the Expert Review Body. The final report makes 47 recommendations overall and NMBI has a named role in addressing 12 of these, in partnership with other stakeholders in the health services.

We are delighted to have had an opportunity to input to the Expert Review Body and the resulting recommendations are in line with our regulatory policies and thinking. We look forward to implementing them, in conjunction with our partners, as part of the Statement of Strategy 2023-2025. The partnership approach to implementation is crucial in that it will strengthen the impact and adoption of the recommendations. The 12 recommendations which name NMBI are listed on the following page.

Share, P. & Pender, J. Preparing for a Robot Future? Social Professions, Social Robotics and the Challenges Ahead Retrieved from https://arrow.dit.ie/ijass/vol18/iss1/4/

Office of the Nursing and Midwifery Services Director. (2019). Digital Roadmap for Nursing and Midwifery 2019 - 2024. Retrieved from https://healthservice.hse.ie/filelibrary/onmsd/digital-roadmap-for-nursing-midwifery-2019-2024.pdf

Workforce

- The HSE, Nursing and Midwifery Board of Ireland (NMBI) and higher education institutions (HEI) to review access and capacity of undergraduate education with a plan to increase undergraduate student numbers in each of the disciplines annually in line with the projected workforce demands. It is recognised that the projected increase in nursing and midwifery student numbers will require planning in relation to academic, clinical staffing and placements resources as well as infrastructural resources.
- The HSE and NMBI to develop a five-year strategy, supported by workforce intelligence data, for the retention of nurses and midwives in Ireland, with a particular focus on:
 - Early graduate and early career nurses and midwives.
 - Nurses and midwives in the last decade of their career.
 - Professional mobility.
 - Workforce stability.
- This strategy should also utilise and incorporate staff retention supports and tools such as professional development plans, performance reviews, clinical supervision, coaching, mentorship, staff wellbeing, access to continuing professional development and postgraduate education, and leadership support.

Education

- The Department of Health, Nursing and Midwifery Board of Ireland (NMBI), higher education institutions and the Health Service Executive (HSE) to review the routes of entry to undergraduate nursing and midwifery as part of increasing diversity of the nursing and midwifery workforce.
- Higher Education Institutions, in partnership with the NMBI, to introduce Graduate Entry to Nursing (GEN) and Graduate Entry to Midwifery (GEM) programmes as part of the wider future health workforce planning process.
- · Higher education institutions, the Department of Health, the HSE and the NMBI, through a highlevel working group, to review the undergraduate nursing and midwifery curricula in the context of Sláintecare, the introduction of the enhanced practice contract, and the future health needs of the population. This group should also align any revisions to the curricula to national health priorities as well as global issues (UN Sustainable Development Goals). This review should consider:
 - Leadership
 - Working within and across primary, community, and acute care settings.
 - Working effectively in interprofessional teams.
 - eHealth and technologyenhanced communication.
 - Social determinants of health.
- Advanced physical and psychological assessment and interventions.
- NMBI, higher education institutions, the HSE (including Community Health Organisations) to expand the locations for undergraduate nursing and midwifery student clinical placements, particularly in community and primary care settings. In addition, to reflect the implementation of Sláintecare in the provision of integrated care, the time allocated to community placements for nursing and midwifery students should be increased.

Education

- NMBI to review the standards and requirements for undergraduate and postgraduate level education programmes every five years to ensure that requirements are aligned with both national and global health priorities.
- NMBI to develop a plan for the undergraduate curriculum of psychiatric and intellectual disability nursing to meet European Union standards.
- Higher education institutions, in partnership with the Nursing and Midwifery Board of Ireland and the HSE, to develop and implement a variety of relevant and contemporary postgraduate education programmes in community nursing and general practice nursing.
- The Nursing and Midwifery Board of Ireland and higher education institutions to review the options for conversion programmes for registered nurses and midwives to enable them to move between the disciplines and further intraprofessional mobility.

Regulatory trends

Internationally, right-touch regulation — the concept of applying the minimum regulatory force required to achieve the desired result — is gaining traction. There is heightened awareness of the burden of regulation and the need to choose the appropriate and proportionate instrument for managing the risk. The principles that underpin a right-touch approach are that regulation is proportionate, consistent, targeted, accountable and adaptable.^{9, 10}

This approach is reflected in the EU Directive of the European Parliament that will require a proportionality test before the adoption of new regulation of professions by EU member states, the aim of which is to adopt a risk-based regulatory approach that ensures labour mobility and fairness to the applicant within the EU.¹¹

We need to ensure that we are responding to international trends in regulation and learning from best practice. For example, international regulatory trends indicate that older professionals with qualifications gained outside the jurisdiction, whose first language is not that of the country of residence and who are practising in isolation, are of most concern with regards to maintaining competence and/or being subject to complaint.^{12, 13} In response, health profession regulators have initiated approaches to support internationally qualified registrants to understand national, cultural, social, legal and professional aspects of practice.¹⁴

There is also an increasing emphasis internationally on preventing professional misconduct or poor professional performance through paying greater attention to educational standards, codes of conduct and ethics, continuing professional development, workforce development and better complaints systems to identify issues as early as possible. The aim is to address performance issues before they arise rather than dealing with them in the context of fitness to practise cases when damage has already been done. ^{15, 16} This is generally referred to as 'upstream regulation'. NMBI continues to commit itself to being agile and evolving its model of regulation in line with areas of emerging risk.

NMBI must also consider changing trends in regulation from regulators in Ireland, EU and internationally. We have seen a move for regulation to become more adaptable to the broader health service changes. This can be seen in new approaches to undergraduate education, broader access to registration and a more comprehensive appreciation of advanced practice roles.

NMBI also needs to be prepared to look wider in relation to where our regulatory scope might best serve the public and engage in networking opportunities with other international healthcare regulators, to share insights from Ireland and gain a greater understanding of future directions for regulation globally.

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¹³ Australian Dental Journal. Complaints about dental practitioners. Retrieved from: https://onlinelibrary.wiley.com/doi/full/10.1111/adj.12625

¹⁴ General Medical Council. Increasing support for overseas doctors. Retrieved from: https://www.gmc-uk.org/responsible-officer-hub/news/increasing-support-for-overseas-doctors

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Organisational sustainability and our funding model

To best serve our registrants and the public, NMBI as an organisation must operate effectively and be sustainable. We are aware that we are a public sector body, primarily funded through registration fees. As such, we take our responsibility to operate within our means very seriously. As our overall model of regulation evolves and specific strategies within that model are defined, we need to always ensure that our spending plans represent value for money, reflect the needs of nursing and midwifery practice in Ireland and further enhance the protection of the public in its dealings with nurses and midwives. We need to choose where we can be most impactful. We need to evolve in line with emerging risks and focus our attention accordingly.

Conclusion

Key considerations which have shaped our strategy

In the context of the above key considerations have emerged and they have shaped our strategy.

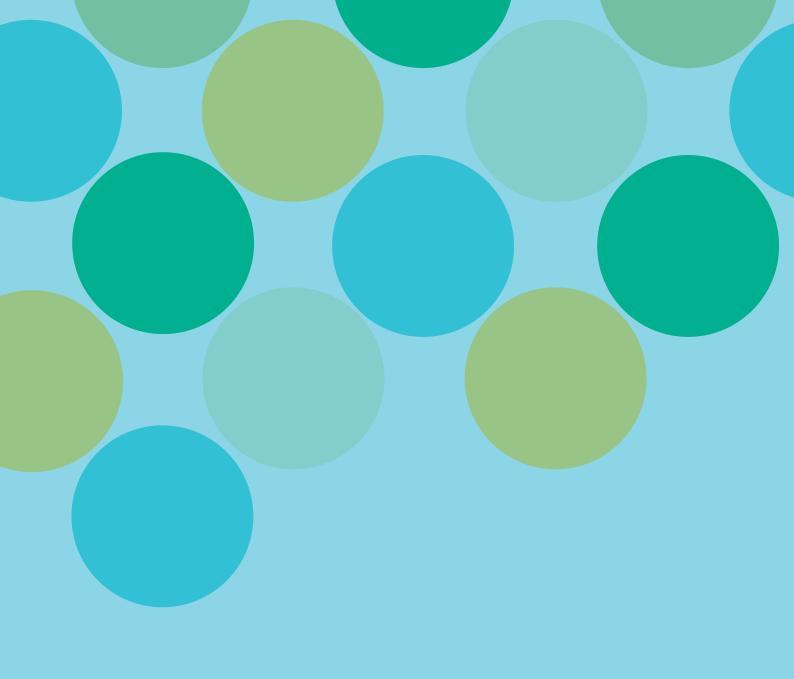
These are:

- There is a global shortage of nurses and midwives. At the same time, there
 is a growing demand for nurses and midwives in the Irish healthcare
 system. Attracting, regulating, integrating and supporting nurses and
 midwives educated within and outside Ireland is integral to the delivery of
 healthcare in Ireland and safe service user outcomes.
- The models and settings of care in Ireland are evolving, the service needs
 of the population are becoming more complex, and technology is playing a
 larger role in care. The day-to-day work experiences and roles of our
 nursing and midwifery registrants are changing in line with this. Our
 education standards and guidance need to evolve to reflect this.
- Risk-based regulation is regarded as best practice and we should align our resources and attention to where there is risk, or where it is emerging.
- As the regulator, we are part of a system-wide approach to service user safety. Continued collaboration with our partners will be essential, as well as evolution of our contribution to the system.
- Technology is playing a greater role in regulation in Ireland and internationally.
- The recommendations contained in the 'Report of the Expert Review Body on Nursing and Midwifery 2022 – A Pathway for developing and strengthening the role of the Nurse & Midwife' will shape the evolution of the nursing and midwifery professions and professionals in Ireland.

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