

ANNUAL REPORT AND FINANCIAL STATEMENTS 2016

An Bord Altranais agus Cnáimhseachais na hÉireann



Bord Altranais agus
Cnáimhseachais na hÉireann
Nursing and Midwifery Board
of Ireland



Contents

President's Address	2
Interim CEO's Overview	4
Education Department	6
Corporate Services and Finance Department	17
Fitness to Practise Department	38
Registration Department	45
Appendices	50

Presidential Address



It is my great pleasure to present the 2016 Annual report of the activities of the Nursing and Midwifery Board of Ireland to both Houses of the Oireachtas, to the professions of nursing and midwifery and to the public.

2016 was a year of considerable change within the Nursing and Midwifery Board both at Board and executive level. The tenure of 11 Board members expired between December 2015 and February of this year. I want to take a moment to express my thanks to those members who have left the organisation for their time and commitment to the work of the Board over the past three years and wish them well for the future.

I would also like to welcome the new Board members who have joined us and I look forward to working with you over the coming year. On a personal note I am deeply honoured that the incoming Board elected me President at its first meeting in January of this year and I am dedicated to performing this important role with energy and commitment.

I wish to thank my fellow Board members for their time, energy and commitment over this past year to advance the work of the Board. I would also like to formally note and thank our voluntary non-Board committee members for their contribution to the work of the Board throughout this year.

I acknowledge our close working relationship with the Department of Health, particularly the Office of the Chief Nurse, and I appreciate the assistance and co-operation received from our key stakeholders: the HSE, ONMSD, staff organisations and other regulator colleagues over the course of this year.

I want to acknowledge and thank the staff members who have left the organisation over the course of 2016 for their service and wish them well for the future.

Three staff members were granted secondments from the Board during 2016, I understand that these staff members will return to the organisation during the first quarter of 2017 and I look forward to their return.

A word of thanks to Ms Ursula Byrne, Director of Regulation for her work and dedication as interim CEO from October 2015 to June of this year.

On behalf of the Board I would like to formally welcome Ms Mary Griffin who was appointed interim CEO in June of this year. We were also joined by Mr Martin Quaid, Director of Corporate Services, and have completed a recruitment campaign for the start-up position of Director of Midwifery within the Education Department towards the end of this year.

This is an exciting development both for the Board and the profession of midwifery as we place midwifery on an equal footing with the nursing professions. It is hoped that the successful candidate will take up position during the first quarter of 2017. I would like to welcome both Martin and the incoming Director of Midwifery and wish them well as they settle into their respective roles in the organisation. A particular word of thanks to the CEO and the staff for their work in administering the affairs of the Board.

This year has been a period of significant progress for the Board. I believe as a group we are working well together and have developed and strengthened our understanding of our corporate governance role and responsibilities.

To summarise our key milestones this year have included:

- Appointment of the interim CEO.
- Opening up and establishing the channels of communication with staff members and our key stakeholders.
- Building relationships with our parent department.
- Publication of the organisational review and consolidated internal audit reports
- A number of reviews have been initiated by the CEO, namely ICT, HR and registration reviews, these will underpin quality improvement initiatives to be undertaken during 2017.
- We have worked with the CEO to close out on the legacy procurement and governance issues, business cases have been developed and submitted to the Department and approval received for a number of posts.
- We commenced the review of our committee structure, and have established an Audit and Risk Committee, Governance and Finance Committee and a Chair of Committees Forum.
- Our Statement of Strategy has been developed and submitted to the Minister for Health for approval. We aim to launch our strategy early in the first quarter of 2017 and it will shape our strategic direction over the coming years.

Finally, I am generally pleased with the finances of the Board and the general administration of Board activities and I confirm that the Nursing and Midwifery Board is complying with the Code of Practice for the Governance of State Bodies.

Essene Cassidy

Essene Cassidy

President, Nursing and Midwifery
Board of Ireland

Interim CEO's Overview



Following my appointment as Interim CEO in June 2016, I am pleased to give an overview of the Nursing and Midwifery Board of Ireland's (NMBI) annual operations for the first time.

It was another year of notable change in the nursing and midwifery professions and, in keeping with our responsibilities under the Nurses and Midwives Act 2011, the NMBI Board and staff continued to diligently implement our programme of activity in relation to regulation, education, registration and standard-setting over that period.

With reform and organisational renewal key priorities for my tenure as Interim CEO, I would like to extend my thanks to Ursula Byrne, interim CEO in the first half of 2016, for her committed and unstinting work in building the foundations in this respect and ensuring NMBI continued to fulfil its growing regulatory duties in a challenging climate. Protecting patients and other members of the public is at the heart of what we do at the NMBI, and we are committed to fulfilling this objective by supporting registered midwives and nurses to provide patient care to the highest standards.

NMBI is focused on strengthening our reputation with our registrants, the public and our stakeholders. We are striving to rebuild trust through open and transparent communication so that our key audiences understand how we work, and find us more efficient and effective to deal with.

In keeping with this, in 2016 we created a new section on our website to readily provide information and updates on meetings of the

Board of NMBI over the year. Additionally, work on the NMBI Statement of Strategy 2017-2019 commenced, and this included a consultation process focused on producing a new strategy in conjunction with our obligations under the 2011 Act. Our broad strategic objective is to set out the mission, vision and the values that underpin our work, with the predominant focus on the delivery of safe patient care through innovative and proactive professional regulation.

There was an ongoing focus over the year on progress with regard to our financial resources and funding, change management, procurement, structure, IT systems, business planning and governance arrangements. This included the publication of extensive independent reviews.

In January, a new, user-friendly NMBI website was launched offering new functionality for nurses and midwives on the register, overseas applicants and third-level nursing and midwifery students.

We hosted a one-day symposium for Registered Nurses in Intellectual Disability in September 2016 to explore developments in this area. As part of National Breastfeeding Week in October, NMBI President, Essene Cassidy, and I had the pleasure of a visit to Áras an Uachtaráin courtesy of Mrs Sabina Higgins.

We also took the opportunity in the autumn to launch an initiative in partnership with Nursing Homes Ireland (NHI) to encourage nurses classified as 'inactive' to return to the workforce to avail of the significant nursing home employment opportunities throughout the country.



Mary Griffin, CEO of NMBI and Tadhg Daly, CEO of NHI with nursing home staff

In late 2016, we started a process to recruit our first Director of Midwifery in recognition of midwifery as a separate and distinct profession.

The NMBI Employee Assistance and Staff Leadership Development programmes over the year have been premised on supporting staff and creating an environment that fosters enthusiasm, energy, skills and competence, whilst moving towards an enhanced organisation-wide effectiveness. The operational focus in 2017 will continue to be on re-organising NMBI at all levels to ensure we can meet our growing statutory obligations effectively.

We continue to give priority and allocate resources to our responsibilities regarding registration – in particular to processing the huge increase in overseas applications. We are working now to further simplify the system, improve responsiveness and efficiency whilst still ensuring standards and the protection of the public remain integral. There were 2,055 successful overseas registrations from January to December 2016. In addition, 1,822 Irish-trained applicants were registered over the same period, which is a total of 3,877 registrations successfully processed. We also continued to uphold our fitness-to-practise responsibilities with ongoing inquiries held over the year under the Nurses and Midwives Act, 2011 and Nurses Act 1985 as part of our overarching obligation to protect the public.

NMBI continued to build its co-operative and partnership activities with key stakeholders in 2016 as part of our statutory responsibilities. We worked closely with Department of Health officials, unions, Nursing Homes Ireland and a number of other bodies on governance and operational matters over the year. We participated in relevant external events such as the Department of Health CNO Conference, the Patient Safety Conference, Healthcare Professionals Crossing Borders, the Nursing Homes Ireland Annual Conference and the Forum of Health Regulatory Bodies. We deepened our co-operation with several regulatory bodies and health sector organisations, both domestically and internationally, in 2016 and signed a memorandum of understanding (MOU) with HIQA across areas of common interest in August to promote better healthcare service provision to patients.

My thanks to the President, Essene Cassidy for her continuous support since my appointment. Over the course of my tenure so far, I have particularly noted the ongoing commitment of staff and the Board, in a time of great change across the nursing and midwifery landscape, to make our vital regulatory work more relevant and transparent for all of our stakeholders. I look forward to 2017 and I am confident we will continue to deliver on our legislative mandate to protect the public and the integrity of the professions, while providing leadership for our registrants. 2017 will no doubt have its challenges. I am confident that we have built the foundations in 2016 to succeed.

Mary Griffin

Interim Chief Executive Officer,
Nursing and Midwifery Board of Ireland

Education Department

The Nursing and Midwifery Board of Ireland (NMBI) continues to promote high standards of professional education, training, clinical practice and professional conduct among nurses and midwives to ensure the protection of the public.

Throughout 2016, we continued our commitment to the effectiveness and efficiency of our education programmes approval process.

This process involves:

- setting and monitoring standards to be adhered to in the education and training of nurses/midwives in their continuing education, and
- evaluating and approving the higher education institutions, hospitals and healthcare institutions providing training to ensure that valuable clinical and theoretical experience is provided.

Site visits to healthcare and linked third level institutions

The Board is required to satisfy itself as to the adequacy and suitability of hospitals and institutions for nurse/midwife education and training at least once every five years.

We carry out site visits to higher education institutions and healthcare Institutions to determine “the suitability of third level institutions and health care institutions in respect of educational programmes leading to registration” (*Requirements and Standards for Nurse Registration Education Programmes*, February 2005).

In 2016, we conducted site visits at:

- **St Angela’s College Sligo and associated healthcare agencies for programmes in:**

General Nursing

Intellectual Disability Nursing

- **National University of Ireland Galway and associated healthcare agencies for programmes in:**

General Nursing

Psychiatric Nursing

Midwifery

The focus of site visits through a partnership approach is to:

- assess that all statutory and regulatory requirements of Bord Altranais agus Cnáimhseachais na hÉireann and the European Directives are met;
- assess the effectiveness and efficiency of the curriculum structures, processes and outcomes; and
- assess the quality and appropriateness of the educational experiences.

Post Registration Courses

The NMBI approves post-registration education courses for nurses and midwives based on criteria divided into two categories:

- Post-Registration Category 1 courses, and
- Post-Registration Category 2 courses.

Post-Registration Category 1 courses include:

- in-service education,
- seminars,
- study days,
- conferences, and
- continued professional development (CPD) programmes (that are not accredited by an academic awarding body, university or college).

The Category 1 application form was reviewed in 2016 and two templates were developed:

1. application for approval of CPD short courses/online courses, and
2. application for approval of Conferences.

Approval for CPD short courses and online courses lasts for two years. After that, educational providers must re-apply.

Approval for Conferences is for one year.

In 2016, we approved 983 Category 1 courses. Appendix 1 gives a breakdown by month of these approvals.

Post-Registration Category 2

These courses are specialist education courses for nurses and midwives that support practice development and service need. Courses leading to registration are not included. These courses are considered by both the Validation and Standards Committee and the Education and Training Committee. Approval is granted if programmes meet the criteria of both committees.

The categories of post-registration programmes that we approve include:

- **Post Registration Course Leading to an Additional Registration with Bord Altranais agus Cnáimhseachais na hÉireann**

These are courses where, when successfully completed, the nurse/midwife is entitled to register on an additional division of the register. Currently there are five post registration programmes leading to additional registration.

- Public Health Nursing Division
- Nurse Tutor Division
- Advanced Nurse Practitioner Division
- Registered Nurse Prescriber Division
- Midwifery Division

- **Post Registration Course Major Awards (Category 2 Approved Courses)**

Category 2 programmes include a broad range of major award courses excluding those leading to registration with the Board. Specialist programmes are post-registration programmes designed, developed and conducted with reference to a specific body of knowledge and experience in an area of nursing and midwifery. Such courses must satisfy the criteria of An Bord Altranais (1989) in relation to specialist education courses.

- **Post Registration Courses (Minor, Special and Supplemental Awards)**

The Board approves courses that are not major awards – that is, they offer minor awards, supplemental awards and special purpose awards. These courses must satisfy the criteria set out in the *Requirements and Standards for Post-Registration Nursing and Midwifery Education Programmes - Incorporating the National Framework of Qualifications (An Bord Altranais, 2010)*.

In 2016, 62 post-registration courses were approved. The following table gives a breakdown of the range of courses approved.

Category 2 Equivalence

NMBI also reviews equivalence – that is, recognition of qualifications achieved by nurses and midwives outside the Republic of Ireland. In 2016, 17 courses were reviewed for equivalent to Category 2 status.

Awards	Number
BSc	1
BSc(Hon)	1
Cert	7
Diploma	1
GradCert	2
GradDip	1
H Dip	3
MSc	10
MSc-PGDip	14
MSc-PGDip-PGCert	3
Supplemental Award-Return to Practice	3
Optional Module	3
PGCert	1
PGDip	2
PGDip-Cert	1
Stand Alone	8
Special Purpose	1
Awards	62

Developments in midwifery education

The National Maternity Strategy, developed by the Department of Health in 2016, introduced community midwifery as a required area for maternity care to be provided by midwives in the future. To that end, course content for student midwives has been adjusted to take account of this.

NMBI was involved with HIQA's new standards for maternity services - The National Standards for Safer Better Maternity Services – which was launched in December 2016.

We were also on the working group for the Self-Employed Community Midwives (SECM) Policies and Guidelines developed by the HSE.

Meeting of European Educationalists

A Conference took place in Dublin on 19 - 20 April 2016 of the network of EU competent authorities of Nurses. Delegates from many European countries attended over the course of the two days with a number of working groups taking place.

On the first day, presentations were given by Irish and British representatives respectively, talking about the Competency Frameworks of both countries. These presentations were followed by an EU Commission presentation about possible changes to Annex V of the Directive.

The second day involved a number of group sessions which looked at refining the terminology and processes within the following areas:

- Nursing and Clinical Practice and General Care

- Nursing and Clinical Practice for Person-Centred Health and Wellbeing.

- Leadership, Management and Multidisciplinary Work

- Evidence-informed Practice

- Communication, Professionalism, Ethics, Learning and Teaching

RNID Symposium

NMBI convened its first symposium for Registered Nurses for Intellectual Disability (RNID) in Dublin on 27 September as part of its role under the Nurses and Midwives Act 2011.

The line-up of speakers included the following:

Professor Mary McCarron – Critical new roles for the RNID

Professor Ruth Northway – Developing the evidence base: Fostering clinical research mindedness among RNID/RNLDs

Professor Michael Brown – Liaison nursing

The conference, attended by registered nurses and students, was also addressed by Essene Cassidy, President of the NMBI; Dr Siobhan O'Halloran, Chief Nursing Officer, Department of Health; Ms Mary Wynne, Office of the Nursing and Midwifery Services Director (ONMSD); and Judith Foley, A/Chief Education Officer, NMBI.

Prescribing

A Registered Nurse Prescribing (RNP) Governance Group was established in 2016 to oversee the implementation of 12 recommendations contained in the 2015 [Report on the Nurse and Midwife Medicinal Product Prescribing Review of Existing Systems and Processes](#). A working group of NMBI and the ONMSD HSE representatives worked on the implementation plan during 2016, and provided a written progress report to the Governance Group in Autumn 2016. The Governance Group are scheduled to meet again in February 2017.

A table of the 12 recommendations appears in Appendix 2. The table lists the 12 recommendations, states who is responsible for implementing them, gives an update on their status and a target date for completion of those not yet implemented.

Site Approval to provide Adaptation and Assessment Courses

Thirteen nursing and midwifery sites were approved to provide adaptation and assessments programmes in 2016. The number of applications for approval increased significantly and corresponds with the increased numbers of overseas applications for registration and work in Ireland.

Advanced Practice 2016

The Board continues to accredit posts and register nurses and midwives in the Advanced Nurse Practitioner and Advanced Midwife Practitioner Divisions of the Register.

In 2016, the Board completed the following site visits for Advanced Practice:

Healthcare Provider	Title of advanced practice service
Our Lady's Children's Hospital, Crumlin	RANP Endocrinology
University Hospital Galway	RANP Critical Care Outreach
Letterkenny University Hospital	RANP Gastroenterology
University Limerick Hospital Group (Ennis & Nenagh)	RANP Gastroenterology
Mercy University Hospital Cork	RANP Inflammatory Bowel Disease
Rotunda Hospital Dublin	RANP Emergency
National Maternity Hospital, Holles Street	RANP Perinatal Mental Health
Connolly Hospital Blanchardstown	RANP Gastroenterology
Mater Misericordiae University Hospital	RANP Heart Failure
Sligo University Hospital	RANP Gastroenterology
University Hospital Kerry	RANP Gastroenterology
Merlin Park University Hospital Galway	RANP Rheumatology
Roscommon University Hospital	RANP Emergency &
RANP Diabetes	
Naas Hospital	RANP Tissue Viability
Dublin North Mental Health Services	RANP Cognitive Psychotherapy
Sligo University Hospital	RANP Diabetes &
RANP Haematology	
Louth Hospitals Group- OLLH Hospital Drogheda	RANP Gastroenterology
Wexford General Hospital	RANP Gastroenterology
Our Lady of Lourdes Hospital Drogheda	RANP Emergency {RAT}
Our Lady's Children's Hospital Crumlin	
RANP Epilepsy and	
RANP Haemoglobinopathy	
St Vincent's University Hospital	RANP Acute Medicine
Mater Misericordiae University Hospital	RANP Acute Medicine
Mater Misericordiae University Hospital	RANP Older Persons Community

The number of nurses registering as Advanced Nurse Practitioners continued to increase with a total of 34 nurses registering in 2016. Two midwives registered as Advanced Midwife Practitioners in 2016.

At the end of 2016, the total number of:

- Registered Advanced Nurse Practitioners was 209, and
- Registered Advanced Midwives was 7.

Values for Nurses and Midwives National Awareness Programme

The Values for Nurses and Midwives in Ireland (Department of Health 2016) Initiative was launched on 1 June 2016. This position paper was developed in collaboration with the Nursing and Midwifery Board of Ireland (NMBI) and the Office of the Nursing and Midwifery Services Director (ONMSD) in the Health Service Executive. The paper specifies the core values underpinning the practice of nurses and midwives in Ireland.

The three core values are **Compassion, Care** and **Commitment**, and these inform clinical decision-making by guiding the nurse/midwife's behaviours and responses. Behaviours have been identified for each of the values, which demonstrate **Compassion, Care** and **Commitment** in clinical practice.

Alongside this, we developed the Values for Nurses and Midwives National Awareness Programme in 2016. This is a two-hour programme developed by the NMBI as an initial strategy to share the agreed core values **Compassion, Care** and **Commitment** throughout the entire healthcare service in Ireland. Specifically, the programme helps nurses, midwives and nursing and midwifery students to reflect on the values and their associated behaviours.

Programme evaluations completed by attendees are overwhelmingly positive. Participants welcomed the opportunity to familiarise themselves with the values, and to take time to reflect on the values in clinical practice. Many nurses and midwives suggested that this programme should be available to all staff. Interestingly, nursing students suggested the development of an e-learning programme, which all nurses and midwives must complete.

To date, the programme was facilitated as part of NMBI undergraduate or advanced practice site visits (see Programmes Facilitated table below). Other programmes are planned in 2017, using a 'train the trainer' approach which will increase the uptake of the programme. We will continue to promote the Values for Nurses and Midwives (Department of Health 2016) in 2017, and will do our best to meet healthcare providers' requests for the Values for Nurses and Midwives National Awareness Programme.



Mary Wynne, ONMSD, Siobhan O'Halloran, Chief Nurse, Essene Cassidy, President NMBI, Simon Harris, Minister for Health, Anne-Marie Ryan, Deputy Chief, Philippa Ryan Withero, Deputy Chief Nurse and Susan Kent, Deputy Chief Nurse.

Programmes Facilitated

Venue	Attendance	Date of programme
Centre for Care and Recovery, Bantry Hospital as part of UCC undergraduate site visit	13	19 October 2016
Cork University Hospital as part of UCC undergraduate site visit	19	20 October 2016
Mallow General Hospital as part of UCC undergraduate site visit	26	27 October 2016
Wexford General Hospital as part of Advanced Practice site visit	23	10 November 2016
Children's University Hospital, Crumlin as part of Advanced Practice	14	17 November 2016
Psychiatry of Later Life (Dr Steeven's Hospital)	31	25 November 2016
Total number of nurses and midwives who attended in 2016	126	

Library

The Library continued to provide the following services:

- Online access to CINAHL (Cumulative Index of Nursing and Allied Health Literature)
- Online access to the Cochrane Library and PubMed

Total Applications

The table below illustrates the total number of applications for each discipline from 2011 - 2016.

Nursing Careers Centre

The total number of places available in nursing and midwifery each year is 1,570. This number is unchanged since 2009 when the figures were decreased by the Department of Health from 1,880. The number of available places does not meet the demand, which explains the highly competitive points race for places.

In August 2016, there were an additional 60 places made available to those applying for psychiatric nursing. This was following a direction from the HEA and the DOH.

Table 1. Total applications for each discipline 2009-16 (End of Season figures)

Prog	No. of places 2009-16	Applic 2011	Ratio 2011	Applic 2012	Ratio 2012	Applic 2013	Ratio 2013	Applic 2014	Ratio 2014	Applic 2015	Ratio 2015	Applic 2016	Ratio 2016
General	860	7019	1:8	7041	1:8	6945	1:8	6604	1:8	6724	1:8	7218	1:8
Psychiatric	290*	3571	1:12	3578	1:12	3425	1:12	3246	1:11	3249	1:11	3512	1:10
Intellectual Disability	180	2370	1:13	2309	1:13	2254	1:12	2081	1:12	1995	1:11	2035	1:11
Midwifery	140	2848	1:20	2938	1:21	2827	1:20	2727	1:19	2644	1:19	2732	1:19
Children's & General	100	2239	1:22	2170	1:22	2084	1:21	2066	1:21	2024	1:20	2189	1:22
Total	1570	9492	1:6	9512	1:6	9094	1:6	8859	1:6	8871	1:6	9470	1:6

*increased in 2016 to 350

Table 2. End of Season Points - range by discipline

Round/ Year	General	Psychiatric	ID	Midwifery	Children's & General
Final 12	400*- 455*	375 - 430	415*- 425	415*- 470*	490*- 525*
Final 13	400*- 450*	365*- 430*	365*- 430	400*- 490	485*- 520
Final 14	400 - 445*	365 - 420*	355 - 425	415 - 455	475*- 525*
Final 15	390 - 455*	370*- 425	345*- 415	400*- 465*	490 - 505
Final 16	400*- 460*	340 - 440	315 - 425	395*- 480	485 - 505*

*Not all on these points may have been offered a place

Trends:

1. Overall, applications to nursing and midwifery remain stable at a ratio of 1:6 – that is, 6 applicants for every place.
2. Whilst the number of total applications to Intellectual Disability was up on 2015, the numbers applying have been decreasing steadily. In 2015, Intellectual Disability Nursing had its lowest number of applications since the introduction of the degree in 2002. The increase in 2016 was accounted for by mature applications.

External Submissions

We work with external bodies on many matters relating to nurses/midwives and the practice of nursing and midwifery. As part of this work with external bodies, we participate in consultations through written submissions.

During 2016, we responded to the following consultations:

Submission	Subject	Date
HIQA	Draft Revision of National Standards for Prevention and Control of Healthcare Associated Infections	December 2016
Department of Health	National Drugs Strategy 2009/2016 - Annual Progress Report 2016	December 2016

Corporate Services and Finance Department

Financial Statements

The Annual Financial Statements and Auditors Report for the year ended 31 December 2016, appear at page 17.

The Income and Expenditure Account for the year to 31 December 2016 shows a deficit of €19,004. This compares with a surplus of €7,567 for the previous year.

There was an increase in income of €608,823 from 2015 to 2016 and this is mainly attributable to the following:

- NMBI has seen a significant rise in the number of applications for registration from nurses and midwives based overseas. This has resulted in an increase in registration income of €948,530.
- This was partially offset by a significant decrease in the level of restoration fees of over €235,000 from 2015 to 2016.

There was also an increase in expenditure of €635,393 from 2015 to 2016 and this is mainly attributable to the following:

- Cost for the Fitness to Practise function increased by €984,188.
- This was partially offset by a reduction in administration costs by €244,283 largely caused by a reduction in operational IT costs.
- Depreciation costs were also lower by €104,431.

Internal Financial Control

The Statement on Internal Financial Control included in the Financial Statements includes an explanatory note on certain breaches of procurement guidelines which occurred prior to 2015. A similar note was included in the 2015 Financial Statements. NMBI is committed to complying fully with public procurement guidelines and is actively working to resolve the remaining outstanding problems. All such non-compliant contract issues will be resolved in 2017.

As part of the Board's drive to constantly review and improve internal controls the functions of the existing Audit and Finance committee of the Board was separated in to the Audit and Risk, and the Governance and Finance committees during 2016. This will provide greater focus in the management of these separate areas. NMBI also operates a Risk Register which is reviewed by management on a regular basis and comes under the Audit and Risk Committee's terms of reference.

Website

During 2016, the Board launched a new website. This required significant investment and we are confident that this will be of major assistance to nurses and midwives in the interaction with the Board in the future.

The website – www.nmbi.ie – contains a comprehensive range of information and documents, including published guidance documents, annual reports and newsletters. Projects are ongoing to increase the information and services provided on the website.

Prompt Payment of Accounts Act, 1997

Payment of invoices by NMBI is governed by the Prompt Payment of Accounts Act, 1997 as amended by the European Communities (Late Payment in Commercial Transactions) Regulations 2012 - S.I. 580 of 2012.

We have been prompt in the payment of creditor accounts.

Partnership

The Partnership Committee, which was established in in 2000, was set up under the auspices of the National Health Service Partnership Forum and comprises representatives of management, staff, IMPACT and the INMO. In recent years, this committee lapsed. A new liaison committee was established in 2016 and comprises representatives of management, Board and staff.

Health and Safety

In 2016, as in previous years, we continued our efforts to ensure the safety, health and welfare of our employees and visitors to the organisation. During 2016, we put in place a new Employee Assistance programme provided under the Office of Government Procurement Framework.

Staff changes

A number of staff joined NMBI in 2016, notably the interim Chief Executive Officer, Ms Mary Griffin. We wish her well in her new role.

A number of administrative staff also joined us during 2016, and we wish them a fulfilling and enjoyable career in the Board.

Some staff left us in 2016 to pursue other opportunities. We would like to thank them for their commitment and service and we wish them every success in their future careers.

Board and Committee meetings record of attendance

Appendices 4 and 5 detail the schedule and attendance of board meetings and committee meetings.

Organisational structure

An organisation chart appears at Appendix 6.

NMBI Board Members 2016

Appendix 7 lists the NMBI Board members for 2016

Annual Financial Statements for Year Ended 31 December 2016

Nursing and Midwifery Board of Ireland
(Bord Altranais agus Cnáimhseachais na hÉireann)

Financial Statements

For the year ended 31 December 2016

Contents	Page
General Information	2
Statement of Board's Responsibilities	3
Statement on Internal Financial Control	4 - 7
Report of the Comptroller & Auditor General	8
Statement of Income & Expenditure and Retained Revenue Reserves	9
Statement of Financial Position	10
Statement of Cash Flows	11
Notes to the Financial Statements	12 - 23

Nursing and Midwifery Board of Ireland

General Information

Board Members	Appointment	End of term of office
Essene Cassidy (President since January 2016)	December 2012	
John Murray (Vice President)	December 2012	
Mary Barrett	December 2012	
Mark Blake-Knox	December 2012	
Eamon Breathnach	December 2012	
Sinead Cleary	December 2012	
Pat Dolan	February 2013 Reappointed July 2016	February 2016
Colette Finn	February 2013	July 2016
Noel Giblin	December 2012	
Dermot Manning	July 2013 Reappointed July 2016	July 2016
Michele Monahan	December 2012	
Denis Murphy	February 2013	
Kevin O'Carroll	February 2013	
Denise Lawler	July 2015	
Dawn Johnston	December 2015	
Louise Kavanagh McBride	December 2015	
Karen Canning	December 2015	
Breda Liston	December 2015	
Lorraine Clarke- Bishop	December 2015	
Rosaleen Mc Elvaney	December 2015	
Liam Minihan	December 2015	
Killian McGrane	December 2015	
Martin Higgins	October 2015 Reappointed July 2016	February 2016
Interim Chief Executive Officer	Ursula Byrne (in office for the period 9 Oct 2015 – 5 June 2016)	
Interim Chief Executive Officer	Mary Griffin (in office from 6 June 2016)	
Address:	18/20 Carysfort Avenue Blackrock Co Dublin	Telephone Number: 01 - 639 8500 Fax Number: 01 - 639 8595
Auditors:	Comptroller and Auditor General 3A Mayor Street Upper Dublin 1	
Solicitors:	Beauchamps Riverside Two Sir John Rogerson's Quay Dublin 2	
Bankers:	Bank of Ireland Baggot Street, Dublin 2	

Nursing and Midwifery Board of Ireland
Statement of Board's Responsibilities
For the Year Ended 31 December 2016

Financial Statements

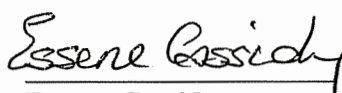
Under the terms of the Nurses and Midwives Act, 2011, which established the Nursing and Midwifery Board of Ireland (Bord Altranais agus Cnáimhseachais na hÉireann), the Board acknowledges its responsibility to prepare financial statements for the year which give a true and fair view of the state of affairs of the Nursing and Midwifery Board of Ireland and its income and expenditure for the year.

In preparing those statements the Board is required to:

- select suitable accounting policies and then apply them consistently;
- make judgements and estimates that are reasonable and prudent;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that it will continue in operation;
- state whether applicable accounting standards have been followed subject to any material departures disclosed and explained in the financial statements.

The Board is responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the Nursing and Midwifery Board of Ireland and which enable it to ensure that the financial statements comply with the relevant Act and in a form approved by the Minister of Health. The Board is also responsible for safeguarding the assets of the Nursing and Midwifery Board of Ireland and hence for taking reasonable steps for the prevention and the detection of fraud and other irregularities.

On behalf of the Board of the Nursing and Midwifery Board of Ireland:


Essene Cassidy
President

21 November 2017


Mary Griffin
Interim CEO

21 November 2017

Nursing and Midwifery Board of Ireland
Statement on Internal Financial Control
For the Year Ended 31 December 2016

Responsibility for the System of Internal Financial Control

This statement is made in accordance with the requirement set out in the Department of Public Expenditure and Reform's Code of Practice for the Governance of State Bodies (2009).

On behalf of the Nursing and Midwifery Board of Ireland, we acknowledge that we are ultimately responsible for the system of internal financial control, for reviewing its effectiveness and ensuring it is maintained and operated.

The system is designed to provide reasonable and not absolute assurances that assets are safeguarded, transactions are authorised and properly recorded, and that material errors or irregularities are either prevented or would be detected in a timely period.

Key Control Procedures

The following is a description of the key procedures that have been put in place by Management and are designed to provide effective internal financial controls:

- The Finance Department coordinated and managed the preparation of an annual Budget that was approved by the Board and provided to the Department of Health.
- Reports which compared actual and budgeted expenditure were prepared and provided to the Department of Health.
- All expenditure by the organisation was recorded in the general ledger of the accounting system. Monthly expenditure reports were prepared by the Finance Department.
- The Finance Department prepared monthly variance expenditure reports comparing actual with budgeted expenditure. These were reported to the Senior Management Team, the Board and the Governance and Finance Committee on a regular basis.
- A comprehensive review of all financial procedures and practices was undertaken to enhance internal controls within the organisation.
- The Audit and Risk Committee and the Governance and Finance Committee of the Board meet on a regular basis to advise the Board on the robustness and effectiveness of the arrangements and status of the corporate governance, financial and risk management and internal audit of the Board.
- The Board's internal audit function is provided by an outside service provider. The programme of work is agreed with the Audit and Risk Committee and is set out in the Strategic Internal Audit Plan 2016 – 2017.

Ongoing enhancements to governance and control framework

NMBI employed an external firm to conduct an organisational review. The resulting report in November 2015 included 18 recommendations relating to structure, staffing, financial resources, funding and IT systems.

NMBI introduced a formal system to track implementation of recommendations with frequent reporting to the Audit committee and the Board and the Department of Health. By October 2017, 10 of the 18 recommendations had been fully implemented. NMBI is continuing to implement the remaining recommendations as follows:

Nursing and Midwifery Board of Ireland

Statement on Internal Financial Control

(Continued)

- Governance and structures – 3 recommendations – these include recommendations in relation to standing orders for the Board, terms of reference of Board committees and the conduct of an external review of governance every two years. Implementation of these recommendations is well underway and it is expected that all required enhancements will be completed or substantially completed by the end of 2017.
- IT systems for registrations — 1 recommendation — NMBI has completed a draft Request For Tender and this is currently with the Department of Health for approval.
- Size and make-up of NMBI and the impact of the current fitness to practice workload — Proposals in this regard are currently with the Department of Health.

Annual Review of Controls

We confirm that there has been a review of the effectiveness of the system of internal financial control for the period 1 January 2016 to 31 December 2016.

Breaches of procurement guidelines

In 2016, as in previous years, the Nursing and Midwifery Board of Ireland incurred expenditure in relation to goods and services where procedures employed did not fully comply with public procurement guidelines. During 2016 and 2017, a number of steps were taken to ensure procedures employed complied with procurement rules; details of these are set out below:

Nursing and Midwifery Board of Ireland
Statement on Internal Financial Control
(Continued)

Expenditure not subject to competitive tendering processes:

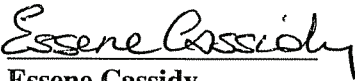
Goods/services	Expenditure in 2016	€	Status at November 2017
Subject matter experts	132,752		<i>All contracts terminated by February 2017</i>
Buildings maintenance (cleaning/security)	69,517		<i>Competitive procurement process completed and new contract agreed May 2017</i>
Legal services	139,946		<i>Office of Government Procurement Framework and new contract agreed in May 2017</i>
Online transaction charges	67,188		<i>Contract in place under OGP Framework, April 2017</i>
Agency staff	74,024		<i>Competitive procurement process completed and new contracts agreed November 2017</i>
Call centre support services	243,171		<i>Competitive procurement process completed and new contract agreed January 2017</i>
Cost of goods and services regularised	726,598		
Legal assessors providing legal advice to the Fitness to Practice Committee	114,882		<i>RFT currently being drafted and it is planned to issue by end 2017</i>
Off-site file storage	48,627		<i>RFT currently being drafted and it is planned to issue by end 2017</i>
Total cost of goods and services	890,107		

Nursing and Midwifery Board of Ireland
Statement on Internal Financial Control
(Continued)

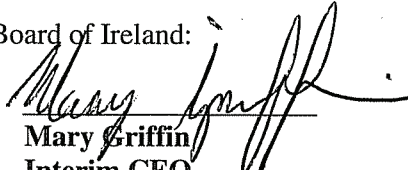
By November 2017, tenders had been completed and contracts awarded in relation to 81.6% of the expenditure. The procurement process for the remaining expenditure is at an advanced stage.

NMBI is committed to complying fully with procurement guidelines. Procurement in NMBI is overseen by the Governance and Finance Committee. NMBI have engaged external procurement advisory services to support the organisation in relation to compliance with procurement guidelines.

On behalf of the Board of the Nursing and Midwifery Board of Ireland:


Essene Cassidy
President

21 November 2017


Mary Griffin
Interim CEO

21 November 2017



Comptroller and Auditor General

Report for presentation to the Houses of the Oireachtas

Nursing and Midwifery Board of Ireland

I have audited the financial statements of the Nursing and Midwifery Board of Ireland for the year ended 31 December 2016 under Section 34 of the Nurses and Midwives Act 2011. The financial statements comprise the statement of income and expenditure and retained revenue reserves, the statement of financial position, the statement of cash flows and the related notes. The financial statements have been prepared in the form prescribed under Section 34 of the Act, and in accordance with generally accepted accounting practice as modified by the directions of the Minister for Health in relation to accounting for superannuation costs.

Responsibilities of the Board

The Board is responsible for the preparation of the financial statements, for ensuring that they give a true and fair view in accordance with the accounting standards specified by the Minister for Health and for ensuring the regularity of transactions.

Responsibilities of the Comptroller and Auditor General

My responsibility is to audit the financial statements and report on them in accordance with applicable law.

My audit is conducted by reference to the special considerations which attach to State bodies in relation to their management and operation.

My audit is carried out in accordance with the International Standards on Auditing (UK and Ireland) and in compliance with the Auditing Practices Board's Ethical Standards for Auditors.

Scope of audit of the financial statements

An audit involves obtaining evidence about the amounts and disclosures in the financial statements, sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. This includes an assessment of

- whether the accounting policies are appropriate to the Board's circumstances, and have been consistently applied and adequately disclosed
- the reasonableness of significant accounting estimates made in the preparation of the financial statements, and
- the overall presentation of the financial statements.

I also seek to obtain evidence about the regularity of financial transactions in the course of audit.

In addition, I read the Nursing and Midwifery Board of Ireland's annual report to identify material inconsistencies with the audited financial statements and to identify any information that is apparently materially incorrect based on, or materially inconsistent with, the knowledge acquired by me in the course of performing the audit. If I become aware of any apparent material misstatements or inconsistencies, I consider the implications for my report.

Opinion on the financial statements

In my opinion, the financial statements

- have been properly prepared under the accounting standards specified by the Minister for Health, and
- give a true and fair view in accordance with those standards of the state of the Nursing and Midwifery Board of Ireland's affairs at 31 December 2016 and of its income and expenditure for 2016.

In my opinion, the accounting records of the Nursing and Midwifery Board of Ireland were sufficient to permit the financial statements to be readily and properly audited. The financial statements are in agreement with the accounting records.

Emphasis of matter – Superannuation benefits

Without qualifying my opinion, I draw attention to Note 1 to the financial statements (accounting policy i) which discloses that, in compliance with the directions of the Minister for Health, the Board accounts for the costs of superannuation entitlements as they become payable, rather than recognising such costs in the year the entitlements are earned.

Matters on which I report by exception

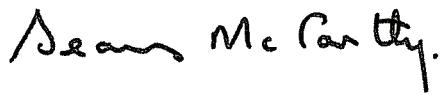
I report by exception if I have not received all the information and explanations I required for my audit, or if I find

- any material instance where money has not been applied for the purposes intended or where the transactions did not conform to the authorities governing them, or
- the information given in the Nursing and Midwifery Board of Ireland's annual report is not consistent with the related financial statements or with the knowledge acquired by me in the course of performing the audit, or
- the statement on internal financial control does not reflect the Nursing and Midwifery Board of Ireland's compliance with the Code of Practice for the Governance of State Bodies, or
- there are other material matters relating to the manner in which public business has been conducted.

Report of the Comptroller and Auditor General (continued)

Non compliance with procurement rules

I draw attention to the statement on internal financial control which discloses that during 2016 the Board incurred expenditure of €890,100 in relation to services where the procedures employed did not comply with public procurement guidelines as the relevant services were not openly tendered. It also notes that by November 2017 procurement procedures had been regularised in relation to goods and services that cost €726,600 in 2016. It is planned to put appropriate procedures in place in relation to the remaining goods and services.



Seamus McCarthy
Comptroller and Auditor General

28 November 2017

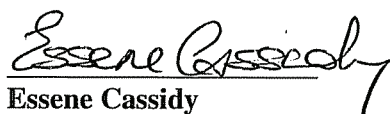
Nursing and Midwifery Board of Ireland
Statement of Income & Expenditure and Retained Revenue Reserves
For the Year Ended 31 December 2016

	Note	2016 €	2015 €
INCOME			
Annual Retention Fee	2	6,183,570	6,225,543
Registration Fee	3	2,049,870	1,101,340
Verification Fee	3	88,320	77,360
HSE Grant Nursing Careers Centre	4	200,000	200,000
Superannuation Contributions		69,921	110,017
Bank & Investment Interest		5,628	14,609
Other Income	5	234,453	494,071
Total Income		8,831,762	8,222,940
EXPENDITURE			
Accommodation Costs	6	416,961	388,088
Staff Costs	7/8	2,935,054	2,965,882
Administration Costs	9	1,848,942	2,101,367
Fitness to Practice	10	3,251,578	2,267,390
Library	11	14,906	17,053
Nursing Careers Centre	12	59,537	47,373
Depreciation	13	323,789	428,220
Total Expenditure		8,850,767	8,215,373
Surplus/(Deficit) for the year		(19,005)	7,567
Balance Brought Forward at 1 January 2016		8,861,626	8,854,059
Balance Carried Forward at 31 December 2016		8,842,621	8,861,626

All income and expenditure for the year relates to continuing activities at the reporting date. The Statement of Income and Expenditure and Retained Revenue Reserves includes all gains and losses recognised in the year.

The Statement of Cash Flows and notes 1 to 20 form part of these financial statements.

On behalf of the Board of the Nursing and Midwifery Board of Ireland:


Essene Cassidy
President

21 November 2017


Mary Griffin
Interim CEO

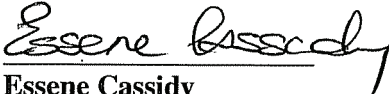
21 November 2017

Nursing and Midwifery Board of Ireland
Statement of Financial Position
For the Year Ended 31 December 2016

	Note	As at 31 December 2016 €	As at 31 December 2015 €
FIXED ASSETS			
Property, Plant and Equipment	13	11,117,333	11,391,862
CURRENT ASSETS			
Receivables	15	92,568	334,238
Cash and Cash Equivalents	14	4,541,182	3,965,976
		<u>4,633,750</u>	<u>4,300,214</u>
CURRENT LIABILITIES (AMOUNTS FALLING DUE WITHIN ONE YEAR)			
Payables	16	<u>(4,462,350)</u>	<u>(4,145,354)</u>
NET CURRENT ASSETS		171,400	154,860
LONG TERM LIABILITIES (AMOUNTS FALLING DUE AFTER ONE YEAR)			
Payables	16	(2,446,112)	(2,685,098)
TOTAL NET ASSETS		<u><u>8,842,622</u></u>	<u><u>8,861,624</u></u>
REPRESENTING			
Accumulated Fund		8,842,622	8,861,624
		<u><u>8,842,622</u></u>	<u><u>8,861,624</u></u>

The Statement of Cash Flows and notes 1 - 20 form part of these financial statements.

On behalf of the Board of the Nursing and Midwifery Board of Ireland:


 Essene Cassidy
 President

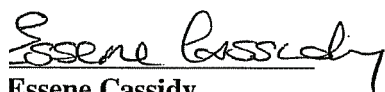
21 November 2017


 Mary Griffin
 Interim CEO

21 November 2017

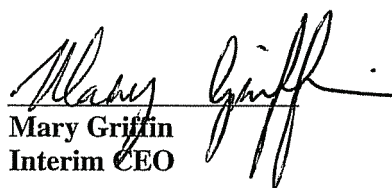
Nursing and Midwifery Board of Ireland
Statement of Cash Flows
For the Year Ended 31 December 2016

	2016 €	2015 €
Net Cash Flows from Operating Activities		
Excess Income over expenditure	(19,005)	7,567
Depreciation of fixed assets	323,789	428,220
(Increase)/Decrease in receivables	241,670	40,733
Increase/(Decrease) in payables	316,996	(93,779)
Deposit interest received	(5,628)	(14,609)
Bank interest paid	8,534	9,817
Net Cash Inflow from Operating Activities	<u>866,356</u>	<u>377,949</u>
 Cash Flows from Investing Activities		
Payment to acquire property, plant & equipment	<u>(49,260)</u>	<u>(93,581)</u>
Net Cash Flows from Investing Activities	<u>(49,260)</u>	<u>(93,581)</u>
 Cash Flows from Financing Activities		
Bank interest received	5,628	14,609
Bank interest paid	(8,534)	(9,817)
Repayment of loan	<u>(238,986)</u>	<u>(237,761)</u>
Net Cash Flows from Financing Activities	<u>(241,892)</u>	<u>(232,969)</u>
 Net Increase/(Decrease) in Cash and Cash Equivalents	575,204	51,399
 Cash and cash equivalents at 1 January	<u>3,965,978</u>	<u>3,914,579</u>
Cash and cash equivalents at 31 December	<u>4,541,182</u>	<u>3,965,978</u>



Essene Cassidy
President

21 November 2017



Mary Griffin
Interim CEO

21 November 2017

Nursing and Midwifery Board of Ireland

Notes to the Financial Statements

For the Year Ended 31 December 2016

1. Accounting Policies

The basis of accounting and significant accounting policies adopted by the Nursing and Midwifery Board of Ireland are set out below. They have all been applied consistently throughout the year and for the preceding year.

a) General Information

The Nursing and Midwifery Board of Ireland was set up under the Nurses and Midwives Act 2011, with a head office at 18/20 Carysfort Avenue, Blackrock, Co. Dublin, Ireland. The object of the Board is the protection of the public in its dealing with nurses and midwives and the integrity of the practice of nursing and midwifery through the promotion of high standards of professional education, training and practice and professional conduct among nurses and midwives.

The Nursing and Midwifery Board's primary objectives are set out in section 8 and 9 of the Nurses and Midwives Act 2011 and are as follows:

- maintaining the register of nurses and midwives
- evaluating applications from Irish and overseas applicants who want to practice as nurses and midwives in Ireland
- supporting nurses and midwives to provide care by developing standards and guidance that they can use in their day-to-day practice
- setting requirements for nursing and midwifery educational programmes in Higher Level Institutions
- investigating complaints made from patients, their families, health care professionals, employers and holding fitness to practice inquiries

b) Statement of Compliance

The financial statements of the Nursing and Midwifery Board for the year ended 31 December 2016 have been prepared in accordance with FRS 102 (the financial reporting standard applicable in the UK and Ireland issued by the Financial Reporting Council, as promulgated by Chartered Accountants Ireland) with the exception of Section 28 Employee Benefits - (See Accounting policy i).

c) Basis of Preparation

The financial statements have been prepared under the historical cost convention, except for certain assets and liabilities measured at fair values as explained in the accounting policies below. The financial statements are in the form approved by the Minister for Health with concurrence of the Minister for Public Expenditure and Reform under section 34 of the Nursing and Midwifery Board Act 2011. The following accounting policies have been applied consistently in dealing with items which are considered material in relation to the Nursing and Midwifery Board's financial statements.

d) Going Concern

In preparing the financial statements for the year ended 31st December 2016, management has assessed the Nursing and Midwifery Board of Ireland's ability to continue as a going concern. On the basis of projected financial results and cash flow for the next financial year, it is clear that the Nursing and Midwifery Board of Ireland can demonstrate that there is no material uncertainty regarding its ability to meet its liabilities as they fall due.

Nursing and Midwifery Board of Ireland
Notes to the Financial Statements
For the Year Ended 31 December 2016

The NMBI considers it appropriate to prepare financial statements on a going concern basis. Accordingly, these financial statements do not include any adjustments to the carrying amounts and classification of assets and liabilities that may arise if NMBI was unable to continue as a going concern.

e) Income

Annual Retention Fees

All annual retention fee receipts in the period January to October are brought to account as income in the current year. Income received in November & December in respect of 2017 fees is recognised as income for the following year. It is shown as deferred income in the balance sheet and will be booked as income in the subsequent year. Outstanding fees are not brought to account until they are received.

Other Fee Income

Other Fee income is accounted for on a cash receipts basis.

State Grants

Grants from the Health Service Executive and the Department of Health are allocated to the accounting period in which the related expenditure occurs.

f) Fixed Assets - Depreciation

Property, plant and equipment are stated at cost less accumulated depreciation, adjusted for any provision for impairment. Depreciation is provided on all property, plant and equipment, other than freehold land, at rates estimated to write off the cost less the estimated residual value of each asset on a straight-line basis over their estimated useful lives, as follows:

Freehold Premises	Straight line over 50 years
Freehold Land	No Depreciation
Equipment and Fittings	33% Straight line
Computer Equipment	33% Straight line
Computer Software	33% Straight line
Telephone Equipment	33% Straight line

Residual value represents the estimated amount which would currently be obtained from disposal of an asset, after deducting estimated costs of disposal, if the asset were already of an age and in the condition expected at the end of its useful life.

If there is objective evidence of impairment of the value of an asset, an impairment loss is recognised in the Statement of Income and Expenditure and Retained Revenue Reserves in the year.

g) Financial Liability

On 23 September 2007, NMBI drew down a mortgage of €4.5 million. The mortgage is by way of a 20 year term loan facility. All amounts are due to be repaid by 23 September 2027. Repayments are made on a quarterly basis. Interest charged is Euribor +0.03%.

The carrying value of the mortgage is recognised at amortised cost using the effective interest rate method.

Nursing and Midwifery Board of Ireland
Notes to the Financial Statements
For the Year Ended 31 December 2016

h) Loan interest

Interest expense is recognised on the basis of the effective interest method and is included in finance costs.

i) Superannuation Contributions

NMBI administers a Superannuation Scheme in accordance with the rules of the Local Government Superannuation Scheme. By direction of the Minister for Health, no provision has been made in respect of future benefits payable under the scheme. Employee contributions are credited to the income and expenditure account when received. Pension payments under the scheme are charged to the income and expenditure account when paid. Only those superannuation payments which fall due to be paid in the current year of account are charged to the current income and expenditure account.

NMBI also administers the Single Public Service Pension Scheme ("Single Scheme") which is a defined benefit scheme for pensionable public servants appointed on or after 1 January 2013. Single scheme members' contributions and employer contributions are paid over to the Department of Public Expenditure and Reform.

j) Critical Accounting Judgements and Estimates

The preparation of the financial statements requires Management to make judgements, estimates and assumptions that effect the amounts reported for assets and liabilities as at the balance sheet date and the amounts reported for revenues and expenses during the year. However, the nature of estimation means that actual outcomes could differ from those estimates. There were no judgements required that had a significant effect on amounts recognised in the financial statements for 2016.

Nursing and Midwifery Board of Ireland
Notes to the Financial Statements
For the Year Ended 31 December 2016

2. Annual Retention Fees (ARF)

The ARF is an annual payment made by each nurse and midwife in order to maintain their name on the active register maintained by the Nursing and Midwifery Board of Ireland. In 2016, the ARF was €100 (2015: €100). There were 67,559 names on the active register in 2016 (65,001 in 2015). Certain registrants active on the register in 2016 may be exempt from paying the annual retention fee.

The table below provides the number of active registrants in 2016 and a breakdown of the number of registrants on each division of the register. Note that a nurse/midwife may appear on more than one division of the register, hence the difference between the total number of registrants and the number of registrants on each division.

Division	2016	2015
Advanced Midwife Practitioner	7	5
Advanced Nurse Practitioner	208	175
Children's	5,979	5,885
General	80,872	78,840
Intellectual Disability	6,085	5,995
Midwives	18,155	18,112
Nurse Prescriber	962	884
Psychiatric	13,862	13,729
Public Health	3,513	3,438
Tutors	896	878
Other	545	549
Total	131,084	128,490

Nursing and Midwifery Board of Ireland
Notes to the Financial Statements
For the Year Ended 31 December 2016

3. Registration/Verification Fees

Registration fees are fees from new applicants joining the register of nurses and midwives for the first time. The increase of €948,530 in 2016 is largely attributable to a significant increase in applications from overseas registrants.

Numbers registered:

	2016	2015
Irish Registrations	1,820	1,760
EU Registrations	1,028	681
Non EU Registrations	1,027	358
Total	3,875	2,799

4. Health Service Executive/Department of Health Grants

Health Service Executive Grant: An amount of €200,000 (2015 - €200,000) has been received from the Health Service Executive (HSE), acting on the directions of the Department of Health, as a contribution towards the running of the Nursing Careers Centre (see Note 12).

	2016	2015
5. Other Income	€	€
Restoration fees	214,935	480,261
Duplicate Certifications	5,950	5,175
Registration Appeal Fees	3,900	2,550
Miscellaneous/other income	9,668	6,085
Total	234,453	494,071

	2016	2015
6. Accommodation Costs	€	€
Mortgage Interest	8,534	9,817
Cleaning	43,792	48,570
Insurance	44,493	42,180
Light & Heat	50,079	49,345
Repairs & Maintenance	270,063	238,176
Total	416,961	388,088

Nursing and Midwifery Board of Ireland
Notes to the Financial Statements
For the Year Ended 31 December 2016

7. Staff Costs	2016	2015
	€	€
Wages and Salaries ¹	1,852,305	2,007,693
Employers PRSI	160,911	156,992
Employers Pension Contributions SPSS	72,192	-
Pension Payments	362,259	431,097
Total NMBI Staff Costs	2,447,667	2,595,782
Agency Costs	487,387	370,100
Total Staff Costs	2,935,054	2,965,882

¹Wages and Salaries include expenditure of €20,000 relating to an employee related settlement. Associated legal costs of €13,400 are included in Legal Fees (Non FTP).

a) Pension related deductions

Pension related deductions of €85,324 (2015: €129,407) were made from staff salaries and €85,324 (2015: €129,407) was remitted to the Department of Health.

b) Employee Benefits

The number of employees (including seconded staff) whose total employee benefits fell within each band of €10,000 from €60,000 upwards are as follows:

Range of total employee benefits		Number of Employees	
From	To	2016	2015
€60,000	— €69,999	4	5
€70,000	— €79,999	5	4
€80,000	— €89,999	2	1
€90,000	— €99,999	-	-
€100,000	— €119,999	-	-
€120,000	— €129,999	-	-
Greater than €130,000		-	-
Total		11	10

Nursing and Midwifery Board of Ireland
Notes to the Financial Statements
For the Year Ended 31 December 2016

c) Board Members Emoluments

Board Members Fees paid during 2016 amounted to €51,395 (2015 €47,519). Travel and Subsistence paid to Board members in 2016 was €69,715 (2015 €57,907). During 2016, 21 Board meetings were held.

<i>Board Member</i>	<i>Board fees</i>	<i>Vouched expenses</i>	<i>Meetings attended</i>
John Murray	€2,509	€13,181	14
Mary Barrett	-	-	20
Mark Blake-Knox	€5,985	-	15
Eamon Breathnach	€5,985	€2,179	13
Essene Cassidy (President)	-	€7,298	21
Sinead Cleary	-	€842	17
Pat Dolan	€3,575	€7,904	9
Colette Finn	€4,330	€4,267	12
Noel Giblin	-	€10,321	16
Dermot Manning	€5,985	-	17
Michelle Monahan	-	€513	13
Denis Murphy	€5,985	€242	18
Kevin O'Carroll	-	-	12
Denise Lawler	-	-	12
Dawn Johnston	€1,496	€3,616	17
Louise Kavanagh McBride	-	€3,101	20
Karen Canning	€5,985	-	17
Breda Liston	-	€6,377	19
Lorraine Clarke-Bishop	-	€4,037	20
Rosealeen Mc Elvaney	-	-	17
Liam Minihan	€5,985	€5,837	17
Killian McGrane	-	-	13
Martin Higgins	€3,575	-	5
Total	€51,395	€69,715	

Nursing and Midwifery Board of Ireland
Notes to the Financial Statements
For the Year Ended 31 December 2016

d) CEO remuneration

The Interim CEO (1st Jan -5th June 2016) received total emoluments of €89,883 during 2016 (9 Oct 2015 – 31 Dec 2015: €18,161), comprising remuneration in respect of her existing role plus an additional allowance in respect of the Interim CEO role, and travel expenses and subsistence of €899 (2015: €97) during 2016.

The Interim CEO (6th June 2015 – 31st December 2016) received total emoluments for this period of €59,865, and travel expenses and subsistence of €323 (2015: nil) during 2016.

In line with Department of Public Expenditure and Reform Guidelines, the Interim Chief Executive Officer did not receive a performance related award in 2016. The pension entitlements of the CEO do not extend beyond the standard entitlements of the Local Government Superannuation Scheme

8. Average Headcount

The average headcount for the Nursing and Midwifery Board of Ireland in 2016 was 44 (2015: 39).

9. Administration

	2016	2015
	€	€
Travel & Subsistence		
- Domestic Travel	195,782	160,155
- Foreign Travel	10,720	9,377
Board Member Fee	51,395	47,519
Telephone	49,778	53,445
Postage	150,321	173,850
Print & Stationery	52,887	56,438
Staff Training & Recruitment	36,164	39,373
Audit Fees – External Audit	21,000	21,000
Audit Fees – Internal Audit	22,109	39,283
Legal Fees (Non FTP)	112,670	110,366
Other Consultancy	850,813	977,538
Bank Interest & charges	75,343	80,682
Computer/IT*	196,157	305,262
Misc.	23,803	27,078
	1,848,942	2,101,367

*In December 2015, the NMBI paid an amount of €105,868 including interest and penalties of 17,217 to the Revenue Commissioners. This payment, following a voluntary disclosure, was in settlement of a VAT liability relating to Intra-Community Acquisitions and other purchases arising from accounting periods 2011 - 2014

Nursing and Midwifery Board of Ireland
Notes to the Financial Statements
For the Year Ended 31 December 2016

	2016	2015
	€	€
10. Fitness to Practise		
FTP Administration	23,418	30,564
Legal Fees	3,145,964	2,189,805
Stenographer Fees	82,196	47,021
Total	3,251,578	2,267,390

11. Library

No value has been placed on books and periodicals in the Library. Expenditure is written off in the year in which it occurs.

12. Nursing Careers Centre

The Department of Health has assigned responsibility for the recruitment of and selection of candidates for entry to nursing and midwifery training to the Nursing and Midwifery Board of Ireland, who established the Nursing Careers Centre to manage the process. Salary and accommodation costs associated with this activity are included under the relevant expenditure headings in the Statement of Income and Expenditure and Retained Revenue Reserves.

	2016	2015
	€	€
Recruitment Expenses	26,058	16,844
Public Appointments Service	33,479	30,529
Total	59,537	47,373

Nursing and Midwifery Board of Ireland
Notes to the Financial Statements
For the Year Ended 31 December 2016

13. Fixed Assets

	Freehold Land €	Premises €	Equipment & Fittings €	Computer Software €	Computer Hardware €	Total €
Cost or Valuation						
At 1 January 2016	1,265,833	12,378,773	110,104	512,533	870,981	15,138,224
Additions	-	-	-	21,830	27,431	49,261
Write down	-	-	-	-	-	-
At 31 December 2016	1,265,833	12,378,773	110,104	534,363	898,412	15,187,485
Accumulated Depreciation						
At 1 January 2016	-	2,401,033	91,562	445,150	808,617	3,746,362
Charge for Year	-	247,574	8,560	34,380	33,275	323,789
Write down	-	-	-	-	-	-
At 31 December 2016	-	2,648,607	100,122	479,530	841,892	4,070,151
Net Book Value at 31 December 2016	1,265,833	9,730,166	9,982	54,833	56,519	11,117,333
Net Book Value at 31 December 2015	1,265,833	9,977,740	18,542	67,383	62,364	11,391,862

14. Analysis of changes in Cash and Cash equivalents

	1 January 2016 €	Cash Flow €	31 December 2016 €
Cash at bank and in hand	2,453,898	(2,303,882)	150,016
Short Term Deposit	1,512,078	2,879,088	4,391,166
Total	3,965,976	575,206	4,541,182

Nursing and Midwifery Board of Ireland
Notes to the Financial Statements
For the Year Ended 31 December 2016

15. Receivables

	2016	2015
	€	€
Debtors	23,155	40,284
Prepayments	69,413	93,954
Amount due from HSE for Nursing Career Centre	-	200,000
	<u>92,568</u>	<u>334,238</u>

16. Payables

a) Amounts falling due within one year

	2016	2015
	€	€
Trade Creditors and Accruals ¹	1,447,522	921,288
Deferred Income Annual Retention Fee (i)	2,651,357	2,860,595
Deferred Income from Department of Health	130,975	130,975
Mortgage due in less than one year	232,496	232,496
	<u>4,462,350</u>	<u>4,145,354</u>

¹Included in trade creditors and accruals is NMBI's liability for employee contributions of €22,410 and employer contributions of €72,192 to the Single Public Service Pension Scheme for the period 1 January 2013 to 31 December 2016 due to be remitted to the Department of Public Expenditure and Reform.

(i) Deferred Income (refer to Accounting Policy 1(d) for further details)

	2016	2015
	€	€
Deferred Income at 1 January	2,860,595	2,344,409
Receipts in Year from Annual Retention Fee	5,974,332	6,741,729
Recognised as income in Year	(6,183,570)	(6,255,543)
Total Deferred Income	<u>2,651,357</u>	<u>2,860,595</u>

b) Amounts falling due after one year

	2016	2015
	€	€
Mortgage 2 – 5 Years	929,984	929,984
Mortgage over 5 Years	1,516,128	1,755,114
	<u>2,446,112</u>	<u>2,685,098</u>

Nursing and Midwifery Board of Ireland
Notes to the Financial Statements
For the Year Ended 31 December 2016

17. Related Party Disclosures

Key management personnel in the Nursing and Midwifery Board of Ireland consist of the CEO and members of the Board. Total compensation paid to key management personnel, including board members fees and expenses and total CEO remuneration, amounted to €272,080 (2015: €221,503). For a breakdown of the remuneration and benefits paid to key management personnel, please refer to Note 7.

The Nursing and Midwifery Board adopts procedures in accordance with the guidelines issued by the Department of Public Expenditure and Reform covering the personnel interests of Board members. In the normal course of business, the Nursing and Midwifery Board may enter into contractual arrangements with entities in which Nursing and Midwifery Board members are employed or are otherwise interested.

In cases of potential conflict of interest, Board members do not receive Board documentation or otherwise participate in or attend discussions regarding these transactions. A register is maintained and available on request in all such instances.

There were no transactions in the year in relation to the Board's activities in which the board members had any beneficial interest.

18. Capital Commitments

There were no capital commitments on 31 December 2016.

19. Contingent liability

NMBI is involved in a number of legal proceedings where it is not possible to predict the outcome or possible financial effect of the relevant cases with any certainty. As a result, no provision has been included in the financial statements in respect of these cases.

20. Approval of Financial Statements

These financial statements were approved by the Board of the Nursing and Midwifery Board on 21 November 2017.

Fitness to Practise Department

Nurses Act, 1985

All applications for inquiry received before the 2 October 2012 are considered by the Fitness to Practise Committee established by the Nurses Act, 1985. This committee will continue in office until all such cases are concluded.

Inquiries held in 2016

Ten inquiries commenced in 2016 and all, with one exception, were concluded by the end of the year. The inquiries took place over 20 days.

The Fitness to Practise Committee that hears the inquiry makes a recommendation regarding sanction. However, the decision regarding sanction is made by the Board. The more serious sanctions must be confirmed by the High Court.

The outcome of the 2016 inquiries

Sanction:

- In five of the cases in 2016, the registrants were sanctioned by having their entry removed from the Register.
- In one case, no sanction was applied.
- In three cases, sanction had yet to be determined by the end of the year.

Applicants for an inquiry:

- In six cases, the applicant for the inquiry was the employer.
- In four cases, the applicant for the inquiry was the Board.

Category of complaint:

Cases fall into one or more categories:

- In nine cases, the main issue was the behaviour of the nurse or midwife.
- Three cases concerned clinical practice/competence in a general hospital setting.

Findings were made in all nine concluded cases.

Preliminary Proceedings Committee Nurses and Midwives Act 2011

The Preliminary Proceedings Committee (PPC) gives initial consideration to complaints.

- The majority of complaints (84%) came from employers, though the percentage of complaints from members of the public has increased in recent years (8% in 2016). Members of the public may be patients or their families. The Board was the complainant in 8% of cases.

- In the category of clinical practice/competence complaints, medication management was the most frequent area of concern, followed by a failure to adequately assess a patient's condition; a failure to identify a deterioration in a patient's condition; and/or a failure to take appropriate actions if a deterioration occurs. Deficits in the standard of documentation were often linked to these types of failures.

- In the category of complaints linked to the behaviour of the nurse or midwife, verbal and physical abuse of patients was the basis for the complaint.

- Financial abuse was also a cause for complaint. In some instances, the complaint was about theft, and in others, inappropriate requests for loans and/or borrowing of money from patients. This was most likely to occur in settings where older people or those with a disability were resident.

- The most common complaint linked to a health issue was drug abuse. This was frequently linked to the theft of drugs, forging of prescriptions and/or being on duty in an unfit state. The most common drugs involved were those that are usually available on prescription.

On the 1 January 2016, there were 58 outstanding cases for PPC consideration.

A further 69 confirmed complaints were received during the year starting 1 January 2016 and ending 31 December 2016.

By the end of 2016, the PPC had made decisions on 69 of the 127 cases that were before it.

Of these 69 cases:

- 46 of the cases were referred to the Board where the PPC was of the opinion that no further action was warranted.

- In 2 of these cases, the Board decided that further action was necessary, and referred the cases forward for an inquiry.

- An additional 21 of the cases were referred directly by the PPC to the Fitness to Practise Committee for an inquiry, giving a total of 23 of the 69 cases (33%) referred for an inquiry.

- Two cases were withdrawn by the complainant, and the PPC decided with the agreement of the Board, that no further action would be taken in these cases.

At the end of 2016, 58 were still under consideration.

'Call Overs'

The Fitness to Practise Committee (the FTPC) meets at 'Call Overs' to consider preliminary applications – for example, applications with regard to the hearing of an inquiry other than in public, or preliminary applications in relation to the production of documents.

In 2016, ten Call Over meetings were held.

Public Inquiries

Inquiries under the 2011 Act are automatically held in public. However, an application may be made by the registrant or a witness subpoenaed to attend the Inquiry, for all of the inquiry or for part of the inquiry to be held in private. The decision to hold an inquiry in private is made by the FTPC.

In 2016, a total of 23 inquiries were held of which 10 were in public; 12 were in private and 1 was partly in private.

Inquiries

In 2016, 23 inquiries were held over a total of 35 days. One of these inquiries had commenced in 2015 and concluded in 2016. Twenty inquiries were concluded and three inquiries that commenced in 2016 were carried over into 2017. Of the 20 inquiries that were concluded in 2016, no findings were made in two cases.

Where findings were made and a sanction had been applied by year end, the following sanctions were applied:

- Cancellation of registration – 4 cases.
- Attachment of Conditions – 2 cases.
- Censure and Conditions – 4 cases.
- An Advice and Conditions – 1 case.
- Censure – 1 case.
- An Advice – 1 case.

An appeal was lodged in one case, and therefore, no final determination regarding sanction had been made by year end.

In four cases, a final determination on sanction had not been made by year end.

In the 11 cases that related to clinical practice/competence, 7 related to general nursing and 4 related to midwifery practice.

Six of these complaints came from the nursing home sector; three from hospitals; and two from the community setting.

Section 58 (Application to the High Court for suspension from the Register in the Public Interest):

The Board considered 10 cases pursuant to section 58:

- In one case, the Board made an application to the High Court for a section 58 Order. The nurse gave an undertaking to the High Court that they would not practise as a nurse pending further Order of the court.
- In five cases, the Board accepted an undertaking from the nurse/midwife in relation to their practice.
- In four cases, the Board decided not to make an application to the High Court.

Nurses/midwives with Conditions attached to the retention of their names in the Register

The monitoring of the Conditions attached to the retention of a nurse/midwife's name in the Register is a function of the Board. As of 31 December 2016, there were 30 nurses/midwives with conditions attached to their name on the Register.

Four nurses/midwives had Conditions removed.

Publication

Details of individual cases are published on the website of NMBI at www.nmbi.ie.

Registration Department 2016

The objectives of the Registration Department are to:

- implement the relevant laws, rules and EU Directives;
- promote and implement best standards and quality service provision within the Registration Department; and
- respond in a timely and appropriate manner to national and international registration issues as they arise.

The Register of Nurses and Midwives is maintained by NMBI in accordance with the provisions of both the Nurses Act, 1985 and the Nurses and Midwives Act, 2011.

The following tables show the Register's status at 31 December 2016, with comparative figures for 2015.

Nurses and Midwives Registered

	Active	Inactive	Total
2015	65,203	30,333	95,536
2016	67,559	30,350	97,909
2015 – 2016	↑ 2,861	↑ 17	↑ 2,373
2015 – 2016	↑ 3.6%	↑ 0.06%	↑ 2.4%

Qualifications Registered

Active	Active 2015	Active 2016	Inactive 2015	Inactive 2016	Total 2015	Total 2016
General	53,718	55,769	25,122	25,103	78,840	80,872
Psychiatric	8,560	8,653	5,169	5,209	13,729	13,862
Children's	4,318	4,399	1,567	1,580	5,885	5,979
Intellectual Disability	4,810	4,894	1,185	1,191	5,995	6,085
Midwifery	10,777	10,772	7,335	7,383	18,112	18,155
Nurse Prescriber	869	946	15	16	884	962
Public Health	2,361	2,426	1,077	1,087	3,438	3,513
Tutor	631	654	247	242	878	896
Adv. Nurse Practitioner	174	207	1	1	175	208
Adv. Mid Practitioner	4	6	1	1	5	7
Other	97	88	452	457	549	549
Total	86,319	88,814	42,171	42,270	128,490	131,088

Summary

In summary, at 31 December 2016, **97,909** individuals were registered with **128,490** qualifications.

Of those, there were **67,559** individuals with **88,814** qualifications on the 'active' file – that is, those actively practising in Ireland.

Inactive File

NMBI maintains an Inactive File listing nurses and midwives who are not engaged in the practice of nursing in Ireland. The following table shows the total and the breakdown of numbers.

Reason for inactivity	2015	2016
Retired	13,543	13,730
Unemployed	1,140	1,132
Career Break	2,417	2,532
Working Abroad	8,302	8,196
Other	4,931	4,940
Total	30,333	30,350

There was a significant increase in registration applications from Overseas applicants during 2016 compared to 2015.

Time Period	EU & Non-EU applications received
January 2015 – December 2015	2,534
January 2016 – December 2016	4,323
This reflects a 71% increase in overseas applications received in 2016	

The following tables show figures for Registration decisions issued by NMBI in 2016 (with comparative figures given for 2015) and the breakdown of registration categories.

Year	2015	2016
EU Registrations	681	1,028
Non EU Registrations	358	1,027
Irish trained Registrations	1,760	1,820
Total	2,799	3,875

Number of newly registered qualifications

	Ireland 2015	Ireland 2016	EU 2015	EU 2016	Non-EU 2015	Non-EU 2016	Total 2015	Total 2016
General	860	874	493	921	345	1,027	1,698	2,822
Psychiatric	244	201	25	44	1	49	270	294
Children's	117	170	9	21	0	0	126	191
Intellectual Disability	167	138	10	7	0	10	177	155
Midwifery	217	194	19	34	0	1	236	229
Nurse Prescriber	88	90	0	0	0	0	88	90
Public Health	106	99	1	3	0	0	107	102
Tutor	26	26	0	1	1	0	27	27
Adv. Nurse Practitioner	35	35	0	0	0	1	35	36
Adv. Mid Practitioner	0	2	0	0	0	0	0	2
Total	1,860	1,829	557	1,031	347	1,088	2,764	3,948

EU and non-EU Registrants

Top 5 countries of Training of new EU registrants

Country – 2015	Country – 2016
1: United Kingdom	1: United Kingdom
2: Poland	2: Romania
3: Romania	3: Poland
4: Portugal	4: Spain
5: Spain	5: Italy
+ 15 other countries	+ 21 other countries

Top 5 Countries of Training of new non-EU registrants

Country – 2015	Country – 2016
1: India	1: India
2: Philippines	2: Philippines
3: Nigeria	3: Nigeria
4: USA	4: USA
5: Australia	5: Australia
+ 24 other countries	+ 30 other countries

Annual Retention Fee (ARF) 2016 and Removal from Register for non-payment of ARF

The Annual Retention Fee (ARF) for 2016 was €100.

Section 77 (1) of the Nurses and Midwives Act 2011 (NMA) allows the Board to remove names from the Register if their Annual Retention Fee is not paid, and remains unpaid 28 days after a reminder has been issued.

Once a name is removed from the Register, the nurse/midwife is entitled to have their name restored on the Register in accordance with Section 78 of the NMA if all outstanding fees owed are paid within six months of the date the ARF becomes due. For example, if an ARF was due on 1 January 2016, restoration to the Register can be made on or before 1 July 2016.

It is the individual responsibility of each registrant to pay their ARF and to advise the Board of any change in their address details. It is important that the removal process remains current to ensure that the recorded numbers on the Register reflect those registrants in active practice.

The removal process is now undertaken by the Board of NMBI and no intervention by the High Court is necessary, as was the case under the Nurses Act 1985. The legal requirements to be met by the Board concern the issuing of a payment notice and a reminder notice before removal from the Register can be considered.

A Renewal notice issued to 63,136 Registrants on 23 November 2015 followed by a Reminder notice which issued to 10,144 on 24 February 2016. The Board agreed at their meeting in May 2016 to remove the names of 1,903 nurses and midwives from the Register for non-payment of ARF 2017.

Registration Projects

During 2016, we undertook a number of significant projects to improve processes relating to the efficient and effective operations of the Registration Department.

These included:

- Overseas file review project

- Overseas EU/EEA application form and guidance review project to ensure compliance with EU Directive

- Appointment of Call Centre

- Commencement of disbandment of Inactive File Project

- Nurse prescribing project

- Continued Stakeholder engagement

Undergraduate student Intake September 2016

Candidate Register

The following table shows the student intake at higher education institutions (HEIs) in 2016.

HEI	Student intake
Athlone IT	58
Dublin City University	239
Dundalk IT	109
Galway Mayo IT	43
Letterkenny IT	69
NUI Galway	107
St Angela's College Sligo	47
Tralee IT	70
Trinity College Dublin	306
University College Cork	224
University College Dublin	283
University of Limerick	115
Waterford IT	107

Certificate of Current Professional Status Requests – Verification requests

We issue Certificates of Current Professional Status (CCPSs) for nurses/midwives who may wish to register abroad. CCPSs are sent directly from NMBI to the equivalent regulatory authority in the country or state where the nurse/midwife is seeking registration. A nurse/midwife may apply for more than one CCPS of registration in any given year.

- **1,059** individuals made a total of **1,288** CCPS requests in 2016.

NOTE: A CCPS request does **not** necessarily equate to travel. A separate CCPS is issued for each Division of the Register.

Country CCPS breakdown	Number of requests 2015	Number of requests 2016
Australia	350	501
Canada	51	50
United Kingdom	547	467
United States of America	78	106
Other countries	163	164
Total	1,179	1,288

Appendix 1: Category 1 course approvals in 2016

Category 1 Approvals	2016
January	
Courses (2-year approval)	157
Conferences (1-year approval)	11
Total	168
February	
Courses (2-year approval)	51
Conferences (1-year approval)	11
Total	62
March	
Courses (2-year approval)	62
Conferences (1-year approval)	7
Total	69
April	
Courses (2-year approval)	104
Conferences (1-year approval)	45
Total	149
May	
Courses (2-year approval)	9
Conferences (date approval)	12
Total	21

Category 1 Approvals	2016
June	
Courses (2-year approval)	95
Conferences (date approval)	16
Total	111
July	
Courses (2-year approval)	57
Conferences (date approval)	2
Total	59
August	
Courses (2-year approval)	52
Conferences (date approval)	7
Total	59
September	
Courses (2-year approval)	68
Conferences (date approval)	46
Total	114
October	
Courses (2-year approval)	33
Conferences (date approval)	35
Total	68
November	
Courses (2-year approval)	40
Conferences (date approval)	29
Total	69
December	
Courses (2-year approval)	28
Conferences (date approval)	6
Total	34
Total for 2016	983

Appendix 2: RNP – status of recommendations

Recommendation	Responsibility	Update	Target date for Completion
<ul style="list-style-type: none"> R1: The CPA is retained as a governance tool which must be completed at the point of application for registration with NMBI as a Registered Nurse Prescriber (RNP). 	NMBI ONMSD		<ul style="list-style-type: none"> Completed
<ul style="list-style-type: none"> R2: The governance for the ongoing review of RNP prescribing practices should be managed through local health service provider policy as directed by the NMBI and HSE. <p>NMBI will continue to require the RNP to attest to having a valid CPA in the short term through the Annual Retention Notification, and subsequently through the NMBI continued competency scheme for nurses and midwives. The NMBI requirement and notification for annual and biannual CPA review will cease.</p>	NMBI Local health service providers	<ul style="list-style-type: none"> All RNPs and Directors of Nursing and Midwifery have received formal notification from NMBI regarding ceasing of the annual and biannual review of the CPA. 	<ul style="list-style-type: none"> Completed December 2016
<ul style="list-style-type: none"> R3: The CPA form should be maintained. However, the NMBI should provide more clarity and guidance for the development of Attachments A, B and C. 	NMBI	<ul style="list-style-type: none"> NMBI in collaboration with ONMSD prescribing team has revised CPA form and Guidance document. Available on NMBI website. All RNPs have been informed of the amended documents. 	<ul style="list-style-type: none"> Completed December 2016

Recommendation	Responsibility	Update	Target date for Completion
<ul style="list-style-type: none"> • R4: The local Health Service Provider D&T Committee is to review and advise on attachment B of the CPA and provide support to the DON/M who authorises the CPA on behalf of the health service provider. This reflects its advisory and supportive role with regard to nurse midwife prescribing. <p>The framework in place for use of authorised medicines prescribed for unauthorised indications (off label) as currently established should be retained</p>	NMBI ONMSD	<ul style="list-style-type: none"> • See Recommendation 5 	<ul style="list-style-type: none"> • See Recommendation 5
<ul style="list-style-type: none"> • R5: The D&T Committee or the relevant review group is provided with clear directions regarding its role and function specific to nurse and midwife prescribing. This will provide for a national consistent standard involving a tripartite approach from the DoH, healthcare regulation and HSE. 	ONMSD HSE DoH NMBI	<p>Working group has updated guidance/Points for Consideration for Drugs and Therapeutics Committees in respect of nurse and midwife prescribing. Document is in final draft This document was developed using a tripartite approach between the Department of Health (Medicines Unit and Chief Nursing Office), the Nursing and Midwifery Board of Ireland and the Office of the Nursing and Midwifery Services Director, Health Service Executive.</p> <p>Agree on method of circulation to all services.</p>	<ul style="list-style-type: none"> • For circulation following Governance Group meeting February 2017
<ul style="list-style-type: none"> • R6: In view of Recommendations 1 – 5 the NMBI should revise its professional guidance documents on prescriptive authority. The ONMSD should revise its National Policy for Nurse and Midwife Medicinal Product Prescribing (2012) and accompanying guidelines. 	NMBI ONMSD	<ul style="list-style-type: none"> • NMBI revision of CPA guidance is completed. • <i>Practice Standards for Nurses and Midwives with Prescriptive Authority</i> to be updated following amendment of legislation (Schedule 8 and Exempt Medicines). • ONMSD prescribing team to review National Policy 	<ul style="list-style-type: none"> • Completed December 2016. • Ongoing in 2017 • Review Quarter 1 2017

Recommendation	Responsibility	Update	Target date for Completion
<ul style="list-style-type: none"> • R7: Each health service provider should have an agreed schedule for routine audit of nurse/midwife prescribing as part of its overall organisational audit programme for prescribing and medication management. The NMPDCS should continue to be available for local use as a support for monitoring and clinical audit of RNP prescribing practice. The HSE national mandatory requirement for RNPs to input their prescriptions into this system should be removed. 	<p>ONMSD</p> <p>Local health service providers</p>	<ul style="list-style-type: none"> • ONMSD prescribing team has circulated letter for Health Service Providers re: change in mandatory requirement for NMPDCS. • ONMSD prescribing team has developed a <i>Toolkit for Clinical Audit</i> of nurse midwife prescribing. Document has been circulated to key stakeholders for feedback. This includes a Guidance Document and suite of supporting tools. • Guidance document and tools are available on the HSE website at http://www.hse.ie/eng/about/Who/ONMSD/Practicedevelopment/NursePrescribing/Guidance-for-Clinical-Audit-for-Nurse-and-Midwife-Prescribing.html 	<ul style="list-style-type: none"> • Completed December 2016
<ul style="list-style-type: none"> • R8: The HSE ONMSD to engage with HSE ICT regarding the potential to further develop the NMPDCS to generate electronic prescriptions. This would be in collaboration with relevant stakeholders involved in e health strategy, eg DoH/HSE. 	<p>ONMSD</p>	<ul style="list-style-type: none"> • ONMSD prescribing team continuously liaises with ICT regarding development of national ePrescribing initiative. 	<ul style="list-style-type: none"> • Ongoing
<ul style="list-style-type: none"> • R9: The Department of Health to amend the legislative authority for RNPs to prescribe exempt medicines and draft regulations to enable this. The health service provider should utilise the existing HSE and NMBI guidance frameworks for the use of medicines for unauthorised indication for managing the implementation of exempt medicine prescribing by RNPs. 	<p>DoH</p>	<ul style="list-style-type: none"> • Awaiting feedback from DoH regarding progress on this recommendation. 	<ul style="list-style-type: none"> • Ongoing

Recommendation	Responsibility	Update	Target date for Completion
<ul style="list-style-type: none"> • R10: Based upon findings of consultation activities regarding exempt and off label medicinal products, communication should be circulated to stakeholders regarding: • a. The provision of information updates about exempt medicines and unauthorised indication medicine usage (off label). • b. RNP use of Irish medicine references such as HPRA and the Irish Medicines Formulary vs reliance on UK sources (British National Formulary BNF). 	NMBI ONMSD	<ul style="list-style-type: none"> • Working group in partnership with HPRA has developed a document <i>Authorised Medicinal Products, Off-label Prescription and Exempt Medicinal Products Toolkit</i> • Agree on circulation process at Governance Group meeting in February 2017 • To include this topic in CPD days, Master Classes etc during 2017. 	• Q1 2017
<ul style="list-style-type: none"> • R11 (a) NMBI to examine a process for competency assurance for addressing the current issue of long term candidate nurse prescribers (i.e. candidates who have successfully completed the education programmes but not yet registered as RNP). • R11(b): NMBI to examine a process for competency assurance for addressing the current issue of RNPs who have not utilised their prescriptive authority, i.e. those returning from long term leave /maternity leave/career break etc. 	NMBI	<ul style="list-style-type: none"> • To be progressed following enactment of relevant section of Nurses and Midwives Act 2011. 	• 2017
<ul style="list-style-type: none"> • R12: The Director of Nursing/Midwifery/Public Health Nursing/Services must have overall responsibility and authority for the governance of nurse and midwife prescribing to ensure due diligence in their health service provider. This should be in collaboration with the Chief Executive Officer (group hospitals) Chief Officer (Community Health Organisations) or equivalent, Superintendent Pharmacist and Clinical Directors as appropriate. 	Directors of Nursing/Midwifery/Public Health Nursing Services	<ul style="list-style-type: none"> • ONMSD to develop guidance to support DON/M//PHN/Services regarding their critical role in supporting nurse midwife prescribing. 	• Q1 2017

Appendix 3: Board member attendance 2016

- Board members are required to attend 4 meetings of the Board each year.
- For the purpose of determining attendance, each day that a Board member attends a Board meeting is constituted as one attendance.

Nurse/midwife		26-Jan	27-Jan	17-Feb	29-Feb	01-Mar	22-Mar	23-Mar	29-Mar	18-Apr	24-May	25-May
Mary	Barrett	√	√	√	√	√	√	√	√	x	√	√
Karen	Canning	√	√	x	√	x	√	√	x	√	√	√
Essene	Cassidy	√	√	√	√	√	√	√	√	√	√	√
Lorraine	Clarke-Bishop	√	√	√	√	√	√	√	√	√	√	√
Sinead	Cleary	√	√	√	√	√	√	√	x	√	x	√
Noel	Giblin	√	√	√	√	√	x	x	√	√	√	√
Dawn	Johnston	√	√	√	√	√	√	√	x	√	x	√
Louise	Kavanagh McBride	√	√	√	√	√	√	√	√	√	√	√
Denise	Lawler	√	√	x	√	x	x	x	x	√	x	√
Breda	Liston	√	√	√	√	√	√	√	x	√	√	√
John	Murray	√	√	√	√	√	√	√	√	√	x	x
Total		11	11	9	11	9	9	9	6	11	7	10

Lay representatives		26-Jan	27-Jan	17-Feb	29-Feb	01-Mar	22-Mar	23-Mar	29-Mar	18-Apr	24-May	25-May
Mark	Blake-Knox	√	√	√	√	√	√	x	√	√	x	x
Eamann	Breatnach	x	x	√	√	√	x	x	x	√	√	√
Pat	Dolan	√	√	-	-	-	-	-	-	-	-	-
Colette	Finn	√	√	√	√	√	√	√	x	√	√	√
Martin	Higgins	x	x	-	-	-	-	-	-	-	-	-
Dermot	Manning	√	√	x	√	√	√	√	√	x	x	x
Rosaleen	McElvaney	√	√	√	√	√	√	√	x	√	√	√
Kilian	McGrane	√	√	x	√	x	√	x	x	√	√	√
Liam	Minihan	√	√	√	√	√	√	√	x	√	√	√
Michele	Monahan	√	√	√	√	√	x	x	x	x	√	√
Denis	Murphy	x	√	√	√	√	√	√	x	√	√	√
Kevin	O'Carroll	√	x	x	√	√	√	x	√	√	x	x
Total		9	9	7	10	8	8	5	3	8	7	7

Nurse/midwife		10-Jun	19-Jul	20-Jul	20-Sep	21-Sep	18-Oct	22-Nov	23-Nov	01-Dec	15-Dec	Total no of meetings attended
Mary	Barrett	√	√	√	√	√	√	√	√	x	√	19
Karen	Canning	√	√	√	√	√	√	√	√	x	√	17
Essene	Cassidy	√	√	√	√	√	√	√	√	√	√	21
Lorraine	Clarke-Bishop	√	√	√	√	√	√	√	√	√	√	21
Sinead	Cleary	√	√	√	√	√	√	√	√	x	x	17
Noel	Giblin	√	√	√	√	√	√	x	x	x	√	16
Dawn	Johnston	√	√	√	√	√	√	√	√	x	√	17
Louise	Kavanagh McBride	x	√	√	√	√	√	√	√	√	x	20
Denise	Lawler	√	√	√	√	√	x	√	√	x	x	12
Breda	Liston	√	√	√	√	√	√	√	√	√	x	19
John	Murray	x	x	x	√	√	√	√	√	x	x	14
Total		8	10	10	11	11	10	10	10	4	6	

Lay representatives		10-Jun	19-Jul	20-Jul	20-Sep	21-Sep	18-Oct	22-Nov	23-Nov	01-Dec	15-Dec	Total no of meetings attended
Mark	Blake-Knox	√	x	x	√	√	√	√	x	√	√	15
Eamann	Breatnach	√	√	√	√	√	x	√	√	x	x	13
Pat	Dolan	-	√	√	√	√	x	√	√	x	√	9
Colette	Finn	x	√	√	-	-	-	-	-	-	-	12
Martin	Higgins	-	√	x	√	√	x	√	√	x	x	5
Dermot	Manning	√	√	√	√	√	√	√	√	√	√	17
Rosaleen	McElvaney	√	x	x	√	√	√	√	√	√	x	17
Kilian	McGrane	√	√	x	√	√	x	√	x	x	√	13
Liam	Minihan	x	√	√	√	√	√	√	√	x	x	17
Michele	Monahan	x	√	√	x	x	x	√	√	√	√	13
Denis	Murphy	√	√	√	√	√	√	√	√	x	√	18
Kevin	O'Carroll	x	√	√	√	√	x	√	x	√	x	12
Total		6	10	8	10	10	5	11	8	5	6	

Appendix 4

Committee attendance 2016

Education and Training Committee:

6 meetings were held in 2016.

Committee structure: 11 members (7 Board and 4 non-Board)

Chairperson: Lorraine Clarke-Bishop

Members	Meetings attended
John Murray	3
Noel Giblin	1
Louise McBride Kavanagh	5
Kevin O'Carroll	1
Rosaleen McElvaney	4
Lorraine Clarke Bishop	6
Denise Lawler	2
Sarah Lennon	0
Barbara Kelly	2
Mary McDonnell-Naughton	5
Margaret Philbin	3

Validation and Standards Committee:

2 meetings were held in 2016.

Committee structure: 13 members (4 Board and 9 non-Board)

Chairperson: Louise Kavanagh McBride

Members	Meetings attended
Breda Liston	2
Louise Kavanagh-McBride	1
Kevin O'Carroll	0
Mary Gobbi	1
Bernie Kerry	2
Elizabeth Adams	2
Aisling Culhane	2
Margaret Philbin	1
Sarah Lennon	0
Myles Hackett	2
Kathy Murphy	1
Peter Cullen	1

Midwifery Committee:

4 meetings were held in 2016.

Committee structure: 14 members (5 Board members and 9 non-Board members)

Chairperson: Sinead Cleary

Members	Meetings attended
Mary Barrett	3
Sinead Cleary	4
Dawn Johnston from February 2016)	3
Colette Finn (resigned July 2016)	1
Denise Lawler (from July 2016)	3
Mary Brosnan	1
Clare O'Regan	2
Declan Keane	0
Sally Millar	3
Siobhan Canny	3
Cathriona Molloy	3
Fidelma Flynn	2
Colette McCann	3

Ethics Committee:

3 meetings were held in 2016

Committee structure: 14 members (6 Board members and 8 non-Board members)

Chairperson: Ms Dawn Johnston

Members	Meetings attended
Mary Barrett	1
Eamann Breatnach	1
Dawn Johnston	3
Liam Minihan	3
Denis Murphy	3
Sinead Cleary	3
Louise Daly	3
Maureen Nolan	3
Joan McCarthy	3
Anna-Marie Greaney	1
Kathleen Henry	3
Caroline Lamb	3
Sile Gill	2
Therese Meehan	2

Audit and Finance Committee & Audit and Risk Committee

On 21 July 2016 the Board agreed to dissolve the Audit and Finance Committee and the Governance Oversight Committee and to create two new committees which would separate the audit and risk function from the day-to-day financial arrangements, internal operations and governance of the organisation. These new committees were called the Audit and Risk Committee and the Governance and Finance Committee.

Audit and Finance Committee

2 meetings were held in 2016.

Committee structure: 9 members, including the President of the Board
(6 Board members and 3 non-Board members)

Chair: Colette Finn

Vice chair: Dermot Manning

Members	Meetings attended
Essene Cassidy (President)	2
Colette Finn	2
Dermot Manning	2
Mark Blake-Knox	0
Liam Minihan	1
Avilene Casey	2
Vacant	
Vacant	
Vacant	

Audit and Risk Committee

One meeting was held in 2016

Committee structure: 9 members, including the President of the Board
(6 Board members and 3 non-Board members)

Chair: Martin Higgins

Members	Meetings attended
Essene Cassidy (President)	1
Martin Higgins	1
Dermot Manning	0
Mark Blake-Knox	1
Liam Minihan	1
Dawn Johnston	0
Avilene Casey	0
Vacant	
Vacant	

Governance Oversight Committee & Governance and Finance Committee

On 21 July 2016 the Board agreed to dissolve the Audit and Finance Committee and the Governance Oversight Committee and to create two new committees which would separate the audit and risk function from the day-to-day financial arrangements, internal operations and governance of the organisation. These new committees were called the Audit and Risk Committee and the Governance and Finance Committee.

Governance Oversight Committee

Two meetings were held in 2016

Committee structure: 6 Board members including the President of the Board

Chair: Kilian McGrane

Members	Meetings attended
Essene Cassidy (President)	2
Kilian McGrane	2
Denis Murphy	2
Pat Dolan	1
Michele Monahan	2
John Murray	2

Governance and Finance Committee

Five meetings were held in 2016

Committee structure: 7 Board members including the President of the Board

Chair: Kilian McGrane

Members	Meetings attended
Essene Cassidy (President)	5
Kilian McGrane	5
Denis Murphy	2
Pat Dolan	4
Michele Monahan	5
John Murray	4
Karen Canning	4

Registration Committee

Four meetings were held in 2016

Committee structure: 7 members (4 Board members and 3 non-Board members)

Chair: Sandra McCarthy and Kevin O'Carroll

Members	Meetings attended
Kevin O'Carroll	1
Lorraine Clarke-Bishop	2
Dermot Manning	2
Karen Canning (resigned November 2016)	1
Cathriona Lavelle	2
Cathriona Molloy	2
Sandra McCarthy	2

Fitness to Practise Committee (Nurses Act 1985)

One meeting was held in 2016

Committee structure: 20 Board members

Chair: Pauline Treanor

Members	Meetings attended	Total number of inquiry days in 2016	Total number of inquiries attended in 2016
Ms Pauline Treanor (Chair)	1	3	1
Ms Maureen Kington (Vice Chair)	1	2	2
Dr Eamann Breatnach	0	0	0
Ms Jacqueline Burke	1	4	2
Dr Robert Burns	0	0	0
Ms Deirdre Duffy	1	0	0
Ms Marie Gilligan	0	2	1
Ms Mary Godfrey	1	9	4
Ms Mary Kenneally	0	6	1
Ms Cathryn Lee	0	4	3
Mr Gerard Maguire	0	6	1
Ms Eimear McAuliffe	1	7	4
Mr John McCardle	0	3	1
Ms Aine McHugh	1	4	1
Ms Caitriona Molloy	1	0	0
Ms Jacinta Mulhere	1	1	1
Ms Orla O'Reilly	0	0	0
Ms Virginia Pye	0	0	0
Ms Siobhan Quirke	0	2	2
Ms Ann Sheehan	1	7	4

Fitness to Practise Committee (Nurses and Midwives Act 2011)

10 Call Over meetings were held in 2016.

23 Inquiries were held in 2016 (one commenced in 2015 and concluded in 2016) over 35 days.

Members	Number of Call Over meetings attended	Number of Inquiries attended	Number of Inquiry days attended
Noel Giblin (Chair)	9	12	16
Mary Barrett (Vice-Chair) Appointed 27.01.2016	0	2	5
Karen Canning (from 27 January 2016)	0	2	2
John Murray	1	4	8
Denise Lawler	0	4	5
Liam Minihan (from 21 September 2016)	0	0	0
Mark Blake Knox	1	4	4
Michele Monahan	3	4	6
Pat Dolan End of term 14.02.2016 Re-appointed 19.07.2016	5	7	8
Una Marren	0	1	1
Amanda Phelan	0	1	1
Martin McNamara (from 21 September 2016)	0	0	0
Mary Higgins	9	16	23
Margaret Crowley Murphy	1	2	8
James Doran	2	1	1
Mark Kane	0	4	8
Tara Cusack	3	6	12
Cathriona Molloy	3	9	11
Shane McCarthy	7	12	17
Catherine Boyhan	1	7	10
Michael McGrail	0	0	0
Michael Brophy	2	3	5

Members	Number of Call Over meetings attended	Number of Inquiries attended	Number of Inquiry days attended
Stephen Kealy	1	4	6
Richard Hammond (from 21 September 2016)	0	0	0
Jill Long (from 21 September 2016)	0	1	1
Cindy Mackie (from 21 September 2016)	0	0	0
Colette Finn (resigned September 2016)	2	7	13

Preliminary Proceedings Committee

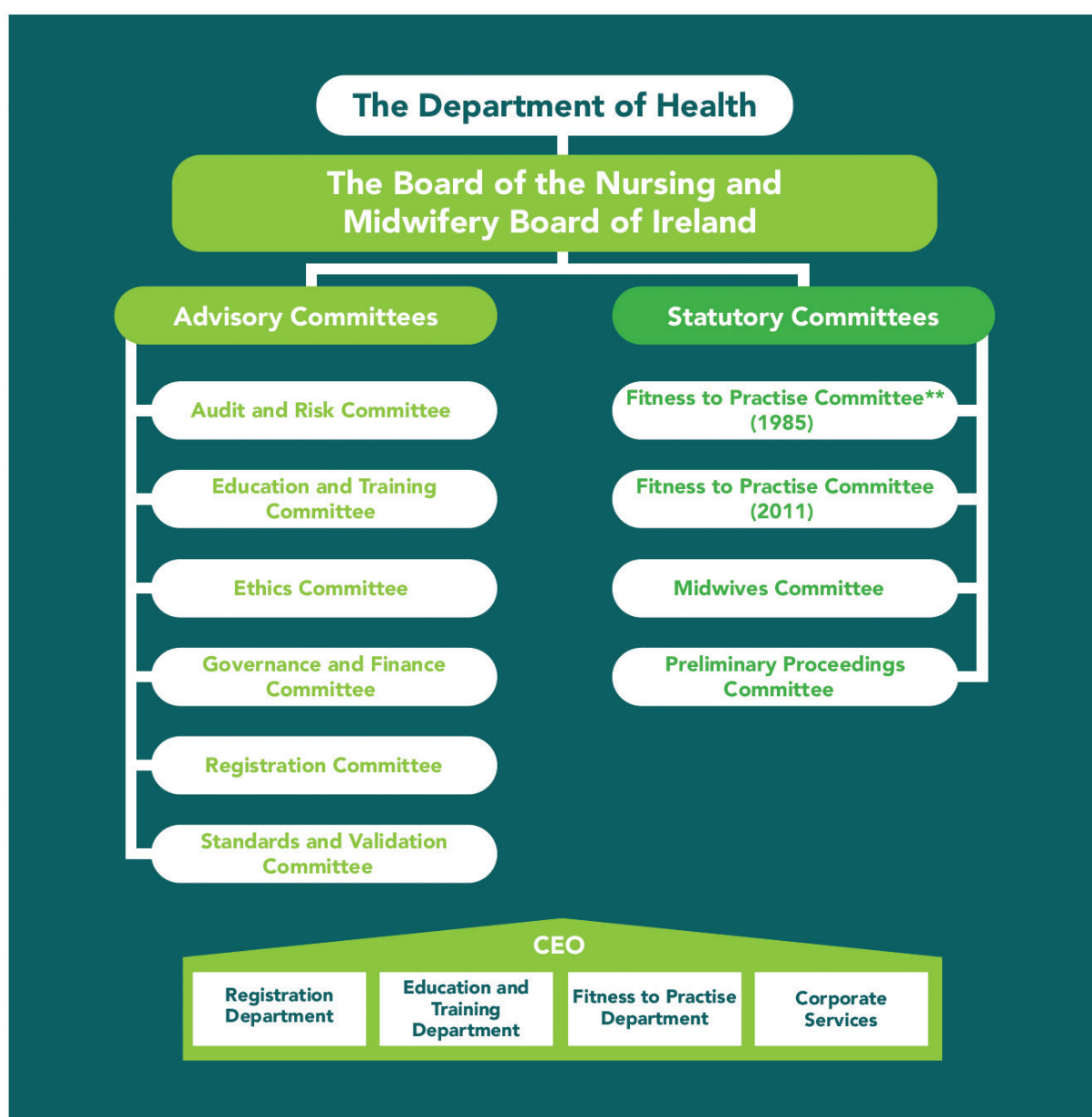
Ten meetings were held in 2016

Committee structure: 10 members (4 Board members and 6 non-Board members)

Chair: Sinead Cleary

Members	Meetings attended
Sinead Cleary	10
Denis Murphy	7
Breda Liston	9
Eamann Breatnach	5
Timothy Frawley	9
Geraldine Freeney	9
Clodagh Geraghty	9
Miriam Kelly	7
Ann Sheehan	8
Fidelma Flynn	4

Appendix 5: Organisation chart



Appendix 7

Members of the Board of NMBI – 2016



Essene Cassidy

President of the Board
Elected Board member from
practice of public health
nursing



John Murray

Vice President of the Board
Elected Board member from
practice of public health
nursing



Denise Lawler

Board member
nominated to
represent the
universities



**Louise Kavanagh
McBride**

Board member
nominated to represent
the institutes of
technology



Lorraine Clarke-Bishop

Elected Board member
employed in the
public health sector
and engaged in the
education of nurses and
midwives



Karen Canning

Elected Board member
from the practice of
general nursing



Breda Liston

Elected Board member
from the practice of
children's nursing



Noel Giblin

Elected Board member
from the practice of
intellectual disability
nursing



Sinead Cleary

Elected Board member from the practice of midwifery



Mary Barrett

Elected Board member from the practice of care of older persons



Éamann Breatnach

Board member nominated to represent the Medical Council



Rosaleen McElvaney

Board member nominated to represent the education and training of nurses and midwives



Liam Minihan

Board member nominated to represent the Health Service Executive



Kilian McGrane

Board member nominated to represent the Health Service Executive



Michele Monahan

Board member nominated to represent the Health and Social Care Professionals Council (CORU)



Kevin O'Carroll

Board member nominated to represent the Health Information and Quality Authority



Mark Blake-Knox

Board member nominated to represent the voluntary sector



Pat Dolan

Board member nominated to represent the public interest



Denis Murphy

Board member nominated to represent the public interest



Dermot Manning

Board member nominated to represent the public interest



Martin Higgins

Board member nominated to represent the public interest



Dawn Johnston

Board member nominated to represent Directors of Nursing and Midwifery



Bord Altranais agus
Cnáimhseachais na hÉireann
Nursing and Midwifery Board
of Ireland