



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

NURSING and
MIDWIFERY
Board of IRELAND

Annual Report
2017

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President's Address

Essene Cassidy
President

The Nursing and Midwifery Board of Ireland (NMBI) is the statutory body which sets the standards for the education, registration and professional conduct of nurses and midwives in Ireland. We provide leadership to registered nurses and midwives, and help ensure high standards of safe care for patients and the wider public through innovative and proactive regulation. Protecting the public and the integrity of the professions of nursing and midwifery is at the heart of our mission.

In recent years, we have been extremely focused on our reform agenda, which is driving improvements in how we perform our functions in a resource-constrained environment.

Our programme of work involves maintaining the Register of Nurses and Midwives, setting standards in their professional education and training, promoting evidence-based best-practice, responding to and investigating complaints to safeguard patient safety, and informing policy and legislation. Through the hard work and commitment of NMBI staff, great progress has been made across these activities over recent years, and I wish to commend them for this and to thank them for their efforts.

I also wish to thank the members of the NMBI Board and Committees for their energy and commitment. They play a crucial role in delivering on the organisation's responsibilities, and have driven reform and made notable progress on issues of corporate governance and transparency.

As part of our commitment to openness and transparency, we now dedicate a section of our website to providing information and updates on NMBI Board meetings. In addition, a review of Committees has led to rationalisation and realignment. There are now four Statutory Committees and four Advisory Committees with specific responsibilities and terms of reference to support the activities of the Board in governing NMBI.

An election took place for Board Member positions in September 2017, and we are delighted to welcome new members to the Board. Mary Gorman, Liam Hamill and Eileen Kelly were elected in their categories and their tenure began in December alongside Catherine Cocoman. The Minister for Health, Mr Simon Harris, also appointed Tanya King, Dr Denise Lawlor and Mark Blake-Knox to the Board.

Protecting the public and the integrity of the professions of nursing and midwifery is at the heart of our mission.

I was honoured to be returned as President alongside our new Vice President, Dr Louise Kavanagh McBride, in the elections for the positions of President and Vice President.

Our Statement of Strategy 2017-2019 was launched in April 2017 by Minister Harris, and it sets the new strategic direction for the organisation. I wish to thank the Minister and the Department of Health for all their assistance and support, in particular, the Office of the Chief Nurse. We continue to work on strengthening our communication with our stakeholders, and I would like to personally thank them for their co-operation and professionalism throughout the year.

I look forward to continuing the reform and progress achieved at the NMBI over the recent period with my colleagues, in keeping with our responsibilities under the Nurses and Midwives Act 2011. All this will provide a regulatory function that is fit-for-purpose and supportive of nurses and midwives across Ireland as they perform their vital work in the healthcare setting on a daily basis. One hundred years of regulation of midwives in Ireland takes place in 2018 and is an important milestone in the development of the midwifery profession in this country. So many aspects of regulation have changed during those 100 years, and we are determined now to continue to adapt to ensure our regulatory model is relevant, modern and effective.



Essene Cassidy

President
Nursing and Midwifery Board of Ireland



Mary Griffin
Interim CEO

Interim CEO's Overview

Reform, renewal and building stability have been the priorities for NMBI throughout 2017. In particular, we are working hard on defining a sustainable funding model to support our important work into the future. The new NMBI Statement of Strategy 2017-2019 plays a vital role in this. The Strategy sets out what we are going to do and the milestones by which we will do it. We are now publicly reporting on our performance against these milestones every six months.

The Strategy is centred on our core purpose, which is to support registrants and protect the public by establishing standards and requirements that guide nursing and midwifery practice. The feedback we have received from stakeholders has shown us that there is a need for us to help them better understand our role and the important work we undertake to safeguard patient safety.

The Strategy also reflects our drive now to strengthen our relationship with our registrants, to make our work more transparent, and to make sure we are equipped to meet the needs of our registrants, the public and other stakeholders going forward. It provides us with a blueprint to support organisational development and continuous operational improvement that makes strong demands of our organisation and our staff.

We are fostering new organisational efficiencies and effectiveness by investing in relevant technology and reaching out to key stakeholders on a consistent basis. We have redesigned our processes and procedures, and our organisational structure has been proactively changed for the better to deliver on our legislative and business needs.

All nurses and midwives who practise in Ireland must be on the Register of Nurses and Midwives which is maintained by NMBI. Currently, there are over 70,000 nurses and midwives on the Register. In 2017, 4,684 nurses and midwives were registered for the first time in Ireland – a record number for a calendar year – with 3,293 trained outside of Ireland. NMBI is working hard to process the huge increase in overseas applications over recent years, with an ongoing focus on improving systems to support qualified candidates that want to practise in Ireland.

Reform, renewal and building stability have been the priorities for NMBI throughout 2017. In particular, we are working hard on defining a sustainable funding model to support our important work into the future.

However, incomplete applications remain a continuing challenge. To achieve registration in Ireland, applicants must meet the highest standards in terms of education and training programmes, as well as having adequate clinical and theory hours. The protection of the public is at the heart of our registration system.

As part of our overarching goal to protect the public, NMBI is legally responsible for considering complaints against nurses and midwives who practise in Ireland. We receive complaints from members of the public, employers and healthcare professionals, as well as nurses and midwives who have concerns about their colleagues. Our Fitness to Practise department deals with all such complaints. In 2017, 27 inquiries into 31 registrants were held. We received 127 complaints throughout the year and we expect about a third of these to go forward for inquiry.

NMBI also plays a pivotal role in the education of nurses and midwives in Ireland. Undergraduate and postgraduate programmes in nursing and midwifery in Ireland's fourteen Higher Education Institutions (HEIs) must comply with the standards and requirements set down by NMBI. In 2017, we engaged with 15 education bodies, monitored 53 education programmes and monitored approximately 400 placement locations.

Our focus on organisational renewal will continue, and, by listening to and working concertedly with our valued partners, we can have a greater positive impact on patient outcomes and public safety into the future. NMBI is strengthening its relationships and is seeking to work more collaboratively with the Minister for Health, the Department of Health, the Oireachtas, the wider political system, partner representative bodies, other relevant statutory bodies, health service providers, as well as relevant EU and international bodies.



Mary Griffin

Interim Chief Executive Officer
Nursing and Midwifery Board of Ireland





01

**NMBI: Our mandate
and our services**

Who we are

NMBI is the regulatory body for the professions of nursing and midwifery in Ireland. We perform our functions in the public interest under the Nurses Act, 1985 and the Nurses and Midwives Act 2011. We have a statutory obligation to protect the integrity of the practice of the professions of nursing and midwifery and to protect the public. We do this by maintaining a Register of Nurses and Midwives and we promote high standards of professional education, training and practice and professional conduct amongst nurses and midwives.

We currently do this by:

- Maintaining the Register of Nurses and Midwives and a candidate list for student nurses and midwives. We establish criteria for assessment and registration in our register and the various divisions of that register. We issue certificates of registration and renewal of registration. We make our register available to the public on our website so that people can check to confirm that a nurse or midwife is registered.
- Setting standards for the education and training of nurses and midwives. We approve programmes of education necessary for registration and renewal of registration. We monitor these programmes on an ongoing basis.
- Supporting our registrants by providing appropriate guidance on professional conduct and ethics for both registered nurses and midwives.
- Specifying criteria regarding the creation by employers of advanced practice nursing and midwifery posts.
- Inquiring into complaints about our registrants. We make decisions relating to the imposition of sanctions on registered nurses and midwives who have findings made against them.
- Advising the Minister and the public on all matters of relevance relating to our functions.

Our role in setting standards and providing guidance for over 70,000 registered nurses and midwives in Ireland focuses on public safety, and we work collaboratively with the Department of Health, employers, managers, unions, educators, other regulatory bodies and our registrants.

How we support Nurses and Midwives



Supporting Nurses and Midwives

Integrity of Nursing and Midwifery Practice

Pre-Registration



Information on careers in nursing and midwifery
 Information on pre-registration programmes
 Setting standards and requirements for education programmes
 Monitoring adherence to standards and requirements for education programmes
 Conducting site visits to programmes and practice placements
 Providing professional advice and support to nurses, midwives and other stakeholders

Registration



Maintaining the Register of Nurses and Midwives and the Candidate Register
 Assessing eligibility of applicants for entry on the Register of Nurses and Midwives
 Providing guidance to nurses and midwives on matters relating to professional conduct and ethics

Standards
 Defining your scope of practice
 Setting out in our Code the standards of practice and behaviours expected of nurses and midwives

Professional Competence Scheme (new)*
 Developing a professional competence scheme to monitor the maintenance of competence

Review



Complaints
 Investigating complaints against registered nurses and midwives
 Responding to concerns and taking action to protect the public where necessary

Fitness to Practise
 Ensuring a robust complaints process through Preliminary Proceedings Committees and Fitness to Practise Committees
 Imposing sanctions proportionately and where appropriate
 Monitoring conditions

Restoration



We assess applications for restoration to the register of former registrants following removal or cancellation (in the case of non-payment of the annual retention fee)

Removal:
 The Board can consider the following six grounds upon receipt of an application for restoration to the Register.

1. Circumstances that led to cancellation of registration
2. The findings of the FTP committee and the reasons for cancellation
3. Any insight the nurse/midwife has gained into the matters that led to cancellation
4. What the nurse/midwife has done since cancellation
5. The steps taken to keep up-to-date with nursing/midwifery knowledge
6. The steps taken to rehabilitate professionally and/or socially

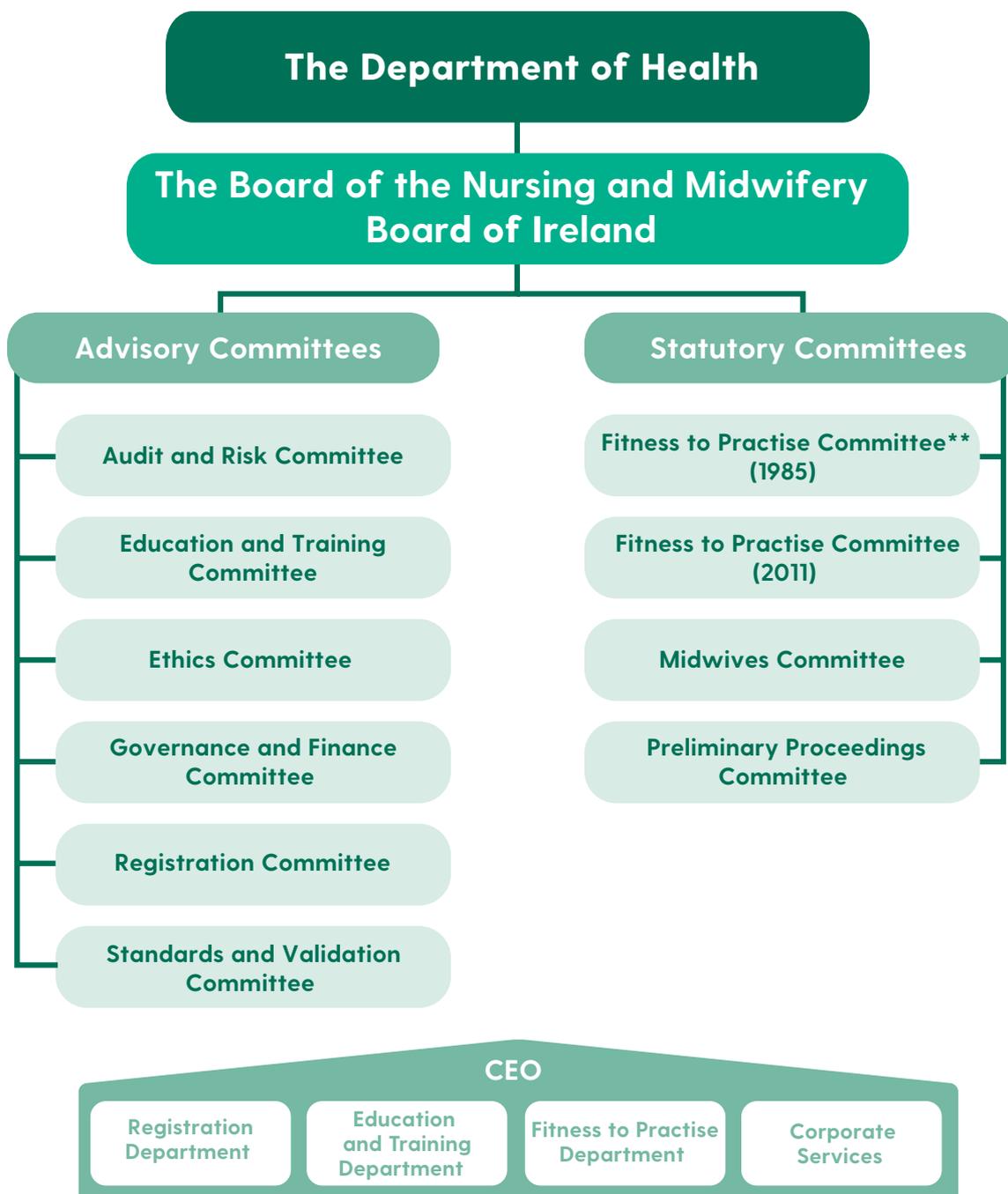




02

Governance and Management

Structure of the Nursing and Midwifery Board of Ireland



Governance

The Board of NMBI comprises 23 members with a lay majority of 12. There are eight elected members, and, in addition, three nurses/midwives are appointed by the Minister. Five members are recruited through Stateboards.ie, and the remaining members are nominated by stakeholders – such as voluntary bodies and public interest groups – and are appointed by the Minister. All Board Members act in a non-executive capacity.

For details of our Board Members, the Board meeting schedule and attendance during 2017, please refer to the Appendices.

Since July 2017, there are four Statutory Committees and four Advisory Committees with specific responsibilities to support the activities of the Board in governing NMBI. There are more details regarding the members of the Committees, a brief summary of the remit of the Committees, meeting schedules and attendance in the Appendices.

Organisation Structure

NMBI's organisational structure reflects our core functions and activities of Education and Training, Registration, Fitness to Practise, together with the corporate services that enable us to achieve our corporate objectives. Corporate services include Finance, IT and HR. In addition, we have the Chief Executive's Office which includes the Secretariat, and more recently the Communications function.

Activities completed in 2017 by each of these core functions are provided in the next section.



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03

Strategic Objectives and Achievements

3.1 Summary of achievements from 1 January to 31 December 2017

Registration



Number of nurses and midwives registered for the first time



- EU: 1,748
- Non-EU: 1,545
- Ireland: 1,391



Education

NMBI is responsible for setting standards for Education Programmes and regularly approving and re-approving programmes.



Education Bodies being engaged with

15



Education Programmes being monitored

53



Placement locations subject to monitoring

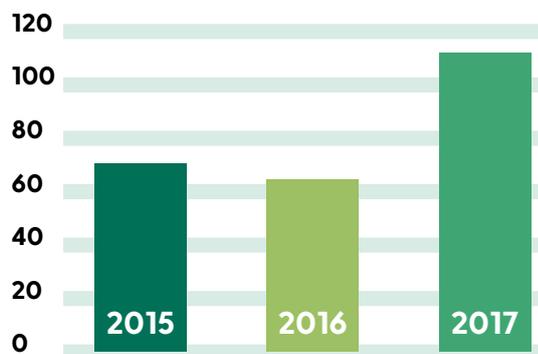
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Dealing with complaints

There are currently over 70,000 nurses and midwives on the NMBI Register. A very small number on the Register are the subject of a complaint each year, about 0.1 per cent of all registrants. In 2017, 127 complaints were received. Of these we would expect approximately 30-35 per cent of these to progress to inquiry.

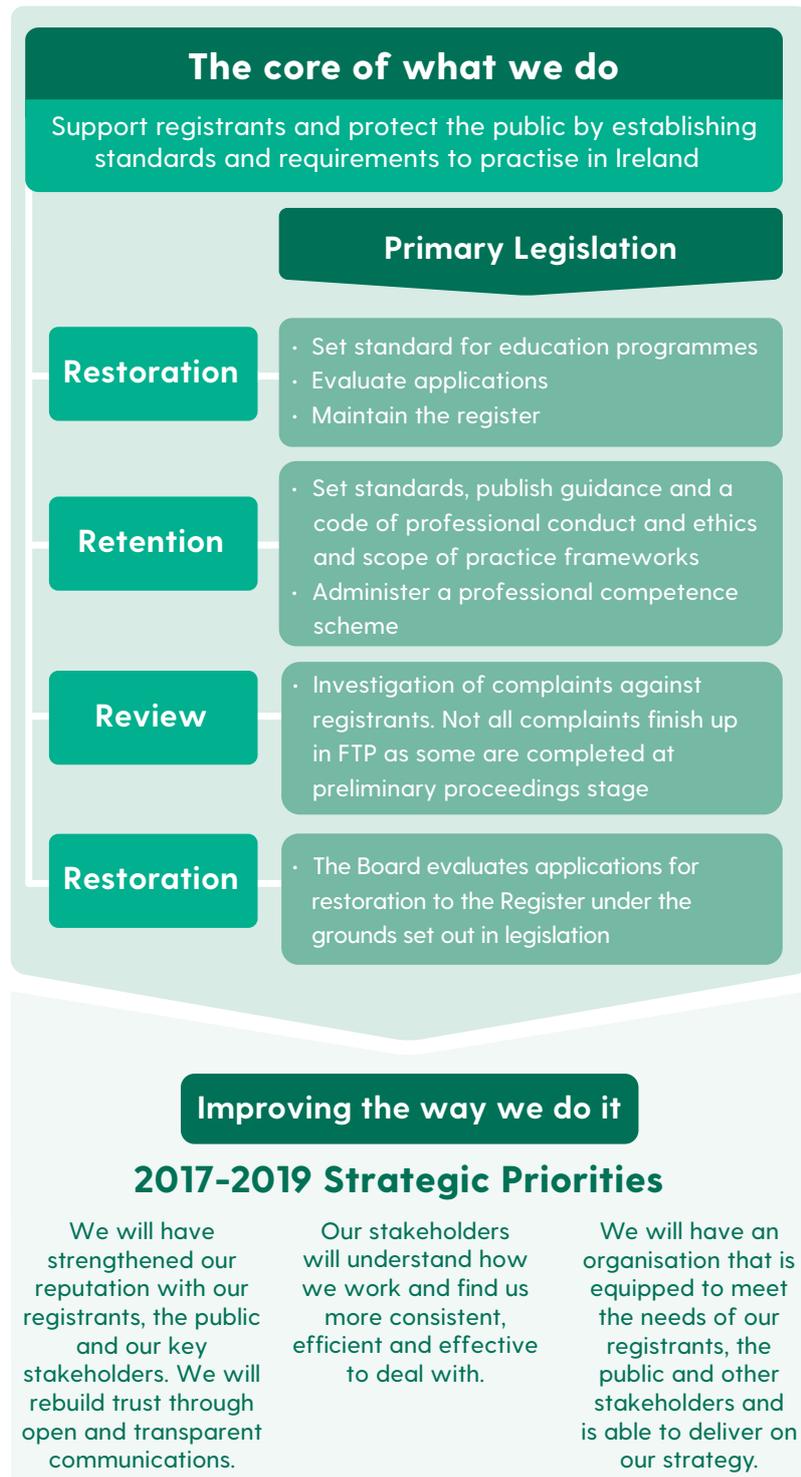
Number of Complaints



Should you wish to find out more, a guide to Fitness to Practise has recently been published and is accessible on the website.

3.2 Strategic Objectives

In April, NMBI published its Statement of Strategy 2017-2019. The strategy is summarised in the diagram below and available on the NMBI website.



Strategy Milestones

In addition to our core work, our three-year strategy also set out a significant reform agenda. We committed to milestones to be achieved each year 2017-2019. A summary of our progress against our 2017 milestones is detailed below.

1. We will have strengthened our reputation with our registrants, the public and our key stakeholders.				
How we will improve it	Key Milestones 2017	Complete	Planned Start Date	Comments
We will build trust through open and transparent communication	Publish Strategy	✓	–	–
	Publish Strategy Consultation Report	✓	–	–
	Publish Annual Report (2016)	✓	–	–
	Publish Business Plan	✓	–	–
	Publish Board Minutes	✓	–	Ongoing activity
	Director of Midwifery in Place	✓	–	–
	Publish and Implement our Consultation Policy	✓	–	–
	Conduct listening events with stakeholders	✓	–	Ongoing activity
	Public consultation on proposed Professional Competence Scheme	✓	July, 2017	A project officer was appointed in June, key stakeholder meetings have commenced and a draft scheme will be shared in an extensive public consultation in 2018.
We will work in partnership with other health and social care agencies	Continue to participate and contribute to existing cross-regulator networks and events	✓	–	Ongoing activity
	Facilitate cross regulator workshop on FTP to share good working practices	✓	–	Ongoing activity

2. Our stakeholders will understand how we work and find us more consistent, efficient and effective to deal with.

How we will improve it	Key Milestones 2017	Complete	Planned Start Date	Comments
We will publish clear, easy to understand information which informs the public and our service users of the role of the Nursing and Midwifery Board of Ireland, and of our requirements, how to engage with us and how we facilitate self service	Ongoing website content development	✓	-	Ongoing activity
We will define and publish service standards for our service users	Customer Charter published	✓	Q3 2017	Not started. A Communications Manager was appointed in November 2017 (originally planned for Q1) and the Customer Charter will form part of the Communications Workplan.
We will publish clear, easy to understand, evidence-based guidance documents for our registrants	Guide to FTP published	✓	-	-
	Analyse internal data and external research and publish material for registrants addressing risk factors for poor practice	✓	-	Ongoing activity
We will develop clear standards and requirements to inform nursing and midwifery education programmes that lead to registration	Guide to education programme approval published	-	Q3 2017	-
	Guide to Registration published	-	Q3 2017	-

3. We will have an organisation that is equipped to meet the needs of our registrants, the public and other stakeholders, and is able to deliver on our strategy.				
How we will improve it	Key Milestones 2017	Complete	Planned Start Date	Comments
We will invest in relevant technology to ensure that suitable hardware and software is in place to support the core functions of the Nursing and Midwifery Board of Ireland	IT Steering Committee in place	✓	–	Ongoing activity
	Enhanced Education Database and File Management System in place	Commenced		Education system requirements have been scoped and will be delivered as part of the new registrant system (2019)
	Consolidate and streamline current data collection approach	✓	–	Ongoing activity. New Excel-based KPI reporting tool in place.
We will support staff so they have the knowledge, skills and competencies to do their jobs effectively and with confidence	Develop and begin implementation a three-year workforce plan	✓	–	Ongoing activity
	Define and implement induction plan for new staff, Board and Committee Members	✓	–	Ongoing activity
We will completely revise and redesign our processes and procedures to meet increased demand and user expectations and reduce the cost to serve	Registration process mapped, and standard operating procedure in place	Commenced		Registration processes and procedures streamlining was ongoing through 2017 with a number of changes implemented. Future requirements have been scoped and will be delivered as part of the new registrant system (2019).
We will reduce paper in our system	Education Programme approval process mapped, and standard operating procedure in place	✓		New approach defined and team aligned. Education system requirements have been scoped and will be delivered as part of the new registrant system (2019).
	File Transfer Protocol (FTP) process mapped, and standard operating procedure in place	✓	–	Guide to FTP published.

(continued)

How we will improve it	Key Milestones 2017	Complete	Planned Start Date	Comments
We will proactively review the structure of our organisation to allow for the effective and efficient delivery of our legislative remit	Begin implementation of three-year workforce plan	✓	–	–
	Manage election to the Board	✓	–	–
We will enhance the ability of our service users to self-serve through digital channels	Online copy of registration certificates and phased payments available	✓	–	Phased payments delivered. On-line certificates have been scoped and will be delivered as part of the new registrant system (2019).
We will fully comply with the Code of Practice for the Governance of State Bodies (2016)	Confirm compliance as part of annual report	✓	–	Ongoing activity. To be confirmed in 2017 annual report and each annual report thereafter.
	Monitor and Manage Risk Register	✓	–	Ongoing activity
We will have defined a sustainable funding model and be operating within it	Complete financial strategy review and identify three-year roadmap	✓	–	Ongoing activity. Twice yearly checkpoint against plan.

In summary, we are progressing well against our strategic objectives and the milestones we put in place for 2017. We recognise, however, that we are on a journey. Maintaining the trust and confidence of the public and professionals in us as regulator, becoming more efficient and effective to deal with, and having an organisation that is appropriately equipped will not be achieved overnight. We remain committed to our strategic objectives and delivery of them.



04

Activities by Directorate

4.1 Professional Standards

The 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 2017, 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 (HEIs), hospitals and healthcare institutions providing training to ensure that valuable clinical and theoretical experience is provided.

Site visits to healthcare institutions and linked third level institutions

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

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

In 2017, site visits commenced at the following:

- **University College Dublin and associated healthcare agencies for programmes in:**
 - General Nursing
 - Children’s and General (Integrated)
 - Psychiatric Nursing
 - Midwifery
- **Galway Mayo Institute of Technology and associated healthcare agencies for programmes in:**
 - General Nursing
 - Psychiatric Nursing
- **Institute of Technology Tralee and associated healthcare agencies for programmes in:**
 - General Nursing
 - Psychiatric Nursing

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.

Site Visit Panel Members

The Acting Chief Education Officer reviewed the current site visit process, and expressions of interest were sought from registrants to participate in the work of the Education Department regarding site visit inspections. Information was posted on the website, and interested applicants had to submit a CV and application form. Site visit inspections are now carried out by a team of registrants chosen by relevant discipline.

Post-Registration Courses

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 I 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).

In 2017, we approved 991 Category 1 courses. These are available in Appendix 5.

Post-Registration Category II courses

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 2017, 48 post-registration courses were approved. The following table gives a breakdown of the range of courses approved.

Awards	Count
BSc	0
BSc-Cert	2
BSc(Hon)	2
Cert	10
Higher Diploma	3
GradCert	1
PGDip	9
MSc	9
MSc-PGDip	2

(continued)

Awards	Count
MSc-PGDip-PGCert	0
N/A	0
Optional Module	0
ProfCert	3
Supplemental award	7
Special Purpose	0
Total:	48

Self-Assessment Audit Tools for Post-Registration Programmes

The Self-Assessment Audit Tool for post-registration courses was updated in 2017. The following documents have been circulated to the HEIs, and are available for download from the NMBI website:

- Guide template for submission of post-registration programmes
- NMBI Major Award post-registration Self-Assessment audit form 2017
- NMBI Minor Award post-registration Self-Assessment audit form 2017
- NMBI ANP post-registration Self-Assessment audit form 2017
- NMBI Prescribing post-registration Self-Assessment audit form 2017

Category II Equivalence

The Board reviews equivalence – that is, recognition of credentials acquired by nurses and midwives outside of Ireland. In 2017, 18 courses were reviewed for Category II equivalence.

Prescribing

NMBI, in collaboration with the Office of the Nursing and Midwifery Director (ONMSD) prescribing team, revised and updated the *Practice Standards and Guidelines for Nurses and Midwives with Prescriptive Authority*. This is in line with the recommendations from the *Report on Nurse and Midwife Medicinal Product Prescribing Review of Existing Systems and Processes (2015)*.

Educational Assessment for Overseas Applicants for Registration

The Education Department work in partnership with the Registration Department in terms of the provision, oversight and management of education assessments required to be undertaken as part of the overseas application assessment for registration as a nurse or midwife in Ireland. In 2017, 2386 files for educational assessment were completed.

Advanced Practice

Registered Advanced Practitioner Figures	Advanced Nursing Practitioner (ANP)	Advanced Midwifery Practitioner (AMP)	Total
2017	49	2	51
2016	36	2	38
2015	35	0	35
2014	19	2	21
2013	14	0	14
2012	15	0	15
2011	53	3	56
2010	33	0	33
2009	0	0	0
Total 2010 to date	254	9	263

As demonstrated above, there is an increasing trend for applicants going forward for Advanced Practice registration. Throughout 2017, NMBI worked closely with the major stakeholders in Advanced Practice to implement the Department of Health's *Policy for Graduate, Specialist and Advanced Nursing & Midwifery Practice*. In October 2017, approximately 124 candidate ANPs commenced the education programme as part of the Department of Health implementation plan.

2017 also saw the launch and publication of the new *Advanced Practice (Nursing) Standards and Requirements*.

There is ongoing work on the drafting of the Advanced Practice Rules as part of the suite of Nurses and Midwives Rules due for enactment in 2018.

Library

The Library continued to provide the following services:

- Online access to CINAHL (Cumulative Index of Nursing and Allied Health Literature)
- Inter-library loans (British Library)
- Online searching

Nursing and Midwifery Careers Centre

The careers function of NMBI is outlined in the *Nurses and Midwives Act 2011*:

“The Board shall, in consultation with the Health Service Executive and such other appropriate bodies as the Board thinks fit, make available career information on nursing and midwifery, including information on education and training.”

Main functions of Careers Section, NMBI

The provision of information on careers in nursing and midwifery was carried out as follows:

1. Annual publication of our booklet *Nursing and Midwifery A Career for You* which tells you everything you need to know if you are thinking about applying for nursing or midwifery.
2. Maintenance of the Careers Section of NMBI website.
3. Response and analysis of careers queries received to dedicated email address – careersinformation@nmbi.ie
4. Annual promotion of Nursing and Midwifery as a Career at the Irish Times Higher Options Career Fair, RDS, Dublin.
5. Analysis of statistics provided by CAO on applications to nursing and midwifery programmes, and dissemination of trends to stakeholders.
6. Development of promotional material on careers in nursing and midwifery.
7. Regular communication with all stakeholders.

The Careers section is also responsible for the ongoing management of mature applications to undergraduate nursing and midwifery programmes with the CAO and the Public Appointments Service (PAS). To apply for a place on a nursing or midwifery degree programme, mature applicants must apply to the CAO and sit an assessment test which is run by the PAS on our behalf.

The test has three components: literacy, numeracy and a job simulation test. The latter test replaced the interview and is based upon competencies required for student nurses and midwives and was developed by the organisational psychologists in the PAS. (Note: the interview element of the application process was discontinued in 2011 following an evaluation.)

Applications to Nursing and Midwifery programmes 2017

Prog.	No. of places 2009-2016	Applic 2013	Ratio 2013	Applic 2014	Ratio 2014	Applic 2015	Ratio 2015	Applic 2016	Ratio 2016	No. of places 2017	Applic 2017	Ratio 2017
Gen	860	6945	1:8	6604	1:8	6724	1:8	7218	1:8	925	6733 ↓	1:7
Psych	290	3425	1:12	3246	1:11	3249	1:11	3512	1:10	423	3794 ↑	1:9
ID	180	2254	1:12	2081	1:12	1995	1:11	2035	1:11	210	2051 ↑	1:10
MW	140	2827	1:20	2727	1:19	2644	1:19	2732	1:19	144	2868 ↑	1:20
C&Gen	100	2084	1:21	2066	1:21	2024	1:20	2189	1:22	130	2100 ↓	1:16
Total	1570	9094	1:6	8859	1:6	8871	1:6	9470	1:6	1832	9277 ↓	1:5

Numbers of Places

1. The number of places available in psychiatric nursing increased in 2016.
2. In August 2017, an extra 200 places were allocated to nursing programmes.

The number of places available to nursing pre-registration education programmes was increased in August 2017.

Applications

1. Total applications were down on 2016. However, 2017 figures (9,277) are greater than the average number over past five years.
2. The drop in applications did not occur across all disciplines.
 - » The numbers applying to Psychiatric, Intellectual Disability and Midwifery are all up on 2016 figures.
 - » Psychiatric nursing saw its highest number of applications since 2009.
 - » Whilst the number of applications to Intellectual Disability is up on 2016, the trend over the past numbers of years shows a decline (highs in 2002 and again in 2010).

Professional Guidance

Professional advice is provided by the Professional Adviser (Careers Section) to stakeholders on receipt of emails to a dedicated email address professionalguidance@nmbi.ie. This email address is advertised through our professional frameworks – The Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI, 2014) and the Scope of Nursing and Midwifery Practice Framework (NMBI, 2015) – and through our website (see *Contact us* and *Medication Management*) and eZine. A total of 614 emails were received in 2017 and were categorised as follows:

Professional Guidance emails	376
Registration emails	134
Midwifery	6
Education	59
Other	39
Total	614

This information is maintained in a database for both quality purposes and for creating reports on specific practice matters that may inform guidance provision within the Professional Standards directorate.

4.2 Registration

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 2017, with comparative figures for 2016.

Nurses and Midwives Registered

Year	Active	Inactive	Total
2016	67,559	30,350	97,909
2017	70,953	30,291	101,244
2016-2017	↑ 3,394 (5%)	↓ 59 (0.01%)	↑ 3,335 (3.4%)

Qualifications Registered

	Active 2016	Active 2017	Inactive 2016	Inactive 2017	Total 2016	Total 2017
General	55,769	58,794	25,103	25,015	80,872	83,809
Psychiatric	8,653	8,714	5,209	5,241	13,862	13,955
Children's	4,399	4,523	1,580	1,579	5,979	6,102
Intellectual Disability	4,894	4,990	1,191	1,197	6,085	6,187
Midwifery	10,772	10,645	7,383	7,406	18,155	18,051
Nurse Prescriber	946	1,059	16	16	962	1,075
Public Health	2,426	2,483	1,087	1,090	3,513	3,573
Tutor	654	687	242	245	896	932
Adv Nurse Practitioner	207	252	1	1	208	253
Adv Mid Practitioner	6	9	1	0	7	9
Other	88	79	457	439	549	518
Total	88,814	92,235	42,270	42,229	131,088	134,464

Summary

In summary, at 31 December 2017, 101,244 individuals were registered with 134,464 qualifications.

Of those, there were 70,953 individuals with 92,235 qualifications on the 'active' file – that is, those entitled to practise in Ireland.

Inactive File

NMBI maintains an Inactive File listing nurses and midwives who are not engaged in the practice of nursing in Ireland. In 2017 there were 30,291 persons on the Inactive File.

EU and Non-EU applications

Time Period	EU and Non-EU applications received
2016	4,323
2017	3,628

EU and Non-EU Registrants

No.	Top 5 countries of training of new EU registrants		Top 5 countries of training of new Non-EU registrants	
	Country 2017	Country 2016	Country 2017	Country 2016
1	United Kingdom	United Kingdom	India	India
2	Spain	Romania	Philippines	Philippines
3	Italy	Poland	Nigeria	Nigeria
4	Romania	Spain	Zimbabwe	USA
5	Portugal	Italy	Australia	Australia

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

The ARF for 2017 was €100.

Section 77(1) of the Nurses and Midwives Act 2011 allows the Board to remove names from the Register if their ARF 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 2017, restoration to the Register can be made on or before 1 July 2017.

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 65,196 Registrants on 10 November 2016 followed by a Reminder notice which issued to 10,500 on 15 February 2017. The Board agreed at their meeting on 21 March 2017 to remove the names of 2,253 nurses and midwives from the Register for non-payment of ARF 2017.

Undergraduate Student Intake September 2017

Candidate Register

The following table shows the student intake at higher education institutions (HEIs) in 2017

HEI	Student intake
Athlone IT	67
Dublin City University	257
Dundalk IT	123
Galway Mayo IT	44
Letterkenny IT	82
NUI Galway	112
St Angela's College Sligo	58
Tralee IT	77
Trinity College Dublin	329
University College Cork	237
University College Dublin	292
University of Limerick	122
Waterford IT	141

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.

- **1,096** individuals made a total of **1,345** CCPS requests in 2017.

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 2017	Number of requests 2016
Australia	662	501
Canada	34	50
United Kingdom	367	467
United States of America	87	106
Other countries	195	164
Total	1,345	1,288

4.3 Fitness to Practise

Nurses Act, 1985

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

Inquiries held under the Nurses Act, 1985.

One inquiry commenced and concluded after one day in 2017. No findings were made against the registrant.

One inquiry commenced in 2016, continued over four days in 2017 and is ongoing.

Inquiries to be held

Three inquiries remain to be heard, but cannot be scheduled at this time due to factors outside the control of NMBI.

Nurses and Midwives Act 2011

Preliminary Proceedings Committee

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

On the 1 January 2017, there were 58 outstanding cases for PPC consideration.

A further 127 complaints were received during 2017. This represents an almost 90% increase on 2016 figures.

- A notable feature of complaints received in 2017 was that 19 of the complainants made complaints about more than one registrant, with a range of two to eight registrants. Seventy complainants made a complaint about one registrant only.
- In previous years, the majority of complaints came from employers/work colleagues. However, in 2017 the largest category of complaints (63%) was made by members of the public – that is, patients or their families. This was up from 8% in 2016. In 33% of cases, employers/work colleagues were the complainant. In 4% of cases, the Board was the complainant.
- 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 deterioration in a patient's condition; and/or a failure to take appropriate actions if deterioration occurs. Deficits in the standard of documentation were often linked to these types of failures.

- Failures to communicate adequately or appropriately with patients and/or their families was also a feature of many complaints, particularly those made by patients and/or their families.
- 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.
- 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 only.

By the end of 2017, the PPC had made decisions or recommendations to the Board on 101 of the 185 cases that were before it.

Of these 101 cases:

- 55 were referred to the Board where the PPC was of the opinion that no further action was warranted. In six of these cases, the Board decided that further action was necessary, and referred the case forward for an inquiry.
- Five cases were withdrawn, and the PPC decided, with the agreement of the Board, that in four cases no further action was to be taken; and in one case, that the PPC would proceed as if the complaint had not been withdrawn.
- 46 of the 101 cases were referred directly by the PPC to the Fitness to Practise Committee for an inquiry. This represents an increase in the percentage referred (46%) compared to 33% in 2016.

At the end of 2017, 84 cases were still under consideration.

Criminal Convictions

As required under the provisions of Section 55(5) of the Nurses and Midwives Act 2011, the PPC referred five registrants who had been convicted of a criminal offence triable on indictment to the Board. In one case, the Board decided to cancel the registration of the individual. The other four cases were referred back to the PPC for further consideration through the PPC process.

‘Call Overs’

The Fitness to Practise Committee (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 2017, nine Call Over meetings were held.

Public Inquiries

Inquiries under the Nurses and Midwives Act 2011 are held in public. However, an application may be made by the registrant or a witness, for all or part of the inquiry to be held in private. The decision to hold an inquiry following such an application is made by the FTPC.

In 2017, a total of 27 inquiries into 31 registrants were held, of which 14 (52%) were in public, and 13 (48%) were in private.

Inquiries

Three inquiries continued from 2016 and concluded in 2017. In 2017, 24 new inquiries into 31 registrants commenced, 22 of which involving 23 registrants were concluded. The inquiries took place over 53 days.

Findings

Findings were made against 22 registrants:

- In five cases, professional misconduct only.
- In nine cases, professional misconduct and a failure to comply with a code of professional conduct.
- In two cases, professional misconduct and a relevant medical disability.
- In two cases, professional misconduct, a failure to comply with a code of professional conduct, and a relevant medical disability.
- In one case, professional misconduct, poor professional performance, and a failure to comply with a code of professional conduct.
- In two cases, professional misconduct, poor professional performance, a failure to comply with a code of professional conduct, and a relevant medical disability.
- In one case, professional misconduct, a failure to comply with a code of professional conduct, an irregularity in relation to the custody, prescription or supply of a controlled drug, and a relevant medical disability.

In three cases, there were no findings made against the registrant.

In one case, an undertaking pursuant to Section 65(1)(a) of the Nurses and Midwives Act 2011, (“not to repeat the conduct [which was] the subject of the complaint”) was requested by the FTPC, with the agreement of the Board, and given by the registrant. The giving of this undertaking brought the case to a close.

Sanctions

The Fitness to Practise Committee panel that hears the inquiry makes a recommendation regarding sanction if there are findings against the registrant. The decision regarding sanction is, however, made by the Board. Sanctions, other than an advice, an admonishment or a censure, must be confirmed by the High Court.

In the 14 cases where findings were made and a sanction had been applied by year end, the sanctions were as follows:

- Cancellation of registration – three cases.
- Attachment of conditions – one case.
- Censure and a fine and conditions – one case.
- Censure and conditions – four cases.
- Admonish and conditions – two cases.
- Censure – two cases.
- Admonish – one case.

In eight cases, a final determination on sanction had not been made or had not yet been confirmed by the High Court by the end of the year.

Section 58 (Application to the High Court for suspension from the Register in the public interest)

The Board considered 17 cases pursuant to Section 58 of the Act:

- In six cases, the Board made an application to the High Court. In four cases, a Section 58 Order was granted. In two cases, the individual gave an undertaking to the High Court not to practise.
- In four cases, an undertaking not to practise was given to the Board.
- In seven cases, the Board decided not to make an application to the High Court.

Nurses and 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 or midwife's name in the Register is a function of the Board. As of 31 December 2017, there were 38 nurses and midwives with conditions attached to their names on the Register.

Publication

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

4.4 Corporate Services

Financial Control

A number of measures were implemented in 2017 which were designed to strengthen the internal control environment. A revised format was introduced for the monthly finance reports to both the Board and the Department of Health. This new format brings the monthly finance reports into alignment with the annual financial statements which NMBI is required to prepare for each financial year. This revised format was developed and implemented in consultation with both the Board Members and with the Department of Health, and accordingly, one common format is now used for reporting both to the Board and to the Department of Health at each month end.

The revised monthly finance report includes a cashflow statement, and this has provided the Board Members with an additional useful and relevant metric for reviewing the activities of the organisation each month. Furthermore, agreement has now been secured with the Department of Health that cashflow reporting may be considered as a measure for funding under the Lansdowne Road Agreement.

IT Highlights

1. On-boarding of new ICT managed-services provider (Unity).
2. Procurement of infrastructure components for SAN/server upgrade completed.
3. Implementation of Government Cloud Network connection.
4. Phased payments of Annual Retention Fees implemented through website completed successfully.
5. Implementation of electronic voting platform (e-Voting) for Board Election 2017 completed successfully.
6. Enhancements to reporting system for providing timely and accurate statistics and related information to stakeholders (Department of Health) from the Registration system.

Human Resources

In 2017, the aim of the Human Resources team was to provide a best-practice HR service to the staff of NMBI. There was a strong focus on resourcing, policy review and development, employee relations and the reinvigoration of the Performance Management and Development System.

Recruitment and selection activity remained a priority during the year, including appointments to remaining posts that were sanctioned by the Department of Health in 2017. Staff headcount was 56.9 by the end of 2017.

All staff-related HR policies and procedures were reviewed and updated in line with public sector guidelines and regulations.

The NMBI Performance Management System was reviewed and a new agile system agreed with the Senior Management Team. The new system will be fully rolled out in 2018.

Training initiatives for staff included interview skills training, data protection, protected disclosures and coaching. Individual staff were also supported through an academic support programme. In addition, members of the Boards and Committees engaged in practical training in corporate governance and other areas specific to their remits.

Health and Safety

The Employee Assistance Programme was continued during the year, which is a confidential support service for all NMBI employees. The service was also extended to family members in 2017.

A Staff Wellbeing programme was initiated at the end of 2017 with in-house flu vaccines available to all staff. HR will continue to work with the Staff Liaison Forum to support further initiatives in this programme.

In 2017, NMBI reviewed and updated the Safety, Health and Welfare Policy to reflect current regulations. The Safety Policy Statement has been updated in accordance with Section 20 of the Safety, Health and Welfare Act, 2005, based on the identification of hazards and prior risk assessments which were carried out. Ten staff undertook fire warden training and certification, and a further 12 staff were trained in CPR and AED.





05

Financial Statements

**For the year ended
31 December 2017**

General Information

Board Members	Appointment	End of term of office
Essene Cassidy (President)	Reappointed December 2017	
Louise Kavanagh McBride (Vice President)	December 2015	
Breda Liston	December 2015	
Catherine Cocoman	December 2017	
Dawn Johnston	July 2015	January 2017
Denis Murphy	February 2013	
Denise Lawler	Reappointed December 2017	
Dermot Manning	Reappointed December 2017	
Éamann Breathnach	December 2012	December 2017
Eileen Kelly	December 2017	
John Murray	December 2012	December 2017
Karen Canning	December 2015	
Kevin O'Carroll	February 2013	
Killian McGrane	December 2015	
Liam Hamill	December 2017	
Liam Minihan	December 2015	
Lorraine Clarke-Bishop	December 2015	
Mark Blake-Knox	Reappointed December 2017	
Martin Higgins	July 2016	
Mary Barrett	December 2012	December 2017
Mary Gorman	December 2017	
Michele Monahan	December 2012	December 2017
Noel Giblin	December 2012	December 2017
Pat Dolan	Reappointed December 2017	
Tanya King	June 2017	
Rosaleen McElvaney	December 2015	
Sinead Cleary	December 2012	December 2017

Interim Chief Executive Officer

Dawn Johnston
(Appointed 12th September 2018)

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

Governance Statement and Board Members' Report

Governance

The Board of Nursing and Midwifery Board of Ireland was established under the Nurses and Midwives Act 2011. The functions of the Board are set out in Section 9 of this Act. The Board is accountable to the Minister for Health and is responsible for ensuring good governance and performs this task by setting strategic objectives and targets and taking strategic decisions on all key business issues. The regular day-to-day management, control and direction of Nursing and Midwifery Board of Ireland are the responsibility of the Chief Executive Officer (CEO) and the senior management team. The CEO and the senior management team must follow the broad strategic direction set by the Board, and must ensure that all Board Members have a clear understanding of the key activities and decisions related to the entity, and of any significant risks likely to arise. The CEO acts as a direct liaison between the Board and management of Nursing and Midwifery Board of Ireland.

Board Responsibilities

The work and responsibilities of the Board are set out in Standing Orders, which also contain the matters specifically reserved for Board decision. Standing items considered by the Board include:

- declaration of interests,
- reports from committees,
- financial reports/management accounts,
- performance reports, and
- reserved matters.

Section 34 of the Nurses and Midwives Act 2011 requires the Nursing and Midwifery Board of Ireland to keep, in such form as may be approved by the Minister for Health with consent of the Minister for Public Expenditure and Reform, all proper and usual accounts of money received and expended by it.

In preparing these financial statements, the Board of Nursing and Midwifery Board of Ireland is required to:

- select suitable accounting policies and 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, and
- state whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements.

The Chief Executive Officer, under the direction of the Board is responsible for keeping adequate accounting records which disclose, with reasonable accuracy at any time, its financial position and enables it to ensure that the financial statements comply with Section 34 of the Nurses and Midwives Act 2011. The maintenance and integrity of the corporate and financial information on the Nursing and Midwifery Board of Ireland's website is the responsibility of the Board.

The Board is responsible for approving the annual plan and budget. Evaluation of the performance of Nursing and Midwifery Board of Ireland by reference to the annual plan and budget is a standing item agenda at Board meetings.

The Board is also responsible for safeguarding its assets and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Board considers that the financial statements of Nursing and Midwifery Board of Ireland give a true and fair view of the financial performance and the financial position of Nursing and Midwifery Board of Ireland at 31 December 2017.

Board Structure

The Board consists of a President, Vice President and twenty-one ordinary members, of which three are vacant at 31 December 2017. All members are appointed by the Minister for Health. The members of the Board were appointed for a period of five years and meet, on average, on a monthly basis. The table below details the appointment period for current members:

Board Member	Role	Date Appointed
Essene Cassidy	President	Reappointed 06/12/2017
Louise Kavanagh McBride	Vice President	Appointed 06/12/2015
Breda Liston	Board Member	Appointed 06/12/2015
Catherine Cocoman	Board Member	Appointed 06/12/2017
Denis Murphy	Board Member	Appointed 15/02/2013
Denise Lawler	Board Member	Reappointed 06/12/2017
Dermot Manning	Board Member	Reappointed 12/07/2016
Eileen Kelly	Board Member	Appointed 06/12/2017
Karen Canning	Board Member	Appointed 06/12/2015
Kevin O'Carroll	Board Member	Appointed 15/02/2013
Killian McGrane	Board Member	Reappointed 06/12/2015
Liam Hamill	Board Member	Appointed 06/12/2017
Liam Minihan	Board Member	Appointed 06/12/2015
Lorraine Clarke-Bishop	Board Member	Appointed 06/12/2015
Mark Blake-Knox	Board Member	Reappointed 06/12/2017
Martin Higgins	Board Member	Reappointed 12/07/2016
Mary Gorman	Board Member	Appointed 06/12/2017
Pat Dolan	Board Member	Reappointed 12/07/2016
Tanya King	Board Member	Appointed 29/06/2017
Rosaleen McElvaney	Board Member	Appointed 06/12/2015

The Board conducted an internal Board self-assessment in December 2017.

The Board has established ten committees, as follows:

7. **Audit and Risk Committee:** comprises of five Board Members and three independent members. The role of the Audit and Risk Committee (ARC) is to support the Board in relation to its responsibilities for issues of risk, control and governance and associated assurance. The ARC is independent from the financial management of the organisation. In particular the Committee ensures that the internal control systems including audit activities are monitored actively and independently. The ARC reports to the Board after each meeting, and formally in writing annually. There were four meetings of the ARC in 2017.

8. **Education and Training Committee:** comprises of six Board Members and four independent members. The Education Committee monitors adherence to standards and evaluate compliance to standards and criteria for the education and training of nurses and midwives on behalf of the NMBI. There were four meetings of the ETC in 2017.
9. **Fitness to Practise Committee (1985)*:** comprises of twenty independent members and no Board Members. All the members of this Committee were members of the Board pre-2011 and their role is to inquire into complaints referred before the Nurses and Midwives Act 2011. There were five meetings of the FPC1985 in 2017.
10. **Fitness to Practise Committee (2011)1*:** comprises six Board Members and eighteen independent members. The role of the Fitness to Practise Committee is to inquire into complaints referred by the Preliminary Proceedings Committee under Section 61 of the Nurses and Midwives Act 2011. On completion of an inquiry, the Fitness to Practise Committee submits its report to the Board. There were 64 meetings of the FPC2011 in 2017.
11. **Governance and Finance Committee:** comprises of seven Board Members. The Governance and Finance Committee reviews and makes recommendations to the Board of NMBI in relation to all issues pertaining to the governance of NMBI There were 12 meetings of the GFC in 2017.
12. **Midwives Committee:** comprises of five Board Members and nine independent members. The role of the Midwives Committee is to advise the Board in relation to all areas pertaining to midwifery practice. There were four meetings of the MC in 2017.
13. **Preliminary Proceedings Committee:** comprises of four Board Members and six independent members. The role of the Preliminary Proceedings Committee is to give initial consideration to complaints. There were nine meetings of the PPC in 2017.
14. **Registration Committee:** comprises three Board Members and three independent members. The Registration Committee considers appeals from applicants for registration who have not been granted direct registration and determines the outcome of such appeals. It makes decisions, advises and makes recommendations to the Board in relation to all issues pertaining to registration. It considers all registration related matters referred to it by the Board or the executive. There were six meetings of the RC in 2017.
15. **Standards and Validation Committee:** comprised of four Board Members and nine independent members. The Standards and Validation Committee reviewed requirements and standards for nurse registration programmes. It prepared guidelines on curriculum issues and content regarding pre-registration education and post-registration education. There were three meetings of the SVC in 2017. The Board voted to disband this Committee on 11 July 2017.
16. **Ethics Committee:** comprised of five Board Members and eight independent members. The Ethics Committee advised and made recommendations to the Board in relation to all issues pertaining to professional guidance and ethics. There were two meetings of the EC in 2017. The Board voted to disband this Committee on 11 July 2017.

1* Under Section 6(1)(b) of the Nurses and Midwives Act 2011, the FTFC established under the Nurses Act, 1985 continues in being until all cases under the 1985 Act are completed. It is hoped this will occur by the end of 2019; however this is influenced by factors outside the control of NMBI. The FTFC established pursuant to Section 24(2)(b) of the Nurses and Midwives Act 2011 hears cases under the 2011 Act.

Schedule of Attendance, Fees and Expenses

A schedule of attendance at the Board and Committee meetings for 2017 is set out below including the fees and expenses received by each member:

	Board	ARC	ETC	FPC 2011	GFC	MC	PPC	RC	VSC	EC	Fees 2017	Expenses 2017
Number of Meetings	17	4	4	64	12	4	9	6	3	2	€	€
Essene Cassidy	17/17	3			12						-	10,252
Louise McBride	8/17		3						1		-	2,982
Breda Liston	13/17						8		3		-	9,827
Catherine Cocoman	1/1										-	120
Dawn Johnston	0										(2,206)	-
Denis Murphy	12/17				10	2	7			2	5,985	298
Denise Lawler	13/17			7		4					-	-
Dermot Manning	14/17	3						5			5,985	235
Éamann Breatnach	9/16						5			0	5,559	772
Eileen Kelly	0/1										-	-
John Murray	14/16		4	29	10						5,559	17,804
Karen Canning	12/17			22	8						5,985	1,458
Kevin O'Carroll	8/17		1					6	0		-	-
Killian McGrane	13/17				12	1					-	-
Liam Hamill	1/1										-	-
Liam Minihan	14/17	2		30						1	5,985	12,394
Lorraine Clarke-Bishop	8/17		3					6			-	2,032
Mark Blake-Knox	14/17	3		8							5,985	36
Martin Higgins	11/17	4									5,985	1,865
Mary Barrett	11/16			12		4				2	-	12,095
Mary Gorman	1/1										-	-
Michele Monahan	9/16			9	11						-	475
Noel Giblin	3/16		0	3							-	1,856
Pat Dolan	11/17			23	7						5,985	10,836
Tanya King	8/12										-	-
Rosaleen McElvaney	7/17		2								-	-
Sinead Cleary	9/16					4	9			2	-	2,876

€50,807 € 88,213

Seventeen members of the Board Members did not receive a Board fee under the One Person One Salary (OPOS) principle.

Key Personnel Changes

Twelve members of the Boards terms of office expired during the year. In accordance with the Nurses and Midwives Act 2011 the Minister appointed five new members, four of which were elected. Five members were reappointed, one of which was elected.

Deirdre Hogan resigned from her position as Deputy CEO in July 2017. The post was rescinded and resanctioned as Director of Registration. Lucia Crimin was appointed as Director of Registration in November 2017. Martin Quaid resigned from his position as Director of Corporate Services in May 2017. The post is currently vacant. Dawn Johnston was appointed as Director of Midwifery in January 2017.

Disclosures Required by Code of Practice for the Governance of State Bodies (2016)

The Board is responsible for ensuring that Nursing and Midwifery Board of Ireland has complied with the requirements of the Code of Practice for the Governance of State Bodies ("the Code"), as published by the Department of Public Expenditure and Reform in August 2016. The following disclosures are required by the Code:

Consultancy Costs

Consultancy costs include the cost of external advice to management and exclude outsourced 'business-as-usual' functions.

	2017	2016
	€	€
Legal Advice	90,976	112,670
Ad Hoc Procurement Advice	7,010	-
Pension Advice	6,459	4,459
Business Process Improvement	355,734	74,357
IT Advisory	74,343	17,933
GDPR Readiness	6,149	-
Workplace Investigation	7,047	-
Education Policy Development	50,869	243,282
Development of a Professional Competence Scheme	16,585	-
Total Consultancy Costs	615,172	452,701
Consultancy Costs Capitalised	44,480	-
Consultancy Costs Charged to the Income and Expenditure and Retained Revenue Reserves	570,692	452,701
Total	615,172	452,701

Legal Costs and Settlements

The table below provides a breakdown of amounts recognised as expenditure in the reporting period in relation to legal costs, settlements and conciliation and arbitration proceedings relating to contracts with third parties. This does not include expenditure incurred in relation to general legal advice received by Nursing and Midwifery Board of Ireland which is disclosed in Consultancy costs above.

	2017	2016
	€	€
Legal Fees – Fitness to Practise	2,749,203	3,145,964
Settlements	-	20,000
Total	<u>2,749,203</u>	<u>3,165,964</u>

Travel and Subsistence Expenditure

Travel and subsistence expenditure is categorised as follows:

	2017	2016
	€	€
Domestic		
Board	80,554	55,511
Employees	19,616	8,419
International		
Board	7,659	-
Employees	17,255	9,694
Total	<u>125,084</u>	<u>73,624</u>

Hospitality Expenditure

The Income and Expenditure Account includes the following hospitality expenditure:

	2017	2016
	€	€
Board and Staff Hospitality	860	452
Client Hospitality	-	-
Total	<u>860</u>	<u>452</u>

Statement of Compliance

The Nursing and Midwifery Board of Ireland has complied with the requirements of the Code of Practice for the Governance of State Bodies, as published by the Department of Public Expenditure and Reform in August 2016, with the following exception:

- A Customer Action plan is being developed.



Essene Cassidy
President
Date: 17/12/2018



Dawn Johnston
Interim CEO
Date: 17/12/2018

Statement on Internal Control

Scope of responsibility

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 (2016).

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

Purpose of the System of Internal Control

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.

The system of internal control, which accords with guidance issued by the Department of Public Expenditure and Reform has been in place in NMBI for the year ended 31 December 2017 and up to the date of approval of the financial statements.

Capacity to Handle Risk

NMBI has an Audit and Risk Committee (ARC) comprising five Board Members, one of whom is the Chair. The ARC met four times in 2017.

The following steps have been taken to ensure an appropriate control environment:

- The Finance Department coordinates and manages the preparation of an annual Budget that is approved by the Board.
- The Finance Department prepares monthly variance expenditure reports comparing actual with budgeted expenditure. These are reported to the Senior Management Team, the Board and the Governance and Finance Committee on a regular basis.
- 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. During 2017, there were delays in completing Internal Audit reports. As a result four audits which had been planned for completion under the Strategic Internal Audit Plan were not completed. Staffing issues are being addressed and new Internal Auditors have been appointed. A new three-year internal audit plan is being prepared.
- There are systems aimed at ensuring the security of information and communication technology systems.
- There are systems in place to secure the assets.

Risk and Control Framework

There is a risk management policy and framework in place which sets out the risk appetite of the NMBI. The management process in place and the roles and responsibilities in relation to risk are set in the risk management policy document.

Risks are identified and managed through the organisations risk register where key risks are stated and existing controls to mitigate the risk are noted. The risks are assessed and prioritised by considering the likelihood of the event occurring and the impact such event would have on the organisation. An action plan are put in place to mitigate the risk and assigned an owner to implement the plan.

The risk register details the controls and actions needed to mitigate risks and responsibility for operation of controls assigned to specific staff. I confirm that a control environment containing the following elements is in place:

- procedures for all key business processes have been documented,
- financial responsibilities have been assigned at management level with corresponding accountability,
- there is an appropriate budgeting system with an annual budget which is kept under review by senior management,
- there are systems aimed at ensuring the security of the information and communication technology systems,
- there are systems in place to safeguard the assets, and
- control procedures over grant funding to outside agencies ensure adequate control over approval of grants and monitoring and review of grantees to ensure grant funding has been applied for the purpose intended.

Ongoing Monitoring and Review

Formal procedures have been established for monitoring control processes and control deficiencies are communicated to those responsible for taking corrective action and to management and the Board, where relevant, in a timely way. I confirm that the following ongoing monitoring systems are in place:

- key risks and related controls have been identified and processes have been put in place to monitor the operation of those key controls and report any identified deficiencies,
- reporting arrangements have been established at all levels where responsibility for financial management has been assigned, and
- there are regular reviews by senior management of periodic and annual performance and financial reports which indicate performance against budgets/forecasts.

Procurement

NMBI is committed to complying fully with procurement guidelines. Procurement in the NMBI is overseen by the Governance and Finance Committee. All contracts above €25,000 are approved by the Board. The NMBI engages external procurement advisory services to support the organisation in compliance with procurement guidelines.

Review of Effectiveness

I confirm that NMBI has procedures to monitor the effectiveness of its risk management and control procedures. NMBI's monitoring and review of the effectiveness of the system of internal financial control is informed by the work of the internal and external auditors, the Audit and Risk Committee which oversees their work, and the senior management within NMBI responsible for the development and maintenance of the internal financial control framework.

I confirm that the Board conducted an annual review of the effectiveness of the internal controls for 2017.

Internal Control Issues

In 2017, 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 2017 a number of steps were taken to ensure procedures in place complied with procurement rules. As a result, during 2017 and 2018, the majority of non-compliant procurement was addressed either by terminating contracts or conducting tendering processes and putting new contracts in place.

Expenditure not subject to competitive tendering processes

Goods/services	Expenditure in 2017 (€)	Status at December 2018
Contracts terminated and new contracts put in place following tender processes in 2017		
Subject Matter Experts	10,332	All contracts terminated by February 2017
Cleaning Services/Building Maintenance	12,210	Contract Signed May 2017
Legal Services	94,744	Contract Signed May 2017
Online Transaction Fee	30,545	OGP Framework in Place April 2017
Agency Staff	39,008	Contracts Signed November 2017
Communication	31,865	Contract Signed October 2017
Call Centre Support Services	37,742	Completed Signed January 2017
Subtotal	256,446	
New contracts put in place following a tender in process in 2018		
Legal Assessors Providing Legal Advice to the FTP Committee	192,885	
FTP Legal Services	21,423	
Off-site File Storage	56,625	
Total	527,379	

By December 2018, tenders have been completed and contracts awarded in relation to 100% of the expenditure.

Approval by the Board

The Statement on System of Internal controls has been reviewed by the Audit and Risk Committee and the Board to ensure it accurately reflects the control system in operation during the reporting period.

A review of internal controls in 2017 was carried out by an external firm and signed off by the Board in 2018.

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



Essene Cassidy
President
Date: 17/12/2018



Dawn Johnston
Interim CEO
Date: 17/12/2018

Report of the Comptroller and Auditor General



Ard Reachtaire Cuntas agus Ciste Comptroller and Auditor General

Report for presentation to the Houses of the Oireachtas Nursing and Midwifery Board of Ireland

Qualified opinion on financial statements

I have audited the financial statements of the Nursing and Midwifery Board of Ireland for the year ending 31 December 2017 as required under the provisions of section 34 of the Nurses and Midwives Act 2011. The financial statements have been prepared in accordance with Financial Reporting Standard (FRS) 102 — *The Financial Reporting Standard applicable in the UK and the Republic of Ireland* and 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, including a summary of significant accounting policies.

In my opinion, except for the non-compliance with the requirements of FRS 102 in relation to retirement benefit entitlements referred to below, the financial statements give a true and fair view of the assets, liabilities and financial position of the Nursing and Midwifery Board of Ireland at 31 December 2017 and of its income and expenditure for 2017 in accordance with FRS 102.

Basis for qualified opinion on financial statements

In compliance with the directions of the Minister for Health, the Nursing and Midwifery Board of Ireland accounts for the costs of retirement benefit entitlements only as they become payable. This does not comply with FRS 102 which requires that the financial statements recognise the full cost of retirement benefit entitlements earned in the period. The effect of the non-compliance on the Nursing and Midwifery Board of Ireland's financial statements for 2017 has not been quantified.

I conducted my audit of the financial statements in accordance with the International Standards on Auditing (ISAs) as promulgated by the International Organisation of Supreme Audit Institutions. My responsibilities under those standards are described in the appendix to this report. I am independent of the Nursing and Midwifery Board of Ireland and have fulfilled my other ethical responsibilities in accordance with the standards.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

Report on information other than the financial statements, and on other matters

The Nursing and Midwifery Board of Ireland has presented certain other information together with the financial statements. This comprises the governance statement and Board members' report and the statement on internal control. My responsibilities to report in relation to such information, and on certain other matters upon which I report by exception, are described in the appendix to this report.

I have nothing to report in that regard.


Patricia Sheehan
For and on behalf of the
Comptroller and Auditor General

21 December 2018

Appendix to the report

Responsibilities of Board members

The governance statement and Board members' report sets out the Board members' responsibilities. The Board members are responsible for

- the preparation of financial statements in the form prescribed under section 34 of the Nurses and Midwives Act 2011
- ensuring that the financial statements give a true and fair view in accordance with FRS 102
- ensuring the regularity of transactions
- assessing whether the use of the going concern basis of accounting is appropriate, and
- such internal control as they determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Responsibilities of the Comptroller and Auditor General

I am required under section 34 of the Nurses and Midwives Act 2011 to audit the financial statements of the Nursing and Midwifery Board of Ireland and to report thereon to the Houses of the Oireachtas.

My objective in carrying out the audit is to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement due to fraud or error. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the ISAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with the ISAs, I exercise professional judgment and maintain professional scepticism throughout the audit. In doing so,

- I identify and assess the risks of material misstatement of the financial statements whether due to fraud or error; design and perform audit procedures responsive to those risks; and obtain audit evidence that is sufficient and appropriate to provide a basis for my opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- I obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the internal controls.
- I evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures.
- I conclude on the appropriateness of the use of the going concern basis of accounting and, based on the audit evidence obtained, on whether a material uncertainty exists

related to events or conditions that may cast significant doubt on the Nursing and Midwifery Board of Ireland's ability to continue as a going concern. If I conclude that a material uncertainty exists, I am required to draw attention in my report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify my opinion. My conclusions are based on the audit evidence obtained up to the date of my report. However, future events or conditions may cause the Nursing and Midwifery Board of Ireland to cease to continue as a going concern.

- I evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

I communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that I identify during my audit.

Information other than the financial statements

My opinion on the financial statements does not cover the other information presented with those statements, and I do not express any form of assurance conclusion thereon.

In connection with my audit of the financial statements, I am required under the ISAs to read the other information presented and, in doing so, consider whether the other information is materially inconsistent with the financial statements or with knowledge obtained during the audit, or if it otherwise appears to be materially misstated. If, based on the work I have performed, I conclude that there is a material misstatement of this other information, I am required to report that fact.

Reporting on other matters

My audit is conducted by reference to the special considerations which attach to State bodies in relation to their management and operation. I report if there are material matters relating to the manner in which public business has been conducted.

I seek to obtain evidence about the regularity of financial transactions in the course of audit. I report if there is any material instance where public money has not been applied for the purposes intended or where transactions did not conform to the authorities governing them.

I also report by exception if, in my opinion,

- I have not received all the information and explanations I required for my audit, or
- the accounting records were not sufficient to permit the financial statements to be readily and properly audited, or
- the financial statements are not in agreement with the accounting records.

Statement of Income and Expenditure and Retained Revenue Reserves

	Note	2017 €	2016 €
INCOME			
Annual Retention Fee	2	6,365,884	6,183,570
Registration Fee	3	1,981,666	2,049,870
Verification Fee	3	90,160	88,320
HSE Contribution Nursing Careers Centre	4	200,000	200,000
Superannuation Contributions		77,724	69,921
Department of Health Grant	4(a)	234,741	-
Bank and Investment Interest		2,111	5,628
Other Income	5	279,334	234,453
Total Income		9,231,620	8,831,762
EXPENDITURE			
Accommodation Costs	6	448,651	416,961
Staff Costs	7/8	3,204,525	2,935,054
Administration Costs	9	2,161,216	1,848,942
Fitness to Practise	10	2,817,670	3,251,578
Library	11	5,588	14,906
Nursing Careers Centre	12	40,809	59,537
Depreciation	13	337,677	323,789
Total Expenditure		9,016,136	8,850,767
Surplus/(Deficit) for the year		215,484	(19,005)
Balance Brought Forward at 1 January 2017		8,842,621	8,861,626
Balance Carried Forward at 31 December 2017		9,058,105	8,842,621

The Statement of Cash Flows and notes 1 to 21 form part of these financial statements.

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



Essene Cassidy
President
Date: 17/12/2018



Dawn Johnston
Interim CEO
Date: 17/12/2018

Statement of Financial Position

	Note	As at 31 December 2017 €	As at 31 December 2016 €
FIXED ASSETS			
Property, Plant and Equipment	13	11,063,077	11,117,333
Asset Under Development	14	44,480	-
		<u>11,107,557</u>	<u>11,117,333</u>
CURRENT ASSETS			
Receivables	16	356,520	92,568
Cash and Cash Equivalents	15	4,346,456	4,541,182
		<u>4,702,976</u>	<u>4,633,750</u>
CURRENT LIABILITIES (AMOUNTS FALLING DUE WITHIN ONE YEAR)			
Payables	17	(4,546,131)	(4,462,350)
		<u>(4,546,131)</u>	<u>(4,462,350)</u>
NET CURRENT (LIABILITIES)/ASSETS		156,845	171,400
LONG TERM LIABILITIES (AMOUNTS FALLING DUE AFTER ONE YEAR)			
Payables	17	(2,206,297)	(2,446,112)
TOTAL NET ASSETS		<u><u>9,058,105</u></u>	<u><u>8,842,621</u></u>
REPRESENTING			
Accumulated Fund		9,058,105	8,842,621
		<u><u>9,058,105</u></u>	<u><u>8,842,621</u></u>

The Statement of Cash Flows and notes 1 to 21 form part of these financial statements.

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



Essene Cassidy
President
Date: 17/12/2018



Dawn Johnston
Interim CEO
Date: 17/12/2018

Statement of Cash Flows

	2017	2016
	€	€
Net Cash Flows from Operating Activities		
Excess Income Over Expenditure	215,484	(19,005)
Depreciation of Fixed Assets	337,677	323,789
(Increase)/Decrease in Receivables	(263,952)	241,670
Increase in Payables	83,781	316,996
Deposit Interest Received	(2,111)	(5,628)
Bank Interest Paid	7,708	8,534
Net Cash Inflow from Operating Activities	378,587	866,356
Cash Flows from Investing Activities		
Payment to Acquire Property, Plant and Equipment	(283,420)	(49,260)
Payment to Development of Asset	(44,480)	
Net Cash Flows from Investing Activities	(327,900)	(49,260)
Cash Flows from Financing Activities		
Bank Interest Received	2,111	5,628
Bank Interest Paid	(7,708)	(8,534)
Repayment of Loan	(239,816)	(238,986)
Net Cash Flows from Financing Activities	(245,413)	(241,892)
Net (Decrease)/Increase in Cash and Cash Equivalents	(194,726)	575,204
Cash and Cash Equivalents at 1 January	4,541,182	3,965,978
Cash and Cash Equivalents at 31 December	4,346,456	4,541,182



Essene Cassidy
President
Date: 17/12/2018



Dawn Johnston
Interim CEO
Date: 17/12/2018

Notes to the Financial Statements

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 practise 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 Practise inquiries.

b) Statement of Compliance

The financial statements of the Nursing and Midwifery Board for the year ended 31 December 2017 have been prepared in accordance with FRS 102, the financial reporting standard applicable in the UK and Ireland issued by the Financial Reporting Council (FRC), as promulgated by Chartered Accountants Ireland.

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.

In preparing the financial statements for the year ended 31 December 2017, 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 2018 and 2019, 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.

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.

d) 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 and December in respect of 2018 fees is recognised as income for the following year. It is shown as deferred income on the Statement of Financial Position 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 Contributions/Grants

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

e) Fixed Assets

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	33.33% Straight line
Computer Equipment	33.33% Straight line
Computer Software	33.33% Straight line
Telephone Equipment	33.33% 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.

Costs associated with the development of a registration system are capitalised. Depreciation of this asset will start once the asset commences to be in use.

f) 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.

g) Loan Interest

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

h) 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.

i) Contingent Liabilities

NMBI makes full provision for its best estimate of legal and other costs expected to arise in relation to cases it is involved in. However, 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 made for these cases.

j) Provisions

Provisions are recognised when the Board has a present legal or constructive obligation as a result of past events; it is probable that an outflow of resources will be required to settle the obligation; and the amount of the obligation can be estimated reliably.

k) 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 Statement of Financial Position 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 2017.

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 2017, the ARF was €100 (2016: €100). There were 70,953 names on the active register in 2017, (67,559 in 2016). Certain registrants active on the register in 2017 may be exempt from paying the annual retention fee.

The table below provides the number of active registrants in 2017 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	2017		2016	
	Active	Inactive	Active	Inactive
Advanced Midwife Practitioner	9	-	6	1
Advanced Nurse Practitioner	252	1	207	1
Children's	4,523	1,579	4,399	1,580
General	58,794	25,015	55,769	25,103
Intellectual Disability	4,990	1,197	4,894	1,191
Midwives	10,645	7,406	10,772	7,383
Nurse Prescriber	1,059	16	946	16
Psychiatric	8,714	5,241	8,653	5,209
Public Health	2,483	1,090	2,426	1,087
Tutors	687	245	654	242
Other	79	439	88	457
Total	92,235	42,229	88,814	42,270

3. Registration/Verification Fees

Registration fees are fees from new applicants joining the Register of Nurses and Midwives for the first time.

Numbers registered	2017	2016
Irish Registration	1,828	1,820
EU Registrations	1,714	1,028
Non-EU Registrations	1,704	1,027
Total	5,246	3,875

4. Health Service Executive Contributions/Department of Health Grants

Health Service Executive Contributions: An amount of €200,000 (2016 - €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).

a) Department of Health Grants

In 2017 the Department agreed to provide funding to the Board in respect of the following

- Funding for the post of Programme Manager for organisational development - €77,797
- HR Service - €95,876
- Professional competency Scheme - €16,588
- Project Management Services New registration System - €44,480

The grant from the Department was not received until 2018. The amount is included as a receivable at year end (Note 16)

5. Other Income

	2017	2016
	€	€
Restoration Fees	253,955	214,935
Duplicate Certifications	7,320	5,950
Registration Appeal Fees	8,100	3,900
Miscellaneous/Other Income	9,959	9,668
Total	279,334	234,453

6. Accommodation Costs

	2017	2016
	€	€
Mortgage Interest	7,708	8,534
Cleaning	18,187	43,792
Insurance	46,884	44,493
Light and Heat	50,627	50,079
Repairs and Maintenance	325,245	270,063
Total	448,651	416,961

7. Staff Costs

	2017	2016
	€	€
Staff Short-term Benefits	2,297,205	1,852,305
Employer's Contribution to Social Welfare	178,280	160,911
Retirement Benefit Costs*	480,959	434,451
Termination Benefit	-	-
Total NMBI Staff Costs	2,956,444	2,447,667
Agency Costs	248,081	487,387
Total Staff Costs	3,204,525	2,935,054

*€84,994 in respect of SPSPS which are remitted to the Department of Public Expenditure and Reform, employee deductions of €28,330 were remitted to DPER.

a) Pension related deductions

Pension related deductions of €78,982 (2016: €85,324) were made from staff salaries and €78,982 (2016: €85,324) were remitted to the Department of Health.

b) Employee Benefits

The number of employees 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	2017	2016
€60,000	– €69,999	1	4
€70,000	– €79,999	4	5
€80,000	– €89,999	1	2
€90,000	– €99,999	1	-
€100,000	– €109,999	-	-
€110,000	– €119,999	-	-
Greater than €120,000		-	-
Total		7	11

Note: For the purposes of this disclosure, short-term employee benefits in relation to services rendered during the reporting period include salary, overtime allowances and other payments made on behalf of the employee, but exclude employer's PRSI.

c) Chief Executive Officer Salary and Benefits

The CEO remuneration package for the financial period was as follows:

	2017	2016
	€	€
Basic Pay	97,849	104,351
BIK	-	-
Travel Expenses and Subsistence	9,912	899
	<u>107,761</u>	<u>105,250</u>

The Interim CEO served from 6 June to 31 December during 2016.

The Chief Executive Officer is a member of NMBI's pension scheme, and her entitlements in that regard do not extend beyond the terms of model public service pension scheme. The value of retirement benefits earned in the period if not included above.

d) Staff Short-Term Benefits

	2017	2016
	€	€
Basic Pay	2,259,864	1,852,305
Overtime	-	-
Death Gratuity	37,341	-
	<u>2,297,205</u>	<u>1,852,305</u>

e) Key Management Personnel

Key management personnel in NMBI consist of the Chief Executive officer and the members of senior management team. The total value of employee benefits for key management personnel is set out below.

	2017	2016
	€	€
Salary	433,837	385,865
Allowances	-	-
Termination Benefits	-	-
Health Insurance	-	-
	<u>433,837</u>	<u>385,856</u>

f) Average Headcount

The average headcount for the Nursing and Midwifery Board of Ireland in 2017 was 52 (2016: 44).

9. Administration

	2017	2016
	€	€
Travel and Subsistence		
Domestic Travel	211,476	195,782
Foreign Travel	26,480	10,720
Board Member Fee	50,807	51,395
Board Training	10,900	-
Telephone	52,462	49,778
Postage	193,196	150,321
Print and Stationery	68,022	52,887
Staff Training and Recruitment	61,177	36,164
Audit Fees – External Audit	21,000	21,000
Audit Fees – Internal Audit	34,139	22,109
Legal Fees (Non FTP)	90,976	112,670
Procurement Advice	7,010	-
Pension Advice	6,459	4,459
Business Improvement	355,734	74,357
IT Advisory	29,863	17,933
External Service Delivery	524,103	510,782
GDPR Readiness	6,149	-
Workplace Investigation	7,047	-
Education Policy Development	50,869	243,282
Development of Professional Competence Scheme	16,585	-
Bank Interest and Charges	62,992	75,343
Computer/IT	237,691	196,157
Misc.	36,079	23,803
	<u>2,161,216</u>	<u>1,848,942</u>

10. Fitness to Practise

	2017	2016
	€	€
FTP Administration	23,870	23,418
Legal Fees	2,726,521	3,145,964
Stenographer Fees	67,279	82,196
Total	2,817,670	3,251,578

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 nurse and midwife training to the Nursing and Midwifery Board of Ireland, who established the Nursing Careers Centre to manage the process. Salary and accommodation costs are included under the relevant expenditure headings in the Statement of Income and Expenditure and Retained Revenue Reserves.

	2017	2016
	€	€
General Admin Costs	4,521	26,058
Public Appointments Service	36,288	33,479
Total	40,809	59,537

In addition to the directly attributable costs above, an amount of €60,217 is included in the payroll costs in respect of staff assigned to duties related to the Nursing Careers Centre. The Board also estimates that apportioned accommodation costs for the centre are €52,807.

13. Fixed Assets

	Freehold Land	Premises	Equipment & Fittings	Computer Software	Computer Hardware	Total
	€	€	€	€	€	€
Cost or Valuation						
At 01 January 2017	1,265,833	12,378,773	110,104	534,363	898,412	15,187,485
Additions		210,331		7,515	65,574	283,420
Write down	-	-	-	-	-	-
At 31 December 2017	1,265,833	12,589,104	110,104	541,878	963,986	15,470,905
Accumulated Depreciation						
At 01 January 2017	-	2,648,607	100,122	479,530	841,892	4,070,151
Charge for Year	-	248,883	9,982	36,156	42,656	337,677
Write Down	-	-	-	-	-	-
At 31 December 2017	-	2,897,490	110,104	515,686	884,548	4,407,828
Net Book Value at 31 December 2017	1,265,833	9,691,614	-	26,192	79,438	11,063,077
Net Book Value at 31 December 2016	1,265,833	9,730,166	9,982	54,833	56,519	11,117,333

14. Assets Under Development

	Registration System
Cost	€
Cost as at 1 January 2017	-
Development Costs Capitalised	44,480
At 31 December 2017	<u>44,480</u>

Development costs of the system are capitalised as they are incurred. Depreciation of the asset will not commence until the asset is in use.

15. Analysis of Changes in Cash and Cash Equivalents

	1 January 2017	Cash Flow	31 December 2017
	€	€	€
Cash at Bank and in Hand	150,016	149,993	300,009
Short Term Deposit	4,391,166	(344,719)	4,046,447
Total	<u>4,541,182</u>	<u>(194,726)</u>	<u>4,346,456</u>

16. Receivables

	2017	2016
	€	€
Debtors	257,660	23,155
Prepayments	98,860	69,413
	<u>356,520</u>	<u>92,568</u>

17. Payables**a) Amounts Falling Due Within One Year**

	2017	2016
	€	€
Trade Creditors and Accruals	1,159,851	1,447,522
Deferred Income Annual Retention Fee (i)	3,022,809	2,651,357
Deferred Income from Department of Health	130,975	130,975
Mortgage Due in Less Than One Year	232,496	232,496
	<u>4,546,131</u>	<u>4,462,350</u>

The accruals figure above includes an amount of €277,318 in relation to a legal case where a high court decision was handed down in October 2017 which ruled that NMBI was liable for 80% of the costs.

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

	2017	2016
	€	€
Deferred Income at 1 January	2,651,357	2,860,595
Receipts in Year from Annual Retention Fee	6,737,336	5,974,332
Recognised as Income in Year	(6,365,884)	(6,183,570)
Total Deferred Income	<u>3,022,809</u>	<u>2,651,357</u>

a) Amounts Falling Due After One Year

	2017	2016
	€	€
Mortgage 2-5 Years	929,984	929,984
Mortgage Over 5 Years	1,276,313	1,516,128
	<u>2,206,297</u>	<u>2,446,112</u>

18. Related Party Disclosures

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 participate in or attend discussions in the decision making 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 any Board Members had any beneficial interest.

Please refer to Note 7 for CEO details and to the Governance Statement for Board Members fees and expenses.

19. Capital Commitments

There were no capital commitments on 31 December 2017.

20. Approval of Financial Statements

These financial statements were approved by the Board of the Nursing and Midwifery Board on 17 December 2018.

The background of the page is a solid teal color. Scattered across the top half are several overlapping circles in various shades of green and teal, ranging from light mint to dark forest green. The circles are of different sizes and are arranged in a somewhat random pattern.

06

Appendices

Appendix 1: Members of the Board - 2017



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 mental health nursing



Denise Lawler

Board Member nominated to represent the universities



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



Noel Giblin

Elected Board Member from the practice of intellectual disability nursing



Sinead Cleary

Elected Board Member from the practice of midwifery



Breda Liston

Elected Board Member from the practice of children's nursing



Dermot Manning

Board Member nominated to represent the public interest



Louise Kavanagh McBride

Board Member nominated to represent the institutes of technology



Liam Minihan

Board Member nominated to represent the Health Service Executive



Michele Monahan

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



Denis Murphy

Board Member nominated to represent the public interest



Kilian McGrane

Board Member nominated to represent the Health Service Executive



Kevin O'Carroll

Board Member nominated to represent the Health Information and Quality Authority



Pat Dolan

Board Member nominated to represent the public interest



Mary Barrett

Elected Board Member from the practice of care of older persons



Martin Higgins

Board Member nominated to represent the public interest



Rosaleen McElvaney

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



Éamann Breathnach

Board Member nominated to represent the Medical Council



Mark Blake-Knox

Board Member nominated to represent the voluntary sector



Dawn Johnston

Board Member nominated to represent Directors of Nursing and Midwifery



Liam Hamill

Elected Board Member from the practice of intellectual disability nursing



Catherine Cocoman

Elected Board Member from the practice of psychiatric nursing



Mary Gorman

Elected Board Member from the practice of midwifery



Eileen Kelly

Elected Board Member from the practice of care of older persons



Tanya King

Board Member nominated to represent Directors of Nursing/Midwifery

Board news and changes in 2017

There were a number of changes in 2017, including an election for five Board Member positions and for the positions of President and Vice President.

The Board accepted Dawn Johnston's resignation on 24 January 2017, and she took up the position of Director of Midwifery with NMBI. The Minister for Health, Simon Harris, appointed Tanya King to the Board of NMBI on 29 June 2017.

The tenure of five Board Members ended on 5 December 2017: Mary Barrett, Éamann Breathnach, Sinead Cleary, Noel Giblin and John Murray.

An election took place in September of 2017. The notice of election for four nurses and one midwife to be members of the Board of NMBI was published on 8 June, with the nominations opening on 23 June 2017 and closing on 3 July 2017. Eight nominations were received and all were deemed eligible. As they were the only nominees in their category, Catherine Cocoman's name and Essene Cassidy's name were forwarded to the Minister for Health for appointment, and there was an election in three of the other categories. Mary Gorman, Liam Hamill and Eileen Kelly were elected in their categories and their tenure began on 6 December alongside Catherine Cocoman.

The election of the President and Vice President took place on 1 December. Ms Cassidy was the sole candidate for the post of President, and was duly elected for a period of four years from 6 December 2017. Dr Louise Kavanagh McBride was also duly elected for a period of three years from 6 December 2017.

Minister Simon Harris appointed Mark Blake-Knox, and Dr Denise Lawlor as a midwife from the academic sector. Their tenure started on 6 December.

Appendix 2: Board Meetings 2017

The Board is required to meet six times per year. However, additional Board meetings were held in 2017 for the purpose of progressing NMBI's agenda. Details of attendance at the meetings are included in the table below.

Board Member attendance 2017

- Board Members are required to attend four 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	24 Jan	25 Jan	21 Feb	08 Mar	21 Mar	22 Mar	25 Apr	23 May	24 May	11 Jul
Mary Barrett	✓	✓	✓	✗	✓	✓	✓	✓	✓	✓
Karen Canning	✓	✓	✓	✓	✓	✓	✓	✓	✗	✓
Essene Cassidy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Lorraine Clarke-Bishop	✓	✓	✗	✓	✓	✓	✓	✓	✓	✗
Sinead Cleary	✓	✓	✓	✗	✓	✓	✓	✓	✓	✓
Noel Giblin	✓	✗	✓	✗	✗	✓	✗	✗	✗	✗
Louise Kavanagh McBride	✗	✓	✗	✗	✗	✗	✓	✓	✓	✓
Tanya King	–	–	–	–	–	–	–	–	–	✓
Denise Lawler	✓	✗	✓	✗	✗	✗	✓	✓	✓	✓
Breda Liston	✓	✓	✓	✗	✓	✓	✓	✓	✓	✓
John Murray	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Total	9	8	8	4	7	8	9	9	8	9

Lay representatives	24 Jan	25 Jan	21 Feb	08 Mar	21 Mar	22 Mar	25 Apr	23 May	24 May	11 Jul
Mark Blake-Knox	✓	✓	✓	✓	✓	✓	✓	✓	✗	✗
Éamann Breatnach	✗	✗	✓	✗	✓	✓	✗	✓	✓	✓
Pat Dolan	✓	✗	✓	✗	✓	✓	✓	✓	✗	✓
Martin Higgins	✓	✗	✓	✗	✗	✓	✓	✓	✓	✓
Dermot Manning	✓	✓	✓	✓	✓	✓	✓	✓	✗	✓
Rosaleen McElvaney	✓	✗	✓	✗	✓	✓	✗	✓	✓	✗
Kilian McGrane	✓	✓	✓	✓	✗	✗	✓	✗	✓	✓
Liam Minihan	✓	✓	✓	✗	✓	✓	✓	✓	✓	✓
Michele Monahan	✓	✓	✓	✗	✓	✓	✗	✓	✓	✓
Denis Murphy	✓	✓	✓	✗	✗	✗	✗	✓	✓	✓
Kevin O'Carroll	✓	✗	✓	✓	✗	✓	✗	✗	✗	✓
Total	10	6	11	4	7	9	6	9	7	9

Nurse/midwife	12 Dec	23 days
Catherine Cocoman	✓	1
Mary Gorman	✓	1
Liam Hamill	✓	1
Eileen Kelly	✗	0

12 Jul	31-Jul	16 Aug	08 Sep	26 Sep	27 Sep	13 Oct	24 Oct	02 Nov	21 Nov	22 Nov	01 Dec	12 Dec	23 days
X	X	✓	X	✓	✓	X	X	✓	✓	✓	✓	–	17
✓	✓	X	X	✓	✓	X	✓	X	✓	✓	✓	X	17
X	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	22
X	X	X	X	✓	✓	X	✓	X	✓	✓	X	X	13
✓	X	X	X	✓	✓	X	X	X	✓	✓	✓	–	16
X	X	X	X	X	X	X	X	X	X	X	X	–	3
✓	X	X	✓	X	X	✓	X	X	✓	✓	✓	X	11
X	X	✓	✓	✓	✓	✓	X	X	✓	✓	✓	✓	10
✓	X	✓	✓	✓	✓	✓	X	✓	✓	X	✓	✓	16
✓	✓	X	✓	✓	✓	X	✓	✓	✓	✓	✓	X	19
✓	X	X	✓	✓	✓	✓	✓	✓	✓	✓	✓	–	20
6	3	4	6	9	9	5	5	5	10	9	9	3	

12 Jul	31 Jul	16 Aug	08 Sep	26 Sep	27 Sep	13 Oct	24 Oct	02 Nov	21 Nov	22 Nov	01 Dec	12 Dec	23 days
X	X	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	X	18
X	✓	X	✓	X	X	X	✓	X	✓	✓	✓	–	
✓	X	X	X	✓	X	X	✓	X	✓	X	✓	✓	13
✓	X	X	✓	X	X	X	✓	✓	✓	✓	✓	X	14
✓	X	X	X	✓	✓	✓	✓	✓	✓	✓	✓	✓	19
X	X	X	X	✓	✓	X	X	X	✓	✓	✓	X	11
✓	✓	✓	X	✓	✓	X	✓	✓	✓	✓	✓	X	17
✓	✓	✓	✓	✓	✓	X	✓	✓	✓	✓	✓	X	20
✓	X	X	✓	X	X	X	X	✓	✓	X	✓	–	13
X	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	X	X	16
✓	X	✓	X	✓	X	X	X	X	X	✓	X	X	9
7	4	5	6	8	6	3	8	7	10	9	9	2	

- The Board accepted Dawn Johnston’s resignation on 24 January 2017
- Colette Finn resigned in 2016 and was not replaced until Tanya King was appointed to the Board on 29 June 2017.
- Mary Barrett, Éamann Breatnach, Sinead Cleary, Noel Giblin and John Murray - tenure ended on 5 December 2017.
- Catherine Cocoman, Mary Gorman, Liam Hamill and Eileen Kelly - tenure began on 6 December 2017.

Appendix 3: Committees 2017

Since July 2017, there are four Statutory Committees and four Advisory Committees with specific responsibilities to support the activities of the Board in governing NMBI. Prior to this, there were also an additional two committees: the Ethics Committee, and the Standards and Validation Committee.

Statutory Committees:

- **Fitness to Practise Committee (2011)**
The role of the Fitness to Practise Committee is to inquire into complaints referred by the Preliminary Proceedings Committee under Section 61 of the Nurses and Midwives Act 2011. On completion of an inquiry, the Fitness to Practise Committee submits its report to the Board.
- **Fitness to Practise Committee (1985)**
Work on this Committee is nearing completion and is based on the 1985 Act.
- **Midwives Committee**
The role of the Midwives Committee is to advise the Board in relation to all areas pertaining to midwifery practice.
- **Preliminary Proceedings Committee**
The role of the Preliminary Proceedings Committee is to give initial consideration to complaints. It can refer complaints to the Fitness to Practise Committee or to other procedures if the complaints are not appropriate for the Board's Fitness to Practise procedures.

Advisory Committees:

- **Audit and Risk Committee**
The Audit and Risk Committee provides an independent appraisal structure within NMBI to measure and evaluate the effectiveness and efficiency of its risks, governance and internal control procedures and its financial reporting framework.
- **Governance and Finance Committee**
The Governance and Finance Committee advises and makes recommendations to the Board in relation to all issues pertaining to the governance and finance function of the Board in accordance with the provisions of the Nurses and Midwives Act 2011. It oversees the financial arrangements and internal operations of the Board, and ensures that appropriate and adequate control arrangements exist in all areas of financial responsibility.

- **Education, Standards and Training Committee**

The Education, Standards and Training Committee monitors adherence to standards, and evaluates compliance to standards and criteria for the education and training of nurses and midwives on behalf of NMBI. It carries a range of functions connected with setting standards and requirements for education programmes and validating those programmes. It provides a forum and guidance to NMBI, to the profession and to those who require it in relation to behaviour, ethical conduct, practice and research. It is responsible for learning techniques/methods of ethical analysis and principles.

- **Registration Committee**

The Registration Committee makes decisions, advises and makes recommendations to the Board in relation to all issues pertaining to registration.

Appendix 4: Committees Members and Meetings 2017

Fitness to Practise Committee (2011)

There were 53 inquiry days and nine Call Over days in 2017.

Committee structure:

Nine Board Members (four nurses, one midwife and four lay) and 18 non-Board Members (three nurses, three midwives and 12 lay)

Chairperson: Denise Lawlor

Members	Inquiry day total	Call Over days	Total
	53	9	62
Mary Barrett	7	3	10
Mark Blake-Knox	3	3	6
Karen Canning	16	5	21
Pat Dolan	18	4	22
Noel Giblin	1	1	2
Denise Lawlor	5	0	5
Liam Minihan	27	1	28
Michele Monahan	9	0	9
John Murray	25	3	28
Catherine Boyhan	3	0	3
James Doran	4	0	4
Eileen Flynn	1	0	1
Richard Hammond	11	4	15
Mary Higgins	35	6	41
Mark Kane	5	1	6
Stephen Kealy	13	2	15
Jill Long	20	5	25
Cindy Mackie	0	0	0
Úna Marren	3	0	3
Shane McCarthy	17	3	20
Martin McNamara	0	0	0
Cathriona Molloy	14	3	17
Orla Mongan	0	0	0
Amanda Phelan	5	0	5
Emma Prendergast	1	0	1
Michelle Rose	1	0	1
Milo Walsh	2	1	3

Fitness to Practise Committee (1985)

Two inquiries were held over a total of five inquiry days. The two-day inquiry concluded; the three-day matter is continuing.

No meetings of this Committee were held in 2017.

Committee structure: All Board Members

Chairperson: Pauline Treanor

Members	No of inquiry days attended in 2017
Eimear McAuliffe	2
Siobhán Quirke	0
Mary Kenneally	3
John McCardle	0
Orla O'Reilly	0
Cathryn Lee	0
Mary Godfrey	2
Bobby Burns	0
Cathriona Molloy	2
Jacinta Mulhere	0
Maureen (Mary) Kington	0
Pauline Treanor	0
Marie Gilligan	0
Ann Sheehan	0
Jacqueline Burke	0
Deirdre Duffy	0
Aine McHugh	3
Éamann Breatnach	0
Virginia Pye	0
Gerry Maguire	3

Midwives Committee

Five meetings were held in 2017.

Committee structure:

14 Members (five Board Members and nine non-Board Members)

Chairperson: Sinead Cleary

Members	Total no. of meetings
Mary Barrett	5
Sinead Cleary	5
Denis Murphy	4
Kilian McGrane	1
Denise Lawler	5
Mary Brosnan	3
Deirdre Walsh	3
Gemma Gannon	3
Sally Millar	4
Allie Moseley	0
Cathriona Molloy	1
Fidelma Flynn	3
Colette McCann	3
Mark Skehan	1

The document Requirements and Standards for the Post-RGN Midwife Registration Education programme was agreed by the Midwives Committee in April 2017 and then by the Board in June 2017.

A draft of Registers Advanced Practice (Midwifery) Standards and Requirements went for public consultation in November. Comments have been included in the amended document which is to be presented to the Education and Training Committee.

The student midwife debate was held in DKIT on 3 May and was moderated by Sarah Carey (Journalist).

There were two new appointments to the Midwives Committee: Mr Mark Skehan (Consultant Obstetrician) and Gemma Gannon (Midwife).

Preliminary Proceedings Committee

Nine meetings were held in 2017.

Committee structure:

10 Members (four Board Members and six non-Board Members)

Chairperson: Sinead Cleary

Members	Total no. of meetings
Éamann Breathnach	5
Sinead Cleary	9
Denis Murphy	7
Breda Liston	8
Fidelma Flynn	4
Clodagh Geraghty	8
Timmy Frawley	8
Ann Sheehan	8
Geraldine Feeney	6
Miriam Kelly	5

Audit and Risk Committee

Four meetings were held in 2017.

Committee structure:

The terms of reference changed on 22 November and the membership went from four Board Members and three non-Board Members to three Board Members and two non-Board Members. The President is an ex-officio member.

Chairperson: Martin Higgins

Members	Total no. of meetings
Mark Blake-Knox	3
Essene Cassidy	3
Martin Higgins	4
Dermot Manning	3
Liam Minihan	2
Avilene Casey	2
Margaret Campbell	3
Denis Doherty	3

Governance and Finance Committee

Twelve meetings were held in 2017.

Committee structure:

Seven Members (seven Board Members and 0 non-Board Members)

Chairperson: Kilian McGrane

Members	Total no of meetings
Karen Canning	8
Essene Cassidy	12
Pat Dolan	7
Kilian McGrane	12
Michele Monahan	11
Denis Murphy	10
John Murray	10

Education, Standards and Training Committee

Four meetings were held in 2017.

Committee structure:

11 Members (seven Board Members and four non-Board Members)

Chairperson: Lorraine Clarke-Bishop

Members	Total no of meetings
John Murray	4
Noel Giblin	0
Louise McBride Kavanagh	3
Kevin O'Carroll	1
Rosaleen McElvaney	2
Lorraine Clarke Bishop	3
Denise Lawler	1
Sarah Lennon	0
Barbara Kelly	3
Mary McDonnell-Naughton	3
Margaret Philbin	2

Registration Committee

Six meetings were held in 2017.

Committee structure:

Six Members (three Board Members and three non-Board Members)

Chairperson: Kevin O'Carroll

Members	Total no. of meetings
Kevin O'Carroll	6
Lorraine Clarke Bishop	6
Dermot Manning	5
Cathriona Molloy	3
Sandra McCarthy	5
Catriona Lavelle	1

Validation and Standards Committee

Three meetings were held in 2017.

Committee structure:

13 Members (four Board Members and nine non-Board Members)

Chairperson: Louise Kavanagh McBride

Members	Total no. of meetings
Breda Liston	3
Louise Kavanagh-McBride	1
Kevin O'Carroll	0
Mary Gobbi	1
Bernie Kerry	1
Elizabeth Adams	1
Aisling Culhane	0
Margaret Philbin	0
Sarah Lennon	0
Myles Hackett	1
JP Nolan	1
Peter Cullen	1

Ethics Committee:

Two meetings were held in 2017

Committee structure:

14 Members (five Board Members and nine non-Board Members)

Chairperson: Sinead Cleary

Board Members	Total no. of meetings
Mary Barrett	2
Éamann Breatnach	0
Liam Minihan	1
Denis Murphy	2
Sinead Cleary	2
Louise Daly	2
Maureen Nolan	2
Mervyn Taylor	2
Anna-Marie Greaney	2
Kathleen Henry	2
Caroline Lamb	1
Sile Gill	2
Therese Meehan	1

Dr Joan McCarthy (UCC) resigned from the Ethics Committee in June 2017.

Appendix 5: Category 1 Course Approvals in 2017

Category 1 Approvals	2017
January	
Courses (two-year approval)	23
Conferences (date approval)	18
Total	41
February	
Courses (two-year approval)	89
Conferences (date approval)	25
Total	114
March	
Courses (two-year approval)	87
Conferences (date approval)	39
Total	126
April	
Courses (two-year approval)	30
Conferences (date approval)	16
Total	46
May	
Courses (two-year approval)	60
Conferences (date approval)	36
Total	96
June	
Courses (two-year approval)	46
Conferences (date approval)	19
Total	65
July	
Courses (two-year approval)	11
Conferences (date approval)	6
Total	17
August	
Courses (two-year approval)	52
Conferences (date approval)	10
Total	62

(continued)

Category 1 Approvals		2017
September		
Courses (two-year approval)		114
Conferences (date approval)		49
Total		163
October		
Courses (two-year approval)		63
Conferences (date approval)		20
Total		83
November		
Courses (two-year approval)		66
Conferences (date approval)		37
Total		103
December		
Courses (two-year approval)		65
Conferences (date approval)		10
Total		75
Total for year		991



**Bord Altranais agus
Cnámhseachais na hÉireann**

**Nursing and Midwifery
Board of Ireland**

Nursing and Midwifery Board of Ireland (NMBI)

18/20 Carysfort Avenue | Blackrock | Co. Dublin | A94 R299

T +353(0)1 639 8500 www.nmbi.ie