



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

# Statement of Strategy Consultation Report 2023-2025



## About the Nursing and Midwifery Board of Ireland (NMBI)

The Nursing and Midwifery Board of Ireland (NMBI) is the regulatory body for the professions of nursing and midwifery in Ireland. We have a statutory obligation to protect the public and the integrity of the professions of nursing and midwifery. We perform our functions in the public interest under the Nurses Act, 1985 and the Nurses and Midwives Act 2011.

We do this by:

- maintaining the Register of Nurses and Midwives and a Candidate Register for student nurses and midwives
- setting the standards for the education and training of nurses and midwives
- approving programmes of education necessary for registration and monitor these programmes on an ongoing basis
- supporting our registrants by providing appropriate guidance on professional conduct and ethics
- 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, and
- advising the Minister and the public on all matters of relevance relating to our functions.

## The consultation process

The consultation process had a number of distinct phases.

### Phase 1: Internal consultation

All staff and Board members had an opportunity, through a series of working sessions, to contribute to an analysis of NMBI's environment and share their thoughts on potential strategic priorities for the organisation.

### Phase 2: Targeted face-to-face meetings

The CEO and President invited a number of stakeholders to meet, with the aim of understanding their own strategic plans and listen to how NMBI might contribute to their agendas. NMBI understands that it needs to respond to or simply be aware of what is going on in the broad nursing and midwifery environment.

### Phase 3: Broad public consultation

On 20 July 2022, we launched a public consultation seeking submissions as we develop our Statement of Strategy 2023-2025.

A brief questionnaire (see Appendix 1) was made available on our website. This was open to all. Registrants, staff organisations, employers, managers, patient advocate groups and other key stakeholders were emailed directly inviting them to participate, including a link to the questionnaire.

A Twitter campaign was launched to encourage participation in the survey and press releases were pitched to regional media outlets.

The timing of the consultation was also flagged during the “NMBI’s Summer Series” – a roadshow conducted by NMBI during the Summer of 2022, which encompassed four meetings in four counties with a total of 190 attendees.

## Overview of responses to consultation

**Table 1: Methods of consultation**

Method	Number of respondents
Online survey	129
External meetings	15
Internal workshops	6

Respondents to the online survey were asked if they were providing feedback in a personal capacity or on behalf of an institution or organisation.

**Table 2: Classification of respondents**

Classification of respondents	Number and % of respondents
In a personal capacity	108 (84%)
On behalf of an institution or organisation	21 (16%)
<b>Total</b>	<b>129</b>

Submissions were received on behalf of the following institutions and organisations:

- Nursing and Midwifery Planning and Development Unit South East.
- Ireland East Hospital Group - Nursing and Midwifery Practice Development Group.
- CervicalCheck.
- Dermatology Aesthetics Nurses Association Ireland (DANAI).
- University Hospital Waterford.
- ANAIL respiratory nurse association.
- National Clinical Programme, Respiratory
- Nursing Homes Ireland.
- National Heart Programme, HSE.
- The Midwifery Team, School of Nursing and Midwifery, Trinity College Dublin.
- Sage Advocacy.

- National Clinical Programme Diabetes.
- Hibernia College.
- 22q group.
- Chief Directors of Nursing and Midwifery group.
- The Irish Association of Advanced Nurse Midwife Practitioners (IAANMP).
- National Lead for Midwifery Office of the Nursing and Midwifery Services Director (ONMSD).
- Health Information and Quality Authority.
- Ireland East Hospital Group (IEHG) CDONM and the Nursing & Midwifery Executive Team.
- Mallow General Hospital.
- IPPOSI – The Irish Platform for Patient Organisations, Science and Industry.

External meetings were facilitated by NMBI's President, CEO, Head of Operations and Senior Management Team members with the following institutions and organisations:

- Department of Health – Chief Nurse's Office.
- Irish Nurses and Midwives Organisation (INMO).
- Services Industrial Professional and Technical Union (SIPTU).
- The Irish Association of Advanced Nurse Midwife Practitioners (IAANMP).
- Children's Nursing group.
- Irish Association of Nursing and Midwifery Practice Development.
- Fórsa.
- Group Directors of Nursing.
- Group Directors of Midwifery.
- Office of the Nursing and Midwifery Services Director (ONMSD).
- Psychiatric Nurses Association (PNA).
- Nursing Homes Ireland.
- Private Hospitals Association.
- Mental Health Area Directors of Nursing.
- IOT Head of schools.
- Irish Universities Association, Heads of Schools of Nursing and Midwifery.
- ID Group Lead.
- Irish General Practice Nurses Association.
- Irish Association of Directors of Nursing and Midwifery.

This report presents the key, consistent themes that emerged from the consultation process, followed by our responses to the findings. The published version of our Statement of Strategy 2023-2025 will reflect the responses we have received.

## What you said

### Retention of nurses and midwives is critical

You told us that many nurses and midwives are leaving the professions. Newly graduated nurses and midwives and those in the early years of their careers are choosing to practise abroad. Many are not returning. You are also seeing talent and expertise leaving the professions at all stages of tenure. You make clear the link between understaffing, suboptimal skills mix, patient/health professional ratios and safety – patient safety and the wellbeing of nurses and midwives.

In our survey you highlighted a number of potential reasons for nurses and midwives leaving including:

- Career paths not being visible, understood or equally accessible by all.
- The public do not necessarily value nursing and midwifery in the same way as they did in the past.
- Constraints to work to the top of the license; in some cases imposed by management, in others by other healthcare professionals.
- Understaffing and under resourcing, creating pressure and stress making other working options more attractive.
- Other work setting challenges (addressed separately below).

#### Our response:

**Recommendation 12** of the Report of the Expert Review Body on Nursing and Midwifery specifically addresses retention and NMBI will have a key role in developing a five-year strategy to support this:

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The **HSE** and **NMBI** to develop a five-year strategy, supported by workforce intelligence data, for the retention of nurses and midwives in Ireland, with a particular focus on:

- Early graduate and early career nurses and midwives.
- Nurses and midwives in the last decade of their career.
- Professional mobility.
- Workforce stability.

This strategy should also utilise and incorporate staff retention supports and tools such as professional development plans, performance reviews, clinical supervision, coaching, mentorship, staff wellbeing, access to continuing professional development and postgraduate education, and leadership support.

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- NMBI will work to communicate the role of nurses and midwives, and the attractiveness of the professions more effectively.
  - » We plan to revamp the careers material on our website under the new strategy to be delivered in 2024. The material will focus on the breadth and variety of roles and career pathways which a nursing or midwifery qualification can provide access to. This includes but is not limited to entry from graduate to Advanced Nurse Practitioner (ANP), acute to non-acute settings, public and private sectors, independent practice, academia, research and management.
  - » We also plan to bring greater clarity to how registrants can move between divisions and progress to specialist and advanced practice.
- Broadening access pathways to register may also support retention by providing access to those who have already experienced healthcare settings and roles. These pathways are covered in more detail under the theme of education on page 8 of this report.
- NMBI has unique visibility of how many people leave the Register each year. We plan to do an annual survey of those who leave the Register to understand why. We will share this data with our stakeholders to inform retention strategies.

## Attracting new nursing and midwifery talent from overseas is key

Annual demand for nurses and midwives is far exceeding the number of graduates from NMBI approved programmes in Ireland. You told us that continuing to be a competitive destination for overseas talent is vital to the healthcare sector, both public and private.

As the regulator you have told us we need to:

- make the application process as simple as possible to understand.
- ensure that we process applications as quickly as possible without lowering our standards.
- ensure that we are competitive in recruiting talent, particularly with the UK.

A number of respondents also asked if the English language requirement, as set by NMBI, is too high, particularly in the context of the Nursing and Midwifery Council (NMC) in the UK, indicating that they may lower their entry requirement.

## Our response

We are committed to continually improving our recognition and registration processes to make them more applicant friendly, streamlined and efficient.

- Our digital registration platform, MyNMBI is key to making the application process as effective and efficient as possible. We will continue to improve this digital system and invest in improvements and innovations. The next generation of MyNMBI will be delivered under the new strategy.
- We plan to introduce a dedicated online and physical hub to specifically support overseas applicants. The hub will be a virtual feature on our website, easing access for overseas applicants and providing tailored information (specific FAQs, videos, webinars etc).
- The hub will also include a physical space in our office in Blackrock, County Dublin. We are aware that, while the digitisation of our processes has many benefits, for a small number of applicants it can be difficult to access a PC, smart phone or a private space. We also know that there are large numbers of overseas applicants already residing in Ireland, working for example in HCA roles while completing the application process. We hope that the hub can support them in this process.

The physical hub can be booked in advance and the applicant will have access to the internet and a PC. A staff member will also be available to support applicants and respond to queries.

- We will build on more in-depth engagement with third parties who play an important role in sourcing talent for Ireland's healthcare system, e.g. recruitment agencies. Understanding their role better will inform our communications and website content strategy for the next three years. Specifically, we will work in collaboration with third parties to ensure that our processes are better understood so that they can support applicants. We will also listen to their feedback to ensure that we understand how our processes can be improved. (A practical example of this is where we collaborated with Migrant Nurses Ireland to make the language in our Decision Letters more straightforward.)
- We have updated our adaptation policy in response to feedback about working flexibly over a 6-week period. We no longer specify 9 - 5, Monday to Friday, but rather 225 hours over a 6-week period. This allows adaptation sites to accommodate applicants and allow them to spend more time with their preceptors.
- In 2022 we have commenced a comprehensive re-validation of adaptation sites to ensure they meet our standards and are candidate friendly. This review will be completed in 2023.
- In 2022 we have piloted a new process in relation to frequently seen applications. This process allows us to reference profiles of education programmes we have a historical experience. When we assess the impact of the pilot, we will make a decision on whether to retain and extend the piloted process.

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- We will continue to engage with the embassies and consulates of countries from which we receive a large number of applications from graduates who apply to practise in Ireland. We will collaborate with embassies and consulates to gain greater understanding on how we can improve our processes. This also allows us to have a conversation about career paths of nurses and midwives from those countries. This insight will enable us to have informed conversations about social equity and allows us to shape our policies in a socially equitable manner.
- English language is integral to patient safety. Our data does not indicate that English language proficiency test results are impacting the progress of the vast majority of applicants.
  - » EU applicants who completed a programme of education through English will no longer be required to complete an English language test.
  - » Language requirements are now better signposted in the process.As such we do not currently have any plans to lower the English language score requirements but we will monitor the NMC and the UK to see how their policy evolves, and the impacts of any policy change.
- 90% of our overseas applicants are from India so NMBI will engage with education bodies in Ireland and India, the Indian Embassy of Ireland and other relevant stakeholders to understand if a programme of education can be developed to NMBI standards. This would mitigate the known deficit between the Indian nursing and midwifery degrees and the standards required to join the NMBI Register. This would provide another, clear route to the Register.
- We are conscious that we are competing for talent and that the speed of our processes should not disadvantage Ireland from securing nurses and midwives from overseas. Of particular relevance is the UK which is the other European destination for English speakers. We continually monitor our processes against international benchmarks.

## Evolve the education of nurses and midwives

You have highlighted that nursing and midwifery roles are evolving, as are patient models of care, therapies and pathways, technology and healthcare settings. The professions will never stand still. Education and ongoing professional development need to be more flexible and responsive.

Points raised in your feedback included the need to:

- increase student placements in the community setting reflecting the objective of the Sláintecare strategy.
- include continuous professional development.
- recognise the value of practice-based reflective learning.
- evolve the curriculum to ensure graduates are ready and maximising the value they can bring to practise from Day 1.
- develop a modular approach to education to facilitate those working and studying at the same time.

## Our response

- The education standards and requirements for undergraduate nursing and midwifery programmes are being updated, as per a key recommendation of the Expert Review Body on Nursing and Midwifery.
  - » A research group has been established and will deliver recommendations on the standards and requirements of nursing and midwifery undergraduate programmes. The group is currently undertaking desk-based research and will be conducting focus groups and complete a student survey in 2023. It is due to make its recommendations in 2023.
  - » An Education Oversight Group chaired by the Director of Education, Policy and Standards will be established in Q4 2022 which will align with the Expert Review Body implementation group. The group will consider the recommendations of the research group and approve a draft of education standards and requirements for the nursing and midwifery undergraduate programmes for public consultation in 2023.
  - » New standards and requirements will be published in 2024 with a one-to-two-year lead time for education bodies to seek approval for their programmes.
  - » The co-design approach will allow education bodies to progress the revision of their programmes to meet of the standards and requirements. This timeline is dependent on further work involving the education and health service sectors' analysis of additional funding requirements to resource academic and clinical education support.
  - » This process will reflect the points highlighted by you in the consultation including, but not limited to, technology, data, critical thinking, leadership, placements in the community etc.
- We have been and will continue to work with the Department of Health and the Department of Higher Education to expand pathways onto the Register. For example:
  - » We are currently developing standards and requirements for graduate entry programmes which will recognise prior learning (another degree) and can be completed in 2 years (12 month calendar years, as opposed to 7 month academic years).
  - » We support the mature student pathway into nursing and midwifery education and welcome the increase in numbers for mature students and Post Leaving Certificate (PLC) course routes for programmes leading to NMBI registration.
  - » We also support the broadening of access pathways to the Register to provide further opportunities to those already working in healthcare, who understand the job: the demands of shift work. (This might also improve attrition pre and post-graduation).
  - » We welcome approaches and initiatives that facilitate those in further education (level 5 – 7) progressing into higher education (level 8). We will work on developing our nursing and midwifery level 8 programme standards and requirements using a structure that will facilitate mapping from other programmes.

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- » Having engaged with stakeholders and looked at the most recent evidence base for MMPC schemes, we consulted on a draft scheme in 2020 and based on feedback, we conducted a proof of pilot (with 20 stakeholders) in 2022. We are progressing with designing principles and will pilot in 2024 with a view to full roll out within the timeframe of this next statement of strategy.
- » In 2023 we plan to revamp our Code of Practice, making it as easy as possible to understand, more relevant to our registrants and all of the settings they practise in, and incorporating scope of practice principles. We hope to capture the content in user-friendly formats such as a video animation that can be used as a guidance tool by education bodies, students and registrants.

## There is greater diversity in the workforce

You told us that as we attract more talent from overseas, we need to recognise that there needs to be support structures in place.

### Our response

#### Applicants:

- We plan to introduce a dedicated overseas nurses and midwives hub to specifically support overseas applicants as already described on page 8.

#### Registrants

- We will develop a learning module/s specifically aimed at first time applicants and registrants planning to work in Ireland.
- It will focus on our Code of Conduct and Ethics and healthcare models in Ireland and embed cultural competencies.
- We plan to co-design this with our stakeholders (nurses and midwives working in Ireland who qualified overseas, employers etc). This content will be informed by their insights, as well as ours, including any patterns of complaints that may be useful to highlight.
- The module/s would be available on our website and we will also explore options of making them available through HSE LanD.
- The module/s will be signposted in communications between the NMBI and applicants, and will be complimentary to employers own induction and onboarding programmes.

## Our data is an asset

NMBI is responsible for maintaining an accurate Register of nurses and midwives. Registration is required to practice in Ireland. The Register itself can also be searched by the public and other professionals to confirm that a person is registered and in what division/s. Some of our stakeholders are now looking to the Register for other purposes – primarily strategic workforce planning and research. The digitised Register now allows us to collate information that may assist this planning and research, including how many nurses and midwives are registered; on what divisions they are registered; where they were educated; the number leaving the Register since the previous year; whether they are practising and patient-facing; their age and how many might be approaching retirement. This allows the workforce planners to model potential gaps in the provision of nursing and midwifery care and plan accordingly. Other researchers, policy makers and stakeholders can also find this information useful. Education bodies for example could use the data to model potential demand for programmes of education and to plan their capacity accordingly.

We also gather data on complaints and inquiries. This is currently shared through our eZine but you suggested that we could do more to share themes emerging and ensure that education bodies and registrants are aware of risks.

## Our response

- NMBI plans to publish an accurate, relevant and easy to digest report on our Register on an annual basis. This will build on information shared during our “NMBI’s Summer Series” which received very positive feedback.
- We launched the initial version of the “NMBI State of the Register 2022” in October this year (2022) and we will develop the report on an ongoing basis. The data will also be included in our annual report.
- Based on the interest expressed in our data, we will explore the potential of making query tools available to third parties to develop their own reports and analysis of the data (all within GDPR parameters).
- We plan to publish an annual complaint statistics report. This will provide an overview of complaints received, themes that have emerged, insights on how registrants can avoid such complaints being raised about them and information on which complaints progressed to inquiry and why. This report supports our shift to upstream regulation. Our first publication is planned for Q2 2023.
- We plan to develop an annual pack for the education bodies for inclusion in their programmes of education. A first version of this report will be developed for September 2023.
- We will continue to work with the Department of Health in relation to the Framework for Safe Nurse Staffing and Skill Mix and A System Dynamics Model of Nursing Workforce Supply.

## Models and settings of healthcare are changing

Many respondents highlighted changes in models and settings of healthcare. Some have already taken place and others are coming in the near future. You felt that as the regulator, NMBI needs to respond and support registrants through the changes.

Some of the points you made included:

- The expanding role of care in primary care and community settings under Sláintecare, e.g. nurses in GP practices, more management of chronic diseases in non-acute settings.
- Education and practice placements need to follow suit.
- More guidance must be developed for non-acute settings.
- Technology and data is underpinning work and critical to evidence-based care.
- The role of healthcare assistants is evolving and impacting on where nurses and midwives can focus their time and attention.
- Other respondents highlighted the risk of moving away from person-centred care.

### Our response:

- NMBI needs to be visible and present at the table when future models of healthcare are being discussed, in a manner similar to our engagement with the Expert Review Body on Nursing and Midwifery and the Department of Health.
- Nurses and midwives require professional guidance on planned changes to models of care. NMBI plans to increase our publication of guidance to nurses and midwives in a variety of healthcare settings (i.e. outside acute hospitals). This will include, but is not limited to, guidance specifically aimed at independent and private practitioners.
- We will continue to be a source of support for nurses and midwives, acknowledging the specific needs of these separate professions.
- We plan to expand the current Code of Conduct to incorporate the Scope of Practice with the aim of making the document relevant and real. Delegation of patient care will be covered as part of this.

## Work settings can be challenging

Respondents highlighted many aspects of their work settings which provide both personal and professional challenges. They want to know why we are not more vocal on some of these matters.

Challenges raised by respondents included:

- Pay.
- Benefits (parking, canteens, etc).
- Staff retention.
- Staffing ratios and levels.
- Lack of administrative support for staff nurses and midwives/administrative burden.
- General work-based problems.
- Mental health and physical wellbeing of registrants.

### Our response

- We are responsible for the regulation of nurses and midwives under the Nurses and Midwives Act 2011. As such, what we do is dictated by that legislation.

Essentially we:

- » maintain a Register of Nurses and Midwives.
  - » set and promote high standards of professional education, training, practice and professional conduct among nurses and midwives.
  - » investigate and consider complaints against nurses and midwives who practise in Ireland.
- Resourcing issues, staffing numbers and management structures in the clinical environment are legally outside of our statutory remit. However, while our primary focus must be on delivering on our statutory activities, we do have an opportunity to contribute at a policy-development level at policy forums. This allows us, as a regulator, to provide insights and a voice on the integrity of the practice of nursing and midwifery.

For example:

- » Our digitised MyNMBI registrant system provides enhanced data and insights to the Department of Health for workforce planning purposes (within GDPR guidelines). This will facilitate data-enabled workforce planning and can be focused on areas of retention.
- » We contributed to the Nursing and Midwifery Expert Review and will be partnering with a number of other stakeholders to deliver key projects.

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- » We are also mindful that any changes we introduce to our rules, standards and requirements should not create unnecessary hurdles in registration or in the flow of suitably qualified resources to the Irish healthcare system.
- » If staffing or clinical environment issues are a factor in an individual fitness to practise case, they will be taken into consideration by the Fitness to Practise Committee.
- » Retention has been addressed specifically above.

## The role of NMBI is not always clear to our stakeholders and you think we can do more

We heard that:

- Many registrants associate NMBI primarily with Fitness to Practise.
- Some of you told us that you had not previously understood our role in setting standards and requirements for programmes of education leading to registration and the monitoring of those programmes. Some responses implied that your perception was that as the regulator we are only regulating nurses and midwives in public healthcare settings, as opposed to practicing nurses and midwives in any setting (e.g. private nursing homes and GP practices).
- It is also clear from responses that many confuse the role of NMBI as the regulator, with trade unions, employers and the Department of Health.
- It is not necessarily clearly understood that we are a regulator of the professionals as opposed to the healthcare system (e.g. like HIQA).

You suggested that we could:

- Explain and promote the role of regulation better.
  - » Promote the fact that nurses and midwives are professionals with their own regulator. Promote this with the public to raise the status of nurses and midwives but also promote within the registrant population so that the value of regulation is understood.
- Do even more within the legislation that we operate under, e.g. promote the work of nursing and midwifery more to improve public understanding of the impact that our registrants make and make the potential careers in nursing and midwifery more attractive as a result.
- Use our data and insights to inform policy debate.
- Be more compassionate with all those party to a complaint.

## Our response

- Our communication plans will include raising the profile of NMBI and increasing understanding of our role and the role of professional regulation.
- Our work on key education initiatives, such as the work on the nursing and midwifery undergraduate programmes (as described above) is an opportunity to demonstrate other aspects of our role.
- We need to improve our messaging and take every opportunity to confirm what our role is and is not (e.g. as in the ‘Our Response’ of ‘Work Settings can be challenging’ section above).
- We will continue to shift our focus and resources to upstream regulation – supporting the vast majority of our registrants to deliver safe care and prevent harm.
- While FTP remains a feature of NMBI we have been making changes and will continue to do so in how we deal with complaints and inquiries. This is based on a compassion project which has identified how the complaints management process could be made more ‘compassionate’ to all those involved.

- » The Preliminary Proceedings Committee (PPC) have approved a process that allows ‘undertakings’ early in the process to deal with a complaint. For example, if a registrant demonstrates they are aware of what they did wrong, have demonstrated remorse and have taken corrective action to address the risk of re-occurrence a complaint can be dealt with at this early stage of the process.

This new process was piloted in 2022 and in 2023 we will assess the pilot, make any updates required to the process based on our learning and publish it on our website.

- » In September, 2022 the Board approved a revised process to relating to ‘undertakings’ at the inquiry stage of the complaints process. This will mean that a registrant who has taken an initiative/initiatives to address the behaviours that led to the complaint, with the knowledge and support of their employer can propose an undertaking.
- » In 2023, an independent support line will be made available to all parties to a complaint to provide support and mental health and wellbeing advice.
- » We have been actively targeting and reducing the lead times to inquiries. This has been reducing consistently over the last 18 months but there is a lot more to do. We continue to build in-house expertise and capacity to support this.  
Our new case management tool is currently being configured and will be fully operational in 2023 digitising our processes and documentation exchange.
- » Our complaints and FTP website content, with a particular focus on plain English and support, will be updated in 2023 to reflect the changes above. Our plans include the revision of all guidance documentation and supporting video content.



## Working with and through partners could amplify our impact

You told us that we should

- Ensure that the patient voice is heard in all that we do.
- Make explicit what we mean by partnering. e.g. will we co-design the standards and requirements for the undergrad programmes of education? How will this work?
- We do not necessarily have to build everything ourselves - if we want to strengthen and make more consistent the voice of the patient in our work for example, we could leverage patient forums that others have already established.
- We could use our influence to promote and support other policies, frameworks, initiatives and national legislation that are also targeting patient safety outcomes.
- Implementation of the work resulting from the Expert Nursing Review Group will be critical over the next number of years and NMBI will have a vital role to play in this.
- You also told us that you liked our Summer Series 2022 and would like to see more of this type of engagement.

## You would like more specifics on HOW we will deliver on the statement of strategy

While the commentary on the draft statement of strategy was overwhelmingly positive you rightly asked the question about how it would be delivered and how progress will be monitored and measured.

### Our response

- We will include milestones and a description of how we will know if we have succeeded in the final version of the statement of strategy.
- Our annual business plan (which is published) will be directly linked to the strategy.
- We will continue to report our progress quarterly to our parent department (Department of Health) and annually to the general public through our annual report.

## Conclusion

The consultation process has provided us with many valuable insights, suggestions and practical steps that we can take to improve our focus, efficiency and effectiveness. We have received clear messages from our stakeholders on their expectations of us. Remaining central to this is open, participative engagement, working in partnership together to protect the public and the integrity of the practices of nursing and midwifery.

## Acknowledgements

We would like to thank all of those who took the time to be part of our consultation process. This report on the consultation process was reviewed by the Board of NMBI and the outcomes will be considered and reflected in our new Statement of Strategy 2023-2025, which will be made available on our website [www.nmbi.ie](http://www.nmbi.ie) from January 2023.



## Appendices

## Appendix 1: Online Questionnaire

### Consultation to inform NMBI's Statement of Strategy 2023-2025

1. **As the regulator of nurses and midwives, what priorities do you think NMBI should have over the next three years?**

2. **What outcomes or results would you like to see?**

3. **How could NMBI further enhance our impact on service user safety through regulation?**

4. **How could NMBI further support our registrants?**

**5. Does the document make clear the role of the NMBI as the regulator?**

Yes	<input type="text"/>
No	<input type="text"/>

**6. If you could see one thing in the Statement of Strategy what would you like it to be?**

**7. Do you have anything else you would like to tell us?**

**Tell us about yourself...**

**8. If you are responding on behalf of an advocacy group, charity or other organisation, please state its name.**

**9. Are you a registrant?**

Yes	<input type="text"/>
No	<input type="text"/>

**10. Do you work for the NMBI?**

Yes	<input type="text"/>
No	<input type="text"/>

**11. Is there anything else you would like to tell us about yourself?**

## Appendix 2: Copy of website notice

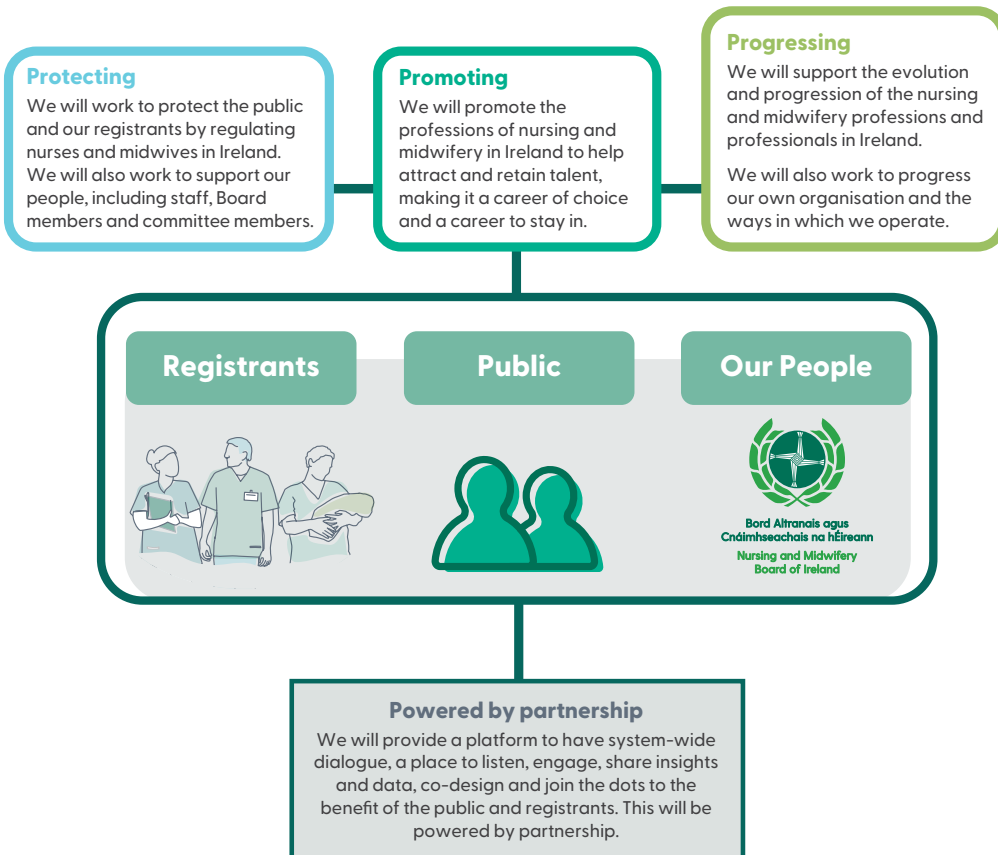
### Consultation to inform NMBI’s Statement of Strategy 2023-2025

The Nursing and Midwifery Board of Ireland (NMBI) is in the process of developing its next strategy which will run from 2023 to 2025. NMBI is inviting members of the public, particularly our registrants, to participate in an open consultation process to inform the organisation’s new strategy.

An independent statutory organisation, NMBI is the regulatory body for the nursing and midwifery professions in Ireland and works with nurses, midwives and educators to protect the public by promoting excellence and progression within the professions.

Anyone who has an interest in nursing and midwifery or in healthcare in general can have their say in shaping NMBI’s next strategic plan by completing a survey which can be accessed through the QR code below or on the NMBI website at [www.nmbi.ie](http://www.nmbi.ie).

**The deadline for submissions is Wednesday, 7 September 2022.**















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Cnáimhseachais na hÉireann

Nursing and Midwifery  
Board of Ireland

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