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National Guideline for the Development of Advanced Nursing or Midwifery Practitioner Services Office of the Nursing and Midwifery Services Director (ONMSD), Health Service Executive (HSE) Is this document a: Policy Procedure Protocol K			
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GLOSSARY

ADOM	Assistant Director of Midwifery
ADON	Assistant Director of Nursing
АНСР	Associated Healthcare Provider
cAMP	candidate Advanced Midwife Practitioner
cANP	candidate Advanced Nurse Practitioner
CDONM	Chief Director of Nursing and Midwifery
СНО	Community Health Organisation
CNOD	Chief Nursing Officer Department
DoH	Department of Health
DOM	Director of Midwifery
DON	Director of Nursing
DONM	Director of Nursing and Midwifery
DPHN	Director of Public Health Nursing
GP	General Practitioner
HEI	Higher Education Institute
HG	Hospital Group
HSE	Health Service Executive
ICT	Information and Communication Technologies
КРІ	Key Performance Indicator
LWG	Local Working Group
MOU	Memorandum of Understanding
NCNM	National Council for the Professional Development of Nursing & Midwifery
NMaHP	Nursing Midwifery and Health Professions
NMBI	Nursing & Midwifery Board of Ireland (An Bord Altranais agus Cnáimhseachais na hÉireann)
NMPDU	Nursing & Midwifery Planning and Development Unit
NZNO	New Zealand Nursing Office
ONMSD	Office of the Nursing and Midwifery Service Director
PPPG	Policy, Procedure, Protocol, Guideline
RAMP	Registered Advanced Midwife Practitioner
RANP	Registered Advanced Nurse Practitioner
SLA	Service Level Agreement

PART A: National Guideline for the Development of Advanced Nursing or Midwifery Practitioner Services

Part A of this document provides guidance for nursing and midwifery services on the development of advanced nursing or midwifery practitioner services. An overview of the process is outlined in Figure 1 below.





3.0 Deelopment of Advanced Nursing or Midwifery Practitioner Services

Toolkit of Resources

The ONMSD Advanced Practice Network has developed the following nationally approved toolkit of resources for use by nursing and midwifery services. The National Guideline should be read in conjunction with these documents. The templates are available at the end of this Guideline and an online version is available at: <u>https://healthservice.hse.ie/about-us/onmsd/advanced-and-specialist-practice/establish-practitioner-posts.html</u>

Template 1	Legislation, Rules, Regulations and Guidelines Governing Nursing and Midwifery Advanced Practice
Template 2	Sample Terms of Reference Advanced Nursing and Midwifery Practice
	Governance Group
Template 3	Business Case Template

Templates relating to Registered Advanced Nurse Practitioners

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1.0 Introduction

This National Guideline for the Development of Advanced Nursing and Midwifery Practitioner Services (hereafter referred to as National Guideline) and its associated toolkit of resources provides guidance for services on the process for the development of advanced nursing or midwifery practitioner services.

The Office of the Nursing and Midwifery Services Director (ONMSD) in the Health Service Executive (HSE) supports the development of advanced nursing and midwifery practitioner services throughout the HSE, and HSE funded agencies (Section 38). Advanced nursing and midwifery practitioner services are developed as a direct response to population health needs and organisational requirements, as identified through local and national planning processes. The identification and confirmation of these specific service developments within HSE and HSE funded service areas is the responsibility of the Chief, Area and Service Directors of Nursing and Directors of Midwifery.

In 2010, the National Council for the Professional Development of Nursing and Midwifery (NCNM) published the *'Evaluation of Clinical Nurse and Midwife Specialist and Advanced Nurse and Midwife Practitioner Roles in Ireland (SCAPE) Final Report* (Begley *et al*, 2010). This report illustrated that levels of success of advanced practice services are directly related to preparation in terms; of service needs analysis, defining advanced practice roles, and integration with other healthcare services. The Nursing and Midwifery Board of Ireland (NMBI) published the Requirements and Standards for Advanced Practice (Nursing) in 2017 and Advanced Practice (Midwifery) in 2018.

The 'Policy on the Development of Graduate to Advanced Nursing and Midwifery Practice' (Department of Health, 2019) sets out the strategic vision for the development of advanced practice services in the context of Sláintecare (Houses of the Oireachtas, May 2017). This policy aims to maximise the nursing and midwifery response to current and emerging health service challenges. The policy provides a model to support the development of graduate to advanced practice, that will create a critical mass of nurses and midwives working at advanced practice level to address population health needs.

The following definitions of advanced practice nursing and registered advanced midwife practitioner have been outlined by the Nursing and Midwifery Board of Ireland.

'Advanced Practice Nursing is defined as a career pathway for registered nurses, committed to continuing professional development and clinical supervision, to practice at a higher level of capability as independent, autonomous, and expert practitioners', (NMBI, 2017, p15).

'Registered Advanced Midwife Practitioner (RAMP) promotes wellness, offers healthcare interventions and advocates healthy lifestyle choices for women, their families and the community in a wide variety of settings in collaboration with other healthcare professionals', (NMBI, 2018, p14).

The RANP/RAMP manages a specific caseload of patients'/service users/women and their babies, from admission to discharge, completing an episode of care at an advanced level. The RANP/RAMP

as a lead healthcare professional uses advanced clinical knowledge and critical thinking skills to provide optimum care and improved clinical outcomes through higher levels of critical analysis, problem solving and senior clinical decision making. In achieving specific competencies, the RANP/RAMP develops the capability to extend practice in line with patient and service needs and developments. In developing capability, the journey of the RANP/RAMP moves from expertise in nursing or midwifery to incorporate additional expertise and thus extend their diagnostic and decision making knowledge and skills where this is in the patient's interest (Department of Health, 2019).

2.0 Partnership for the Development of Advanced Nursing or Midwifery Practitioner Services

The four partners involved in the development of advanced nursing or midwifery practitioner services are outlined below.

Figure 2. Partnership for the Development of Advanced Nursing or Midwifery Practitioner Services



2.1 Policy and Legislation– Department of Health

In July 2019, the Minister for Health launched 'A Policy on the Development of Graduate to Advanced Nursing and Midwifery Practice' (Department of Health, 2019). The purpose of the policy is to present a model for graduate to advanced practice capable of developing a critical mass of nurses and midwives to:

- i) address emerging and future service needs and
- ii) drive integration between services and professional groups.

The overarching principle underpinning the policy is to develop the nursing and midwifery resource in response to patient and service need.

The DoH Policy (2019) aims to create a more responsive, integrated and person-centred health and social care service. Similarly, other national policies including the Department of Health Statement of Strategy (2016-2019) (Department of Health, 2016) and the Houses of the Oireachtas Committee on the Future of Healthcare Sláintecare Report (Houses of the Oireachtas, May 2017) specify that care should be delivered at the lowest level of complexity with timely access to services. The availability of a critical mass of RANPs/RAMPs can support the shift in government health strategy from hospital to the community (Houses of the Oireachtas, May 2017). Linked to this priority is the development of advanced nursing and midwifery practitioner services to support the implementation of the HSE National Clinical and Integrated Care Programmes across services to ensure consistent service across geographic areas (Goal 1, Action A; DoH, 2019).

The DoH recommend that the HSE maintain the target of 2% advanced practitioners in the nursing/midwifery workforce as an initial critical mass (Recommendation 1, Action A; and Goal 1, Action, c; DoH, 2019). Development of advanced nursing and midwifery practitioner services should be focused on areas such as reduction of waiting lists, hospital avoidance, and supporting access to services in areas where the integration of services can be achieved (Goal 1, Action b; DoH, 2019). Furthermore, the creation of a critical mass of RANPs/RAMPs will generate an enhanced career pathway for graduate nurses and midwives who wish to progress from graduate to advanced clinical practice roles.

2.2 Regulation – Nursing and Midwifery Board of Ireland (NMBI)

The NMBI is the statutory regulatory body for nursing and midwifery in Ireland and has legislative authority to regulate advanced practice nursing and midwifery. The Nurses and Midwives Act (2011) states that the Board shall establish procedures and criteria for assessment and registration in the register of nurses and midwives and the candidate register, and the divisions of those registers, including the issue of certificates of registration and renewal of registration (Government of Ireland, 2011).

In accordance with the Nurses and Midwives Act (2011), the NMBI have published Advanced Practice (Nursing) Standards and Requirements (NMBI, 2017) and Advanced Practice (Midwifery) Standards and Requirements (NMBI, 2018). The standards and requirements provide flexibility to higher education institutions and associated health care providers to be responsive and adaptable in the provision of evidence based education programmes that prepare nurses and midwives with the necessary competences to register as advanced nurse or midwife practitioners.

http://www.irishstatutebook.ie/eli/2011/act/41/enacted/en/pdf https://www.nmbi.ie/Education/Standards-and-Requirements.

Revisions were made to the Nurses and Midwives Rules in 2018 which relate to the following areas:

- Registration
- Qualification recognition
- The candidate register
- The structure of registers.

The rules and SI numbers are:

- Nurses and Midwives (Candidate Register) Rules 2018 SI No 217 of 2018
- <u>Nurses and Midwives (Education and Training) Rules 2018 SI No 218 of 2018</u>
 Nurses and Midwives (Register of Nurses and Midwives) Rules 2018 SI No 219 of 2018
- Nurses and Midwives (Recognition of Professional Qualifications) Rules 2018 SI No 220 of 2018
- Nurses and Midwives (Registration) Rules 2018 SI No 221 of 2018

A list of relevant legislation, rules, regulations and guidelines for advanced practice is included in Template 1 (see page 28).

2.3 Guidance, Development and Support – The Role of the Office of the Nursing and Midwifery Services Director

The Office of the Nursing and Midwifery Services Director (ONMSD) provides a standardised approach to support the development of advanced nursing and midwifery practitioner services within each HSE Nursing and Midwifery Planning and Development (NMPD) area. This is coordinated through the ONMSD Lead for Advanced Practice and an NMPD officer from each of the eight NMPDU's.

2.4 Education and Research Support – The Role of the Higher Education Institutions

The Higher Education Institutions (HEIs) provide educational preparation, guidance and support to cANP/cAMP learning in line with the NMBI Post Registration Nursing and Midwifery Programmes Standards and Requirements (NMBI, 2015), and the Advanced Practice Standards and Requirements (Nursing) (NMBI, 2017) and (Midwifery) (NMBI, 2018). The HEIs and the associated healthcare providers facilitate the cANP/cAMP to achieve the competences for advanced nursing/midwifery practice through the provision of evidence based programmes of education that meet the criteria for registration as a RANP/RAMP. The HEIs are available to provide support to the cANP/cAMP and RANP/RAMP in developing their research knowledge, conducting research and publication.

3.0 Development of Advanced Nursing or Midwifery Practitioner Services

The process for the development of advanced nursing and midwifery practitioner services is outlined in table 3.1.

		Process Step	Action Required	Responsibility
on	1	Identification of need for RANP/RAMP service The requirement for a nursing/midwifery advanced practitioner service may be developed in response to Department of Health Policy, HSE National Service Plan, National Clinical and Integrated Care Programmes and/or local service needs	 A governance group, at Hospital Group (HG)/Community Healthcare Organisation (CHO) level should be established to facilitate, enable and drive the strategic development and integration of advanced nursing and midwifery practitioner services – Template 2 Terms of Reference High level identification of service need Discuss the potential for a new nursing/midwifery advanced practitioner service with the relevant stakeholders locally including succession planning requirements 	Chief DONM/ Director of Nursing/ Director of Midwifery/Director of Services/ Service Manager/DONM/ DPHN/Area Director Mental Health Nursing/Area Director Disability Services/ Existing RANP/RAMP
ati			 Engage with local NMPD officer for advice and guidance at an early stage 	
Initiation	2	Initial scoping of the service with key stakeholders	 Engagement with senior management team and clinical and non-clinical stakeholders as appropriate Obtain commitment to scope out the nursing/midwifery advanced practitioner service requirements 	Chief DONM/ Director of Nursing/ Director of Midwifery/ Director of Services/ Service Manager/DONM/ DPHN/Area Director Mental Health Nursing/Area Director /Manager of Disability Services in collaboration with key stakeholders including Consultant /GPs/RANP/RAMP
Planning	3	Development of business case for funding approval	 Review service data and align with service plans. See Template 3 Developing a Business Case for advanced nursing and midwifery practitioner services Consider the professional scope of practice of the RANP/RAMP role and the requirements to meet the role within the service Prepare and submit business case for approval The post(s) must be approved and signed off by the senior management team including whole time equivalent and financial approval 	Chief DONM/ Director of Nursing/ Director of Midwifery/ Director of Services/ Service Manager/DONM/ DPHN/Area Director Mental Health Nursing/Area Director Disability Services /Project Lead/RANP/RAMP
d	4	Recruitment of candidate ANP/AMP	 Adapt nationally approved job description specifying post specific requirements See Template 4 cANP Job Description or Template 11 cAMP Job Description 	Chief DONM/ Director of Nursing/ Director of Midwifery/ Director of Services / Service Manager/DONM/ DPHN/Area Director Mental Health Nursing/Area Director Disability Services

Table 3.1 Process for the Development of Advanced Nursing or Midwifery Practitioner Services

		Process Step	Action Required	Responsibility
	5	Development of the advanced nursing/midwifery practitioner service	 Establish Local Working Group (LWG). See Template 5 and Template 12 for sample Terms of Reference for LWG Agree clinical and professional supervision processes. See Template 6 and Template 13 Meet with key stakeholders Agree caseload, scope of practice and develop job description for RANP/RAMP. See Template 7 and Template 14 Develop PPPGs for practice Consider impact on other services- Develop Memorandum of Understanding (MOUs) and Service Level Agreements (SLAs) required. See Template 8, 9, 10, and Template 15,16,&17 Agree Referral Pathways, as required Identify resources required (for example clerical support) and facilities (examination room/office) 	cANP/cAMP/ Project Lead/ Consultant / GP/Professional Supervisor/Site Lead/ADON/ADOM/ RANP/ RAMP
Implementation	6	cANP/cAMP preparation for registration as RANP/RAMP with NMBI	 cANP/cAMP will undertake the academic preparation and develop the clinical and leadership skills, competences and knowledge required to meet the criteria for registration as a RANP/ RAMP Registration Pathway 1: complete the NMBI approved Master of Science in Nursing (Advanced Practice Nursing) Registration Pathway 2: Nurses and midwives who have attained the NMBI competencies and capabilities of advanced practice through a developmental pathway <u>https://www.nmbi.ie/Registration/Advanced- Practice/Registering-as-an-ANP-AMP</u> 	cANP/cAMP, Higher Education Institute, Employer
	7	cANP/cAMP applies for registration as RANP/RAMP	 Complete the necessary documentation for registration with NMBI <u>https://www.nmbi.ie/Registration/Advanced-Practice/Registering-as-an-ANP-AMP</u> The Local Working Group must approve all aspects of the development of the advanced nursing/midwifery practitioner service prior to the cANP/cAMP registering with NMBI. 	cANP/cAMP Local Working Group
	8	Registration as RANP/RAMP	 The NMBI will communicate the registration decision directly to the applicant. A new employment contract as RANP/RAMP (agreed job description) issued which includes on-going clinical supervision arrangements. 	NMBI Employer
Mainstreaming	9	Engagement in continuing clinical supervision and professional development and expansion of practice to meet service needs	 RANP/RAMP must keep his/her knowledge and skills up-to- date by taking part in relevant continuing professional development and clinical supervision The RANP/RAMP should maintain a professional practice portfolio, incorporating evidence of learning from continuing professional development, clinical supervision, reflective practice and review of his/her own scope of practice in accordance with regulatory requirements and service need. 	RANP/RAMP

4.0 Key Stakeholders – Roles and Responsibilities

This section outlines the roles and responsibilities of all key stakeholders involved in the development of advanced nursing or midwifery practitioner services.

4.1 Chief Director of Nursing and Midwifery (Hospital Groups)/ Director of Nursing/ Midwifery/ Area Director of Mental Health Nursing/ Director of Public Health Nursing/ Director of Service Intellectual Disability Services, or Service Manager (Community Healthcare Organisations) (hereafter referred to as Director)

The Director or their designated person has overall responsibility and authority for the governance for all aspects of advanced nursing or midwifery practitioner services.

They are responsible for:

- Identifying advanced nursing or midwifery practitioner service requirements to meet the current and emerging population health needs and health service challenges (Recommendation 2, Action A; DoH, 2019) by planning the strategic direction for advanced nursing or midwifery practitioner services in line with national and local policy, service and population needs.
- Ensuring robust governance and accountability structures are in place to oversee the development and implementation of advanced nursing and midwifery practitioner service (Recommendation 1, Action C; DoH, 2019).
- Establishing an Advanced Nursing and Midwifery Practice Governance Group (strategic level HG/CHO) and Local Working Group (operational level) to provide governance for the planning, implementation, operation and monitoring of the advanced nursing and midwifery practitioner service.
- Developing governance and managerial structures that support collaborative interdisciplinary team working that enable the skills of the cANP/cAMP or RANP/RAMP be maximised for patient-centred care (Goal 2, Action a; DoH, 2019); this governance structure should enable the cANP/cAMP or RANP/RAMP to provide a full episode of care, in a mutually supportive environment with all members of the health and social care team (Goal 3, Action a; DoH, 2019).
- Ensuring that programme governance arrangements are in place with the relevant academic partner.
- Ensuring a named individual is identified as site lead¹ with responsibility for development of the advanced nursing or midwifery practitioner service and for liaising with the education provider, NMBI and NMPDU.
- Ensuring that appropriate professional and clinical supervision arrangements with a named professional and clinical supervisor(s) is in place.
- Securing necessary resources for the nursing or midwifery advanced practice service i.e. clinical space, ICT requirements etc.
- Supporting the cANP/cAMP by agreeing access to; diagnostics, referral pathways, and

¹ An organisation may identify a site lead responsible for co-ordinating and supporting advanced nursing or midwifery practitioner development at service level and acting as a central point of contact for the cANP/cAMP, clinical and professional supervisor(s) and key stakeholders. The site lead should be a senior nurse/midwife manager.

appropriate treatments that are required to facilitate the provision of full episodes of care (Goal 3, Action b; DoH, 2019).

- Ensuring robust and agreed collaborative working arrangements are in place e.g. service level agreements (SLA) and memorandum of understanding (MOU).
- Supporting audit, research and evaluation processes for the advanced nursing or midwifery practitioner service.
- Monitoring patient outcomes to ensure the advanced nursing or midwifery practitioner service meets demand (Recommendation 2, Action B; DoH, 2019) by supporting the cANP/cAMP or RANP/RAMP to comply with local, regional and national data collection activities.
- Supporting cANPs/cAMPs to meet the criteria for registration as advanced nurse/midwife practitioners.
- Supporting the newly registered RANP/RAMP to take up their post as an RANP/RAMP.
- Ensuring that arrangements are in place to provide access to continuing clinical supervision and professional development for all RANP/RAMPs and ongoing maintenance of a professional practice portfolio.
- Providing reports pertaining to advanced nursing or midwifery practitioner service developments as required.

4.2 Chief Executive Officer/Chief Officer/General Manager or other senior manager within the health care organisation

They are responsible for:

- Providing support to the DON/DOM/DONM/DPHN/Area DON/Director of Service/Service Manager, and provide the structures required for the development of advanced nursing or midwifery practitioner service in their health care organisation.
- Ensuring robust governance and accountability structures are in place to oversee the development and implementation of advanced practice, (Recommendation 1, Action C; DoH, 2019)
- Ensuring that the advanced nursing or midwifery practitioner service is included within the overall clinical governance structure of primary, community and hospital services, and delegates responsibility appropriately to relevant healthcare professionals.

4.3 Line Manager/ADON/ADOM

They are responsible for:

- Identifying the service need for advanced nursing and midwifery practitioner services in consultation with the DON/DOM/DONM/DPHN/Area DON/Director of Service/Service Manager, existing RANP/RAMP, the nursing/midwifery and multidisciplinary teams.
- Taking cognisance of succession planning to meet future service requirements.
- Supporting the cANP/cAMP with the development of all aspects of the service.
- Providing professional supervision to the cANP/cAMP.
- Supporting the continuing professional development of the cANP/cAMP or RANP/RAMP.
- Informing the DON/DOM/DONM/DPHN of any issues associated with the cANP/cAMP or RANP/RAMP practices and taking appropriate action.
- Supporting audit and research and responding appropriately to audit and key performance

indicator (KPI) reports undertaken by the cANP/cAMP or RANP/RAMP.

- Monitoring patient outcomes to ensure the advanced nursing or midwifery practitioner service meets demand (Recommendation 2, Action B; DoH, 2019) by supporting the cANP/cAMP or RANP/RAMP to comply with local, regional and national data collection activities.
- Reviewing patient/client presentation times to ensure that the service provided by cANP/cAMP or RANP/RAMP matches the demand within the normal 24/7 patterns of nurse/midwife provision of care (Goal 3, Action d; DoH, 2019).

4.4 Candidate Advanced Nurse Practitioner (cANP)/Candidate Advanced Midwife Practitioner (cAMP)

Given the developmental nature of this service, the cANP/cAMP will be required to adhere to the terms as set out in his/her job description (see Template 4, pg.37, and Template 11, pg.75.).These include:

- Engaging in a process of self-development, structured education and professional and clinical supervision specific to their area of practice, in order to develop advanced clinical nursing/midwifery knowledge and critical thinking skills to gain the competence necessary to independently provide efficient, effective, safe patient care to a specific caseload of patients'/service users, women and their babies within their scope of practice.
- Demonstrating the core and specific competences deemed necessary to manage a collaboratively agreed caseload.
- Demonstrating that s/he meets the criteria for registration as an RANP/RAMP within an agreed timeframe. The timeframe for application for registration will be agreed with the Local Working Group in order to progress the development of an RANP/RAMP service.
- cANP/cAMP or RANP/RAMP who is undertaking educational preparation for medicinal product prescribing/ ionising radiation prescribing must comply with the *National Nurse and Midwife Medicinal Product Prescribing Policy* (2018)

https://healthservice.hse.ie/filelibrary/onmsd/national-nurse-and-midwife-medicinalproduct-prescribing-policy.pdf

and the Guiding Framework for the Implementation of Nurse Prescribing of Medical Ionising Radiation (X-Ray) in Ireland (2009)

https://healthservice.hse.ie/filelibrary/onmsd/a-guiding-framework-for-the-

 $\underline{implementation-of-nurse-prescribing-of-medical-ionising-radiation-x-ray-in-ireland.pdf}$

4.5 Clinical Supervisor

Clinical supervision provides in-depth reflection on clinical practice and acts as a vehicle for developing and sustaining high quality clinical care and contributes to continuous professional development. Clinical supervision is an integral part of the cANP/cAMP and RANP/RAMP role (NMBI, 2017). The Advanced Practice (Nursing) Standards and Requirements state 'the relationship between the HEI and each Associated Healthcare Provider(s), (AHCPs) in relation to students' clinical supervision and competence assessment, is specified in a formal Memorandum of Understanding that is subject to review on a five-yearly basis, or earlier, if deemed necessary by the HEI, AHCP, NMBI or other relevant authority' (NMBI, 2017 p 23). Clinical supervision promotes shared learning and may provide an exchange of different approaches to a clinical situation which may then be used to inform and change current and future practice. The number of theoretical and supervised clinical hours must be consistent with the acquisition of competence in compliance with the criteria for registration as an advanced nurse/midwife practitioner. Clinical supervision can be provided by a RANP/RAMP/Consultant/GP/Clinical Psychologist as appropriate to the area of practice and patient caseload. Through clinical supervision the cANP/cAMP or RANP/RAMP may identify areas for audit or research. The cANP/cAMP and designated clinical supervisor sign a declaration of undertaking for clinical supervision with oversight provided through the HEIs (pathway 1 criteria for registration with NMBI). cANPs/cAMPS who are on the developmental education pathway must also have agreed clinical supervision arrangements in place. An MOU for clinical supervision may be used to underpin this arrangement (pathway 2 criteria for registration with NMBI) see Template 6, pg.55, and Template 13, pg. 94.

Clinical supervision is facilitated through the clinical governance structure. Clinical supervisors are responsible for:

- The clinical supervision of the cANP /cAMP as they develop and establish competences and skills to provide care for an agreed caseload as governed by the competences required for registration. Where there are a number of aspects to a patient caseload, the responsibility for clinical supervision may be shared by one or more supervisors and appropriate governance arrangements are agreed by relevant parties.
- Supporting the ongoing clinical supervision of the RANP/RAMP in managing their patient caseload through the establishment of an agreed clinical supervision framework and adapting an interdisciplinary approach.
- Monitoring the quality of the learning environment in collaboration with named academic staff and guiding and supporting the candidates to ensure that practice placements provide an optimum learning environment for advanced practice nursing & midwifery (NMBI, 2017).
- Providing opportunities for formal and informal clinical supervision.
- Providing ongoing clinical supervision post registration.

4.6 Professional Supervisor (Nursing/Midwifery)

Professional supervision is facilitated through the organisation's nursing/midwifery management structure, for example; Director of Nursing or Midwifery/Assistant Director of Nursing or Midwifery or the /RANP/RAMP in the division in which the cANP/cAMP practices. Both the clinical and professional supervision roles operate simultaneously and are specified through the cANP's/ cAMPs job description.

Professional supervisors are responsible for:

- Supporting the advanced nursing or midwifery practitioner service development and establishment.
- Assisting the cANP/cAMP or RANP/RAMP to identify professional training and continuing development needs emerging from the ongoing review of their patient caseload.
- Supporting the cANP/cAMP or RANP/RAMP to develop competencies and skills as a lead healthcare professional in order to realise the service vision.
- Supporting the cANP/cAMP or RANP/RAMP to work within professional codes of conduct and

scope of professional practice.

- Supporting the cANP/cAMP or RANP/RAMP to keep up-to-date with developments in their profession.
- Ensuring professional standards of practice.

4.7 Office of the Nursing and Midwifery Services Director (ONMSD)

The ONMSD is responsible for providing a standardised approach to support the development of advanced nursing and midwifery practitioner services within each HSE Nursing and Midwifery Planning and Development (NMPD) area. This support is coordinated by the ONMSD Lead for Advanced Practice with the support of the assigned NMPD officers from each of the eight NMPDUs. For further information see: <u>https://healthservice.hse.ie/en/about-us/onmsd/advanced-and-specialist-practice/advanced-practice.html</u>

4.7.1 Nursing and Midwifery Planning and Development Unit (NMPDU) Directors and assigned NMPD Officers

The NMPDUs have responsibility for:

- Facilitating, providing guidance and supporting Directors of Nursing and Midwifery on the development of the advanced nursing and midwifery practitioner services from business case development through to the registration of the candidate.
- Liaising with Directors of Nursing and Midwifery in local organisations and services, to enable them to identify the service need for registered advanced nurse or midwife practitioner services.
- Supporting integration between services.
- Providing awareness and understanding of the principles of advanced nursing and midwifery practitioner service development.
- Supporting, guiding and advising advanced nursing and midwifery practice governance groups and local working groups.
- Circulating information and updates to cANP/cAMP, RANP/RAMP, managers and services.
- Coordinating the funding for postgraduate education to support the educational preparation of cANP/cAMPs, in line with funding guidelines.
- Liaising with the ONMSD, DoH, NMBI, cANPs/cAMPs, RANPs/RAMPs, managers and services.

5.0 Governance Arrangements

This section outlines the governance structures which should be established to support the development of advanced nursing or midwifery practitioner services.

5.1 Advanced Nursing and Midwifery Practice Governance Group

An Advanced Nursing and Midwifery Practice Governance Group, at Hospital Group (HG) /Community Healthcare Organisation (CHO) level, facilitates, enables and drives the strategic development and integration of cANPs/cAMPs within the HG/CHO (see Template 2 for: Sample Terms of Reference for Advanced Nursing and Midwifery Practice Governance Group, pg. 30).

The roles and responsibilities of the governance group are to:

- Provide leadership, governance and management in the planning, implementation, operation and monitoring of the advanced practice service development across the HG/ CHO.
- Provide a forum to discuss progress from each hospital/CHO service area and to share what is working well.
- Where necessary to address emerging issues to enable advanced nursing or midwifery practitioner services to respond effectively, for example; finance, human resources, information technology, referral pathways to other healthcare professionals, prescribing/diagnostic requirements, or establishing the advanced nursing or midwifery practitioner service e.g. clinical space, ICT or other considerations.
- Ensure appropriate hospital and HEI support is available for clinical and professional supervisors who provide clinical and professional supervision to cANPs/cAMPs.
- Support the establishment of governance arrangements across care settings for example service level agreements to support care pathways at community and hospital level for the hospitals/CHOs, as required.
- Provide a reporting structure for the individual local working group(s).
- Consider emerging and future service needs, such as integration between services, including, appropriate care pathways at community and hospital level for the hospitals/CHOs, as required.
- Facilitate the monitoring of key performance indicators (KPIs) to measure the impact of the advanced nursing or midwifery practitioner service and its alignment to DoH and HSE objectives.
- Monitor the alignment with National Clinical and Integrated Care Programmes and Sláintecare Implementation Plans.
- Ensure compliance with Advanced Practice Standards and Requirements: Nursing (NMBI, 2017); Midwifery (NMBI, 2018).
- Identify and mitigate or escalate risks as appropriate to the Chief Executive Office/Chief Officer
- Support the implementation of the Department of Health (2019) Policy on the Development of Graduate to Advanced Nursing and Midwifery Practice.

5.2 Local Working Group

A multidisciplinary Local Working Group (LWG) is established to oversee the cANP/cAMP service development, and to facilitate integration of the advanced nursing or midwifery practice role and service into the organisation's structures and processes. A project plan and milestones for the development of the service and the candidate role is agreed by the LWG (see Template 5 pg. 50, and Template 12 pg. 89 for sample terms of reference).

The LWG will establish clear governance structures and clearly defined reporting relationships for cANPs/cAMPs and RANPs/RAMPs, in the context of the existing health service organisational governance structures. They include:

• Agreed clinical and professional supervision (see Template 6 pg. 55; and Template 13 pg. 94).

- Defining caseload and scope of practice.
- Development of job description (see Template 7, pg. 58; and Template 14, pg. 97).
- Support for the development of competence.
- Development of policies, procedures, protocols and guidelines, memorandums of understanding and service level agreements as necessary (see Template 8,9, 10 and Template 15,16 and 17)
- Determine referral pathways as appropriate across disciplines/services.
- Support the development of professional practice portfolio.
- Support audit of clinical practices and participation of data collection.
- Support research activities.
- Develop, monitor and report key performance indicators that capture the output, outcomes and impact activity of the service (Recommendation 4, Action A; DoH, 2019).
- Evaluation of the advanced nursing or midwifery practitioner service.

PART B: Outline of the Guideline Development Process

Part B of this document provides an outline of the process for the development of this national guideline for the development of advanced nursing or midwifery practitioner services.

6.0 Background

This section outlines the purpose, scope, objectives and intended outcome of the National Guideline for the Development of Advanced Nursing or Midwifery Practitioner Services. It also outlines the guideline development and governance group membership and the strategic context of the guideline.

6.1 Purpose

The purpose of this National Guideline for the Development of Advanced Nursing or Midwifery Practitioner Services is to provide a single repository of all information pertaining to the development of advanced nursing and midwifery practitioner services in Ireland. It reflects current evidence based best practice.

6.2 Scope

This National Guideline applies to:

- Chief DONMs/DONs, DOMs/DONMs/DPHNs, Area Directors Mental Health Nursing, Area Directors/Managers of Disability Services, and Service Managers who are involved in developing advanced practice roles within their service.
- Clinical and professional supervisors.
- Assistant Directors of Nursing and Midwifery
- cANPs/cAMPs who are preparing for registration as RANP/RAMP with NMBI.
- RANPs and RAMPs who support the development of advanced practice services.
- All nurses and midwives.
- ONMSD and the NMPDUs who support the development of advanced practice services.
- Chief Executive Officers, General Managers and all key stakeholders who support the development of advanced nursing or midwifery practitioner services in the HSE and HSE funded services.

6.3 Objectives

The objectives of the National Guideline are to:

- Provide guidance on the responsibility and accountability required to support the development of advanced nursing or midwifery practitioner services.
- Provide clear guidance on the process of development of advanced nursing or midwifery practitioner services which is underpinned by legislation and regulation.
- Link the development of advanced nursing or midwifery practitioner services to strategic service planning to meet current and future service needs (Recommendation 2 A, DOH 2019).

6.4 Outcome

It is intended that this National Guideline will create a standardised process for the development of advanced nursing and midwifery practitioner services in Ireland.

6.5 Guideline Development and Governance Group

6.5.1 Guideline Development Group

A list of the membership of the Guideline Development Group is outlined in Appendix I.

6.5.2 Guideline Approval Governance Group

The Director of the Office of Nursing and Midwifery Services Director commissioned this National Guideline. The ONMSD Lead for Advanced Practice (who reports to the Director ONMSD), managed, coordinated and administered the process. The membership of the Guideline Approval Governance Group is outlined in Appendix II.

6.6 Supporting Evidence

References can be found in Section 13.0.

6.6.1 Relevant Legislation/PPPGs

Refer to Template 1 pg. 30).

6.6.2 PPPGs that are being replaced by this PPPG

This is a newly developed guideline and does not replace any previous guidelines.

6.6.3 Related Policies Procedures Protocols and Guidelines

The guideline is underpinned by the following strategic documents:

- Department of Health (2019) A Policy on the Development of Graduate to Advanced Nursing & Midwifery Practice.
- HSE (2014) HSE HR Circular 020/2014 Re: Sponsorship of Nursing/Midwifery Education Initiatives.
- ONMSD (2019) Standard Operating Procedure 2019-016 for funding of Post Registration Education for Nurses and Midwives sponsored by HSE HR Circular 020/2014.
- ONMSD (2018) National Nurse and Midwife Medicinal Product Prescribing Policy.
- NMBI (2007) Guidance to Nurses and Midwives on Medication Management.
- NMBI (2014) Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives.
- NMBI (2015) Practice Standards for Midwives.
- NMBI (2015) Scope of Nursing and Midwifery Practice Framework.
- NMBI (2015) Ionising Radiation (Nurse Prescriptive Authority): Standards and Requirements.
- NMBI (2015) Post-Registration Nursing and Midwifery Education Programmes: Standards and Requirements
- NMBI (2015) Prescriptive Authority for Nurses and Midwives: Standards and

Requirements.

- NMBI (2017) Advanced Practice (Nursing) Standards and Requirements.
- NMBI (2018) Advanced Practice (Midwifery) Standards and Requirements.
- NMBI (2019) Practice Standards and Guidelines for Nurses and Midwives with Prescriptive Authority 4th Edition.

7.0 Development of the National Guideline

A literature search was undertaken to determine the steps involved in establishing advanced nursing or midwifery practitioner services.

7.1 Literature Search Strategy

The National Guideline Development Group focused on updated Irish legislation, Policies, Professional Regulation, and Implementation Documents, to inform the National guideline. International guidance on advanced nurse or midwife practitioner development was also reviewed.

7.2 Method of Appraising Evidence

Evidence appraisal was not applicable for this National Guideline.

7.3 Process used to Formulate Recommendations

Grading of recommendations was not applicable for this National Guideline.

7.4 Summary of Evidence from the Literature

An extensive literature review titled; 'International perspectives on Advanced Nurse and Midwife Practice, regarding advanced practice, criteria for posts and persons' requirements for regulation of Advanced Nurse/Midwife Practice' was undertaken by Prof Marie Carney in 2012 and updated in 2016 on behalf of NMBI. This comprehensive literature review provides the background evidence to the development of advanced practice roles internationally, (Carney, 2016) and is available at:

https://www.nmbi.ie/nmbi/media/NMBI/Publications/Literature-review-advanced-practice

In 2010, the National Council for the Professional Development of Nursing and Midwifery published the 'Evaluation of Clinical Nurse and Midwife Specialist and Advanced Nurse and Midwife Practitioner Roles in Ireland (SCAPE) Final Report. This report illustrated that levels of success of advanced practice services are directly related to preparation in terms of service needs analysis, defining advanced practice roles and integration. On the contrary, lack of clarity around the development of advanced practice can result in diminished role effectiveness, which is evident from research in other jurisdictions (Begley et al., 2010). Consequently, robust standards for the development of advanced practice nursing and midwifery services should be established and maintained (Begley at al., 2010).

The NMBI has published the Advanced Practice Standards and Requirements for Nursing in 2017 and Advanced Practice Standards and Requirements for Midwifery in 2018, which

include specified advanced practice competences for the respective nursing and midwifery professions. Both documents, underpinned by the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (2014) and the Scope of Nursing and Midwifery Practice Framework (2015), provide clear guidance on the principles, competences and boundaries of advanced practice nursing and midwifery. However, the process for the development of nursing/midwifery advanced practice rests with the HSE.

The Department of Health 'Policy on the Development of Graduate to Advanced Nursing and Midwifery Practice' (DoH, 2019) defines a model for the development of graduate to advanced practice nursing and midwifery roles linked to service needs. This policy involves: developing a critical mass of RANPs/RAMPs; introducing a credentialing pathway for the development of RANPs/RAMPs; streamlining the education pathway; and facilitating interprofessional education. The policy clearly articulates the requirement for robust organisational governance to support the development and implementation of nursing/midwifery advanced practice services. In order to facilitate such service developments, organisations should also ensure that there is clarity regarding the role and service. There should be clear objectives and service needs outlined. Advanced practice roles should be accepted and supported by all key stakeholders and distinct structures and processes for the development and evaluation of the nursing/midwifery advanced practice service are required. The full Policy can be found at the following link: https://health.gov.ie/wp-content/uploads/2019/07/2644-HE-advanced-NursingMidwiferyPracticePolicy-WEB-v2.pdf.

The ONMSD has responsibility for guiding the development of nursing/midwifery advanced practice services in the HSE and HSE funded organisations (Section 38). Therefore, the National Guideline Development Group focused the literature search on evidence of published national and international guidance documents on the development of advanced practice services. The seminal document published by the NCNM (4th Edition, 2008) 'Framework for Establishment of Advanced Nurse Practitioner and Advanced Midwife Practitioner Posts' has been superseded due to changes in policy, legislation and requirements and standards for advanced practice.

Internationally, there are published guidelines to support the development of advanced practice roles, including Australia, New Zealand and Scotland. The Scottish National Health Service (NHS) has developed a web-based advanced practice toolkit with various resources available to services in developing advanced practice services. This dynamic repository of resources is easily accessible to promote systematic approaches to the development of new advanced practice roles, encouraging consistency and avoiding duplication. In 2017, the Chief Nursing Officer Department (CNOD) in Scotland, as part of a series of publications on transforming nursing, midwifery and health professional roles, issued guidance for NHS employers on the development of advanced nursing practice. This National Guidance incorporates information on competence, qualifications, clinical supervision, clinical governance, evaluation, quality assurance and the development of the job description.

Likewise, the Australian, Nurse Practitioner in New South Wales Guideline (2012), specifies a similar process including analysis of current services, preparation of a business case, development of a multidisciplinary committee to support the development and establish the role, recruitment of an advanced practitioner or transitional advanced practitioner and development of their scope of practice followed by evaluation of the service and KPIs. Similarly, the New Zealand Nurses Organisation (NZNO) provides guidance with initial focus on business case development and clear identification of the service need.

In conclusion, there is a lack of up to date guidance available to support all stakeholders on the process for development of nursing and midwifery advanced practice services in Ireland. This National Guideline will address that gap. The use of an online toolkit, as evidenced in the Scottish system, will be developed for documents/templates that are regularly updated. It is essential that services have access to current information that is easily accessible.

7.5 Consultation Process

A draft version of this National Guideline was circulated by the Nursing and Midwifery Services Director of the HSE for consultation to the following:

- The Nursing and Midwifery Board of Ireland
- The Office of the Chief Nursing Officer in the Department of Health
- All Chief Directors of Nursing
- All Directors of Nursing and Midwifery in HSE and HSE funded services
- Higher Education Institutions currently delivering the MSc Nursing Advanced Practice
- All Area Directors and Directors of NMPDU'S
- The Irish Association of Advanced Nurse and Midwife Practitioners.

Feedback was received from 40 separate individuals/groups. This feedback was used to inform the development of the National Guideline.

7.6 Resources

The National Guideline reflects current evidence based practice and should be budget neutral for its on-going implementation at health service provider level.

7.7 Outline of Guideline Steps

See Part A of this document

8.0 Governance and Approval

8.1 Formal Governance Arrangements

Refer to Appendix II for Membership of the National Guideline Approval Governance Group.

8.2 Method for Assessing the Guideline in meeting the Standards Outlined in the HSE National Framework for Developing PPPGs

The National Guideline was reviewed to ensure compliance with the HSE Policies, Procedures, Protocols and Guidelines Checklist for Developing Non-Clinical PPPGs (2016).

8.3 Approval and Sign-off

This National Guideline for the Development of Advanced Nursing or Midwifery Practitioner Services (2020) is approved by the Director of the Office of Nursing and Midwifery Services Director, HSE, and meets the standards outlined in the HSE National Framework for Developing Policies, Procedures, Protocols and Guidelines (PPPGs) (HSE, 2016).

9.0 Communication and Dissemination

The communication and dissemination arrangements for the National Guideline are outlined below.

9.1 Communication and Dissemination Plan

This National Guideline and associated templates will be made available on the advanced practice section of the ONMSD website. The National Guideline will also be circulated widely to Chief Directors of Nursing and Midwifery (HG's), Directors of Nursing/Midwifery, Directors of Public Health Nursing and Service Managers in Community Health Organisations: <u>https://healthservice.hse.ie/about-us/onmsd/advanced-and-specialist-practice/establish-practitioner-posts.html</u>

10.0 Implementation

The National Guideline will be implemented through the Nursing and Midwifery Planning and Development Units.

10.1 Implementation Plan

This National Guideline will be implemented through the NMPD officers' engagement with services that are planning to develop advanced nursing or midwifery practitioner services.

10.2 Education/Training Plan

A presentation on the process for the development of advanced nursing or midwifery practitioner services will be provided by the relevant area NMPD officer as required.

10.3 Lead Person(s) Responsible for the Implementation of the National Guideline

The ONMSD Lead for Advanced Practice is the lead person responsible for the implementation of the National Guideline.

10.4 Specific Roles and Responsibilities

- 10.4.1 Chief Directors of Nursing and Midwifery (Hospital Groups)/ Director of Nursing/Midwifery/ Area Director of Mental Health Nursing/ Director of Public Health Nursing/ Directors of Service Intellectual Disability, or Service Manager (Community Healthcare Organisations)
 - Support the implementation of the National Guideline
 - Assign personnel with responsibility, accountability and autonomy to implement the National Guideline
 - Provide managers with support to implement the National Guideline

- Ensure clinical staff are supported to implement the National Guideline
- Monitor the implementation of the National Guideline.

10.4.2 Line Managers ADONs/ADOMs

- Ensure all relevant staff members are aware of this National Guideline.
- Ensure staff are supported to undertake education programmes and related training, as appropriate.

10.4.3 cANP/cAMP, RANP/RAMP, Professional and Clinical Supervisors

- Clinical staff should comply with this National Guideline.
- A copy of the signature sheet should be signed to show all relevant staff have read, understand and agree to adhere to the National Guideline (see Appendix III).

10.4.4 NMPD Officer

• Guide, support and advise on the implementation of this National Guideline.

11.0 Monitoring and Evaluation

11.1 Monitoring

The ONMSD Advanced Practice Lead and the NMPD officers responsible for supporting advanced practice will monitor the use and implementation of the National Guideline on an ongoing basis.

11.2 Evaluation

The ONMSD Advanced Practice Lead will initiate an evaluation of the use of the National Guideline and its application within services within 1 year of its implementation.

12.0 Revision/Update

The following arrangements are in place for revisions or updates to the National Guideline:

12.1 Procedure for the Update of the National Guideline

The National Guideline will be updated in Quarter one 2023 or sooner if legislation or national guidance changes. This document will be updated by the ONMSD Advanced Nursing and Midwifery Practice Network.

12.2 Method for Amending the National Guideline if New Evidence Emerges

The National Guideline will be revised by the ONMSD Advanced Practice Network if new evidence emerges.

13.0 References

Begley C., Murphy K., Higgins A., Elliott N., Lalor J., Sheerin F., Coyne I., Comiskey C., Normand C., Casey C., Dowling M., Devane D., Cooney A., Farrelly F., Brennan M., Meskell P. and Mac Neela P. (2010) An Evaluation of Clinical Nurse and Midwife Specialist and Advanced Nurse and Midwife Practitioner Roles in Ireland (SCAPE). National Council for the Professional Development of Nursing and Midwifery in Ireland: Dublin

Carney M. (2014, updated 2016) Literature review- International perspectives on Advanced Nurse and Midwife Practice, regarding advanced practice, criteria for posts and persons and requirements for regulation of Advanced Nurse /Midwife Practice. Undertaken for Nursing and Midwifery Board of Ireland (NMBI) (An Bord Altranais agus Cnáimhseachais na hÉireann). Available at: https://www.nmbi.ie/nmbi/media/NMBI/Publications/Literature-review-advancedpractice.pdf?ext=.pdf

CNOD (2017) Transforming Nursing, Midwifery and Health Professions' (NMaHP) Roles: pushing the boundaries to meet health and social care needs in Scotland. Paper 2: Advanced nursing practice

Department of Health (2016) Department of Health Statement of Strategy 2016-2019

Department of Health (2017) Developing a Policy for Graduate, Specialist and Advanced Nursing & Midwifery Practice: Consultation Paper (in draft)

Department of Health (2017) Developing a Community Nursing and Midwifery Response to an Integrated Model of Care: Consultation Document (in draft)

Department of Health (2019) A Policy on the Development of Graduate to Advanced Nursing and Midwifery Practice

Government of Ireland (2011) Nurses and Midwives Act 2011. Government of Ireland

Health Service Executive (2014) Circular-020-2014 re postgraduate education funding

Houses of the Oireachtas Committee on the Future of Healthcare (May 2017) Houses of the Oireachtas Committee on the Future of Healthcare Sláintecare Report, Dublin

National Council for the Professional Development of Nursing and Midwifery (2008) Framework for the establishment of advanced nurse practitioner and advanced midwife practitioner posts. 4th Edition

New South Wales Government: Health (2012) Nurse Practitioners in NSW- Guideline for implementation of nurse practitioner roles

New Zealand Nurses Organisation

https://www.nzno.org.nz/support/professional_development/nurse_practitioners/advice_for_aspiring_nurse_practitioners (accessed 15/02/19)

New Zealand Nursing Council <u>http://www.nursingcouncil.org.nz/Education/Nurse-practitioner</u> (accessed 15/02/19)

NMBI (2007) Guidance to Nurses and Midwives on Medication Management. Dublin: NMBI

NMBI (2014) Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives. Dublin: NMBI

NMBI (2015) Ionising Radiation (Nurse Prescriptive Authority): Standards and Requirements. Dublin: NMBI

NMBI (2015) Practice Standards for Midwives. Dublin: NMBI

NMBI (2015) Prescriptive Authority for Nurses and Midwives: Standards and Requirements. Dublin: NMBI.

NMBI (2015) Scope of Nursing and Midwifery Practice Framework. Dublin: NMBI

NMBI (2017) Advanced Practice (Nursing) Standards and Requirements. Dublin: NMBI

NMBI (2018) Advanced Practice (Midwifery) Standards and Requirements. Dublin: NMBI

NMBI (2019) Practice Standards and Guidelines for Nurses and Midwives with Prescriptive Authority 4th Edition. Dublin: NMBI

ONMSD (2019) Guidelines for funding nursing and midwifery service improvement innovation initiatives

Ryder, M., Jacob, E., Hendricks, J. (2019) An inductive qualitative approach to explore Nurse Practitioners views on leadership and research: An international perspective. *Journal of Clinical Nursing*: 00:1-15

Scottish Government (2010) Advanced Nursing Practice Roles: Guidance for NHS Boards.

Slatyer S., Coventry L.L., Twigg DI., & Davis S. (2016) Professional Practice Models for Nursing: A Review of the Literature and Systhesis of Key Components. *Journal of Nursing Management 24*, 139-150

14.0 Appendices

Appendix 1: Membership of the National Guideline Development Group

Area	Name and Title
ONMSD Lead for Advanced	Mary Frances O'Reilly
Practice	Director NMPD West Mid-West
HSE North West	Liz Breslin
	Nursing & Midwifery Planning and Development Officer
HSE West/ Mid-West	Carmel Hoey
	Nursing & Midwifery Planning and Development Officer
HSE Dublin North	Angela Martin
	Nursing & Midwifery Planning and Development Officer
	Replaced by:
	Gwen Regan
	Nursing & Midwifery Planning and Development Officer
HSE Dublin North East	Gillian Whyte
	Nursing & Midwifery Planning and Development Officer
HSE South East	Eithna Coen
	Project Officer
HSE South	Fiona Willis
	Nursing & Midwifery Planning and Development Officer
	Replaced by:
	Dr Aoife Lane
	Nursing & Midwifery Planning and Development Officer
HSE Midlands	Dr Mary Doolan
	Project Officer,
HSE Dublin South, Kildare &	Sheila Cahalane
Wicklow	Nursing & Midwifery Planning and Development Officer
	Replaced by:
	Mary Nolan
	Project Officer,
	Leanne Madigan
	Nursing & Midwifery Planning and Development Officer

Appendix 2: Membership of the National Guideline Approval Governance Group

	Name
Nursing and Midwifery Services Director, ONMSD.	Dr Geraldine Shaw
ONMSD Lead for Advanced Practice and Director NMPD HSE West Mid-West	Mary Frances O'Reilly

Appendix 3: Signature Sheet

I have read, understand and agree to adhere to this National Guideline:

Print Name	Signature	Area of Work	Date

Appendix 4 Toolkit of Resources

Template 1: Legislation, Rules, Regulations and Guidelines Governing Nursing and Midwifery Advanced Practice

Advanced Practice Nursing and Midwifery roles right through from identification to implementation are governed and supported by legislation, policy, professional and organisational guidance and rules and regulation.

On 21 December 2011; the Nurses and Midwives Act 2011 was signed into law: <u>https://www.oireachtas.ie/en/bills/bill/2010/16/</u>. This Act updated the provisions relating to the regulation of nurses and midwives. It has been commenced in three stages with the exception of Part 11 - Maintenance of Professional Competence, and any provisions of the Act associated with that part. This 2011 Act enhances the protection of the public in its dealings with the professions, while ensuring the integrity of the practice of nursing and midwifery: (<u>https://www.nmbi.ie/What-We-Do/Legislation</u>). There are many key pieces of legislation which effect and support advanced nursing practice and links can be found at: <u>http://www.irishstatutebook.ie/</u>

The following provides an overview **ONLY** of the key professional guidance documents and important web links which are required to support the development and ongoing implementation of advanced practice roles in Ireland. The first table details the key web links, and the second table provides an overview of current professional guidance documents.

Service	Web Link
Health Service Executive	The Office of the Nursing and Midwifery Services Director: https://healthservice.hse.ie/about-us/onmsd/advanced-and-specialist-practice/
Executive	The Quality Improvement Division: <u>https://www.hse.ie/eng/about/who/qid/</u>
Department of Health	https://www.gov.ie/en/organisation/department-of-health/ https://www.gov.ie/en/organisation-information/a3ee95-chief-nursing-officers-cnos- and-professional-regulation-division/
The Irish Statue Book	http://www.irishstatutebook.ie/
The Health Information and Quality Authority	https://www.hiqa.ie/

Key Web Links

Year	Publication
2019	Practice Standards and Guidelines for Nurses and Midwives with Prescriptive Authority (4 th Edition) - <u>https://www.nmbi.ie/NMBI/media/NMBI/NMBI_Practice-</u> <u>StandardsGuidelines_07102019.pdf?ext=.pdf</u>
2018	Advanced Practice (Midwifery) Standards and Requirements - <u>https://www.nmbi.ie/NMBI/media/NMBI/Advanced-Practice-(Midwifery)-</u> <u>Standards-and-Requirements-2018-final 2.pdf?ext=.pdf</u>
2017	Advanced Practice (Nursing) Standards and Requirements - <u>https://www.nmbi.ie/NMBI/media/NMBI/Advanced-Practice-Nursing-Standards-</u> <u>and-Requirements-2017.pdf?ext=.pdf</u>
2015	Scope of Nursing and Midwifery Practice Framework - <u>https://www.nmbi.ie/NMBI/media/NMBI/Scope-of-Nursing-Midwifery-Practice-</u> <u>Framework.pdf?ext=.pdf</u>
2015	Practice Standards for Midwives - <u>https://www.nmbi.ie/NMBI/media/NMBI/Practice-Standards-for-Midwives-</u> <u>2015 3.pdf?ext=.pdf</u>
2014	Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives - <u>https://www.nmbi.ie/NMBI/media/NMBI/Code-of-professional-</u> <u>Conduct-and-EthicsAd 2.pdf?ext=.pdf</u>
2013	Guidance to Nurses and Midwives on Social media and Social Networking - <u>https://www.nmbi.ie/NMBI/media/NMBI/Tips-on-social-media-and-social-</u> <u>networking-for-nurses-midwives.pdf?ext=.pd</u> f
2008 (2015)*	Working with Older People: Professional Guidance - https://www.nmbi.ie/NMBI/media/NMBI/working-with-older-people.pdf?ext=.pdf
2008 (2015)*	Ionising Radiation (Nurse Prescriptive Authority): Standards and Requirements - <u>https://www.nmbi.ie/NMBI/media/NMBI/Prescrptive-Authority-for-Nurses-and-</u> <u>Midwives.pdf?ext=.pdf</u>
2007 (2015)*	Prescriptive Authority for Nurses and Midwives: Standards and Requirements - <u>https://www.nmbi.ie/NMBI/media/NMBI/Prescrptive-Authority-for-Nurses-and-</u> <u>Midwives.pdf?ext=.pdf</u>
2007 (2015)*	Ethical Conduct in Research: Professional Guidance - <u>https://www.nmbi.ie/NMBI/media/NMBI/ethical-conduct-in-research-</u> professional-guidance.pdf?ext=.pdf
2007	Guidance to Nurses and Midwives on Medication Management - <u>https://www.nmbi.ie/NMBI/media/NMBI/Guidance-Medicines-</u> <u>Management 1.pdf?ext=.pdf</u>
2003 (2015)*	Quality Learning Environment : Professional Guidance - <u>https://www.nmbi.ie/NMBI/media/NMBI/quality-clinical-learning-environment-</u> <u>professional-guidence.pdf?ext=.pdf</u>
2002 (2015)*	Recording Clinical Practice Professional Guidance - <u>https://www.nmbi.ie/NMBI/media/NMBI/recording-clinical-practice-professional-</u> <u>guidance.pdf?ext=.pdf</u>

Nursing and Midwifery Board of Ireland - Professional Nursing and Midwifery Guidance

*Refer to specific document for explanation.

Template 2: Sample Terms of Reference for Advanced Nursing and Midwifery Practice Governance Group

Terms of Reference (Sample) (xxx) Hospital Group/ CHO Area Advanced Nursing and Midwifery Practice Governance Group

The 'Policy on the Development of Graduate to Advanced Nursing and Midwifery Practice' (DoH, 2019) recommends that robust governance and accountability structures, processes and systems are in place to oversee the development and implementation of advanced nursing and midwifery practice (Recommendation 1, Action C, DoH, 2019).

Overview of the governance arrangements at a strategic level

The Advanced Nursing and Midwifery Practice Governance Group supports the implementation of national policy by finding collaborative solutions to emerging challenges, providing overarching strategic robust corporate, clinical and financial governance to advanced practice services. A governance group, at Hospital Group (HG)/Community Healthcare Organisation (CHO) level, facilitates, enables and drives the strategic development and integration of cANPs/cAMPs within the HG/CHO aligned to the local working group.

Implementation of all elements and phases of the development of the advanced practice nursing/midwifery service will be communicated as appropriate through the chair of the xxx HG/CHO governance group.

Each service establishes its own Local Working Group (LWG) responsible for local planning and dayto-day implementation, operation and oversight of the relevant advanced practice nursing/midwifery services. The support of each individual LWG is critical in order to facilitate the implementation of the advanced practice nursing/midwifery service in full, within the given timeframe, and to meet the requirements set out in national policy. Issues that arise through the Local Working Groups are reported back to the xxx HG/CHO Advanced Nursing and Midwifery Practice Governance Group through the chair. A two-way feedback mechanism is established.

Membership of the Advanced Nursing and Midwifery Practice Governance Group may include the following:

- Chief Director of Nursing and Midwifery (Hospital Group)/Director of Nursing / Midwifery Services (Community Healthcare Organisations). (Chair)
- Chief Executive Officer of Health Care Provider or nominee
- Service Manager
- National Clinical and Integrated Care Programme representatives
- Community Health Organisation representative
- Representation from each Hospital/CHO Local Working Group Chair or delegate
- Finance/HR/ICT Director/Estates or nominee or other(s) (as applicable)
- Quality/Safety/Risk/Clinical Audit Manager

- Senior Nurse Managers for each of the relevant clinical areas (CNMs/PHNs)
- ADON/ADOM/ ADPHN / nominated site lead
- Nurse/Midwifery Practice Development representative
- Local nursing/midwifery staff association representatives
- Candidate ANP(s) (xxx)
- Registered Advanced Nurse Practitioner representative
- Consultant(s)/ Clinical Lead
- Nursing and Midwifery Planning & Development Officer
- HEI /Academic Partner representative
- Health and Social Care representatives (as appropriate)
- Pharmacy / Radiology/ Laboratory representative (as required)
- Patient / Service User / Public Interest representatives as appropriate
- Administration Support
- Representatives from other areas may be invited as required

Aims of the Advanced Nursing and Midwifery Practice Governance Group

The main aims of the group are to:

- Direct the implementation of the Department of Health 'A Policy on the Development of Graduate to Advanced Nursing and Midwifery Practice' (DoH, 2019).
- Facilitate, support, enable and drive the development and integration of Advanced Nurse/Midwife Practitioner(s) within the xxx Hospital Group/ CHO area.
- Support candidate ANPs/AMPs in meeting the NMBI criteria for registration as Registered Advanced Nurse Practitioners and Registered Advanced Midwife Practitioners, as set out by the Nursing and Midwifery Board of Ireland (NMBI).

Objectives of the Advanced Nursing and Midwifery Practice Governance Group

The objectives are as follows:

- Establish governance, responsibility and accountability structures, processes, systems for planning, implementation, operation and monitoring of the development of advanced practice nursing / midwifery services across the hospital group / CHO area.
- Co-ordinate, plan, implement and monitor the care pathways at community and hospital level, as relevant.
- Monitor alignment with National Clinical and Integrated Care Programmes.
- Ensure compliance with Advanced Practice Standards and Requirements: Nursing (NMBI, 2017); Midwifery (NMBI, 2018).
- Identify and develop leadership and management capability and organisational structures to support the ongoing development of advanced practice services within the hospital group/CHO.
- Implement robust workforce planning and recruitment processes to support effective recruitment, retention and succession planning for advanced practice services.

Roles and Responsibilities of the Advanced Nursing and Midwifery Practice Governance Group

The roles and responsibilities are as follows:

- Provide leadership, governance and management in the planning, implementation, operation and monitoring of the advanced practice service development across the hospital group / CHO.
- Provide a forum to discuss progress from each hospital / CHO service area and to share what is working well and/or address emerging issues to enable the ANP/AMP service to respond effectively e.g. finance, human resources, information technology, referral pathways to other healthcare professional, prescribing/diagnostic requirements, establishing ANP/AMP service e.g. clinical space etc. or other considerations.
- Ensure appropriate hospital and {insert **HEI**} support is available for clinical and professional supervisors who provide clinical and professional supervision to candidate ANPs/AMPs.
- Support the establishment of governance arrangements across care settings for example service level agreements to support care pathways at community and hospital level for the hospitals/CHO, as required.
- Provide a reporting structure for the individual Local Working Groups.
- Consider emerging and future service needs, such as integration between services including appropriate care pathways at community and hospital level for the hospitals/CHO, as required.
- Facilitate the monitoring of key performance indicators to measure the impact of ANP/AMP service and its alignment to DOH and HSE objectives.
- Monitor alignment with National Clinical and Integrated Care Programmes.
- Ensure compliance with Advanced Practice Standards and Requirements: Nursing (NMBI, 2017); Midwifery (NMBI, 2018).
- Identify and mitigate or escalate risks as appropriate e.g. to the Chief Executive Officer /Chief Officer
- Support the implementation of the Department of Health (2019) Policy on the Development of Graduate to Advanced Nursing and Midwifery Practice.
- Report progress to XXX

Accountability

The Advanced Nursing and Midwifery Practice Governance Group is operationally accountable to XXX

Chairperson

The Chairperson will be the Chief Director of Nursing and Midwifery (Hospital Group)/Director of Nursing/Midwifery Services.

Frequency of Meetings

The xxx Hospital Group /CHO Advanced Nursing and Midwifery Practice Governance Group will meet xxx

Quorum:

{Adapt as relevant to the xxx Group / CHO Area}

Agenda and Minutes of Meetings

The agenda and minutes of previous meeting will be sent out one week in advance of the scheduled meeting and accompanied by any supporting documentation.

Meeting dates for the year will be determined at the beginning of each new year

Administrative Support

Administrative support should be available to the Advanced Nursing and Midwifery Practice Governance Group as required.

Term

The Advanced Nursing and Midwifery Practice Governance Group Terms of Reference (TOR) is effective from the establishment of the group and will be ongoing until terminated by agreement between the parties.

Approved by: _____

Date: _____

Chairperson of the Advanced Nursing and Midwifery Practice Governance Group

Template 3: Business Case Template

Business Case Template Advanced Nurse / Midwife Practitioner Services

** To be read in conjunction with the National Guideline for the Development of Advanced Nursing and Midwifery Practitioner Services **

В	usiness Case (inset name of Advanced Practice Nursing / Midwifery Service)		
	le of DON/DOM/Service oping the business case		
Name of hospital/hospital group/CHO area			
	ses of other organisations licable (<i>include name of</i>		
	Business Case should address		
Proposition	 This should include the: Title, role, and proposed location of the service Number of Registered Advanced Nurse/ Midwife Practitioners (RANPs/RAMPs) proposed for the service Proposed operation times of the service 		
Context	 Brief details of the service to include rationale for the proposed post(s): What service does the unit/service/catchment area provide? What patient/person group is served by the unit/service/catchment area? What is the existing team structure to support the proposed post(s)? How will the proposed post(s) impact on the client and the healthcare setting? How will the proposed post(s) contribute to the integration of care between services? How the proposed post(s) fits into the service plan for the organisation? What possible future developments can be imagined as a result of this service being in place? 		
Service Needs Analysis	 The identification of the need for advanced practice roles is the first vital step in the process of establishing the advanced practice service. Data supporting the identification of the need for RANP/RAMP service to include: Geographic context of service provision, e.g. population served, catchment area, outreach service, moving services closer to the population served, for example from acute to community care etc. Epidemiology or disease patterns relevant to proposed service Identification of gaps within services that an RANP/RAMP service can address using local evidence How the RANP/RAMP service will contribute to the overall delivery of client care How the proposed RANP/RAMP service aims to meet objectives of access to 		

	 services, hospital avoidance, early discharge, addressing waiting lists, improving patient flow, and integration of care/services - demonstrate by using data and highlight the skill set /competencies that the RANP/RAMP will bring to the service. Organisational drivers for targeted service improvements, e.g. key performance indicators, waiting lists, delayed discharges, population health indicators etc. Relevant regional and national health policy documents e.g. National Clinical and Integrated Care Programmes, HSE National Service Plan, Healthy Ireland Strategy, Sláintecare, Department of Health Policy documents, HIQA Standards etc.
Organisational Impact	Articulate the potential benefits of the proposed post(s) under the following
impact	headings:
	Patient/Service User Impact:
	 Improved communication – provision of single point of contact to service for clients and their carers
	 Waiting times – improved and timely access to diagnostic and therapeutic services reducing the time to wait
	Hospital avoidance – preventative care, timely interventions, promotion of self- care management and prevention of co-morbidities
	 Quality & Safety – improved continuity of care, supported trusting relationship building, utilisation of robust and evidence based policies, procedures protocols and guidelines (PPPGs) to inform care provision.
	Service impact:
	 Caseload management will be provided by an expert experienced registered advanced nurse/midwife practitioner(s)
	• Potential reduction in service complaints /adverse events and reduction of risk due to early intervention and treatment
	 Potential reduction in re-admission rates, waiting lists/times – improved access to appropriate care
	Contribution to achievement of key performance indicators as determined by service
	 Potential for cost savings as care provision is transferred from high cost centres to lower cost areas (for example from acute to community care)
	 Provision of education and support to other nursing/midwifery and other healthcare colleagues impacting on quality of care delivery across services.
	Nursing /Midwifery impact:
	 Professional Values and Conduct Competencies – the RANP/RAMP will apply ethically sound solutions to complex issues related to individuals and populations
	 Clinical Decision Making Competencies – the RANP/RAMP will utilise advanced knowledge, skills and abilities to engage in senior clinical decision making
	 Knowledge / Cognitive Competencies –the RANP/RAMP will actively contribute to the professional body of knowledge related to his/her area of advanced practice
	 Communication / Interpersonal Competencies – the RANP/RAMP will negotiate and advocate with other health professionals to ensure the beliefs, rights and wishes of the person are respected
	 Management / Team Competencies – the RANP/RAMP will manage risk to those who access the service through collaborative risk assessments and promotion of
	a safe environment
	• Leadership /Professional Scholarship Competencies – the RANP/RAMP will lead the multidisciplinary team planning for transitions across the continuum of care.

Governance and Clinical	The RANP/RAMP is a senior clinical decision maker within the organisation. An integral
Supervision	and underpinning component of all aspects of the advanced practice role is the
Arrangements	application of governance structures to ensure quality, risk, and safety are managed
, and angements	appropriately and effectively in all aspects of the role, and across all service
	boundaries.
	The governance arrangements need to stipulate that the organisation is in compliance
	with the Advanced Practice (Nursing) Standards and Requirements (NMBI, 2017)/
	Advanced Practice (Midwifery) Standards and Requirements (NMBI, 2018).
	Include an organisation chart of the proposed governance structures for the post(s).
	A description of the proposed professional and clinical supervision arrangements to
	support the advanced practice post(s) should be included.
Human	Human Resource and Financial Considerations:
Resource & Financial	Whole time equivalents (WTEs) requirements for advanced practice service
Considerations	Cost implications and associated backfill replacement costs
considerations	 Recruitment process, appointment of a candidate ANP(s)/AMP(s)
	Cost of achieving educational requirements for the post
	Skills and competency development e.g. clinical exposure in another site
	Estimated Financial Savings:
	 Look at healthcare spending currently which can be different to what is
	budgeted for, for example, unexpected rises in cases, new technologies etc.
	 Identify what could be saved by the introduction of this new service.
	Outline a plan for the proposed future sustainability of the RANP/RAMP
	service
	Other potential costs:
	Equipment, training, evaluating and continuing costs of providing the
	advanced practice service.
	• Demonstrate the commitment to provide the necessary supports for e.g.
	location of clinical space/office space, ICT support, etc.

If Applicable:

	Signature	Date:
Signature of Business Case Developer		
Signature of Director of Nursing/Midwifery		
Signature of primary contact from supporting organisation		

Template 4: Job Description – candidate Advanced Nurse Practitioner (cANP)

Job Title, Grade	Advanced Nurse Practitioner, candidate (cANP) (area of speciality to be inserted)
and Grade Code	Grade Code: 2272
and Grade Code	The successful candidate will, on completion of the requirements set out in the
	section entitled Tenure be appointed to the post of Registered Advanced Nurse Practitioner
Competition	To be completed by HR Department
Reference	
Whole Time Equivalent	To be completed by service advertising for the cANP
Closing Date	To be completed by HR Department
Proposed	Insert proposed date of interviews
Interview date(s)	
Taking up Appointment	The successful candidate will be required to take up duty no later than
Duration of Post	The candidate ANP is required to progress to registration with Bord Altranais agus
	Cnáimhseachais na hÉireann (Nursing and Midwifery Board of Ireland) (NMBI) as a
	Registered Advanced Nurse Practitioner (RANP) within 3 years of commencement of
	this post.
Location of Post	(to be completed by service advertising candidate ANP)
	What is the name of the Department?
	Where is the cANP located?
	Which hospital/service?
	Which geographical area?
Organisational	(to be completed by service advertising candidate ANP)
Area	
Details of Service	(to be completed by service advertising candidate ANP)
	What service does the unit/service/catchment area provide?
	What client group is served by the unit/service/catchment area?
	What are the possible future developments for the service?
	What is the team structure?
	What area is covered by this service?
	There is no limit to the text that can be inserted here. Please use this section to
	highlight the service and generate interest in the service and job being recruited for.
Service Mission,	To be completed by the service(s) {Hospital Group and/or CHO area}
Vision and	
Values	
Reporting	Is professionally accountable to the Assistant Director of Nursing and Director of
Arrangements	Nursing
U	Is clinically accountable to the supervising Consultant/Clinical Lead/ GP and/or
	Registered Advanced Nurse Practitioner
Clinical	To be completed by the service(s) {Hospital Group and/or CHO area}
Indemnity	
Key Working	Director of Nursing
Relationships	Assistant Director of Nursing

Job Specification, Terms and Conditions: Advanced Nurse Practitioner, candidate (cANP)

to include but not limited to	Clinical Nurse Manager RANPs and other nursing grades Nurse Practice Development Co-ordinator Prescribing site co-ordinator(s) Medical colleagues Interprofessional colleagues Patients/service users/families and/or carers Nursing and Midwifery Board of Ireland Higher Education Institution Nursing and Midwifery Planning and Development Unit Centres of Nursing and Midwifery Education National Clinical and Integrated Care Programme National Clinical Leadership Centre Other relevant statutory and non-statutory organisations
Clinical Supervision	The cANP (NNN) engages in on-going clinical supervision as per a Memorandum of Understanding. The structure, process and outcome of clinical supervision must be explicit. The cANP (NNN) maintains a record of clinical supervision in his/her professional practice portfolio.
Purpose of the Post	The main purpose of the post is to develop the job description and supporting documentation under the direction of the Health Care Provider's Advanced Practice Stakeholder Governance Group, to enable the individual nurse to meet the NMBI Criteria for Registration as an Advanced Nurse Practitioner as set out in <i>Advanced Practice (Nursing) Standards and Requirements (NMBI, 2017)</i> . The individual will undertake the academic preparation and develop the clinical and leadership skills, competencies and knowledge required to meet the criteria to be registered as a RANP with NMBI. The scope of the cANP role must reflect the incremental development of expertise and as such, the cANP cannot deliver care as an autonomous practitioner. The individual will complete and submit the necessary documentation for registration as an RANP with NMBI. The value of the nursing contribution as a distinct profession must be safeguarded and articulated in the development of new services led by advanced nurse practitioners, complementing rather than replacing current services delivered by doctors (NMBI 2017 p.9). The overall purpose of the post is to provide safe, timely, evidenced based nurse-led care to patients at an advanced nursing level. This involves undertaking and documenting a complete episode of patient care (assess, diagnose, plan, treat and discharge patients) according to collaboratively agreed protocols and scope of practice in the clinical setting; demonstrating advanced clinical and theoretical knowledge, critical thinking, clinical leadership and decision making skills. The advanced practice role demonstrates a high degree of knowledge, skill and experience that is applied within the nurse-patient/client relationship to achieve optimal outcomes through critical analysis, problem solving and accurate decisionmaking (NMBI, 2017).

	The role will provide clinical leadership and professional scholarship in order to develop nursing practice and health policy at local, regional and national level. The role will contribute to nursing research to shape and advance nursing practice,
	education and health care policy at local, national and international levels.
Principle Duties	The post holder's practice is based on developing a higher level of capability across
and Responsibilities	the six domains of competences as defined by Bord Altranais agus Cnáimhseachais na hÉireann Advanced Practice (Nursing) Standards and Requirements (NMBI 2017)
Responsibilities	 na hÉireann Advanced Practice (Nursing) Standards and Requirements (NMBI 2017) The domains are: Professional Values and Conduct Clinical-Decision Making Knowledge and Cognitive Competences Communication and Interpersonal Competences Communication and Interpersonal Competences Leadership and Professional Scholarship Competences Domain 1: Professional Values and Conduct Standard 1 The cANP NNN will gain increased competence in applying ethically sound solutions to complex issues related to individuals and populations by: Demonstrating accountability and responsibility for professional practice as a lead healthcare professional (in the care of patients with) Collaborating with his/her supervisor and local stakeholder group to scope the caseload and scope of practice for the RANP (NNN) Collaborating with his/her supervisor and local stakeholder group to determine the inclusion criteria for the RANP (NNN) Collaborating with his/her supervisor and local stakeholder group to determine the exclusion criteria for the RANP (NNN) Collaborating safe boundaries and engaging in timely referral and collaboration for those areas outside his/her scope of practice, experience, and competence by establishing, in collaboration with key stakeholders, referral pathways and locally agreed policies, procedures, protocols and guidelines to support and guide the RANP (NNN) service Demonstrating leadership by practising compassionately to facilitate, optimise, promote and support the health, comfort, quality of life and wellbeing of persons whose lives are affected by altered health, chronic disorders, disability, distress or life-limiting conditions Selecting

 Articulating and promoting the advanced practice nursing service in clinical, political and professional contexts {for example presenting key performance outcomes locally and nationally; contributing to the service's annual report; participating in local and national committees to ensure best practice as per the relevant national clinical and integrated care programme}.
Domain 2: Clinical-Decision Making Competences
 Standard 2 The cANP NNN will enhance his/her advanced knowledge, skills, and abilities to engage in senior clinical decision-making by increasing his/her capability to: Conduct a comprehensive holistic health assessment using evidenced based frameworks, policies, procedures, protocols and guidelines to determine diagnoses and inform autonomous advanced nursing care
 Synthesise and interpret assessment information particularly history including prior treatment outcomes, physical findings and diagnostic data to identify normal, at risk and subnormal states of health
• Demonstrate timely use of diagnostic investigations / additional evidence- based advanced assessments to inform clinical-decision making
 Exhibit comprehensive knowledge of therapeutic interventions including pharmacological and non-pharmacological advanced nursing interventions, supported by evidence-based policies, procedures, protocols, and guidelines, relevant legislation, and relevant professional regulatory standards and requirements
 Initiate and implement health promotion activities and self-management plans in accordance with the wider public health agenda
• Discharge patients from the service as per an agreed supporting policy, procedure, protocols, guidelines and referral pathways
Domain 3: Knowledge and Cognitive Competences
 Standard 3 The cANP NNN will actively contribute to the professional body of knowledge related to his/her area of advanced practice by enhancing his/her capability to: Provide leadership in the translation of new knowledge to clinical practice (for example teaching sessions; journal clubs; case reviews; facilitating clinical supervision to other members of the team)
 Educate others using an advanced expert knowledge base derived from clinical experience, on-going reflection, clinical supervision and engagement in continuous professional development
 Demonstrate a vision for advanced practice nursing based on service need and a competent expert knowledge base that is developed through research, critical thinking, and experiential learning
 Demonstrate accountability in considering access, cost and clinical effectiveness when planning, delivering and evaluating care (for example key performance areas, key performance indicators, metrics).

	Domain 4: Communication and Interpersonal Competences		
	Standard 4		
	The cANP NNN will negotiate and advocate with other health professionals to ensure		
	the beliefs, rights and wishes of the person are respected by gaining increased		
	competence and capability to:		
	Communicate effectively with the healthcare team through sharing of		
	information in accordance with legal, professional and regulatory		
	requirements as per established referral pathways		
	- H		
	• Demonstrate leadership in professional practice by using professional		
	language (verbally and in writing) that represents the plan of care, which is		
	developed in collaboration with the person and shared with the other		
	members of the inter-professional team as per the organisation's policies,		
	procedures, protocols and guidelines		
	 Facilitate clinical supervision and mentorship through utilising one's expert 		
	knowledge and clinical competences		
	Utilise information technology, in accordance with legislation and		
	organisational policies, procedures, protocols and guidelines to record all		
	aspects of advanced nursing care.		
	Domain Fr. Management and Team Competences		
	Domain 5: Management and Team Competences		
	Standard 5		
	The cANP NNN will manage risk to those who access the service through		
	collaborative risk assessments and promotion of a safe environment by:		
	Promoting a culture of quality care		
	• Proactively seeking feedback from persons receiving care, families and staff		
	on their experiences and suggestions for improvement		
	 Implementing practice changes using negotiation and consensus building, in 		
	collaboration with the multidisciplinary team and persons receiving care.		
	Domain 6: Leadership and Professional Scholarship Competences		
	Standard 6		
	The cANP NNN will lead in multidisciplinary team planning for transitions across the		
	continuum of care by enhancing his/her competence and capability to:		
	Demonstrate clinical leadership in the design and evaluation of services (for		
	example findings from research, audit, metrics, new evidence)		
	• Engage in health policy development, implementation, and evaluation (for		
	example key performance indicators from national clinical and integrated		
	care programme/HSE national service plan/ local service need to influence		
	and shape the future development and direction of advanced practice in		
	{cite speciality})		
	 Identify gaps in the provision of care and services pertaining to his/her area 		
	of advanced practice and expand the service to enhance the quality,		
	effectiveness and safety of the service in response to emerging healthcare		
	needs		
	 Load in managing and inclusion ting shares 		
1	 Lead in managing and implementing change. 		

	Advanced Practice Performance Management and Evaluation			
	 Performance Indicators (PI's) are required to evaluate nursing interventions and implement initiatives to improve quality and quantity of the nursing care provided. They should have a clinical nursing focus as well as a breakdown of activity, including patients seen and treated. In addition, they identify areas of good practice that must be recognised and celebrated (HSE 2015). The Department of Health (2017) <i>Framework for National Performance Indicators for Nursing and Midwifery</i> provides a guiding framework for the development of Nursing and Midwifery PI's. In collaboration with the Director of Nursing and the Assistant Director of Nursing, the cANP will identify and develop Nursing PI's for their area of practice, collect and collate data that will provide evidence of the impact and effectiveness of the interventions undertaken. (<i>insert agreed PI's/clinical targets/structure, process and outcome measures</i>) The cANP will evaluate audit results and research findings to identify areas for quality improvement in collaboration with nursing management and multidisciplinary team colleagues (primary and secondary care). 			
	Professional / Clinical			
	 The cANP NNN will practice nursing according to: Professional clinical guidelines National Health Policy 			
	 Local policies, procedures, protocols and guidelines Current legislation Values for Nursing and Midwifery – Care, Compassion and Commitment (DoH, 2016). 			
	Education and Training			
	The cANP NNN will:			
	 Contribute to service development through appropriate continuous education, research initiatives, keeping up to date with nursing literature, recent nursing research and new developments in nursing practice, education and management. 			
	 Provide support and advice to those engaging in continuous professional development in his/her area of advanced nursing practice. 			
Legislation,	The cANP (NNN) practises nursing according to:			
Regulations, Policies and	 The Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI 2014); 			
Guidelines	Scope of Nursing and Midwifery Practice Framework (NMBI 2015);			
	 Values for Nurses and Midwives in Ireland – Care, Compassion and Commitment (Department of Health 2016); 			
	 Advanced Practice Nursing Standards and Requirements (NMBI 2017); National Health Policies and Procedures (latest versions) {list as relevant to the service for example: Houses of the Oireachtas Committee on the Future of Healthcare (Sláintecare 2017), National Consent Policy (HSE 2013, revised 2016); 			
	 Local policies, procedures, protocols and guidelines; Current legislation {list as relevant to the service for example: 			

	Assisted Decision-Making Capacity Act (Government of Ireland 2015); {Insert as appropriate to the RANP (NNN) service}.			
Professional Practice Portfolio	The cANP (NNN) must develop a professional practice portfolio, incorporating evidence of learning from continuing professional development, clinical supervision, reflective practice and review of his/her own scope of practice in accordance with regulatory requirements and service need.			
Health and Safety	 The cANP NNN will: Ensure adherence to established policies and procedures e.g. health and safety, infection control, storage and use of controlled drugs etc. Ensure completion of incident and near miss forms. Ensure adherence to department policies in relation to the care and safety of any equipment supplied for the fulfilment of duty. Have a working knowledge of the Health Information and Quality Authority (HIQA) Standards Have a working knowledge of the Health Information and Quality Authority (HIQA) Standards or Mental Health Commission (MHC) as they apply to the role, for example; Standards for Healthcare, National Standards for the Prevention and Control of Healthcare Associated Infections, Hygiene Standards etc. and comply with associated HSE protocols for implementing and maintaining these standards as appropriate to the role. Support, promote and actively participate in sustainable energy, water and waste initiatives to create a more sustainable, low carbon and efficient health service. 			
Management / Administration:	 The cANP NNN will: Provide support, advice and direction to staff as required. Engage with the wider healthcare team and facilitate team building. Facilitate communication with the healthcare team across services and within the senior nurse team. Provide staff leadership and motivation which is conducive to good working relations and work performance. Promote a culture that values diversity and respect in the workplace. Manage and promote liaisons with internal and external bodies as appropriate, for example; intra-hospital service, community services, or voluntary organisations. Contribute to the strategic management and planning process. Formulate service plans and budgets in co-operation with the wider healthcare team. Provide reports on activity and services as required. Engage in digital developments as they apply to service user and service administration. 			

Eligibility Criteria	1.	<u>Prof</u>	essional Qualifications, Experience, etc.
Qualifications and/or Experience		(a)	Eligible applicants will be those who on the closing date for the competition are:
			 Be a registered nurse with the Nursing and Midwifery Board of Ireland (Bord Altranais agus Cnáimhseachais na hÉireann) or entitled to be so registered
			And (ii) Be registered in the division(s) of the Nursing and Midwifery Board of Ireland (Bord Altranais agus Cnáimhseachais na hÉireann) Register for which the application is being made or entitled to be so registered.
			Or In recognition of services that span several patient/client groups and/or division(s) of the register, provide evidence of validated competences relevant to the context of practice
			And
			(iii) Have a broad base of clinical experience relevant to the advanced field of practice
			And
			(iv) Be eligible to undertake a Master's Degree (or higher) in Nursing or a Master's Degree, which is relevant, or applicable, to <i>the advanced field of practice</i> . The Master's programme must be at Level 9 on the National Framework of Qualifications (Quality & Qualifications Ireland), or equivalent. Educational preparation must include at least three modular components pertaining to the relevant area of advanced practice, in addition to clinical practicum.
			Or (v) Be currently undertaking a Master's Degree in Nursing (Advanced Practice Pathway) <u>or be eligible</u> to register to undertake additional Level 9 National Framework of Qualifications (Quality and Qualifications Ireland) specific modules of a Master's Degree in Nursing (Advanced Practice Pathway) within an agreed timeframe. Educational preparation must include at least three modular components pertaining to the relevant area of advanced practice, in addition to clinical practicum.
			Or Possess a Master's Degree (or higher) in Nursing or a Master's Degree which is relevant, or applicable, to <i>the advanced field</i> <i>of practice</i> . The Master's programme must be at Level 9 on the National Framework of Qualifications (Quality & Qualifications Ireland), or equivalent. Educational preparation must include at least three modular components pertaining to the relevant area of advanced practice, in addition to clinical practicum. And
		(b)	
		(0)	Candidates must possess the requisite knowledge and ability including a high standard of suitability and clinical, professional and administrative capacity to properly discharge the functions of the role.

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	2. <u>Annual Registration</u>
	(i) Practitioners must maintain active annual registration on the appropriate/relevant Division of the register of Nurses and Midwives maintained by the Nursing and Midwifery Board of Ireland (Bord Altranais agus Cnáimhseachais na hÉireann) for the role
	And (ii) Confirm annual registration with NMBI to the HSE by way of the annual Patient Safety Assurance Certificate (PSAC).
	3. <u>Age</u>
	Age restriction shall only apply to a candidate where s/he is not classified as a new entrant (within the meaning of the Public Service Superannuation (Miscellaneous Provisions) Act, 2004). A candidate who is not classified as a new entrant must be under 65 years of age on the first day of the month in which the latest date for receiving completed application forms for the office occurs.
	4. <u>Health</u>
	Candidates for and any person holding the office must be fully competent and capable of undertaking the duties attached to the office and be in a state of health such as would indicate a reasonable prospect of ability to render regular and efficient service.
	5. <u>Character</u>
	Candidates for and any person holding the office must be of good character.
Post Specific Requirements, Additional Qualifications and/or Experience Required	The organisation will consider the post specific requirements, additional qualifications and or experience required in developing the specific cANP (NNN) service.
F 1 1 6 1 1	
Essential Skills, Competencies	Demonstrate the specialist knowledge and clinical skills in the specific area of practice (NNN)
and/or Knowledge	The cANP must demonstrate:
	 Professional/Clinical Knowledge Demonstrate a high degree of commitment, professionalism and dedication to the philosophy of quality health care provision Demonstrate evidence of Policy, Procedure, Protocol, Guideline (PPPG) development and the translation of PPPGs into action Demonstrate knowledge and experience of quality audit/assurance systems Demonstrate experience in developing, implementing and evaluating quality improvement initiatives Demonstrate awareness of relevant legislation and policy developments Demonstrate commitment to continuing professional development.

	Planning and Organising Resources
	 Demonstrate ability to proactively plan, organise, deliver and evaluate a nursing service in an efficient, effective and resourceful manner, within a model of person-centred care and value for money Demonstrate ability to manage deadlines and effectively handle multiple tasks.
	Building and Maintaining Relationships: Leadership, Staff Management and Team Work
	 Demonstrate flexibility and openness to change and ability to lead and support others in a changing environment Demonstrate the ability to communicate a change vision and engage stakeholders in a sustainable change process Demonstrate ability to foster a learning culture among staff and colleagues to drive continuous improvement Demonstrate ability to work effectively within multi-disciplinary teams.
	Evaluation Information and Judging Situations
	Demonstrate the ability to evaluate information and solve problems.
	Commitment to Providing Quality Services
	 Demonstrate understanding of, and commitment to, the underpinning requirements and key processes in providing quality, person-centred care Demonstrate the ability to lead on clinical practice and service quality.
	Communication and Interpersonal Skills
	 Demonstrate effective communication and interpersonal skills, including the ability to present information in a clear and concise manner
	 Demonstrate ability to engage collaboratively and influence others Demonstrate competency in the general use of information technology for example computers, office functions, internet for research purposes, email and preparation of presentation materials Demonstrate evidence of skills in data management and report writing.
Other Requirements Specific to Post	<i>Please outline the specific criteria that are specific to the post, e.g. access to transport as post will involve frequent travel</i>
Competition	Campaign Specific Selection Process
Specific Selection Process	Ranking/Shortlisting / Interview
Short listing / Interview	A ranking and or shortlisting exercise may be carried out on the basis of information supplied in your application form. The criteria for ranking and or shortlisting are based on the requirements of the post as outlined in the eligibility criteria and skills, competencies and/or knowledge section of this job specification. Therefore, it is very important that you think about your experience in light of those requirements.
	Failure to include information regarding these requirements may result in you not being called forward to the next stage of the selection process.
	Those successful at the ranking stage of this process (where applied) will be placed on an order of merit and will be called to interview in 'bands' depending on the service needs of the organisation.
	Candidates who are successful at interview and subsequently meet the necessary registration requirements with NMBI will automatically be upgraded into the prepared Registered Advanced Nurse Practitioner post.

Code of Practice	The Health Service Executive will run this campaign in compliance with the Code of Practice prepared by the Commission for Public Service Appointments (CPSA). The Code of Practice sets out how the core principles of probity, merit, equity and fairness might be applied on a principle basis. The Code also specifies the responsibilities placed on candidates, feedback facilities for candidates on matters relating to their application, when requested, and outlines procedures in relation to requests for a review of the recruitment and selection process, and review in relation to allegations of a breach of the Code of Practice. Additional information on the HSE's review process is available in the document posted with each vacancy entitled "Code of Practice, Information for Candidates".
	entitled "Code of Practice, Information for Candidates". Codes of Practice are published by the CPSA and are available on <u>www.hse.ie</u> in the document posted with each vacancy entitled "Code of Practice, Information For Candidates" or on <u>https://www.cpsa.ie/</u>

The reform programme outlined for the health services may impact on this role and as structures change the job description may be reviewed.

This job description is a guide to the general range of duties assigned to the post holder. It is intended to be neither definitive nor restrictive and is subject to periodic review with the employee concerned.

HEALTH SERVICES EXECUTIVE Terms and Conditions of Employment-candidate Advanced Nurse Practitioner (cANP)

Tenure	 The appointment is whole-time and candidate ANP is required to have progressed to being eligible to be registered as an ANP with NMBI within 3 years of commencement of the post. Given the developmental nature of this service the successful advanced nurse practitioner candidate will be required to adhere to the terms as set out below which are specific to this appointment. In line with requirements and standards set out by NMBI (2017) <i>Advanced Practice (Nursing) Standards and Requirements</i> the successful candidate will be required to engage in a process of self-development and structured education and clinical supervision specific to (<i>area of practice to be inserted</i>) in order to develop advanced clinical nursing knowledge and critical thinking skills to gain competence necessary to independently provide efficient, effective, safe patient care to a specific caseload which has been previously agreed. The candidate Advanced Nurse Practitioner is expected to demonstrate the core and specific competencies deemed necessary to manage the particular scope of practice. The candidate must undertake formal competency assessment in order to meet the criteria for registration as an ANP with NMBI. On successful completion of the above requirements and on acquiring registration with NMBI as an ANP, the candidate will be appointed as an RANP in a permanent capacity. Failure to successfully achieve essential milestones (outlined above) within an agreed timeframe will result in termination of the ANP career pathway and return to a previously held substantive post OR re-deployment within the organisation.
	Appointment as an employee of the Health Service Executive is governed by the Health Act 2004 and the Public Service Management (Recruitment and Appointment) Act 2004.
Remuneration	The salary scale for this post is in accordance with HSE approved salary scales (aligned to Clinical Nurse Manager 3 salary scale) Candidates who are successful at interview and subsequently meet the necessary registration requirements with NMBI will automatically be appointed into the approved post of RANP (NNN)
Working Week	The standard working week applying to the post is: 39 hours
	HSE Circular 003-2009 "Matching Working Patterns to Service Needs (Extended Working Day / Week Arrangements); Framework for Implementation of Clause 30.4 of Towards 2016" applies. Under the terms of this circular, all new entrants and staff appointed to promotional posts from Dec 16 th 2008 will be required to work agreed roster / on call arrangements as advised by their line manager. Contracted hours of work are liable to change between the hours of 8am-8pm over seven days to meet the requirements for extended day services in accordance with the terms of the Framework Agreement (Implementation of Clause 30.4 of Towards 2016).
Annual Leave	The annual leave associated with the post is in accordance with approved HSE policy
Superannuation	All pensionable staff become members of the pension scheme.

	Applicants for posts in the Mental Health service are advised that Section 65 of the Mental Treatment Act, 1945, <u>does not</u> apply to new entrants to the Mental Health Services as defined by the Public Service Superannuation(Miscellaneous Provisions) Act, 2004 (Section 12 of that Act) New entrants
Probation	Every appointment of a person who is not already a permanent officer of the Health Service Executive or of a Local Authority shall be subject to a probationary period of 12 months.
Protection of Persons Reporting Child Abuse Act 1998	This post is one of those designated in accordance with Section 2 of the Protection of Persons Reporting Child Abuse Act, 1998. You will remain a designated officer for the duration of your appointment in this post or for the duration of your appointment to such other post as is included in the categories specified in the Ministerial Direction. Such officers will, on receiving a report of child abuse, formally notify the Senior Social Worker in the community care area in which the child is living.

Template 5: Sample Terms Reference for Local Working Group (Nursing)

Terms of Reference (Sample) Local Working Group for the Development of XXX Advanced Nursing Practice Service

Introduction

The 'Policy on the Development of Graduate to Advanced Nursing and Midwifery Practice' (DoH, 2019) recommends that robust governance and accountability structures, systems and processes are in place to oversee the development and implementation of advanced nursing and midwifery practice (Recommendation 1, Action C, DoH, 2019). Support at local level is required to facilitate the educational and clinical development of candidate advanced nurse practitioners (cANP's) to register and the development of the advanced practice nursing service. In achieving specific competences, the cANP develops his/her capabilities to extend his/her practice in line with service user needs and professional competences.

Suggested Membership of the xxx LWG may include:

- Director of Nursing / Designate (Chair)
- Consultants/ Clinical Lead
- RANP representative
- Clinical supervisor
- candidate ANP
- NMPD Officer
- ADON xxx Directorate and professional supervisor
- Clinical Nurse Manager
- Nurse Practice Development Coordinator (as appropriate)
- Prescribing site coordinator
- Health and Social Care Professional Representatives (as appropriate)
- Pharmacy, Radiology and Laboratory Representatives (as appropriate)
- Representatives from other areas may be invited as required

Aims of the Local Working Group (LWG)

The main aims of the LWG are to:

- Oversee and steer the development of the ANP service
- Support candidate ANPs in meeting the NMBI criteria for registration as an advanced nurse practitioner, as set out by the Nursing and Midwifery Board of Ireland (NMBI).

Objectives of the Local Working Group

The objectives are as follows:

- Create local governance and accountability structures for the establishment of the ANP service
- Determine and provide access to resources required to support ANP service e.g. diagnostics, care pathways etc.
- Agree clinical and professional supervision processes.
- Agree caseload, scope of practice and develop job description for RANP(s).
- Approve PPPGs for the ANP service.

- Consider impact on other services- develop MOUs / SLAs as required.
- Agree Referral Pathways, as required
- Monitor alignment with National Clinical and Integrated Care Programmes
- Ensure compliance with Advanced Practice (Nursing) Standards and Requirements (NMBI, 2017).
- Report progress to XXX e.g. the Advanced Nursing and Midwifery Practice Governance Group or Chief Director of Nursing
- Identify and mitigate or escalate risks as appropriate.

Roles & Responsibilities

- Define the role by examining supporting data e.g. local population demographic and need presentations, diagnoses, gender, age profile, reality of current service, quality of life, prevention of illness, health promotion etc.
- Provide direction to the cANP xxx in establishing the new service:
 - to enable the individual cANP to meet the NMBI Criteria for Registration as a Registered Advanced Nurse Practitioner as set out by NMBI and achieve the competences outlined in the Advanced Practice (Nursing) Standards and Requirements (NMBI, 2017).
 - to undertake the academic preparation and develop the clinical and leadership skills, competencies and knowledge required to meet the criteria to be registered as a RANP with NMBI. The scope of the cANP role must reflect the incremental development of expertise and as such, the cANP cannot deliver care as an autonomous advanced nurse practitioner.
- Support the process for clinical and professional supervision
- Define the caseload and scope of practice, inclusion and exclusion criteria for the advanced nursing practice service
- Agree the range of therapeutic interventions to be provided to the patients'/service users by the cANP/ RANP xxx.
- Identify resources required (for example clerical support) and facilities (examination room/office).
- Develop and approve the RANP job description
- Develop Policies Procedures, Protocols and Guidelines, Memorandums of Understanding and Service Level Agreements (as necessary)
- Determine referral pathways as appropriate across disciplines/services
- Support the development of professional practice portfolio
- Support audit of clinical practices and participation of data collection
- Support research activities
- Develop, monitor and report Key Performance Indicators that capture the output, outcomes and impact activity of the service (Recommendation 4, Action A; DoH, 2019).
- Evaluate the advanced practice service and patient experience.
- Approve all aspects of the development of the advanced nursing practitioner service prior to the cANP to registering with NMBI.
- Promote, market and advocate the importance and value of the development of the RANP xxx service within xxx Hospital /CHO.
- Ensure that the service being developed is aligned to patient / service user needs and national policy direction e.g. National Clinical and Integrated Care Programmes.

Accountability The Local Working Group is operationally accountable to XXX

Chairperson The Chairperson will be the Director of Nursing / Designate

Frequency of Meetings

The xxx LWG will meet xxx initially

Quorum {Adapt as relevant to the xxx Hospital / CHO Area}

Agenda and Minutes of Meetings

The agenda and minutes of previous meeting will be sent out one week in advance of the scheduled meeting and accompanied by any supporting documentation.

Meeting dates will be set for the year at the beginning of each New Year.

Administrative Support

Administrative support should be available to the Local Working Group as required.

Term

The Advanced Practice (Nursing) Local Working Group Terms of Reference (TOR) is effective from the establishment of the group and will be ongoing until terminated by agreement between the parties.

Sample Gantt Chart

Development of the XXX Advanced Nurse Practitioner Service

Commencement date: dd/mm/yy

Project Timeline												
Proposed Advanced Nurse	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12
Practitioner Service-	1	2	3	4	5	0	· /	°	9	10	11	12
Hospital Group/CHO												
Overall Governance												
Strategic agreement to												
proceed with the												
development of the ANP												
Recruitment of cANP and establishment/ review of												
project plan												
Establishment of Local Working Group												
Agreement of project plan												
and timelines with key												
stakeholders												
Commencement of process												
Process	1					1	1	1		<u> </u>		
cANP will undertake the												
academic preparation and												
develop the clinical and												
leadership skills,												
competences and												
knowledge required to												
meet the criteria for Identification of												
patient/service user needs												
Agree patient caseload and												
scope of practice												
Development of job description for the role												
Development of referral pathways												
Development of PPPGs to support the service												
Consider the impact on other services and												
development MOUs/SLAs												
Identify resources required												
e.g. clerical support,												
clinical/office space, ICT												
requirements												

LWG approve all aspects of the development of the advanced nursing/midwifery practitioner service prior to the cANP to registering with NMBI						
Registration Process						
cANP applies for registration as RANP						
NMBI decision regarding registration						
Evaluation of Process (LWG)						
Review of project plan/timelines						

Gantt Key: Blue- to be commenced, Amber- in process, Green- complete, Red- delayed

Template 6: Memorandum of Understanding for Clinical Supervision (Nursing)

Memorandum of Understanding Clinical Supervision cANP/RANP xxx xxx Hospital/Hospital Group xxx Service/CHO Area

Clinical Supervision for candidate Advanced Nurse Practitioners (cANP's) Parties to the Memorandum of Understanding (MOU)

This MOU is between the [Insert Speciality] cANP and the xxx RANP / Consultants /GP, working within xxx Hospital Group/xxx Hospital or CHO area/ xxx Service/Hospital.

The Scope of the MOU

This agreement documents the following:

- a. The Department of [Insert Speciality] commitment to practice-based learning by providing ongoing support, formal, informal clinical and professional supervision and shared learning for the [Insert Speciality] cANP. This supervision will enable the [Insert Speciality] cANP to attend case conferences, ward rounds, multidisciplinary meetings, clinics, conferences, teaching sessions and department meetings e.g. clinical audit, quality and safety, risk management and/or other relevant meetings as required.
- b. The [Insert Speciality] cANP will participate in formal and informal supervision with the xxx team.

Purpose

The purpose of this MOU is:

- To ensure that relevant commitments are in place for both parties to support on-going clinical supervision and shared learning.
- To ensure maximum provision is made to support the maintenance/development of [Insert Speciality] cANP/RANP competence.

Supervisor's Responsibilities: (RANP/ Consultant /GP/ Clinical/Professional Supervisors)

In keeping with a clinical reporting relationship, the RANP / Consultant /GP [Insert Speciality], at xxx Hospital / CHO area is responsible for supporting the cANP/RANP formal and informal supervision and shared learning.

In relation to this MOU, the [Insert Speciality] department will:

- Participate in a formal and informal supervision programme with the cANP. Assign candidates to a named appropriate clinical supervisor for the duration of the programme to provide support and supervision and assist them to develop evidence-based knowledge, competence, know-how and skills to assess learning. Protected time is agreed for clinical supervision and assessment of competence.
- Provide, maintain and develop the network infrastructure to support the cANP clinical competence development and maintenance.

- Have available and accessible clearly written up-to-date learning outcomes/objectives appropriate to agreed practice specific competences, to guide each students' learning and achievement of competence at advanced practice level.
- Make provision for the cANP attendance and role participation at case conferences, ward rounds, grand rounds etc.
- Establish a safe supervisory environment where confidentiality and trust are assured within the relationship.
- The lead supervisor has overall responsibility for the cANP development where a cANP has a number of supervisors.

cANP/RANP Responsibilities

The [Insert Speciality] cANP/RANP will:

- Participate in and avail of all opportunities to access formal and informal supervision in order to maintain and develop clinical skills, competence, and knowledge.
- The cANP will meet with their identified supervisor(s) for a minimum of one hour per month to discuss clinical care / professional development in a structured manner, in a safe, supportive and confidential environment.
- The cANP will maintain a record of clinical supervision sessions, agreed activities, actions and learning outcomes.
- The cANP will attend continuing professional development (CPD) days, teaching sessions, as well as engaging in case discussions, audit of practice, and self-study relevant to his/her caseload. Learning from these will be captured as part of a reflective journal and can be brought to discussions at formal clinical supervision sessions.
- Adhere to Code of Professional Conduct and Ethics for Professional Nurses and Midwives (NMBI 2014), other relevant regulations and best practice guidelines.

Review Details

This MOU should be reviewed at least every 2 years or earlier if deemed necessary, with the overall aim to ensure a focus is on the purpose and direction of supervision.

Reports

A log of case studies, audits/research reviewed and items of interest will be maintained by the [Insert Speciality] cANP/RANP and will form the basis of the review.

Procedure to make changes to the MOU

MOU change requests should be made through the [Insert Speciality] cANP Local Working Group.

Signatories

The parties to this MOU agree to the contents set out herein

Name	Signature	Date	Email address
Director of Nursing			
RANP/Consultant/GP [Insert speciality]			
RANP/Consultant/GP [Insert speciality]			
RANP/Consultant/GP [Insert speciality]			
cANP [Insert speciality]			

Template 7: Job Description – Registered Advanced Nurse Practitioner (RANP)

Job Specification, Terms and Conditions: Registered Advanced Nurse Practitioner (RANP) (NNN)

Registered Advanced Nurse Practitioner (RANP) Job Description Template for use by organisations where the candidate ANP (cANP) has been formally recruited; (therefore, this RANP position is not required to be advertised).

Job Title, Grade	Registered Advanced Nurse Practitioner (RANP) (NNN)
and Grade Code	
	Grade Codes:
	Advanced Nurse Practitioner (Children's) 2270
	Advanced Nurse Practitioner (Community /Primary Care) 2269
	Advanced Nurse Practitioner (General) 2267
	Advanced Nurse Practitioner (Intellectual Disability) 2271
	Advanced Nurse Practitioner (Psychiatric) 2268
Competition	To be completed by HR Department
Reference	
Whole Time	To be completed by the service(s) {Hospital Group and/or CHO area}
Equivalent	
Taking up	A start date will be indicated at job offer stage
Appointment	The successful candidate will be required to take up duty no later than { to be
	completed by HR Department}
Duration of	To be completed by HR Department
Post	
Location of Post	To be completed by the service(s) {Hospital Group and/or CHO area advertising for
	RANP service}
	What is the name of the Department?
	Where is the RANP located?
	Which hospital/ CHO area?
	Which geographical area?
Organisational Area	To be completed by the service(s) {Hospital Group and/or CHO area}
Details of	To be completed by the service(s) {Hospital Group and/or CHO area}
Service	What service does the unit/service/catchment area provide?
Service	
	What client group is served by the unit/service/catchment area?
	What are the possible future developments for the service? What is the team structure?
	There is no limit to the text that can be inserted here.
Service Mission,	To be completed by the service(s) {Hospital Group and/or CHO area}
Vision and	
Values	
Reporting	Is professionally accountable to the Director of Nursing {insert name(s)}
Arrangements	Clinically accountable to the Consultant/Clinical Lead / GP {insert name(s)}
Analigements	
Clinical	To be completed by the service(s) {Hospital Group and/or CHO area}
Indemnity	
-	
Key Working	Director of Nursing
Relationships	Assistant Director of Nursing

to include but	Clinical Nurse Manager
not limited to:	RANPs and other nursing grades
	Nurse Practice Development Co-ordinator
	Prescribing site Co-ordinator(s)
	Medical colleagues
	Interprofessional colleagues
	Patients/service users/families and/or carers
	Nursing and Midwifery Board of Ireland
	Higher Education Institution
	Nursing and Midwifery Planning and Development Unit
	Centres of Nursing and Midwifery Education
	National Clinical and Integrated Care Programme
	National Clinical Leadership Centre
	Other relevant statutory and non-statutory organisations
Clinical	The RANP (NNN) engages in on-going clinical supervision as per a Memorandum of
Supervision	Understanding. The structure, process and outcome of clinical supervision must be
Supervision	explicit.
	The RANP (NNN) maintains a record of clinical supervision in his/her professional
	practice portfolio.
Purpose of the	The advanced practice service is provided by nurses who practice at a higher level of
Post	capability as independent, autonomous and expert advanced practitioners. The
	overall purpose of the service is to provide safe, timely, evidenced based nurse-led
	care to patients at an advanced nursing level. This involves undertaking and
	documenting complete episodes of patient care, which include comprehensively
	assessing, diagnosing, planning, treating and discharging patients in accordance with
	collaboratively agreed local policies, procedures, protocols and guidelines and/or
	service level agreements/ memoranda of understanding.
	The RANP (NNN) demonstrates advanced clinical and theoretical knowledge, critical
	thinking, clinical leadership and complex decision-making abilities.
	The DAND (NNN) practices in accordance with the Code of Professional Conduct and
	The RANP (NNN) practices in accordance with the Code of Professional Conduct and
	Ethics for Registered Nurses and Registered Midwives (NMBI, 2014), the Scope of
	Nursing and Midwifery Practice Framework (NMBI, 2015), Advanced Practice
	(Nursing) Standards and Requirements (NMBI, 2017), and the Values for Nurses and
	Midwives in Ireland (Department of Health, 2016).
	The RANP (NNN) service provides clinical leadership and professional scholarship in
	the delivery of optimal nursing services and informs the development of evidence
	based health policy at local, regional and national levels.
	The RANP (NNN) contributes to nursing research that shapes and advances nursing
	practice, education and health care policy at local, national and international levels.
	{insert additional specific requirements to support the purpose of the particular
	advanced practice nursing service or speciality
	advanced practice nursing service of speciality
During director Daniel	The DAND (NINN) prostions to a litely subject of some hills
Principle Duties	The RANP (NNN) practices to a higher level of capability across six domains of
and	competence as defined by Bord Altranais agus Cnáimhseachais na hÉireann Advanced
Responsibilities	Practice (Nursing) Standards and Requirements (NMBI, 2017).
	The six domains of competence are as follows:
	Professional Values and Conduct
	Clinical-Decision Making

Knowledge and Cognitive Competences
Communication and Interpersonal Competences
Management and Team Competences
Leadership and Professional Scholarship Competences
Each of the six domains specifies the standard which the RANP (NNN) has a duty and responsibility to demonstrate and practise.
Domain 1: Professional Values and Conduct
 Standard 1 The RANP (NNN) will apply ethically sound solutions to complex issues related to individuals and populations by: Demonstrating accountability and responsibility for professional practice as a lead healthcare professional {in the care of patients with}
The <u>initial</u> caseload* and scope of practice for the RANP (NNN) is agreed as follows:{ insert here }
The inclusion criteria for the RANP (NNN) are as follows: {insert here}
The exclusion criteria for the RANP (NNN) are as follows: {insert here}
*The caseload and scope of practice for the registered advanced nurse practitioner services will evolve to reflect changing service needs
 Articulating safe boundaries and engaging in timely referral and collaboration for those areas outside his/her scope of practice, experience, and competence using established referral pathways as per locally agreed policies, procedures, protocols and guidelines
 Demonstrating leadership by practising compassionately to facilitate, optimise, promote and support the health, comfort, quality of life and wellbeing of persons whose lives are affected by altered health, chronic disorders, disability, distress or life-limiting conditions. The RANP practices according to a professional practice model that provides him/her latitude to control his/her own practice, focusing on person centred care, interpersonal interactions and the promotion of healing environments
The chosen professional practice model for nursing { insert here } emphasises a caring therapeutic relationship between the RANP and his/her patients, recognising that RANPs work in partnership with their multidisciplinary colleagues (Slatyer et al. 2016).
 Articulating and promoting the RANP role in clinical, political and professional contexts by {insert here} (for example presenting key performance outcomes locally and nationally; contributing to the service's annual report; participating in local and national committees to ensure best practice as per the relevant national clinical and integrated care programme).
Domain 2: Clinical-Decision Making Competences
Standard 2 The RANP (NNN) will utilise advanced knowledge, skills, and abilities to engage in senior clinical decision making by:

 Conducting a comprehensive holistic health assessment using evidenced based frameworks, policies, procedures, protocols and guidelines to determine diagnoses and inform autonomous advanced nursing care
 Synthesising and interpreting assessment information particularly history including prior treatment outcomes, physical findings and diagnostic data to identify normal, at risk and subnormal states of health
• Demonstrating timely use of diagnostic investigations/additional evidence- based advanced assessments to inform clinical-decision making
 Exhibiting comprehensive knowledge of therapeutic interventions including pharmacological and non-pharmacological advanced nursing interventions, supported by evidence-based policies, procedures, protocols, and guidelines, relevant legislation, and relevant professional regulatory standards and requirements
 Initiating and implementing health promotion activities and self- management plans in accordance with the wider public health agenda
 Discharging patients from the service as per an agreed supporting policy, procedure, protocols, guidelines and referral pathways.
Domain 3: Knowledge and Cognitive Competences
Standard 3 The RANP (NNN) will actively contribute to the professional body of knowledge related to his/her area of advanced practice by:
 Providing leadership in the translation of new knowledge to clinical practice {insert here} (for example teaching sessions; journal clubs; case reviews; facilitating clinical supervision to other members of the team)
 Educating others using an advanced expert knowledge base derived from clinical experience, on-going reflection, clinical supervision and engagement in continuous professional development
 Demonstrating a vision for advanced practice nursing based on service need and a competent expert knowledge base that is developed through research, critical thinking, and experiential learning
 Demonstrating accountability in considering access, cost and clinical effectiveness when planning, delivering and evaluating care {insert here} (for example key performance areas, key performance indicators, and metrics).
Domain 4: Communication and Interpersonal Competences
Standard 4 The RANP (NNN) will negotiate and advocate with other health professionals to ensure the beliefs, rights and wishes of the person are respected by:
 Communicating effectively with the healthcare team through sharing of information in accordance with legal, professional and regulatory requirements as per established referral pathways

	 Demonstrating leadership in professional practice by using professional language (verbally and in writing) that represents the plan of care, which is developed in collaboration with the person and shared with the other members of the inter-professional team as per the organisation's policies, procedures, protocols and guidelines Facilitating clinical supervision and mentorship through utilising one's expert
	 knowledge and clinical competences Utilising information technology, in accordance with legislation and organisational policies, procedures, protocols and guidelines to record all
	aspects of advanced nursing care.
	Domain 5: Management and Team Competences
	Standard 5 The RANP (NNN) will manage risk to those who access the service through collaborative risk assessments and promotion of a safe environment by:
	Promoting a culture of quality care
	 Proactively seeking quantitative and qualitative feedback from persons receiving care, families and members of the multidisciplinary team on their experiences of the service, analysing same and making suggestions for improvement
	 Implementing practice changes using negotiation and consensus building, in collaboration with the multidisciplinary team and persons receiving care.
	Domain 6: Leadership and Professional Scholarship Competences
	Standard 6 The RANP (NNN) will lead in multidisciplinary team planning for transitions across the continuum of care by:
	 Demonstrating clinical leadership in the design and evaluation of services {insert here} (for example findings from research, audit, metrics, new evidence)
	 Engaging in health policy development, implementation, and evaluation {insert here} (for example key performance indicators from national clinical and integrated care programme/HSE National Service Plan/ local service need to influence and shape the future development and direction of advanced practice in {cite speciality})
	 Identifying gaps in the provision of care and services pertaining to his/her area of advanced practice and expand the service to enhance the quality, effectiveness and safety of the service in response to emerging healthcare needs
	 Leading in managing and implementing change.
Legislation ,	The RANP (NNN) practises nursing according to:
Regulations,	The Code of Professional Conduct and Ethics for Registered Nurses and Degistered Miduituse (NNAPL 2014):
Policies and Guidelines	 Registered Midwives (NMBI, 2014); Scope of Nursing and Midwifery Practice Framework (NMBI 2015);

	
	 Values for Nurses and Midwives in Ireland – Care, Compassion and Commitment (Department of Health, 2016); Advanced Practice Nursing Standards and Requirements (NMBI, 2017); National Health Policies and Procedures (latest versions) {list as relevant to the service for example: Houses of the Oireachtas Committee on the Future of Healthcare (Sláintecare, 2017), National Consent Policy (HSE 2013, revised 2016); Local policies, procedures, protocols and guidelines; Current legislation {list as relevant to the service for example: Assisted Decision-Making Capacity Act (Government of Ireland, 2015) {Insert as appropriate to the RANP (NNN) service}.
Performance Management and Evaluation	 Performance Indicators (PI's) are required to evaluate nursing interventions and implement initiatives to improve the quality and quantity of nursing care provided. PI's should have a clinical nursing focus as well as a breakdown of activity, including patients seen and treated. In addition, PI's should identify areas of good practice that must be recognised and celebrated (HSE, 2015). The Department of Health (2017) <i>Framework for National Performance Indicators for Nursing and Midwifery</i> provides a guiding framework for the development of Nursing and Midwifery PI's.
	In collaboration with the Director of Nursing, the RANP will identify and develop Nursing PI's for their area of practice, collect and collate data which will provide evidence of the impact and effectiveness of the interventions undertaken { insert here } (for example relevant national clinical and integrated care programme and associated KPIs, Department of Health). The RANP (NNN) will participate in clinical audit and evaluate audit results and research findings to identify areas for quality improvement in collaboration with nursing and multidisciplinary team colleagues (primary and secondary care).
Professional Practice Portfolio	The RANP (NNN) must maintain a professional practice portfolio, incorporating evidence of learning from continuing professional development, clinical supervision, reflective practice and review of his/her own scope of practice in accordance with regulatory requirements and service need.
Health and Safety, Quality Assurance, Risk and Clinical Governance	 The management of Risk, Infection Control, Hygiene Services and Health & Safety is the responsibility of everyone and will be achieved within a progressive, honest and open environment. These organisational standards and procedures are developed and managed to comply with statutory obligations: The RANP (NNN) demonstrates knowledge of clinical governance structures and processes supporting service provision. The RANP (NNN) must be familiar with and is responsible for attending the necessary education, training and support to enable them to meet this responsibility. The RANP (NNN) is responsible for ensuring that they comply with hygiene service requirements in their area of responsibility. Hygiene services incorporate environment and facilities, hand hygiene, catering, cleaning, the management of laundry, waste, sharps and equipment. The RANP (NNN) must foster and support a quality improvement culture throughout their area of responsibility.
	 The RANP (NNN) is responsible for ensuring they become familiar with the requirements stated within, and that they comply with the Hospital

r	
	Group's/Community Healthcare Organisation's PPPGs.
	Have a working knowledge of PPPGs in relation to the care and safety of any
	equipment supplied for the fulfilment of duty within the RANP (NNN) nursing
	service. Ensure the advice of relevant stakeholders is sought prior to
	procurement.
	Have a working knowledge of the Health Information and Quality Authority
	(HIQA) Standards or Mental Health Commission (MHC) (as relevant) as they
	apply to the RANP (NNN) nursing service, for example: Standards for
	Healthcare, National Standards for the Prevention and Control of Healthcare
	Associated Infections, Hygiene Standards or MHC regulations/standards and legislation as relevant. Comply with associated HSE protocols for
	implementing and maintaining these standards as appropriate to the role.
	 Support, promote and actively participate in sustainable energy, water and
	waste initiatives to create a more sustainable, low carbon and efficient
	health service.
	•
Management	• The RANP (NNN) will support the principle that person-centred care comes
and Leadership:	first at all times and will approach the effective, efficient and resourceful
	planning, organisation and delivery of RANP (NNN) nursing service with the
	flexibility and enthusiasm necessary to make this principle a reality for every
	patient.
	• The RANP (NNN) will adopt a professional leadership role within the clinical
	governance structures influencing both clinical and non-clinical processes
	that impact upon the experience and/or outcomes for patients within the
	RANP (NNN) nursing service.
	• The RANP (NNN) will participate in the appropriate and effective
	management of the RANP (NNN) service.
	• The RANP (NNN) will participate in the development of the overall service
	plan and in the monitoring and review of RANP (NNN) activity against the
	plan.
	 The RANP (NNN) will provide innovative and effective leadership, support,
	and advice, to nursing and allied staff at all levels related to their area of
	practice.
	 The RANP (NNN) will participate and engage in projects and service
	developments by representing senior nursing on committees and groups as
	relevant to the RANP (NNN) nursing service.
	• The RANP (NNN) will participate in the overall financial planning of the
	service including the assessment of priorities in pay and non-pay expenditure
	relating to the RANP (NNN) nursing service.
	• The RANP (NNN) will promote a culture that values diversity and respect in
	the workplace.
	The RANP (NNN) will manage and promote liaisons with internal and avtornal hadias as appropriate, for examples intro heavital service
	external bodies as appropriate, for example; intra-hospital service,
	 community services, or voluntary organisations. The RANP (NNN) will engage in digital developments as they apply to service
	 The RANP (NNN) will engage in digital developments as they apply to service user and service administration.
	 The RANP (NNN) will undertake other relevant duties as may be determined
	from time to time by the Director of Nursing or other designated officer.
	nom time to time by the Director of Nursing of other designated officer.
Eligibility	The next section of this template will apply when the candidate ANP has registered
Criteria	with the NMBI as an RANP.
	Professional Qualifications and Experience
Qualifications	
and/or	(i) Be registered in the advanced nurse practitioner division of the Nursing
and/or Experience	 Be registered in the advanced nurse practitioner division of the Nursing and Midwifery Board of Ireland Register

	 (ii) Candidates must possess the requisite knowledge and ability including a high standard of suitability and clinical, professional and administrative capacity to properly discharge the functions of the role.
	<u>Annual registration</u> Practitioners must maintain active annual registration on the Advanced Nurse
	Practitioner Division of the register of Nurses and Midwives maintained by the Nursing and Midwifery Board of Ireland (Bord Altranais agus Cnáimhseachais na hÉireann) for the role.
	And Confirm annual registration with NMBI to the HSE by way of the annual Patient Safety Assurance Certificate (PSAC).
	Age restriction shall only apply to a candidate where s/he is not classified as a new entrant (within the meaning of the Public Service Superannuation (Miscellaneous Provisions) Act, 2004). A candidate who is not classified as a new entrant must be under 65 years of age on the first day of the month in which the latest date for receiving completed application forms for the office occurs.
	Health Candidates for and any person holding the office must be fully competent and capable of undertaking the duties attached to the office and be in a state of health such as would indicate a reasonable prospect of ability to render regular and efficient service.
	Character Candidates for and any person holding the office must be of good character.
Post Specific Requirements, Additional Qualifications	The organisation will have identified the post specific requirements in terms of additional post registration education and /or clinical experience related to the specific RANP (NNN) service during the recruitment process for the candidate ANP.
and/or Experience Required	The organisation may specify other post specific requirements in terms of additional post registration education and/or clinical experience(s) related to the RANP (NNN) service in line with expansion of practice and caseload review.
Other Requirements Specific to the Post	Access to transport as the post may involve some travel
Specific to the Post The reform progra	amme outlined for the health services may impact on this role and as structures change on may be reviewed.

This job description is a guide to the general range of duties assigned to the post holder. It is intended to be neither definitive nor restrictive and is subject to periodic review with the employee concerned. It is not intended to be a comprehensive list of all duties involved and consequently, the post holder may be required to perform other duties as appropriate to the post which may be assigned to him/her from time to time and to contribute to the development of the post while in office.

HEALTH SERVICES EXECUTIVE: Terms and Conditions of Employment- Registered Advanced Nurse Practitioner (RANP)

Tenure	The appointment is whole-time and permanent.
	Given the developmental nature of this service the successful registered advanced
	nurse practitioner will be required to adhere to the terms as set out below which are
	specific to this appointment.
	 In line with standards and requirements set out by NMBI (2017)
	Advanced Practice (Nursing) Standards and Requirements the RANP
	(NNN) will continue to engage in a process of self-development,
	structured education and clinical supervision specific to the service
	{insert here} in order to maintain and develop advanced clinical nursing
	knowledge and critical thinking skills to maintain the competences
	necessary to independently provide efficient, effective, safe patient care.
	Appointment as an employee of the Health Service Executive is governed by the Health
	Act 2004 and the Public Service Management (Recruitment and Appointment) Act 2004.
	The above job description is not intended to be a comprehensive list of all duties
	involved and consequently, the post holder may be required to perform other
	duties as appropriate to the post which may be assigned to him/her from time to
	time and to contribute to the development of the post while in office.
Remuneration	The salary scale for this post adheres to national HSE approved salary scales
Working Week	The standard working week applying to the post is: 39 hours
	HSE Circular 003-2009 "Matching Working Patterns to Service Needs (Extended
	Working Day / Week Arrangements); Framework for Implementation of Clause 30.4 of
	Towards 2016" applies. Under the terms of this circular, all new entrants and staff
	appointed to promotional posts from Dec 16 th 2008 will be required to work agreed
	roster / on call arrangements as advised by their line manager. Contracted hours of
	work are liable to change between the hours of 8am-8pm over seven days to meet
	the requirements for extended day services in accordance with the terms of the
	Framework Agreement (Implementation of Clause 30.4 of Towards 2016).
Annual Leave	The annual leave entitlement adheres to national HSE approved leave entitlements
Superannuation	All pensionable staff become members of the pension scheme.
	Applicants for posts in the Mental Health service are advised that Section 65 of the
	Mental Treatment Act, 1945, does not apply to new entrants to the Mental Health
	Services as defined by the Public Service Superannuation (Miscellaneous Provisions)
	Act, 2004 (Section 12 of that Act) New entrants
Probation	Every appointment of a person who is not already a permanent officer of the Health
	Service Executive or of a Local Authority shall be subject to a probationary period of
	12 months.
Protection of	This post is one of those designated in accordance with Section 2 of the Protection of
Protection of Persons	Persons Reporting Child Abuse Act, 1998. You will remain a designated officer for the
Reporting Child	duration of your appointment in this post or for the duration of your appointment to
Abuse Act 1998	such other post as is included in the categories specified in the Ministerial Direction.
	Such officers will, on receiving a report of child abuse, formally notify the Senior Social
	Worker in the community care area in which the child is living.

Template 8: Memorandum of Understanding (Short version) (Nursing)

Memorandum of Understanding between xxx Department/Service and Registered Advanced Nurse Practitioner Service xxx

This Memorandum of Understanding (MOU) sets out for the terms and understanding between the xxx Department/Service/Organisation and xxx Department/ Service at xxx and the Registered Advanced Nurse Practitioner (RANP) Service, xxx (e.g. Acute Medicine) to enable the RANP xxx (e.g. Acute Medicine) to refer to the xxx service in xxx Service/ Organisations within a defined and agreed caseload as outlined in the RANP xxx job description.

Purpose

The RANP xxx service includes a caseload that requires the input of the xxx service to ensure provision of optimal care and management of patients. This caseload includes patients presenting with xxx

Reporting relationships for the RANP xxx

The RANP xxx will be professionally accountable to the Director of Nursing.

The RANP xxx will be clinically accountable to the Consultant xxx.

Indemnity

Indemnity arrangements for the post and service are provided by the State Claim Agency's Clinical Indemnity Scheme; the Registered Advanced Nurse Practitioner, xxx (e.g. Older Persons) works within a defined and agreed scope of practice and in accordance with approved protocols, policies, procedures and guidelines (PPPGs) and clinical supervision arrangements.

Head of xxx Department	xxx Consultant	Director of Nursing
Name:	Name:	Name:
Signature:	Signature:	Signature:
E-mail:	E-mail:	E-mail:
Tel:	Tel:	Tel:

Template 9: Memorandum of Understanding (Long version) (Nursing)

Memorandum of Understanding

This Memorandum of Understanding (MOU) is a formal agreement that sets out a framework for coordination of service arrangements, co-operation and data/information exchange, in the provision of Registered Advanced Nursing Practitioner services

between

xxx Service, **xxx** Hospital, **xxx** Hospital Group/ **xxx** Healthcare Service, CHO Area (Registered Advanced Practice Nursing service provider)

and

xxx Service, xxx Hospital, xxx Hospital Group/ xxx Healthcare Service/Facility, CHO Area (Registered Advanced Practice Nursing service recipient)

Background

The role of the RANP xxx is to optimise the care and treatment of a specific patient/client caseload within xxx Service /health facility by providing safe, timely evidence based nurse/midwife-led care, utilising advanced practice skills and expertise.

The RANP xxx will engage and collaborate with healthcare staff involved in the care of the patient(s)/client(s) in planning and delivering care, and provide education to nursing staff as required.

Purpose

This MOU applies to the RANP xxx Service and xxx Service, xxx Hospital, xxx Hospital Group/ xxx Healthcare Service, CHO area.

The MOU is established to outline the lines of accountability and the reporting relationships from a professional and clinical perspective between the RANP xxx and the partners outlined above.

Arrangements will be agreed and documented between the RANP xxx and the xxx healthcare service/ facility in relation to: RANP xxx service access and provision, its structure, processes, timeframes and the requirements of advanced practice as it pertains to the care of xxx patient(s). These should include but are not limited to:

- Accountability and the reporting relationships
- Response to referrals received from xxx service
- Venue for delivery of care at xxx
- Access to resources for example Information Technology
- Communication pathways
- Discharge, transfer and referral/arrangements.

Services beyond and above what is agreed in this MOU require discussion and further agreement with the patient(s), consultant/GP, and the Director of Nursing of the healthcare facility/service and the RANP line manager.

The xxx advanced practice nursing service delivers all aspects of care within the legislative and regulatory framework, health service provider (i.e. governance structure) and within RANP scope of practice and specific caseload.

Reporting Relationships

Professional Accountability

The RANP xxx will remain professionally accountable to the Director of Nursing, xxx Service, xxx Hospital, xxx Hospital Group/ xxx Healthcare Service, CHO area or designated deputy, while providing care in xxx Service, xxx Hospital, xxx Hospital Group/ xxx Healthcare Service, CHO area.

• Clinical Accountability

The RANP xxx will remain clinically accountable to the Consultant xxx /GP xxx while providing care in xxx Service, xxx Hospital, xxx Hospital Group/ xxx Healthcare Service, CHO Area.

Indemnity

Indemnity arrangements for the RANP xxx are provided by the State Claims Agency.

Information Requirements and Data Protection

The RANP xxx will adhere to xxx Hospital/Service Recording of Clinical Practice Policy, NMBI Recording Clinical Practice Guidelines and any other PPPG's pertinent to the management of patient information.

The RANP xxx will protect data by adhering to the Data Protection PPG's and comply with General Data Protection Regulation (GDPR) requirements.

Review, Modification or Termination of the MOU

This MOU shall become effective upon signature by the authorised partners and will remain in effect until modified or terminated by any one of the partners by mutual consent.

This MOU may be modified by mutual consent of the Director of Nursing, xxx Service, xxx Hospital, xxx Hospital Group/ xxx Healthcare Service, CHO Area and the Director of Nursing of ___ (Insert name of xxx Service, xxx Hospital, xxx Hospital Group/ xxx

Healthcare Service, CHO Area).

Signatories:

The parties to this Memorandum of Understanding agree to the contents set out herein.

Name	Signature	Date	Email
RANP xxx, xxx Hospital/Service Name			
RANP supervising Consultant/Consultants, GP/GP's Name			
RANP supervising Consultant/Consultants, GP/GP's Name			
Director of Nursing: xxx Service, xxx Hospital, xxx Hospital Group/ xxx Healthcare Service, CHO Area (Registered Advanced Practice Midwifery xxx service provider) Name			
Director of Nursing: XXX Service, XXX Hospital, XXX Hospital Group/ XXX Healthcare Service, CHO Number (Registered Advanced Practice Midwifery XXX service recipient) Name			

Template 10: Service Level Agreement (Nursing)

Service Level Agreement (generic template)

candidate Advanced Nurse Practitioner (cANP) xxx/ Registered Advanced Nurse Practitioner (RANP) xxx

for xxx

in xxx Hospital/xxx Hospital Group/General Practitioner/Primary Care/Community Healthcare Organisation/Private Organisations.

Section One: Introduction

The Service Level Agreement (SLA) is a contract between the service provider(s) and its internal or external clients. The SLA specifies the services that the cANP/RANP will provide.

Parties to the Agreement

This SLA is between the:

- Advanced Nursing and Midwifery Practice Governance Groups, Directors of Nursing and Key Stakeholders supporting cANPs/RANPs and
- Consultant XXX working in XXX Hospital/XXX Hospital Group/General Practitioner/Primary Care/Community Healthcare Organisation/ Private Organisations.

Scope of the Agreement

This SLA documents the following:

- The Director of Nursing in XXX is the professional line manager to the cANPs /RANPs XXX
- The Consultants/Consultant XXX provide clinical supervision and have a clinical reporting agreement with the cANPs/RANPs XXX.

Purpose of the Agreement

To ensure that relevant governance structures and reporting relationships are in place for all parties to support on-going advanced nursing services and clinical supervision to the cANPs/RANPs XXX.

Agreement Commencement Date

- The Advanced Nursing and Midwifery Practice Governance Group/Key Stakeholders in XXX will agree the commencement date
- The key stakeholders involved in reaching this agreement are detailed in Section 4.

Section Two: Service Description

Services provided by the cANP/RANP

The SLA sets out the services which will be provided by the cANP/RANP XXX as outlined below:

1. XXX

2. XXX

Resources required by the cANP/RANP

In order to provide the services as outlined above the cANP/RANP XXX will require the following resources:

1. XXX

2. XXX

Key Performance Indicators

The Key Performance Indicators associated with the delivery of these services will be reviewed on XXX by XXX.

Consultant/Consultants XXX

In fitting with a clinical reporting relationship, the Consultant/Consultants XXX, at XXX is/are responsible for clinically supervising the cANPs/RANPs XXX.

Directors of Nursing

In keeping with nursing governance, the Director of Nursing in XXX is responsible for providing professional nursing governance to the cANPs/RANPs.

cANPs/RANPs XXX

The cANPs/RANPs will adhere to the Code of Professional Conduct and Ethics (NMBI, 2014), Scope of Nursing and Midwifery Practice Framework (NMBI, 2015), their Policies Procedures, Protocols, Guidelines and other relevant regulations/legislation and best practice guidelines.

Section Three: Communication and Operations

Review Details

A Service Level Review schedule will be defined and agreed periodically to review nursing/ medical/clinical governance and clinical supervision.

Procedure to make changes to the Agreement

SLA change requests should be made through Advanced Nursing and Midwifery Practice Governance Group/Key Stakeholders/Governance Group if still in place otherwise requests for changes to SLA should be submitted to XXX.

Section Four: Governance Structure XXX Hospital Group

Hospital Group Organisational Governance Structure	Overview: Paragraph Outline of Hospitals within the Group:
	The objectives of the group are to:
Directorates Structure	
Nursing Governance	Overview: Paragraph
	(Appendix 1: Organogram for xxx Group Governance
Paragraph on Hospital	Structure)
where cANPs/RANPs xxx	
Paragraph on the Specialism	

Section Five: Signatories to the Agreement

The parties to this SLA agree to the contents set out herein

Name	Signature	Date	Email
RANP xxx, xxx Hospital/Service Name			
Consultants, GP/GP's Name			
Chief Director of Nursing and Midwifery: Name			
Director of Nursing: (service provider) Name			
Director of Nursing/Midwifery: (service recipient) Name			
candidate ANP: Name			
candidate ANP: Name			
candidate ANP: Name			

Template 11: Job Description – candidate Advanced Midwife Practitioner (cAMP)

Job Title, Grade	Advanced Midwife Practitioner, candidate (cAMP) (area of speciality to be inserted)
and Grade	Grade Code: 2536
Code	The successful candidate will, on completion of the requirements set out in the
	section entitled Tenure, be appointed to the post of Registered Advanced Midwife
· ····	Practitioner
Competition	To be completed by HR Department
Reference Whole Time	To be completed by convice adverticing for the condidate Advanced Midwife
	To be completed by service advertising for the candidate Advanced Midwife Practitioner
Equivalent	Practitioner
Closing Date	To be completed by HR Department
Proposed	Insert proposed date of interviews
Interview	
date(s)	
Taking up	The successful candidate will be required to take up duty no later than
Appointment	
Duration of	The cAMP is required to have progressed to being eligible to be Registered by An
Post	Bord Altranais agus Cnáimhseachais na hÉireann (Nursing and Midwifery Board of
	Ireland) (NMBI) as a Registered Advanced Midwife Practitioner (RAMP) within 3
	years of commencement of this post.
Location of	(to be completed by service advertising cAMP)
Post	What is the name of the Department?
	Where is the cAMP located? Which hospital/service?
	Which geographical area?
Organisational	(to be completed by service advertising cAMP)
Area	(to be completed by service duvertising chini)
Details of	(to be completed by service advertising cAMP)
Service	What service does the unit/service/catchment area provide?
	What client group is served by the unit/service/catchment area?
	What are the possible future developments for the service?
	What is the team structure?
	What area is covered by this service?
	There is no limit to the text that can be inserted here. Please use this section to
	highlight the service and generate interest in the service and job being recruited for.
Service	To be completed by the service(s) {Hospital Group and/or CHO area}
Mission, Vision	
and Values	
Reporting	Is professionally and clinically accountable to the Assistant Director of Midwifery and
Arrangements	the Director of Midwifery
	Is clinically accountable to the supervising Consultant/Clinical Lead and/or other
	healthcare professionals as appropriate e.g. Registered Advanced Midwife
	Practitioner (RAMP).
Clinical Indomnity	To be completed by the service(s) {Hospital Group and/or CHO area}
Indemnity Key Working	Director of Midwifery
Relationships	Assistant Director of Midwifery
Relationships	Clinical Midwife Manager

Job Specification, Terms and Conditions: Candidate Advanced Midwife Practitioner (cAMP)

	RAMPs and other midwifery/nursing grades
	Senior midwives within the health service
	Medical colleagues
	Inter-professional colleagues
	Prescribing site co-ordinator(s)
	Midwifery Practice Development
	Women and babies/families and Services Users
	Nursing and Midwifery Board of Ireland
	Higher Education Institution
	May include client/women interest groups
	Nursing and Midwifery Planning and Development Unit
	Centres of Nursing and Midwifery Education
	National Women and Infants Health Programme
	National Clinical Leadership Centre
	Other relevant statutory and non-statutory organisations
Clinical	The cAMP (NNN) engages in on-going clinical supervision as per a Memorandum of
Supervision	Understanding. The structure, process and outcome of clinical supervision must be
	explicit.
	The cAMD (NNN) maintains a record of clinical supervision in his/her professional
	The cAMP (NNN) maintains a record of clinical supervision in his/her professional
	practice portfolio.
Purpose of the	The main purpose of the post is to develop the advanced practice midwifery service
-	
Post	and supporting documentation under the direction of the Health Care Provider's
	Advanced Practice Stakeholder Governance Group, to enable the individual midwife
	to meet the NMBI Criteria for Registration as an Advanced Midwife Practitioner as
	set out in Advanced Practice (Midwifery) Standards and Requirements (NMBI, 2018).
	The individual will undertake the academic preparation and develop the clinical and
	leadership skills, competencies and knowledge required to meet the criteria to be
	registered as a RAMP with NMBI. The scope of the cAMP role must reflect the
	incremental development of expertise and as such, the cAMP cannot deliver care as
	an autonomous practitioner.
	The value of the midwifery contribution as a distinct profession must be safeguarded
	and articulated in the development of new services led by RAMPs, complementing
	rather than replacing current services delivered by doctors (NMBI, 2018 pg. 7).
	The overall purpose of the post is to provide safe, timely, evidenced based
	midwifery-led care to women and their babies at an advanced midwifery level.
	This involves undertaking and documenting a complete episode of maternity care
	(assess, diagnose, plan, treat and discharge women and babies), according to
	collaboratively agreed protocols and scope of practice in the clinical setting;
	demonstrating advanced clinical and theoretical knowledge, critical thinking and
	decision making skills.
	PANAD's utilize advanced clinical midwifers knowledge and existent thinking stills to
	RAMP's utilise advanced clinical midwifery knowledge and critical thinking skills to
	provide optimum care and improved clinical outcomes for women and their babies
	through higher levels of critical analysis, problem solving and senior clinical decision-
	making as a lead healthcare professional who is accountable and responsible for
	their own practice.
	The role will provide the opportunity to focus on the health and wellbeing of women
	and their babies to assist them in making positive choices which can have a

	significant impact on giving each baby the best start in life.
	To support a safe environment for women and babies by increasing the use of evidence based clinical guidelines, address women's expectations and promote wellness and evaluate care given.
	The role will provide professional and clinical leadership in order to develop midwifery practice and health policy at local, regional and national level.
	The role will contribute to leading, conducting, disseminating and publishing midwifery research to shape and advance midwifery practice, education and health care policy at local, national and international levels.
Duin sints Duting	The week balded and the is been deep developing a bish subset of each iting and
Principle Duties and Responsibilities	The post holder's practice is based on developing a higher level of capability across the 5 principles of competences for registration as an Advanced Midwife Practitioner as defined by Bord Altranais agus Cnáimhseachais na hÉireann Advanced Practice (Midwifery) Standards and Requirements (NMBI 2018)
	The principles are:
	Respect for the Dignity of the Person
	 Professional Responsibility and Accountability
	Quality of Practice
	Trust and Confidentiality
	Collaboration with Others
	Principle 1: Respect for the Dignity of the Person
	Practice Standard 1 Midwifery practice is underpinned by a philosophy that protects and promotes the safety and autonomy of the woman and respects her experiences, choices, priorities, beliefs and values.
	Competency 1 The cAMP (NNN) will gain increasing competency and capability in applying ethically sound solutions to complex issues related to caring for women and their babies by:
	1.1 Demonstrating leadership by protecting, promoting and supporting the human rights of women and babies, including advocating for each woman's right to choose how and where to give birth {in the care of women }
	 Collaborating with his/her supervisor and local stakeholder group to determine the caseload and scope of practice for the RAMP (NNN) service Collaborating with his/her supervisor and local stakeholder group to determine the inclusion criteria for the RAMP (NNN) service Collaborating with his/her supervisor and local stakeholder group to determine the exclusion criteria for the RAMP (NNN) service.
	 1.2 Demonstrating clinical leadership by practising empathically and compassionately to facilitate, and support the health and wellbeing of all women, babies and their families, respecting the diversity of beliefs, values, choices and priorities of each woman and her family.
	• Articulating and promoting the advanced practice midwifery service in clinical, political and professional contexts which is woman-centred, and integrated and team based care {for example presenting key performance

	outcomes locally and nationally; contributing to the service's annual report; maternity strategy implementation, participating in local and national committees to ensure best practice as per the National Clinical Programme for Obstetrics and Gynaecology, National Women and Infants Health Programme, National Clinical Programme for Paediatrics and Neonatology, and Integrated Care Programme for Children, as required}.
	 Selecting a professional practice model that provides him/her latitude to control his/her own practice, focusing on person centred care, interpersonal interactions and the promotion of normal physiological process (normality).
	• The chosen professional practice model for midwifery will emphasise a caring therapeutic relationship between the cAMP/RAMP (NNN) and women and babies, recognising that cAMP's/RAMP's work in collaboration with their inter/multidisciplinary colleagues.
	• The chosen model emphasises the woman receiving care from the most appropriate professional, in the most appropriate setting, at the most appropriate time. Supporting the normalisation of pregnancy and birth though the three pathways - Supported Care, Assisted Care and Specialised Care recommended in the National Maternity Strategy (2016-2026) as relevant to the area of practice.
1.3	³ Demonstrating leadership by advocating for women and their babies, including their emotional and psychological safety whilst at all times respecting each woman's right to choose whether or not to follow advice and recommendations about her care.
	 Initiating and implementing health promotion activities and self- management plans in accordance with the wider public health agenda
	inciple 2: Professional Responsibility and Accountability actice Standard 2 Midwives practise in line with legislation and professional guidance, and are responsible and accountable within their scope of midwifery practice. This encompasses the full range of activities of the midwife as set out in EC Directive 2005/36/ EC and the adapted Definition of the Midwife International Confederation of Midwives 2011 (ICM) as adopted by the NMBI
Co	The cAMP (NNN) will develop and utilise advanced knowledge, skills and abilities to critically analyse, problem solve and engage in complex clinical decision-making as lead healthcare professionals by:
2.1	Developing his/her capability to be accountable and responsible for senior clinical decision-making, practising effectively as a lead healthcare professional in accordance with legal, professional and regulatory requirements, supported by evidence-based local, national, & international PPPG's, relevant legislation and relevant professional regulatory standards and requirements pertaining to (NNN) advanced midwifery services.
	• Conduct comprehensive holistic health assessment using evidenced based frameworks, policies, procedures, protocols and guidelines to determine diagnoses and inform autonomous advanced midwifery care.

 Synthesise and interpret assessment information particularly history including prior outcomes, physical, mental, emotional social findings and diagnostic data to identify normal, normal-risk, medium-risk and high-risk states of health as appropriate to the (NNN) service.
 Demonstrate timely use of diagnostic investigations/additional evidence- based advanced assessments to inform clinical-decision making.
• Exhibit comprehensive knowledge of therapeutic interventions including pharmacological and non-pharmacological advanced midwifery interventions, supported by local, national, & international evidence-based PPPG's, relevant legislation, and relevant professional regulatory standards and requirements.
2.2 Understand and demonstrate professional boundaries by referring to, transferring and collaborating with other members of the multidisciplinary team for areas that are outside the RAMP's scope of practice, experience or competence. The cAMP will establish in collaboration with key stakeholders the development of referral pathways and locally agreed PPPG's to support and guide the RAMP (NNN) service.
 Develop supporting PPPG's for discharge and /or transfer of women and babies from the service
2.3 Promotes, protects and articulates the advanced practice midwifery role in clinical, professional and political contexts developing clinical expertise under supervision, undertaking reflection in and on practice and continuous professional development
2.4 Collaboratively develops a vision for the RAMP (NNN) service based on a competent expert knowledge derived from research, critical thinking and experiential learning {for example informed by vision expressed in the National Maternity Strategy (2016-2026) utilising a health and wellbeing approach}.
Principle 3: Quality of Practice Practice Standard 3
Midwives use comprehensive professional knowledge and skills to provide safe, competent, kind, compassionate and respectful care. Midwives keep up to date with midwifery practice by undertaking relevant continuing professional development.
Competency 3 The cAMP (NNN) will promote and protect a culture of quality, compassionate and evidence-based safe maternity care and services by gaining increased competence and capability to:
3.1 Demonstrate leadership in developing maternity services through initiatives, improvements and changes in the care provided to women, their babies and families {for example, identify service needs through audit, research, new evidence, seeking feedback, satisfaction audits and develop key performance areas utilising key performance indicators and metrics}.
3.2 Influence clinical practice through education (formal and informal) mentoring and coaching in the multidisciplinary team {for example teaching sessions; journal clubs; case reviews; presenting on academic programmes in the

affiliated Higher Education Institute (XXX)} in the area of NNN Midwifery care.
3.3 Use expert knowledge and clinical competence when facilitating clinical supervision and mentorship of midwifery colleagues, midwifery students and others.
3.4 Lead in the translation of new knowledge and facilitation of best available evidence in the clinical setting
• Contribute to the introducing and implementing change to meet service needs (e.g. Implementation of National Maternity Strategy 2016-2026)
• Establish links to affiliated HEI's and other HEI's as appropriate. Seek opportunities to present at local, national and international fora.
3.5 Demonstrate professional leadership by conducting audits and research and disseminate findings that shape and advance practice in midwifery, education, and policy at local, national, and international levels.
Principle 4: Trust and Confidentiality
Practice Standard 4 Midwives work in equal partnership with the woman and her family and establish a relationship of trust and confidentiality.
Competency 4 The cAMP (NNN) will negotiate and advocate with other health professionals to ensure the beliefs, rights, and wishes of women, babies and their families are upheld in the design and evaluation of services by enhancing his/her capability to:
4.1 Demonstrate professional leadership in advocating choice for women when developing midwifery services {for example by ensuring best practice is applied consistently by continuity of care and carer}.
4.2 Promote, protect and develop a culture of openness, honesty, trust and confidentiality with women and their families {for example: Working in partnership, building good rapport and maintaining a high level of engagement with women and their partners and families}.
4.3 Articulate and understand how, in exceptional circumstances, confidential information may need to be shared with others according to relevant legislation.
Principle 5: Collaboration with Others Practice Standard 5 Midwives communicate and collaborate effectively with women, women's families and with the multidisciplinary healthcare team.
Competency 5 The cAMP (NNN) will manage risk for those who access the service through collaborative risk assessments and promotion of a safe environment by gaining increased competence and capability to:
5.1 Communicate effectively with other members of the multidisciplinary team sharing information in accordance with legal, professional and regulatory requirements as per established PPPG's and referral pathways, Service Level

Agreements and Memorandum of Understanding.
5.2 Use expert professional judgment to make timely referrals to other appropriate healthcare professionals or members of the multidisciplinary team
5.3 Demonstrate leadership in negotiation and consensus-building by developing skills to manage conflict in collaboration with women receiving care and other members of the multidisciplinary team
5.4 Establish and standardise clear governance structures to ensure accountability and transparency
5.5 Utilise information technology, in accordance with local, national, & international legislation and organisational policies, procedures, protocols and guidelines to record all aspects of advanced midwifery care {for example; e-health records, Maternal & Newborn Clinical Management System}
Advanced Practice Performance Management and Evaluation
Performance Indicators (PI's) are required to evaluate midwifery interventions and implement initiatives to improve quality and quantity of the midwifery care provided. They should have a clinical midwifery focus as well as a breakdown of activity, including patients seen and treated. In addition, they identify areas of good practice that must be recognised and celebrated (HSE 2015).
The Department of Health (2017) <i>Framework for National Performance Indicators for Nursing and Midwifery</i> provides a guiding framework for the development of Nursing and Midwifery PI's.
In collaboration with the Director of Midwifery / Assistant Director of Midwifery, the cAMP will identify and develop midwifery PI's for their area of practice, collect and collate data, which will provide evidence of the impact and effectiveness of the interventions undertaken (<i>insert agreed PI's/clinical targets/structure, process and outcome measures</i>)
The cAMP will evaluate audit results and research findings to identify areas for quality improvement in collaboration with midwifery management and multidisciplinary team colleagues (primary and secondary care).
 Professional/Clinical The cAMP NNN will practice midwifery according to: Professional clinical guidelines National Health Policy for example: Slaintecare (2017), National Maternity Strategy (2016-2026), National Clinical and Integrated Care Programmes Local policies, procedures, protocols and guidelines Current legislation
 Values for Nursing and Midwifery - Care, Compassion and Commitment (DoH, 2016). Practice Standards for Midwives (NMBI, 2015) Protection of Life During Pregnancy Act, No.25 of 2013, Irish Statute Book 2013
Education and Training
 The cAMP NNN will: Contribute to service development through appropriate continuous education, research initiatives, keeping up to date with midwifery literature,

	recent midwifery research and new developments in midwifery practice, education and management.
	 Provide support and advice to those engaging in continuous professional development in his/her area of advanced midwifery practice.
	•
Legislation,	The cAMP (NNN) practises midwifery according to:
Regulations,	The Code of Professional Conduct and Ethics for Registered Nurses and
Policies and	Registered Midwives (NMBI 2014);
Guidelines	 Scope of Nursing and Midwifery Practice Framework (NMBI 2015);
	 Practice Standards for Midwives (NMBI 2015);
	 Values for Nurses and Midwives in Ireland – Care, Compassion and
	Commitment (Department of Health 2016);
	Advanced Practice (Midwifery) Standards and Requirements (NMBI 2018);
	 National Health Policies and Procedures (latest versions) {list as relevant to the carries for examples Heaves of the Oirseshtee Committee on Future of
	the service for example: Houses of the Oireachtas Committee on Future of Healthcare (Sláintecare 2017), National Consent Policy (HSE 2013, revised
	2016);
	 Local policies, procedures and guidelines;
	 Protection of Life During Pregnancy Act, No.25 of 2013, Irish Statute Book
	2013
Professional	The cAMP (NNN) must develop a professional practice portfolio, incorporating
Practice	evidence of learning from continuing professional development, clinical supervision,
Portfolio	reflective practice and review of his/her own scope of practice in accordance with
	regulatory requirements and service need.
Health and	The cAMP (NNN) will:
Safety	Ensure adherence to established policies and procedures e.g. health and
	safety, infection control, storage and use of controlled drugs etc.
	 Ensure completion of incident and near miss forms.
	Ensure adherence to department policies in relation to the care and safety of
	any equipment supplied for the fulfilment of duty.
	Have a working knowledge of the Health Information and Quality Authority
	(HIQA) Standards for Safer, Better Maternity Services (2016).
	Have a working knowledge of the HIQA Standards or Mental Health Commission (MUC) as they apply to the rate for supervision (MUC) as they apply to the rate.
	Commission (MHC) as they apply to the role, for example; Standards for Healthcare, National Standards for the Prevention and Control of Healthcare
	Associated Infections, Hygiene Standards etc. and comply with associated
	HSE protocols for implementing and maintaining these standards as
	appropriate to the role.
	• Support, promote and actively participate in sustainable energy, water and
	waste initiatives to create a more sustainable, low carbon and efficient
	health service.
NAchara	
Management / Administration:	The cAMP (NNN) will: Provide support advice and direction to staff as required
	 Provide support, advice and direction to staff as required. Engage with the wider healthcare team and facilitate team building.
	 Facilitate communication with the healthcare team across services and
	within the senior midwife/nurse team.
	 Provide staff leadership and motivation which is conducive to good working
	relations and work performance.
	• Promote a culture that values diversity and respect in the workplace.
	Manage and promote liaisons with internal and external bodies as
	appropriate, for example; intra-hospital service, community services, or
	voluntary organisations.

	 Contribute to the strategic management and planning process. Formulate service plans and budgets in co-operation with the wider healthcare team. Provide reports on activity and services as required. Engage in digital developments as they apply to service user and service administration
Eligibility Criteria	Professional Qualifications, Experience, etc.
Qualifications and/or Experience	 (a) Eligible applicants will be those who on the closing date for the competition: (i) Be a registered midwife with the Nursing and Midwifery Board of Ireland (Bord Altranais agus Cnáimhseachais na hÉireann) or entitled to be so registered.
	And (ii) Be registered in the division(s) of the Nursing and Midwifery Board of Ireland (Bord Altranais agus Cnáimhseachais na hÉireann) Register for which the application is being made or entitled to be so registered. Or
	In recognition of services that span several patient/client groups and/or division(s) of the register, provide evidence of validated competences relevant to the context of practice.
	And
	(iii) Have a broad base of clinical experience relevant to the advanced field of practice
	A
	And (iv) Be eligible to undertake a Master's Degree (or higher) in Midwifery or a Master's Degree, which is relevant, or applicable, to <i>the</i> <i>advanced field of practice</i> . The Master's programme must be at Level 9 on the National Framework of Qualifications (Quality & Qualifications Ireland), or equivalent. Educational preparation must include at least three modular components pertaining to the relevant area of advanced practice, in addition to clinical practicum.
	Or
	 (v) Be currently undertaking a Master's Degree in Midwifery (Advanced Practice Pathway) or be eligible to register to undertake additional Level 9 National Framework of Qualifications (Quality and Qualifications Ireland) specific modules of a Master's Degree in Midwifery (Advanced Practice Pathway) within an agreed timeframe. Educational preparation must include at least three modular components pertaining to the relevant area of advanced practice, in addition to clinical practicum. Or
	Possess a Master's Degree (or higher) in Midwifery or a Master's Degree which is relevant, or applicable, to the advanced field of
	(vi) practice. The Master's programme must be at Level 9 on the National Framework of Qualifications (Quality & Qualifications Ireland), or equivalent. Educational preparation must include at least three modular components pertaining to the relevant area of advanced practice, in addition to clinical practicum. And

	(b) Candidates must possess the requisite knowledge and ability including a high standard of suitability and clinical, professional and administrative capacity to properly discharge the functions of the role.
	Annual Registration
	(i) Practitioners must maintain active annual registration on the appropriate/relevant Division of the register of Nurses and Midwives maintained by the Nursing and Midwifery Board of Ireland (Bord Altranais agus Cnáimhseachais na hÉireann) for the role
	And
	(ii) Confirm annual registration with NMBI to the HSE by way of the annual Patient Safety Assurance Certificate (PSAC).
	Age
	Age restriction shall only apply to a candidate where s/he is not classified as a new entrant (within the meaning of the Public Service Superannuation (Miscellaneous Provisions) Act, 2004). A candidate who is not classified as a new entrant must be under 65 years of age on the first day of the month in which the latest date for receiving completed application forms for the office occurs.
	<u>Health</u>
	Candidates for and any person holding the office must be fully competent and capable of undertaking the duties attached to the office and be in a state of health such as would indicate a reasonable prospect of ability to render regular and efficient service.
	<u>Character</u>
	Candidates for and any person holding the office must be of good character.
Post Specific Requirements, Additional Qualifications and/or Experience Required	The organisation will consider the post specific requirements, additional qualifications and or experience required in developing the specific cAMP (NNN) service.
Essential Skills, Competencies and/or	Demonstrate the specialist knowledge and clinical skills in the specific area of practice (NNN)
Knowledge	The cAMP must demonstrate:
	 Professional/Clinical Knowledge Demonstrate a high degree of commitment, professionalism and dedication to the philosophy of quality health care provision. Demonstrate evidence of Policy, Procedure, Protocol, Guideline (PPPG) development and the translation of PPPG into action Demonstrate knowledge and experience of quality audit/assurance systems
	 Demonstrate experience in developing, implementing and evaluating quality improvement initiatives Demonstrate an awareness of relevant legislation and policy developments

	Demonstrate a commitment to continuing professional development
	 Planning and Organising Resources Demonstrate ability to proactively plan, organise, deliver and evaluate midwifery service in an efficient, effective and resourceful manner, within a
	 model of person-centred care and value for money. Demonstrate ability to manage deadlines and effectively handle multiple tasks
	Building and Maintaining Relationships: Leadership, Staff Management and Team Work
	 Demonstrate flexibility and openness to change and ability to lead and support others in a changing environment.
	 Demonstrate the ability to communicate a change vision and engage stakeholders in a sustainable change process. Demonstrate ability to foster a learning culture among staff and colleagues
	 Demonstrate ability to loster a learning culture among starrand concegues to drive continuous improvement. Demonstrate ability to work effectively within multi-disciplinary teams.
	 Evaluation Information and Judging Situations Demonstrate the ability to evaluate information and solve problems.
	 Commitment to Providing Quality Services Demonstrate understanding of, and commitment to, the underpinning requirements and key processes in providing quality, woman centred care. Demonstrate the ability to lead on clinical practice and service quality.
	 Communication and Interpersonal Skills Demonstrate effective communication and interpersonal skills, including the ability to present information in a clear and concise manner Demonstrate ability to engage collaboratively and influence others Demonstrate competency in the general use of information technology for example computers, office functions, internet for research purposes, email and preparation of presentation materials Demonstrate evidence of skills in data management and report writing.
Other Requirements Specific to the Post	Please outline the specific criteria that are specific to the post, e.g. access to transport as post will involve frequent travel
Competition	Campaign Specific Selection Process
Specific Selection Process	Ranking/Shortlisting/Interview A ranking and or shortlisting exercise may be carried out on the basis of information
Short Listing/ Interview	supplied in your application form. The criteria for ranking and or shortlisting are based on the requirements of the post as outlined in the eligibility criteria and skills, competencies and/or knowledge section of this job specification. Therefore, it is
	very important that you think about your experience in light of those requirements. Failure to include information regarding these requirements may result in you not being called forward to the next stage of the selection process.
	Those successful at the ranking stage of this process (where applied) will be placed on an order of merit and will be called to interview in 'bands' depending on the service needs of the organisation.

	Candidates who are successful at interview and subsequently meet the necessary registration requirements with NMBI will automatically be upgraded into the prepared Registered Advanced Midwife Practitioner post.
Code of Practice	The Health Service Executive will run this campaign in compliance with the Code of Practice prepared by the Commission for Public Service Appointments (CPSA). The Code of Practice sets out how the core principles of probity, merit, equity and fairness might be applied on a principle basis. The Codes also specifies the responsibilities placed on candidates, feedback facilities for candidates on matters relating to their application, when requested, and outlines procedures in relation to requests for a review of the recruitment and selection process, and review in relation to allegations of a breach of the Code of Practice. Additional information on the HSE's review process is available in the document posted with each vacancy entitled "Code of Practice, Information for Candidates".
	The reform programme outlined for the Health Services may impact on this role and as structures change the job description may be reviewed. This job description is a guide to the general range of duties assigned to the post holder. It is intended to be neither definitive nor restrictive and is subject to periodic review with the employee concerned.

HEALTH SERVICES EXECUTIVE Terms and Conditions of Employment Candidate Advanced Midwife Practitioner (cAMP)

Tenure	 The appointment is whole-time and candidate AMP is required to have progressed to being eligible to be a RAMP with the NMBI within 3 years of commencement of the post. Given the developmental nature of this service the successful advanced midwife practitioner candidate will be required to adhere to the terms as set out below which are specific to this appointment. In line with requirements and standards set out by NMBI (2018) <i>Advanced Practice (Midwifery) Standards and Requirements</i> the successful candidate will be required to engage in a process of self-development and structured education and clinical supervision specific to (<i>area of practice to be inserted</i>) in order to develop advanced clinical midwifery knowledge and critical thinking skills to gain competence necessary to independently provide efficient, effective, safe women, babies and patient care to a specific caseload which has been previously agreed. The candidate Advanced Midwife Practitioner is expected to demonstrate the core and specific competencies deemed necessary to manage the particular scope of practice. The candidate must undertake formal competency assessment in order to meet the criteria for registration as an AMP with NMBI. On successful completion of the above requirements and on acquiring registration with NMBI as an AMP the candidate will be appointed as a RAMP in a permanent capacity. Failure to successfully achieve essential milestones (outlined above) within an agreed timeframe will result in termination of the AMP career pathway and return to a previously held substantive post OR redeployment within the organisation.
	Appointment as an employee of the Health Service Executive is governed by the Health Act 2004 and the Public Service Management (Recruitment and Appointment) Act 2004.
Remuneration	The salary scale for this post is in accordance with HSE approved salary scales (aligned to Clinical Midwife Manager 3 salary scale) Candidates who are successful at interview and subsequently meet the necessary registration requirements with NMBI will automatically be appointed into the approved post of RAMP (NNN)
Working Week	The standard working week applying to the post is: 39hours HSE Circular 003-2009 "Matching Working Patterns to Service Needs (Extended Working Day / Week Arrangements); Framework for Implementation of Clause 30.4 of Towards 2016" applies. Under the terms of this circular, all new entrants and staff appointed to promotional posts from Dec 16 th 2008 will be required to work agreed roster / on call arrangements as advised by their line manager. Contracted hours of work are liable to change between the hours of 8am-8pm

	over seven days to meet the requirements for extended day services in accordance with the terms of the Framework Agreement (Implementation of Clause 30.4 of Towards 2016).
Annual Leave	The annual leave associated with the post is: (to be completed by the service)
Superannuation	All pensionable staff become members of the pension scheme. Applicants for posts in the Mental Health service are advised that Section 65 of the Mental Treatment Act, 1945, <u>does not</u> apply to new entrants to the Mental Health Services as defined by the Public Service Superannuation (Miscellaneous Provisions) Act, 2004 (Section 12 of that Act) New entrants
Probation	Every appointment of a person who is not already a permanent officer of the Health Service Executive or of a Local Authority shall be subject to a probationary period of 12 months.
Protection of Persons Reporting Child Abuse Act 1998	This post is one of those designated in accordance with Section 2 of the Protection of Persons Reporting Child Abuse Act, 1998. You will remain a designated officer for the duration of your appointment in this post or for the duration of your appointment to such other post as is included in the categories specified in the Ministerial Direction. Such officers will, on receiving a report of child abuse, formally notify the Senior Social Worker in the community care area in which the child is living.

Template 12: Sample Terms of Reference for Local Working Group (Midwifery)

Terms of Reference (Sample) Local Working Group for the Development of XXX Advanced Midwifery Practice Service

Introduction

The 'Policy on the Development of Graduate to Advanced Nursing and Midwifery Practice' (DoH, 2019) recommends that robust governance and accountability structures, systems and processes are in place to oversee the development and implementation of advanced nursing and midwifery practice (Recommendation 1, Action C, DoH, 2019). Support at local level is required to facilitate the educational and clinical development of candidate advanced midwife practitioners (cAMP's) to register and the development of the advanced practice midwifery service. In achieving specific competences, the cAMP develops his/her capabilities to extend his/her practice in line with service user needs and professional competences.

Suggested Membership of the xxx LWG may include:

- Director of Midwifery / Designate (Chair)
- Consultants/ Clinical Lead
- RAMP representative
- Clinical supervisor
- Candidate AMP
- NMPD Officer
- ADON xxx Directorate and professional supervisor
- Clinical Midwife Manager
- Midwife Practice Development Coordinator (as appropriate)
- Prescribing site coordinator
- Health and Social Care Professional Representatives (as appropriate)
- Pharmacy, Radiology and Laboratory Representatives (as appropriate)
- Representatives from other areas may be invited as required

Aims of the Local Working Group (LWG)

The main aims of the LWG are to:

- Oversee and steer the development of the AMP service
- Support candidate AMPs in meeting the NMBI criteria for registration as an Advanced Midwife Practitioner, as set out by the Nursing and Midwifery Board of Ireland (NMBI).

Objectives of the Local Working Group

The objectives are as follows:

- Create local governance and accountability structures for the establishment of the AMP service
- Determine and provide access to resources required to support AMP service e.g. diagnostics, care pathways etc.
- Agree clinical and professional supervision processes.
- Agree patient group, scope of practice and develop Job Description for RAMP(s).

- Approve PPPGs for the AMP service.
- Consider impact on other services- develop MOUs / SLAs as required.
- Agree Referral Pathways, as required
- Monitor alignment with National Women and Infants Health Programmes
- Ensure compliance with Advanced Practice (Midwifery) Standards and Requirements (NMBI, 2018).
- Report progress to XXX e.g. the Advanced Midwifery and Midwifery Practice Governance Group or Chief Director of Midwifery
- Identify and mitigate or escalate risks as appropriate.

Roles & Responsibilities

The roles and responsibilities are as follows:

- Define the role by examining supporting data e.g. local population demographic and need presentations, diagnoses, gender, age profile, reality of current service, quality of life, prevention of illness, health promotion etc.
- Provide direction to the cAMP xxx in establishing the new service:
 - to enable the individual cAMP to meet the NMBI Criteria for Registration as a Registered Advanced Midwife Practitioner as set out by NMBI and achieve the competences outlined in the Advanced Practice (Midwifery) Standards and Requirements (NMBI, 2017).
 - to undertake the academic preparation and develop the clinical and leadership skills, competencies and knowledge required to meet the criteria to be registered as a RAMP with NMBI. The scope of the cAMP role must reflect the incremental development of expertise and as such, the cAMP cannot deliver care as an autonomous advanced midwife practitioner.
- Support the process for clinical and professional supervision
- Define the caseload and scope of practice, inclusion and exclusion criteria for the advanced midwifery practice service
- Agree the range of therapeutic interventions to be provided to the women and their babies by the cAMP/ RAMP xxx.
- Identify resources required (for example clerical support) and facilities (examination room/office).
- Develop and approve the RAMP job description
- Develop Policies Procedures, Protocols and Guidelines, Memorandums of Understanding and Service Level Agreements (as necessary)
- Determine referral pathways as appropriate across disciplines/services
- Support the development of professional practice portfolio
- Support audit of clinical practices and participation of data collection
- Support research activities
- Develop, monitor and report Key Performance Indicators that capture the output, outcomes and impact activity of the service (Recommendation 4, Action A; DoH, 2019).
- Evaluate the advanced practice service and service user experience.
- Approve all aspects of the development of the advanced Midwifery/midwifery practitioner service prior to the cAMP/cAMP to registering with NMBI.

- Promote, market and advocate the importance and value of the development of the RAMP xxx service within xxx Hospital /CHO.
- Ensure that the service being developed is aligned to the needs of women and their babies and national policy direction e.g. National Clinical and Integrated Care Programmes.

Accountability

The Local Working Group is operationally accountable to XXX

Chairperson

The chairperson will be the Director of Midwifery / designate

Frequency of Meetings

The xxx LWG will meet xxx initially

Quorum:

{Adapt as relevant to the xxx Hospital / CHO Area}

Agenda and Minutes of Meetings

The agenda and minutes of previous meeting will be sent out one week in advance of the scheduled meeting and accompanied by any supporting documentation.

Meeting dates will be set for the year at the beginning of each New Year.

Administrative Support

Administrative support should be available to the Local Working Group as required.

Term

The Advanced Practice (Midwifery) Local Working Group Terms of Reference is effective from the establishment of the group, and will be ongoing until terminated by agreement between the parties.

Sample Gantt Chart

Development of the XXX Advanced Midwife Practitioner Service

Commencement date: dd/mm/yy

Project Timeline Proposed Advanced	Month											
Midwife Practitioner Service– Hospital	1	2	3	4	5	6	7	8	9	10	11	12
Overall Governance												
Strategic agreement to proceed with the development of the AMP Recruitment of cAMP and establishment/ review of												
project plan												
Establishment of Local Working Group												
Agreement of project plan and timelines with key stakeholders												
Commencement of process												
Process												
cAMP will undertake the academic preparation and develop the clinical and leadership skills, competences and knowledge required to meet the criteria for												
Identification of patient/service user needs												
Agree patient caseload and scope of practice												
Development of job description for the role												
Development of referral pathways												
Development of PPPGs to support the service												
Consider the impact on other services and development MOUs/SLAs												
Identify resources required e.g. clerical support, clinical/office space, ICT requirements												

LWG approve all aspects of the development of the advanced midwifery practitioner service prior to the cAMP to registering with NMBI						
Registration Process						
cAMP applies for registration as RAMP						
NMBI decision regarding registration						
Evaluation of Process (LWG)						
Review of project plan/timelines						

Gantt Key: Blue- to be commenced, Amber- in process, Green- complete, Red- delayed

Memorandum of Understanding Clinical Supervision cAMP/RAMP xxx xxx Hospital / Hospital Group xxx Service/CHO Area

Clinical Supervision for candidate Advanced Midwife Practitioners (cAMP's)

Parties to the Memorandum of Understanding (MOU)

This Memorandum of Understanding (MOU) is between the [Insert Speciality] cAMP and the xxx RAMP / Consultants /GP working within xxx Hospital Group/xxx Hospital **or** CHO area/ xxx Service/Hospital.

Scope of the MOU

This agreement documents the following:

- a) The Department of [Insert Speciality] commitment to practice-based learning by providing on-going support, formal, informal clinical and professional supervision, and shared learning for the [Insert Speciality] cAMP. This supervision will enable the [Insert Speciality] cAMP to attend case conferences, ward rounds, multidisciplinary meetings, clinics, conferences, teaching sessions and department meetings e.g. clinical audit, quality and safety, risk management and/or other relevant meetings as required.
- b) The [Insert Speciality] cAMP will participate in formal and informal supervision with the xxx team.

Purpose

The purpose of the MOU is to:

- Ensure that relevant commitments are in place for both parties to support on-going clinical supervision and shared learning.
- Ensure maximum provision is made to support the maintenance/development of [Insert Speciality] cAMP/RAMP competence.

Supervisor's Responsibilities: (RAMP/Consultant/GP/Clinical/Professional Supervisors)

In keeping with a clinical reporting relationship, the RAMP / Consultant /GP [Insert Speciality], at xxx Hospital / CHO area, is responsible for supporting the cAMP/RAMP's formal and informal supervision and shared learning.

In relation to this MOU, the [Insert Speciality] department will:

 Participate in a formal and informal supervision programme with the cAMP. Assign candidates to a named appropriate clinical supervisor for the duration of the programme to provide support and supervision and to assist them to develop evidence-based knowledge, competence, know-how and skills to assess learning. Protected time is agreed for clinical supervision and assessment of competence

- Provide, maintain and develop the network infrastructure to support the cAMP clinical competence development and maintenance.
- Have available and accessible, clearly written up-to-date learning outcomes/objectives appropriate to agreed practice specific competences to guide each students' learning and achievement of competence at advanced practice level.
- Make provision for the cAMP attendance and role participation at case conferences, ward rounds, grand rounds etc.
- Establish a safe supervisory environment where confidentiality and trust are assured within the relationship.
- The lead supervisor has overall responsibility for the cAMP development where a cAMP has a number of supervisors.

2.1 cAMP/RAMP Responsibilities

The [Insert Speciality] cAMP/RAMP will:

- Participate in and avail of all opportunities to access formal and informal supervision in order to maintain and develop clinical skills, competence and knowledge.
- The cAMP will meet with their identified supervisor(s) for a minimum of one hour per month to discuss clinical care / professional development in a structured manner, in a safe, supportive and confidential environment.
- The cAMP will maintain a record of clinical supervision sessions, agreed activities, actions and learning outcomes.
- The cAMP will attend continuing professional development (CPD) days, teaching sessions, as well as engaging in case discussions, audit of practice, and self-study relevant to his/her caseload. Learning from these will be captured as part of a reflective journal and can be brought to discussions at formal clinical supervision sessions.
- Adhere to Code of Professional Conduct and Ethics for Professional Midwifes and Midwives (NMBI 2014), other relevant regulations and best practice guidelines.

Review Details

This MOU should be reviewed at least every 2 years or earlier if deemed necessary, with the overall aim to ensure a focus is on the purpose and direction of supervision.

Reports

A log of case studies, audits/research reviewed, and items of interest will be maintained by the [Insert Speciality] cAMP/RAMP and will form the basis of the review.

Procedure to make changes to the MOU

MOU change requests should be made through the [Insert Speciality] cAMP Local Working Group.

Signatories

The parties to this MOU agree to the contents set out herein

Name	Signature	Date	Email address
Director of Midwifery			
RAMP/Consultant/GP [Insert speciality]			
RAMP/Consultant/GP [Insert speciality]			
RAMP/Consultant/GP [Insert speciality]			
cAMP [Insert speciality]			

Template 14: Job Description – Registered Advanced Midwife Practitioner

Job Specification, Terms and Conditions: Registered Advanced Midwife Practitioner (RAMP) (NNN)

Registered Advanced Midwife Practitioner (RAMP) Job Description Template for use by organisations where the candidate AMP (cAMP) has been formally recruited; (therefore, this RAMP position is not required to be advertised).

Job Title, Grade	Registered Advanced Midwife Practitioner (RAMP) (NNN - area of speciality to						
and	be inserted)						
Grade Code							
	Grade Code: Advanced Midwife Practitioner 2535						
Competition							
Reference	To be completed by HR Department						
Whole Time	To be completed by the service(s) {Hospital Group and/or CHO area}						
Equivalent							
Taking up	A start date will be indicated at job offer stage						
Appointment	The successful candidate will be required to take up duty no later than { to be						
	completed by HR Department}						
Duration of	To be completed by HR Department						
Post							
Location of Post	To be completed by the service(s) {Hospital Group and/or CHO area advertising						
	for RAMP service}						
	What is the name of the department?						
	Where is the RAMP located?						
	Which hospital/ CHO area?						
	Which geographical area?						
Organisational	To be completed by the service(s) {Hospital Group and/or CHO area}						
Area							
Details of	What service does the unit/service/catchment area provide?						
Service	What client group is served by the unit/service/catchment area?						
	What are the possible future developments for the service?						
	What is the team structure?						
	What area is covered by this service?						
	There is no limit to the test that one had in out of home						
	There is no limit to the text that can be inserted here.						
Service Mission,	To be completed by the service(s) {Hospital Group and/or CHO area}						
Vision and							
Values							
	Is an factor with a second ship to the Direct Control of Control o						
Reporting	Is professionally accountable to the Director of Midwifery {insert name(s)}						
Arrangements	Is clinically accountable to the Consultant/Clinical Lead/GP {insert name(s)}						
Clinical	To be completed by the service(s) {Hospital Group and/or CHO area}						
Indemnity	is we completed by the service(s) thospital Group and/or Cho area?						
Key Working	Director of Midwifery						
Relationships	Assistant Director of Midwifery						
	Clinical Midwife Manager						
	RAMP's and other grades of midwifery						
	Senior midwives within the health service						
	Medical colleagues						
	medical concagues						

	Interprofessional colleagues Women and babies/ service users Prescribing site co-ordinator(s) Nursing and Midwifery Board of Ireland Higher Education Institution May include client/women interest groups
	Nursing and Midwifery Planning and Development Unit Centres of Nursing and Midwifery National Women and Infants Health Programme National Clinical Leadership Centre Other relevant statutory and non-statutory organisations
Clinical Supervision	The RAMP (xxx) engages in on-going clinical supervision as per a Memorandum of Understanding. The structure, process and outcome of clinical supervision must be explicit (formal and informal).
	The RAMP (xxx) maintains a record of clinical supervision in his/her professional practice portfolio.
Purpose of the Post	The advanced practice service is provided by midwives who practice at a higher level of capability as independent, autonomous and expert advanced practitioners. The overall purpose of the service is to provide safe, timely, evidenced based midwife-led care to women and babies at an advanced midwifery level. This involves undertaking and documenting complete episodes of maternity care, (assess, diagnose, plan, treat and discharge women and babies), according to collaboratively agreed local policies, procedures, protocols, guidelines and scope of practice in the clinical setting and/or service level agreements/ memoranda of understanding; demonstrating advanced clinical and theoretical knowledge, critical thinking and decision making skills. The RAMP (xxx) demonstrates advanced clinical and theoretical knowledge, critical thinking, clinical leadership and complex decision-making abilities. The RAMP (xxx) practices in accordance with the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI 2014), the Scope of Midwifery Practice Framework (NMBI 2000), Advanced Practice (Midwifery) Standards and Requirements (NMBI 2018), and the Values for Nurses and Midwives in Ireland (Department of Health 2016). The RAMP (xxx) service provides clinical leadership and professional scholarship in the delivery of optimal midwifery services and informs the development of evidence based health policy at local, regional and national levels. The RAMP (xxx) contributes to midwifery research that shapes and advances midwifery practice, education and health care policy at local, national and international levels.{insert additional specific requirements to support the
Principle Duties	purpose of the particular advanced midwifery practice service or speciality The RAMP practices to a higher level of capability across the 5 principles of
and Responsibilities	competences as defined by Bord Altranais agus Cnáimhseachais na hÉireann Advanced Practice (Midwifery) Standards and Requirements (NMBI 2018). Each of the 5 principles specifies the standard which the RAMP (xxx) has a duty and responsibility to demonstrate and practise.
	Principle 1: Respect for the Dignity of the Person Practice Standard 1

Midwifery practice is underpinned by a philosophy that protects and promotes the safety and autonomy of the woman and respects her experiences, choices, priorities, beliefs and values.
Competency 1 The RAMP (xxx) will demonstrate competency and capability in applying ethically sound solutions to complex issues related to caring for women and their babies by:
1.1 Demonstrating leadership by protecting, promoting and supporting the human rights of women and babies, including advocating for each woman's right to choose how and where to give birth
The <u>initial</u> caseload and scope of practice for the RAMP (xxx) is agreed as follows: { insert here }
The inclusion criteria for the RAMP (xxx) service are as follows: { insert here }
The exclusion criteria for the RAMP (xxx) service are as follows: { insert here }
The caseload and scope of practice for the Registered Advanced Midwife Practitioner service will evolve to reflect changing service needs
 1.2 Demonstrate clinical leadership by practising empathically and compassionately to facilitate, and support the health and wellbeing of all women, babies and their families, respecting the diversity of beliefs, values, choices and priorities of each woman and her family. Articulate and promote the advanced practice midwifery service in
clinical, political and professional contexts which is woman-centred, and integrated and team based care contexts by {insert here} {for example presenting key performance outcomes locally and nationally; contributing to the service's annual report; maternity strategy implementation, participating in local and national committees to ensure best practice as per the National Clinical Programme for Obstetrics and Gynaecology, National Women and Infants Health Programme, National Clinical Programme for Paediatrics and Neonatology, and Integrated Care Programme for Children as required}.
• The chosen professional practice model for midwifery { insert here } provides the RAMP latitude to control his/her own practice, focusing on person-centred care, interpersonal interactions and the promotion of normal physiological process (normality).
• The XXX model for midwifery emphasises a caring therapeutic relationship between the RAMP (xxx) and women and babies, recognising that RAMP's work collaboration with their inter/multidisciplinary colleagues.
• It emphasises the woman receiving care from the most appropriate professional, in the most appropriate setting, at the most appropriate time. Supporting the normalisation of pregnancy and birth though the three pathways - Supported Care, Assisted Care and Specialised Care recommended in the National Maternity Strategy (2016-2026) as

relevant to the area of practice.
1.3 Demonstrate leadership by advocating for women and their babies, including their emotional and psychological safety whilst at all times respecting each woman's right to choose whether or not to follow advice and recommendations about her care.
 Initiate and implement health promotion activities and self- management plans in accordance with the wider public health agenda
Principle 2: Professional Responsibility and Accountability Practice Standard 2
Midwives practise in line with legislation and professional guidance, and are responsible and accountable within their scope of midwifery practice. This encompasses the full range of activities of the midwife as set out in EC Directive 2005/36/ EC and the adapted Definition of the Midwife International Confederation of Midwives 2011 (ICM) as adopted by the NMBI
Competency 2 The RAMP (xxx) develops and utilises advanced knowledge, skills and abilities to critically analyse, problem solve and engage in complex clinical decision-making as lead healthcare professionals by;
 2.1 Developing his/her capability to be accountable and responsible for senior clinical decision-making, practising effectively as a lead healthcare professional in accordance with legal, professional and regulatory requirements, supported by evidence-based local, national, & international PPPG's, relevant legislation and relevant professional regulatory standards and requirements pertaining to (xxx) advanced midwifery services. Conduct comprehensive holistic health assessment using evidenced based frameworks, policies, procedures, protocols and guidelines to determine diagnoses and inform autonomous advanced midwifery care.
• Synthesise and interpret assessment information particularly history including prior outcomes, physical, mental, emotional social findings and diagnostic data to identify normal, normal-risk, medium-risk and high-risk states of health as appropriate to the (xxx) service
 Demonstrate timely use of diagnostic investigations/additional evidence-based advanced assessments to inform clinical-decision making
 Exhibit comprehensive knowledge of therapeutic interventions including pharmacological and non-pharmacological advanced midwifery interventions, supported by local, national, & international evidence-based policies, procedures, protocols, and guidelines, relevant legislation, and relevant professional regulatory standards and requirements
2.2 Understanding and demonstrating professional boundaries by referring to, transferring and collaborating with other members of the multidisciplinary team for areas outside the RAMP's scope of practice, experience or competence using established referral pathways as per locally agreed policies, procedures, protocols and guidelines to support and guide the RAMP (xxx) service.
 Develop supporting policy, procedure, protocols, guidelines for

discharge and /or transfer of women and babies from the service
2.3. Promoting, protecting and articulating the advanced practice midwifery role in clinical, professional and political contexts, utilising clinical expertise and undertakes reflection in and on practice and continuous professional development
2.4. Demonstrating a vision for the RAMP (xxx) service based on a competent expert knowledge derived from research, critical thinking and experiential learning. {For example informed by vision expressed in the National Maternity Strategy (2016-2026) utilising a health and wellbeing approach}.
Principle 3: Quality of Practice
Practice Standard 3 Midwives use comprehensive professional knowledge and skills to provide safe, competent, kind, compassionate and respectful care. Midwives keep up to date
with midwifery practice by undertaking relevant continuing professional development.
Competency 3 The RAMP (xxx) promotes and protects a culture of quality, compassionate and evidence-based safe maternity care and services by:
3.6 Demonstrating leadership in developing maternity services through initiatives, improvements and changes in the care provided to women, their babies and families.
3.7 Influencing clinical practice through education (formal and informal) mentoring and coaching in the multidisciplinary team (for example teaching sessions; journal clubs; case reviews; presenting on academic programmes in the affiliated Higher Education Institute (XXX) in the area of xxx midwifery care.
3.8 Using expert knowledge and clinical competence when facilitating clinical supervision and mentorship of midwifery colleagues, midwifery students and others.
3.9 Leading in the translation of new knowledge and facilitation of best available evidence in the clinical setting
• Lead on managing and implementing change to meet service needs (e.g. Implementation of National Maternity Strategy 2016-2026)
 Establish links to affiliated HEI's and other HEI's as appropriate and present at local, national and international fora. 2.10 Dependent to a finite production of the set o
 3.10 Demonstrate professional leadership by conducting audits and research and disseminate findings that shape and advance practice in midwifery, education, and policy at local, national, and international levels. Principle 4: Trust and Confidentiality
Practice Standard 4
Midwives work in equal partnership with the woman and her family and establish a relationship of trust and confidentiality
Competency 4 The RAMP (xxx) will negotiate and advocate with other health professionals to ensure the beliefs, rights, and wishes of women, babies and their families are

	upheld in the design and evaluation of services by:				
	4.4 Demonstrating professional leadership in advocating choice for women when developing midwifery services {for example by ensuring best practice is applied consistently by continuity of care and carer).				
	4.5 Promoting, protecting and developing a culture of openness, honesty, trust and confidentiality with women and their families. For example: Working in partnership, building good rapport and maintaining a high level of engagement with women and their partners and families.				
	4.6 Articulating and understanding how, in exceptional circumstances, confidential information may need to be shared with others according to relevant legislation.				
	Principle 5: Collaboration with Others Practice Standard 5 Midwives communicate and collaborate effectively with women, women's				
	families and with the multidisciplinary healthcare team.				
	Competency 5				
	The RAMP (xxx) manages risk for those who access the service through collaborative risk assessments and promotion of a safe environment by;				
	5.1 Communicating effectively with other members of the multidisciplinary team sharing information in accordance with legal, professional and regulatory requirements as per established PPPG's and referral pathways, SLAS's and MOU's.				
	5.6 Using expert professional judgment to make timely referrals to other appropriate healthcare professionals or members of the multidisciplinary team				
	 5.7 Demonstrating leadership in negotiation and consensus-building to manage conflict in collaboration with women receiving care and other members of the multidisciplinary team. Establish and standardise clear governance structures to ensure accountability and transparency. 				
	 Utilise information technology, in accordance with local, national, & international legislation and organisational policies, procedures, protocols and guidelines to record all aspects of advanced midwifery care {for example e health records, Maternal & Newborn Clinical Management System} 				
Legislation,	The RAMP (xxx) practises midwifery according to:				
Regulations, Policies and	 The Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI 2014); 				
Guidelines	 Scope of Nursing and Midwifery Practice Framework (NMBI 2015); 				
	Practice Standards for Midwives (NMBI 2015); Notice for Nurses and Midwives in Italand - Care Composition and				
	 Values for Nurses and Midwives in Ireland – Care, Compassion and Commitment (Department of Health 2016); 				
	 Advanced Practice (Midwifery) Standards and Requirements (NMBI 2018); 				
	 National Health Policies and Procedures (latest versions) {list as relevant to the service for example: Houses of the Oireachtas Committee on Future of Healthcare (Sláintecare 2017), National Consent Policy (HSE 2013, revised 2016); 				
	· · ·				

[
	 Local policies, procedures and guidelines; Practice Standards for Midwives (NMBI, 2015) Protection of Life During Pregnancy Act, No.25 of 2013, Irish Statute Book 2013 				
Performance Management and Evaluation	Performance Indicators (PI's) are required to evaluate nursing interventions and implement initiatives to improve the quality and quantity of nursing care provided. PI's should have a clinical nursing focus as well as a breakdown of activity, including patients seen and treated. In addition, PI's should identify areas of good practice that must be recognised and celebrated (HSE 2015). The Department of Health (2017) <i>Framework for National Performance Indicators for Nursing and Midwifery</i> provides a guiding framework for the development of Nursing and Midwifery PI's. In collaboration with the Director of Midwifery, the RAMP will identify and develop Midwifery PI's for their area of practice, collect and collate data which will provide evidence of the impact and effectiveness of the interventions undertaken { insert here }.				
	The RAMP (NNN) will participate in clinical audit and evaluate audit results and research findings to identify areas for quality improvement in collaboration with midwifery and multidisciplinary team colleagues (primary and secondary care).				
Professional Practice Portfolio	The RAMP (xxx) must maintain a professional practice portfolio, incorporating evidence of learning from continuing professional development, clinical supervision, reflective practice and review of his/her own scope of practice in accordance with regulatory requirements and service need.				
Health and Safety, Quality Assurance, Risk and Clinical Governance	 The management of Risk, Infection Control, Hygiene Services and Health & Safety is the responsibility of everyone and will be achieved within a progressive, honest and open environment. These organisational standards and procedures are developed and managed to comply with statutory obligations. The RAMP (NNN) demonstrates knowledge of clinical governance structures and processes supporting service provision. The RAMP (NNN) must be familiar with and is responsible for attending the necessary education, training and support to enable them to meet this responsibility. The RAMP (NNN) is responsible for ensuring that they comply with hygiene services requirements in their area of responsibility. Hygiene services incorporate environment and facilities, hand hygiene, catering, cleaning, the management of laundry, waste, sharps and equipment. The RAMP (NNN) must take reasonable care for their own actions and the effect that these may have on the safety of others. The RAMP (NNN) is responsible for ensuring they become familiar with the requirements stated within and that they comply with the Hospital Group's/ Community Healthcare Organisation's PPPGs. Have a working knowledge of PPPGs in relation to the care and safety of any equipment supplied for the fulfilment of duty within the RAMP (NNN) midwifery service. Ensure the advice of relevant stakeholders is sought prior to procurement. 				

· · · · · · · · · · · · · · · · · · ·				
Management and Leadership	 Healthcare, National Standards for the Prevention and Control of Healthcare Associated Infections, Hygiene Standards or MHC regulations/standards and legislation as relevant. Comply with associated HSE protocols for implementing and maintaining these standards as appropriate to the role. Support, promote and actively participate in sustainable energy, water and waste initiatives to create a more sustainable, low carbon and efficient health service. The RAMP (NNN) will support the principle that person-centred care comes first at all times and will approach the effective, efficient and resourceful 			
	 first at all times and will approach the effective, efficient and resourceful planning, organisation and delivery of RAMP (xxx) midwifery service with the flexibility and enthusiasm necessary to make this principle a reality for every patient. The RAMP (NNN) will adopt a professional leadership role within the clinical governance structures influencing both clinical and non-clinical processes that impact upon the experience and/or outcomes for patients within the RAMP (xxx) midwifery service. The RAMP (NNN) will participate in the appropriate and effective management of the RAMP (NNN) midwifery service. The RAMP (NNN) will participate in the development of the overall service plan and in the monitoring and review of RAMP (xxx) activity against the plan. The RAMP (NNN) will provide innovative and effective leadership, support and advice to midwifery, nursing and allied staff at all levels related to their area of practice. The RAMP (NNN) will participate in the overall financial planning of the service including the assessment of priorities in pay and non-pay expenditure relating to the RAMP (NNN) midwifery service. The RAMP (NNN) will provote a culture that values diversity and respect in the workplace. The RAMP (NNN) will manage and promote liaisons with internal and external bodies as appropriate, for example; intra-hospital service, community services, or voluntary organisations. The RAMP (NNN) will engage in digital developments as they apply to service user and service administration. 			
Eligibility	The next section of this template will apply when the candidate AMP has			
Criteria	registered with the NMBI as an RAMP.			
Qualifications and/or	Professional Qualifications and Experience			
Experience	 Be registered in the advanced midwife practitioner division of the Nursing and Midwifery Board of Ireland Register 			
	(ii) Candidates must possess the requisite knowledge and ability including a high standard of suitability and clinical, professional and administrative capacity to properly discharge the functions of the role.			

	Annual registration				
	Practitioners must maintain active annual registration on the Advanced Midwife Practitioner Division of the register of Nurses and Midwives maintained by the Nursing and Midwifery Board of Ireland (Bord Altranais agus Cnáimhseachais na hÉireann) for the role And Confirm annual registration with NMBI to the HSE by way of the (ii annual Patient Safety Assurance Certificate (PSAC).				
	Age restriction shall only apply to a candidate where s/he is not classified as a new entrant (within the meaning of the Public Service Superannuation (Miscellaneous Provisions) Act, 2004). A candidate who is not classified as a new entrant must be under 65 years of age on the first day of the month in which the latest date for receiving completed application forms for the office occurs.				
	HealthCandidates for and any person holding the office must be fully competent and capable of undertaking the duties attached to the office and be in a state of health such as would indicate a reasonable prospect of ability to render regular and efficient service.				
	<u>Character</u> Candidates for and any person holding the office must be of good character.				
Post Specific Requirements, Additional Qualifications and/or	The organisation will have identified the post specific requirements in terms of additional post registration education and /or clinical experience related to the specific RAMP (xxx) service during the recruitment process for the candidate AMP.				
Experience Required	The organisation may specify other post specific requirements in terms of additional post registration education and / or clinical experience(s) related the RAMP (NNN) service in line with expansion of practice and caseload review.				
Other Requirements Specific to the Post	Access to transport as the post may involve some travel				

The reform programme outlined for the health services may impact on this role and as structures change the job description may be reviewed.

This job description is a guide to the general range of duties assigned to the post holder. It is intended to be neither definitive nor restrictive and is subject to periodic review with the employee concerned. It is not intended to be a comprehensive list of all duties involved and consequently, the post holder may be required to perform other duties as appropriate to the post which may be assigned to him/her from time to time and to contribute to the development of the post while in office.

HEALTH SERVICES EXECUTIVE: Terms and Conditions of Employment-Registered Advanced Midwife Practitioner (RAMP)

Tenure	The appointment is whole-time and permanent.
	Given the developmental nature of this service the successful registered advanced
	midwife practitioner will be required to adhere to the terms as set out below which
	are specific to this appointment.
	 In line with standards and requirements set out by NMBI (2018) Advanced Practice (Midwifery) Standards and Requirements the RAMP (NNN) will continue to engage in a process of self-development, structured education and clinical supervision specific to the service {insert here} in order to maintain and develop advanced clinical midwifery knowledge and critical thinking skills to maintain the competences necessary to independently provide efficient, effective, safe patient care.
	Candidates who meet the necessary registration requirements with NMBI will automatically be appointed into the approved post of RAMP (xxx) in a permanent capacity.
	Appointment as an employee of the Health Service Executive is governed by the Health Act 2004 and the Public Service Management (Recruitment and Appointment) Act 2004.
	The above job description is not intended to be a comprehensive list of all duties
	involved and consequently, the post holder may be required to perform other
	duties as appropriate to the post which may be assigned to him/her from time to time and to contribute to the development of the post while in office.
Remuneration	The salary scale for this post adheres to national HSE approved salary scales
Working Week	The standard working week applying to the post is: 39hours
	HSE Circular 003-2009 "Matching Working Patterns to Service Needs (Extended Working Day / Week Arrangements); Framework for Implementation of Clause 30.4 of Towards 2016" applies. Under the terms of this circular, all new entrants and staff appointed to promotional posts from Dec 16 th 2008 will be required to work agreed roster / on call arrangements as advised by their line manager. Contracted hours of work are liable to change between the hours of 8am-8pm over seven days to meet the requirements for extended day services in accordance with the terms of the Framework Agreement (Implementation of Clause 30.4 of Towards 2016).
Annual Leave	The annual leave associated with the post is: (to be completed by the service)
Superannuation	All pensionable staff becomes members of the pension scheme. Applicants for posts in the Mental Health service are advised that Section 65 of the Mental Treatment Act, 1945, <u>does not</u> apply to new entrants to the Mental Health Services as defined by the Public Service Superannuation (Miscellaneous Provisions) Act, 2004 (Section 12 of that Act) New entrants
Probation	Every appointment of a person who is not already a permanent officer of the Health Service Executive or of a Local Authority shall be subject to a probationary period of 12 months.
Protection of	This post is one of those designated in accordance with Section 2 of the Protection of
Persons	Persons Reporting Child Abuse Act, 1998. You will remain a designated officer for the
Reporting Child	duration of your appointment in this post or for the duration of your appointment to
Abuse Act 1998	such other post as is included in the categories specified in the Ministerial Direction. Such officers will, on receiving a report of child abuse, formally notify the Senior

Template 15: Memorandum of Understanding (Short version) (Midwifery)

Memorandum of Understanding between xxx Department/Service and Registered Advanced Midwife Practitioner Service xxx

This Memorandum of Understanding (MOU) sets out for the terms and understanding between the xxx Department/Service/Organisation and xxx Department/ Service at xxx and the Registered Advanced Midwife Practitioner (RAMP) Service, xxx to enable the RAMP xxx to refer to the xxx service in xxx Service/ Organisations within a defined and agreed caseload as outlined in the RAMP xxx Job description.

Purpose

The RAMP xxx service includes a caseload that requires the input of the xxx service to ensure provision of optimal care and management of patients. This caseload includes patients presenting with xxx

Reporting relationships for the RAMP xxx

The RAMP xxx will be professionally accountable to the Director of Midwifery. The RAMP xxx will be clinically accountable to the Consultant xxx.

Indemnity

Indemnity arrangements for the post and service are provided by the State Claim Agency's Clinical Indemnity Scheme; the Registered Advanced Midwife Practitioner, xxx works within a defined and agreed scope of practice and in accordance with approved protocols, policies, procedures and guidelines (PPPGs) and clinical supervision arrangements.

Head of xxx Department	xxx Consultant	Director of Midwifery
Name:	Name:	Name:
Signature:	Signature:	Signature:
E-mail:	E-mail:	E-mail:
Tel:	Tel:	Tel:

Template 16: Memorandum of Understanding (Long version) (Midwifery)

Memorandum of Understanding

This Memorandum of Understanding (MOU) is a formal agreement that sets out a framework for coordination of service arrangements, co-operation and data/information exchange, in the provision of Registered Advanced Midwife Practitioner services

between

xxx Service, **xxx** Hospital, **xxx** Hospital Group/ **xxx** Healthcare Service, CHO Area (Registered Advanced Practice Midwifery service provider)

and

xxx Service, xxx Hospital, xxx Hospital Group/ xxx Healthcare Service/Facility, CHO Area (Registered Advanced Practice Midwifery service recipient)

Background

The role of the RAMP xxx is to optimise the care and treatment of a specific caseload of women and their babies within xxx Service /health facility by providing safe, timely evidence based midwife-led care, utilising advanced practice skills and expertise.

The RAMP xxx will engage and collaborate with healthcare staff involved in the care of the patient(s)/client(s) in planning and delivering care, and provide education to midwifery staff as required.

Purpose

This MOU applies to the RAMP xxx Service and xxx Service, xxx Hospital, xxx Hospital Group/ xxx Healthcare Service, CHO area.

The MOU is established to outline the lines of accountability and the reporting relationships from a professional and clinical perspective between RAMP xxx and the partners outlined above.

Arrangements will be agreed and documented between the RAMP xxx and the xxx Healthcare Service/ Facility in relation to RAMP xxx service access and provision, its structure, processes, timeframes and the requirements of advanced practice as it pertains to the care of xxx patient(s).

These should include but are not limited to:

- Accountability and the reporting relationships
- Response to referrals received from xxx service
- Venue for delivery of care at xxx
- Access to resources i.e. Information Technology
- Communication pathways
- Discharge, transfer and referral/arrangements.

Services beyond and above what is agreed in this MOU require discussion and further agreement with the patient(s), consultant/GP, and the Director of Midwifery of the healthcare facility/service and the RAMP line manager.

The xxx advanced practice midwifery service delivers all aspects of care within the legislative and regulatory framework, health service provider (i.e. governance structure) and within RAMP scope of practice and specific caseload.

Reporting Relationships

• Professional Accountability

The RAMP xxx will remain professionally accountable to the Director of Midwifery, xxx Service, xxx Hospital, xxx Hospital Group/ xxx Healthcare Service, CHO Area or designated deputy, while providing care in xxx Service, xxx Hospital, xxx Hospital Group/ xxx Healthcare Service, CHO Area.

• Clinical Accountability

The RAMP xxx will remain clinically accountable to the Consultant xxx /GP xxx while providing care in xxx Service, xxx Hospital, xxx Hospital Group/ xxx Healthcare Service, CHO Area.

Indemnity

Indemnity arrangements for the RAMP xxx are provided by the State Claims Agency.

Information Requirements & Data Protection

The RAMP xxx will adhere to xxx Hospital/Service Recording of Clinical Practice Policy, NMBI Recording Clinical Practice Guidelines and any other PPPG's pertinent to the management of patient information.

The RAMP xxx will protect data by adhering to the Data Protection PPG's and comply with General Data Protection Regulation requirements.

Review, Modification or Termination of the MOU

This MOU shall become effective upon signature by the authorised partners and will remain in effect until modified or terminated by any one of the partners by mutual consent.

This MOU may be modified by mutual consent of the Director of Midwifery, xxx Service, xxx Hospital, xxx Hospital Group/ xxx Healthcare Service, CHO Area and the Director of Nursing/Midwifery of ______ (Insert name of xxx Service, xxx Hospital, xxx Hospital Group/ xxx Healthcare Service, CHO Area).

Signatories:

The parties to this Memorandum of Understanding agree to the contents set out herein.

Name	Signature	Date	Email
RAMP xxx, xxx			
Hospital/Service			
Name			
RAMP Supervising			
Consultant/Consultants,			
GP/GP's			
Name			
RAMP Supervising			
Consultant/Consultants,			
GP/GP's			
Name			
Director of Midwifery: xxx			
Service, xxx Hospital, xxx			
Hospital Group/ xxx			
Healthcare Service, CHO			
Area (Registered Advanced Practice			
Midwifery xxx service provider)			
Name			
Director of			
Nursing/Midwifery: XXX			
Service, XXX Hospital, XXX			
Hospital Group/ XXX			
Healthcare Service, CHO			
Number (Registered			
Advanced Practice			
Midwifery XXX service			
recipient)			
Name			

Template 17: Service Level Agreement (Midwifery)

Service Level Agreement (generic template)

candidate Advanced Midwife Practitioner (cAMP) xxx/ Registered Advanced Midwife Practitioner (RAMP) xxx

for xxx

in xxx Hospital/xxx Hospital Group/General Practitioner/Primary Care/Community Healthcare Organisation/Private Organisations.

Section One Introduction

The Service Level Agreement (SLA) is a contract between the service provider(s) and its internal or external clients. The SLA specifies the services that the cAMP/RAMP will provide.

Parties to the Agreement

This SLA is between the:

- Advanced Midwifery and Nursing Practice Governance Group, Directors of Midwifery and Key Stakeholders supporting cAMPs/RAMPs
 and
- Consultant XXX working in XXX Hospital/XXX Hospital Group/General Practitioner/Primary Care/Community Healthcare Organisation/ Private Organisations.

Scope of the Agreement

This SLA documents the following:

- The Director of Midwifery in XXX is the professional line manager to the cAMPs/RAMPs XXX
- The Consultants/Consultant XXX provide clinical supervision and has a clinical reporting agreement with the cAMPs/RAMPs XXX.

Purpose of the Agreement

• To ensure that relevant governance structures and reporting relationships are in place for all parties to support on-going advanced midwifery services and clinical supervision to the cAMPs/RAMPs XXX.

Agreement Commencement Date

- The Advanced Midwifery and Nursing Practice Governance /Key Stakeholders in XXX will agree the commencement date
- The key stakeholders involved in reaching this agreement are detailed in Section 4.

Section Two Service Description

Services provided by the cAMP/RAMP

The SLA sets out the services which will be provided by the cAMP/RAMP XXX as outlined below:

1. XXX

2. XXX

Resources required by the cAMP/RAMP

In order to provide the services as outlined above the cAMP/RAMP XXX will require the following resources:

1. XXX

2. XXX

Key Performance Indicators

The Key Performance Indicators associated with the delivery of these services will be reviewed on XXX by XXX.

Consultant/Consultants XXX

In fitting with a clinical reporting relationship, the Consultant/Consultants XXX, at XXX is responsible for clinically supervising the cAMPs/RAMPs XXX.

Directors of Midwifery

In keeping with midwifery governance, the Director of Midwifery in XXX is responsible for providing professional midwifery governance to the cAMPs/RAMPs.

cAMPs/RAMPs XXX

The cAMPs/RAMPs will adhere to the Code of Professional Conduct and Ethics (NMBI, 2014), Scope of Nursing and Midwifery Practice Framework (NMBI, 2015), their Policies Procedures, Protocols, Guidelines, and other relevant regulations/legislation and best practice guidelines.

Section Three: Communication and Operations

Review Details

A Service Level Review schedule will be defined and agreed periodically to review midwifery/ medical/clinical governance and clinical supervision.

Procedure to make changes to the Agreement

SLA change requests should be made through Advanced Nursing and Midwifery Practice Governance Group/Key Stakeholders/Governance Group if still in place, otherwise requests for changes to SLA should be submitted to XXX.

Section Four: Governance Structure XXX Hospital Group				
Hospital Group Organisational	Overview: Paragraph			
Governance Structure	Outline of Hospitals within the Group:			
	The objectives of the group are to:			
Directorates Structure				
Nursing Governance	Overview: Paragraph			
Paragraph on Hospital where cANPs/RANPs xxx	(Appendix 1: Organogram for xxx Group Governance Structure)			
Paragraph on the Specialism				

Soction Four: Covernance Structure VVV Hechital Group

Section Five: Signatories to the Agreement

Name	Signature	Date	Email
RAMP xxx, xxx Hospital/Service Name			
Consultants, GP/GP's Name			
Chief Director of Nursing and Midwifery: Name			
Director of Midwifery: (service provider) Name			
Director of Nursing/Midwifery: (service recipient) Name			
candidate AMP: Name			
candidate AMP: Name			
candidate AMP: Name			

The Parties to this SLA agree to the contents set out herein