



Findings from the Survey of 2010 Nursing Graduates Where are they now?

December 2011



Changing practice to support service delivery





ISBN 978-1-906218-46-1
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December 2011

Office of the Nursing & Midwifery Services Director
Clinical Strategy and Programmes Directorate
Health Service Executive
Dr Steevens' Hospital
Dublin 8
Ireland

telephone: +353 1 635 2471
email: nursing.services@hse.ie

www.hse.ie



Preface

On behalf of the Health Service Executive (HSE), Office of the Nursing and Midwifery Services Director, I am delighted to publish this report of *Findings from the Survey of the 2010 Nursing and Midwifery Graduates*. This report presents the findings from a national survey entitled: *Survey of 2010 Nursing and Midwifery Graduates: Where are they now?* The survey was conducted among graduates, who completed a Bachelor of Science (BSc)

undergraduate education programme in general/psychiatric/intellectual disability nursing or midwifery in 2010. The survey was administered within twelve months of the completion of BSc undergraduate studies in nursing/midwifery. The report provides information from these graduates about their experience seeking work, initial and current employment status and initial nursing/midwifery practice experience. In this report, the results from the survey are also compared with the nursing graduate survey results from 2007 to 2009 in order to present a trend analysis. Of note, this survey includes the first cohort of graduates from the new four year BSc undergraduate education programme in midwifery which commenced nationally in September 2006.

It is anticipated that this information will assist the Health Service Executive and other stakeholders, to plan and improve the quality of the experience for nurses graduating in the Republic of Ireland. It is also anticipated that the information will facilitate the ongoing development of pre-registration education programmes in nursing/midwifery, ensuring that these programmes are continuously updated to reflect evolving health service requirements and related changes in nursing/midwifery practice.

I would like to thank each graduate who took the time to complete the survey form and the staff in the Higher Education Institutions who provided additional information and assisted with the distribution of the survey. Finally, particular thanks must be paid to Fiona McMahon, HSE Project Manager, Office of the Nursing and Midwifery Services Director for conducting the survey and compiling this report.

Mr Michael Shannon

Health Service Executive

Nursing and Midwifery Services Director

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EXECUTIVE SUMMARY

New graduate nurses and midwives represent a significant contribution to the supply side of the nursing/midwifery resource. Because they are new to the profession, new graduate nurses and midwives have specific needs that should not be overlooked. Of equal importance is maintaining equilibrium between the national nursing and midwifery workforce supply and the demand for new graduate nurses and midwives. This equilibrium requires that sufficient employment opportunities exist for new graduate nurses/midwives and that these opportunities are aligned with current service need in a complex dynamic and evolving healthcare system. There is no doubt that the equilibrium between the supply and demand for nurses/midwives has fluctuated in recent years and that this will continue until the global labour market stabilises.

Consequently, the Health Service Executive (HSE), Office of the Nursing and Midwifery Services Director conducted a fourth annual survey of graduates who completed a BSc undergraduate education programme in general, psychiatric or intellectual disability nursing in 2010. Of note, this survey also includes the first cohort of graduates from the new four year direct entry BSc undergraduate education programme in midwifery. This survey is similar in structure to the one conducted with the 2007, 2008 and 2009 nursing graduates, the results of which are included in this report to provide a comparison (see Chapter 4). In all years, the survey was administered within fourteen months of the completion of BSc undergraduate studies in nursing/midwifery, using a quantitative exploratory survey study method to examine graduates' employment trends, including their experience seeking initial work, their current employment status and their initial nursing/midwifery practice experience.

In 2011, the *Survey of 2010 Nursing and Midwifery Graduates* was distributed to a total of 1,403 graduates who completed a BSc undergraduate education programme in general/psychiatric/intellectual disability nursing or midwifery in 2010, of which 625 (45%) individuals responded (579 nurses, 46 midwives). Since 2009, as a result of the Moratorium on Recruitment and Promotions in the Public Service (as notified by Government effective from the 27 March 2009), changes have occurred in the recruitment practices in hospitals between 2009 and 2011 (HSE HR Circular 010/2009). The purpose of the Moratorium is to facilitate a permanent, structural reduction in the numbers of staff employed in the public service and to contribute significant and ongoing savings to the Exchequer (HSE HR Circular 001/2010).

Despite this the findings of the 2010 graduate nurse/midwife survey were positive and encouraging with the majority of new nurse/midwife graduates finding employment shortly after graduation (90% within eleven weeks of graduation). Traditional sites for hiring new graduates in clinical placement internship hospital sites are no longer the norm. Non-traditional first time hiring sites for new graduates (private hospitals, private nursing/midwifery agencies, hospital nursing/midwifery banks, UK hospitals) recruited vigorously, giving rise to new employment opportunities.

Survey Highlights

Almost every new graduate respondent (98% or n = 610; 565 nurses; 45 midwives) commenced initial employment as a registered nurse/midwife following completion of their BSc undergraduate education studies in nursing/midwifery, the majority of whom 431 (393 nurses; 38 midwives) commenced employment in the Republic of Ireland. Also, at the time of the survey, 605 (561 nurses; 44 midwives) reported current employment as a registered nurse/midwife [i.e. 400 (366 nurses; 34 midwives) in the Republic of Ireland and 205 (195 nurses; 10 midwives) outside the Republic of Ireland].

In addition:

- 64% (391) (368 nurses; 23 midwives) reported that it took less than four weeks to obtain their initial work as a registered nurse/midwife.
- 46% (283) (264 nurses; 19 midwives) reported their experience finding initial employment was the same as expected.
- Of the 431 (393 nurses; 38 midwives) new graduates initially employed in Ireland:
 - 53% (230) (213 nurses; 17 midwives) were employed *outside* the Dublin area.
 - 45% (193) (172 nurses; 21 midwives) were employed *within* the Dublin area.
 - 74% (320) (298 nurses; 22 midwives) reported set full-time work hours of 37.5 to 39 hours or more per week.
 - 73% (318) (291 nurses; 27 midwives) were employed in the public/voluntary health sector.
 - 70% (305) (267 nurses; 38 midwives) were employed in acute hospitals.
 - 80% (347) (320 nurses; 27 midwives) reported receiving an orientation, although there was variability in the length from “one day or less” (40% or n = 174), “between two to five days” (30% or n = 127), “between 6 to 14 days” (6% or n = 28), and “more than 14 days” (4% or n = 18).
 - 75% (259) (240 nurses; 19 midwives) who received an orientation reported it prepared them “satisfactorily” (44% or n = 154), “quite well” (17% or n = 60) or “very well” (13% or n = 45).
- Of the 400 (366 nurses; 34 midwives) who reported current employment in Ireland:
 - 52% (207) (193 nurses; 14 midwives) were employed *outside* of the Dublin area.
 - 46% (185) (165 nurses; 20 midwives) were employed *within* the Dublin area.
 - 68% (271) (253 nurses; 18 midwives) reported set full-time work hours of 37.5 to 39 hours or more per week.
 - 67.5% (270) (246 nurses; 24 midwives) were employed in the public/voluntary health sector.
 - 68% (271) (237 nurses; 34 midwives) were employed in acute hospitals.
 - 6% (24) (21 nurses; 3 midwives) reported seeking registered nurse/midwife employment overseas.
- 1% (4) reported that they were currently unemployed and seeking work as a nurse.
- 1% (5) reported that they were currently employed in a non-nursing position and were seeking work as a nurse.
- 3% (18) reported that they were currently undertaking further education [i.e. nursing/midwifery studies (15), non-nursing/midwifery studies (3)].
- 96% (583) (540 nurses; 43 midwives) reported the BSc undergraduate programme prepared them for their initial position as a nurse/midwife.



- 44% (275) (249 nurses; 26 midwives) respondents provided additional comments to support the preparedness of new graduates in the workplace. They highlighted an opportunity for
 - enhanced education during undergraduate studies on pharmacology, medication management (including the preparation and administration of intravenous medications e.g. IV antibiotics) and IV therapy management;
 - obtaining venepuncture and peripheral intravenous cannulation competency skills during the period of clinical internship;
 - greater clinical practice experience during undergraduate studies obtained in Higher Education Institute clinical laboratories and health service settings;
 - enhanced education during undergraduate studies on communication (patient/ family/medical team), first aid and time management;
 - adequate orientation/induction to the workplace setting (organisation and ward/service area) for all new graduates (including nurses/midwives employed through a private nursing/midwifery agency) assigned to work shifts in acute hospitals and other locations as “relief/backfill/float nurses/midwives”;
 - receiving ample support from an assigned knowledgeable mentor/preceptor/buddy during the initial weeks of work;
 - endorsing the value of sound nursing/midwifery leadership in the unit;
 - encouraging the importance of being encouraged to ask questions and to be able to obtain guidance from experienced nurses/midwives; and
 - enhanced job application assistance and availability of information regarding job opportunities

Although newly qualified nurses/midwives cannot be expected to function at the level of an experienced nurse/midwife, there is an expectation from both employers and new graduates that they need to be “practice ready” to meet the requirements of the current healthcare setting.



INTRODUCTION

Each year, the nursing and midwifery workforce is augmented by new graduate nurses/ midwives, internationally educated nurses/midwives, and nurses/midwives who re-enter the workforce (Blythe et al., 2008; Simoens, Villeneuve & Hurst, 2005). New graduate nurse/midwives represent a significant contribution to the supply side of the nursing/midwifery resource. Because they are new to the profession, new graduate nurses/midwives have specific needs that should not be overlooked. In support of effective planning and the best practice recruitment of nurses/midwives into the national workforce, an understanding of how to support new graduate nurses/midwives in initial practice in the healthcare system is imperative in implementing effective retention strategies. Of equal importance is maintaining equilibrium between the national nursing/midwifery workforce supply and the demand for new graduate nurses/midwives. This equilibrium requires that sufficient employment opportunities exist for new graduates and that these opportunities are aligned with current service need in a complex, dynamic and evolving healthcare system.

There is no doubt that the equilibrium between the supply and demand for nurses/midwives has fluctuated in recent years and that this will continue to fluctuate until the global labour market stabilises. Important factors in nursing recruitment include labour market conditions and the availability of employers to recruit new graduates and integrate them into the workforce. Since 2009, as a result of the Moratorium on Recruitment and Promotions in the Public Service (as notified by Government effective from the 27 March 2009), changes have occurred in the recruitment practices in hospitals between 2009 and 2011 (HSE HR Circular 010/2009). The purpose of the Moratorium is to facilitate a permanent, structural reduction in the numbers of staff employed in the public service and to contribute significant and ongoing savings to the Exchequer (HSE HR Circular 001/2010).

In order to support the delivery of a safe health service, while at the same time continuing to seek reductions in the numbers of individuals employed, the Health Service Executive established a process to devolve the operation of the Moratorium to regional level. This devolution has enabled local clinicians and managers to balance where appropriate, the employment/recruitment of resources (including nursing and midwifery) as required, upholding patient safety as a key priority (HSE HR Circular 001/2010).

The turnover of nurses/midwives is affected by retirement, job changes and personnel leaving the profession or moving between different health service organisations (e.g. hospital to community). During times of recession, unemployment rates increase while labour force participation rates remain unchanged, signifying a loss of individual jobs is the main cause of labour market downturn (Borbely, 2009).

This report presents the findings from a national survey entitled: *Survey of 2010 Nursing and Midwifery Graduates; Where are they now?* The survey was conducted among graduates, who completed a Bachelor of Science (BSc) undergraduate education programme in general/psychiatric/intellectual disability nursing or midwifery in 2010. The survey was administered within twelve months of the completion of BSc undergraduate studies in nursing/midwifery. The report provides information from the graduates about their experience seeking work, initial and current employment status, and initial nursing/midwifery practice experience.



The report also presents:

- the number of designated first year course places in BSc undergraduate education programmes in nursing/midwifery in 2006;
- the number of designated first year course places in BSc undergraduate education programmes in nursing/midwifery in 2010;
- the number of students who commenced BSc undergraduate education programmes in nursing/midwifery in 2010;
- the number of students who graduated from BSc undergraduate education programmes in nursing or midwifery in 2010; and
- Comparative trend analysis highlights from the 2007 - 2010 surveys of nursing graduates.

This report was developed to assist the Health Service Executive and other stakeholders, to plan and improve the quality of the experience for nurses/midwives graduating in the Republic of Ireland. It is also anticipated the information will facilitate the ongoing development of pre-registration education programmes in nursing/midwifery, ensuring that these programmes are continuously updated to reflect evolving health service requirements and related changes in nursing/midwifery practice.

The report is divided into **five sections:**

- **Section 1** provides background information on pre-registration undergraduate nurse/midwife education relevant to the context of the report.
- **Section 2** provides information pertaining to the survey questionnaire tool and data assumptions and analysis.
- **Section 3** outlines the survey findings from a national perspective.
- **Section 4** encapsulates the comparative trend analysis from the 2007 - 2010 surveys of nursing graduates.
- **Section 5** identifies conclusions derived from the national survey findings.

SECTION 1.

Pre-Registration Nurse/Midwife Education - Background Information

This section provides background information on pre-registration undergraduate nurse/midwife education relevant to the context of the report.

During the past decade, there have been tremendous advances in nursing and midwifery education in the Republic of Ireland. Pre-registration nursing and midwifery education has undergone radical change with the transfer of education to the higher education sector. This change was in response to the recommendations of the Commission of Nursing (Government of Ireland, 1998), the evaluation of the Diploma in Nursing Programme (Simmons et al, 1998), the Reports of the Nursing Education Forum (Government of Ireland, 2000), the National Implementation Committee (Department of Health and Children (DoHC), 2002 and 2007), and the Expert Group on Midwifery and Children's Nursing Education (DoHC, 2004).

In 2006, nursing in the Republic of Ireland became a graduate profession with the graduation of students from the new four-year Bachelor of Science (BSc) undergraduate education programmes in general, psychiatric and intellectual disability nursing, which commenced nationally in September 2002. This was followed by the new four-year BSc undergraduate education programme in midwifery (graduating in 2010) and new, 4.5-year BSc undergraduate education programme in integrated children's and general nursing (graduating in 2011) which commenced in September 2006. The development of these programmes was informed and influenced by international trends in pre-registration nursing and midwifery education programmes.

Students enrolled in BSc undergraduate education programmes in nursing/midwifery are fulltime; along with academic teaching they are required to attend specific nursing/midwifery clinical practice placements throughout the programme in order to register nationally and throughout the European Union. The clinical placements facilitate students to develop domains of competence enabling them to become safe, caring and competent practitioners utilising evidence based practice (An Bord Altranais, 2005). Specific educational support roles have been established in the health services to support and monitor students during clinical placement. Students are also allocated a preceptor, who is a registered nurse/midwife to supervise the student's placement and assess the student's competence for practice. During placement, the student also becomes a health service employee involved in service provision (36 week internship in the fourth year including two weeks annual leave).

An Bord Altranais (ABA), the statutory body responsible for the regulation of the practice of nursing and midwifery in the Republic of Ireland, set requirements and standards to govern these programmes (ABA, 2005) which are based on European Union regulations for the education and training of nurses and midwives.



There are currently 13 higher education institutions (HEIs) involved in the delivery of 44 BSc undergraduate education programmes in nursing/midwifery in the Republic of Ireland (see Appendix A). The Higher Education Authority is the statutory planning and development body for higher education and research. The Department of Health and Children through workforce planning processes determine the number of designated course places in BSc undergraduate education programmes' in nursing/midwifery.

The year 2006 was the fifth year for the intake of students to the new four-year Bachelor of Science (BSc) undergraduate education programmes in general, psychiatric and intellectual disability nursing which commenced nationally in September 2002. Of note, the year 2006 was the first year for the intake of students to the new four-year BSc undergraduate education programme in midwifery and to the new four and a half year BSc undergraduate education programme in integrated children's and general nursing, which both commenced nationally in September. The majority of the 2006 intake of students to the BSc in midwifery graduated from the programme in 2010.

In 2006, the number of designated first year course places in BSc undergraduate education programmes in nursing and midwifery was 1880, of which the largest proportion of places was in Trinity College Dublin (293 or 16%) and within the HSE Dublin/Mid-Leinster Administrative Area (598 or 32%). See Tables 1 and 2.

Table 1: Number of designated first year course places in BSc undergraduate education programmes in nursing and midwifery in 2006, by HEI

BSc Undergraduate Education Program	Higher Education Institution													Total
	Athlone Institute of Technology	Dublin City University	Dundalk Institute of Technology	Galway Mayo Institute of Technology	Letterkenny Institute of Technology	National University of Ireland Galway	St Angela's College of Education	Tralee Institute of Technology	Trinity College Dublin	University College Cork	University College Dublin	University of Limerick	Waterford Institute of Technology	
BSc General Nursing	42	102	55	40	30	95	40	60	148	145	180	65	55	1057
BSc Psychiatric Nursing	18	60	25	15	25	20	0	20	45	30	15	30	40	343
BSc Intellectual Disability Nursing	0	50	30	0	20	0	25	0	40	25	0	30	20	240
BSc Children's & General Nursing (Integrated)	0	30	0	0	0	0	0	0	20	20	30	0	0	100
BSc Midwifery	0	0	20	0	0	20	0	0	40	20	20	20	0	140
Total	60	242	130	55	75	135	65	80	293	240	245	145	115	1880
% First Year Students who Commenced Studies	3%	13%	7%	3%	4%	8%	4%	4%	16%	13%	13%	8%	6%	100%

Data Source: Nursing & Midwifery Careers Centre 2006

Table 2: Number of designated first year course places in BSc undergraduate education programmes in nursing and midwifery in 2006, by HSE area

BSc Undergraduate Education Program	HSE Administrative Area				
	Dublin/Mid-Leinster	Dublin/North East	South	West	Total
BSc General Nursing	370	157	260	270	1057
BSc Psychiatric Nursing	78	85	90	90	343
BSc Intellectual Disability Nursing	40	80	45	75	240
BSc Children's & General Nursing (Integrated)	50	30	20	0	100
BSc Midwifery	60	20	20	40	140
Total	598	372	435	475	1880
% Designated First Year Course Places	32%	20%	23%	25%	100%

Data Source: HSE 2011, Office of the Nursing & Midwifery Services Director

In 2009 and 2010, the total number of designated first year course places in BSc undergraduate education programmes in nursing and midwifery was 1570 (a reduction of 310 intake places as compared to 2006-2008). In 2010, the largest proportion of designated first year course places was in Trinity College Dublin (274 or 17%) and within the HSE Dublin/Mid-Leinster Administrative Area (553 or 35%). See Tables 3 and 4.

Table 3: Number of designated first year course places in BSc undergraduate education programmes in nursing/midwifery in 2010, by HEI

BSc Undergraduate Education Program	Higher Education Institution												Total	
	Athlone Institute of Technology	Dublin City University	Dundalk Institute of Technology	Galway Mayo Institute of Technology	Letterkenny Institute of Technology	National University of Ireland Galway	St Angela's College of Education	Tralee Institute of Technology	Trinity College Dublin	University College Cork	University College Dublin	University of Limerick		Waterford Institute of Technology
BSc General Nursing	35	87	40	25	25	60	30	50	139	110	164	50	45	860
BSc Psychiatric Nursing	15	60	20	15	20	15	0	15	45	20	15	20	30	290
BSc Intellectual Disability Nursing	0	40	20	0	15	0	15	0	30	20	0	20	20	180
BSc Children's & General Nursing (Integrated)	0	30	0	0	0	0	0	0	20	20	30	0	0	100
BSc Midwifery	0	0	20	0	0	20	0	0	40	20	20	20	0	140
Total	50	217	100	40	60	95	45	65	274	190	229	110	95	1570
% First Year Students who Commenced Studies	3%	14%	6%	3%	4%	6%	3%	4%	17%	12%	15%	7%	6%	100%

Data Source: Nursing Careers Centre 2010

Table 4: Number of designated first year course places in BSc undergraduate education programmes in nursing/midwifery in 2010, by HSE area

BSc Undergraduate Education Program	HSE Administrative Area				Total
	Dublin/Mid-Leinster	Dublin/North East	South	West	
BSc General Nursing	338	127	205	190	860
BSc Psychiatric Nursing	75	80	65	70	290
BSc Intellectual Disability Nursing	30	60	40	50	180
BSc Children's & General Nursing (Integrated)	50	30	20	0	100
BSc Midwifery	60	20	20	40	140
Total	553	317	350	350	1570
% First Year Students who Commenced Studies	35%	20%	22%	22%	100%

Data Source: HSE 2011, Office of the Nursing and Midwifery Services Director

In 2010, 1588 students actually commenced a BSc undergraduate education programme in nursing/midwifery, which only represents an infinitesimal 0.01 percent (18) over fill of designated first year course places. The largest proportion of students commenced their studies in Trinity College Dublin (274 or 17%) and within the HSE Dublin/Mid-Leinster Administrative Area (552 or 35%). See Tables 5 and 6.

Table 5: Number of students who commenced a BSc undergraduate education programme in nursing/midwifery in 2010, by HEI

BSc Undergraduate Education Program	Higher Education Institution												Total	
	Athlone Institute of Technology	Dublin City University	Dundalk Institute of Technology	Galway Mayo Institute of Technology	Letterkenny Institute of Technology	National University of Ireland Galway	St Angela's College of Education	Tralee Institute of Technology	Trinity College Dublin	University College Cork	University College Dublin	University of Limerick		Waterford Institute of Technology
BSc General Nursing	35	80	39	26	30	63	30	51	140	112	164	50	45	865
BSc Psychiatric Nursing	14	59	19	15	22	16	0	16	43	21	15	20	34	294
BSc Intellectual Disability Nursing	0	34	19	0	20	0	15	0	33	23	0	20	26	190
BSc Children's & General Nursing (Integrated)	0	27	0	0	0	0	0	0	19	20	30	0	0	96
BSc Midwifery	0	0	19	0	0	19	0	0	39	25	20	21	0	143
Total	49	200	96	41	72	98	45	67	274	201	229	111	105	1588
% First Year Students who Commenced Studies	3%	13%	6%	3%	5%	6%	3%	4%	17%	13%	14%	7%	7%	100%

Data Source: HSE 2011, Office of the Nursing & Midwifery Services Director

Table 6: Number of students who commenced a BSc undergraduate education programme in nursing/ midwifery in 2010, by HSE area

BSc Undergraduate Education Program	HSE Administrative Area				
	Dublin/Mid-Leinster	Dublin/North East	South	West	Total
BSc General Nursing	339	119	208	199	865
BSc Psychiatric Nursing	72	78	71	73	294
BSc Intellectual Disability Nursing	33	53	49	55	190
BSc Children's & General Nursing (Integrated)	49	27	20	0	96
BSc Midwifery	59	19	25	40	143
Total	552	296	373	367	1588
% First Year Students who Commenced Studies	35%	19%	23%	23%	100%

Data Source: HSE 2011, Office of the Nursing & Midwifery Services Director



SECTION 2.

Survey Questionnaire, Data Assumptions and Analysis

This section provides information pertaining to the survey questionnaire (i.e. business need, aim and objectives, design, distribution), data assumptions and analysis.

2.1 Business Need

To facilitate the Health Service Executive and others such as Government (i.e. Department of Education and Science, Department of Health and Children), Higher Education Authority, Higher Education Institutions and private/voluntary sector health service providers to better plan and meet the needs of newly qualified nurses/midwives graduating from basic nursing/midwifery BSc undergraduate education programmes in the Republic of Ireland.

2.2 Aim and Objectives

The aim of the survey is to facilitate nursing/midwifery workforce planning and development by capturing employment information from new graduates of nursing/midwifery schools in the Republic of Ireland who graduated from approved nursing programs in 2010.

The objectives of the survey are to:

- ascertain the employment profile of newly graduated nurses/midwives in the Republic of Ireland.
- identify the self-perceived level of preparedness of these new graduates in the workplace in the Republic of Ireland.

2.3 Survey Design

A questionnaire was developed in two sections, as shown in Appendix B.

Section One, composed of three quantitative questions, was designed to collect information from Higher Education Institutions about BSc undergraduate education programmes in nursing/midwifery.

The following information was sought about the programmes:

- the number of students who graduated in 2010 in the programmes;
- the number of designated approved first year student places in 2010 in the programmes; and
- the number of students who actually commenced in 2010 in the programmes.

Section Two, composed of 22 quantitative questions and one qualitative question, was designed to collect information from students who graduated in 2010 from a BSc undergraduate education programme in nursing/midwifery. The qualitative question was designed to provide respondents with an opportunity to write comments to support the preparedness of newly qualified nursing/midwifery graduates in the workplace.

The questionnaire was designed to collect the following types of information:

- name of undergraduate programme completed in 2010;
- registration status with An Bord Altranais;
- experience seeking employment (i.e. first position deciding factors, time taken to obtain employment, expectation in obtaining employment, geographic locations work sought in);
- initial and current employment status (i.e. geographic location, provider type (public/private/voluntary), organisation type [e.g. acute hospital, primary care centre], unit area [e.g. medical/surgical/oncology ward], work hours, undertaking further education, employment in other roles, reasons for not seeking and obtaining employment);
- initial nursing/midwifery practice experience (i.e. education programme preparedness for initial work, length and quality of orientation [buddy/preceptor/mentor shifts], orientation deficiency);
- qualitative comments to support the preparedness of newly qualified nurses/midwives in the workplace.

2.4 Distribution and Response Rate

Section One questionnaires were emailed in 23 March 2011 with an accompanying cover letter (see Appendix C) to the Heads of Departments (Schools of Nursing/Midwifery, Health Sciences) in each of the 13 Higher Education Institutions delivering BSc undergraduate education programmes in nursing/midwifery in 2010. The deadline for receipt of completed questionnaires was 06 April 2011.

Section Two questionnaires were posted to all persons who graduated from a BSc undergraduate education programme in nursing/midwifery in 2010. Each graduate survey package included a survey cover letter (see Appendix D), a Section Two questionnaire with a unique reference code and a self-addressed prepaid postal envelope for completed questionnaires to be returned. Consent was assumed with the return of the completed questionnaire.

Higher Education Institutions facilitated the HSE Office of the Nursing and Midwifery Services Director with the initial distribution of survey packages posted to graduates in the first week of June 2011. Deadline for receipt of completed questionnaires was 22 July 2011. The initial total response rate was 30 percent. In order to increase the initial response rate, a second round of questionnaires was posted to first round non-responders, as enabled by the unique reference code on each questionnaire not returned in the first round. Higher Education Institutions facilitated the HSE Office of the Nursing and Midwifery Services Director with the second distribution of survey packages to the graduates in August 2011, with the 14 October 2011 set as the final deadline for receipt of completed questionnaires. The final total response rate, as shown in Tables 7 through 9 was 45 percent.



Table 7: Number of graduate survey responses and response rates¹, by HEI

Higher Education Institution	Total Number of Graduates Surveyed	Total Number of Questionnaires Returned ¹	Total Response Rate
Athlone Institute of Technology	54	29	54%
Dublin City University	117	41	32%
Dundalk Institute of Technology	104	45	43%
Galway Mayo Institute of Technology	52	24	46%
Tralee Institute of Technology	63	28	44%
Letterkenny Institute of Technology	72	33	46%
National University of Ireland Galway	123	49	40%
St. Angela's College of Education	63	27	43%
Trinity College Dublin	202	96	48%
University College Cork	179	81	45%
University College Dublin	177	87	49%
University of Limerick	124	51	41%
Waterford Institute of Technology	73	34	47%
Total	1403	625	45%

¹Excludes questionnaires returned as "no longer at address/address unknown"

Table 8: Number of graduate survey responses¹, by HSE area

BSc Undergraduate Education Program	HSE Administrative Area				Total
	Dublin/Mid-Leinster	Dublin/North East	South	West	
BSc General Nursing	156	47	93	112	408
BSc Psychiatric Nursing	23	16	29	33	101
BSc Intellectual Disability Nursing	12	16	12	30	70
BSc Midwifery	21	7	9	9	46
Total	212	86	143	184	625
Percentage	34%	14%	23%	29%	100%

¹Excludes questionnaires returned as "no longer at address/address unknown"

Table 9: Graduate survey response rates¹, by HSE area

BSc Undergraduate Education Program	HSE Administrative Area				
	Dublin/Mid-Leinster	Dublin/North East	South	West	Overall
BSc General Nursing	50%	45%	45%	44%	47%
BSc Psychiatric Nursing	38%	31%	46%	40%	39%
BSc Intellectual Disability Nursing	40%	30%	39%	45%	39%
BSc Midwifery	64%	54%	60%	33%	52%
Overall	49%	39%	45%	42%	45%

¹Excludes questionnaires returned as "no longer at address/address unknown"

2.5 Data Analysis

Questionnaire data was merged and analysed using a simple database. Each survey was analysed individually and "cleansed" utilising the experience and expertise of the clinical nurse data analyst. Due to variances across respondents (see Table 9) comparisons were not completed between categories of respondents (i.e. BSc in general nursing; BSc in psychiatric nursing; BSc in intellectual disability nursing; BSc in midwifery). Findings are reported as overall totals.



SECTION 3.

Survey Findings - HSE National Perspective

This section outlines the survey findings from a HSE National Perspective.

3.1 Education Programme / Registration

In 2010, there were 1,403 students who graduated from a four-year BSc undergraduate education programme in general (876 or 63%), psychiatric (258 or 18%), intellectual disability nursing (181 or 13%) or midwifery (88 or 6%). See Table's 10 and 11.

Table 10: Number of students who graduated in 2010 from a BSc undergraduate education programme in nursing/midwifery, by HEI

BSc Undergraduate Education Program	Higher Education Institution													Total	
	Athlone Institute of Technology	Dublin City University	Dundalk Institute of Technology	Galway Mayo Institute of Technology	Letterkenny Institute of Technology	National University of Ireland Galway	St Angela's College of Education	Tralee Institute of Technology	Trinity College Dublin	University College Cork	University College Dublin	University of Limerick	Waterford Institute of Technology	N	%
	BSc General Nursing	37	59	45	39	30	91	44	50	120	116	152	53	40	876
BSc Psychiatric Nursing	17	32	19	13	22	19	0	13	34	28	10	29	22	258	18%
BSc Intellectual Disability Nursing	0	26	27	0	20	0	19	0	30	20	0	28	11	181	13%
BSc Midwifery	0	0	13	0	0	13	0	0	18	15	15	14	0	88	6%
Total	54	117	104	52	72	123	63	63	202	179	177	124	73	1403	100%

Table 11: Number of students who graduated in 2010 from a BSc undergraduate education programme in nursing, by HSE area

BSc Undergraduate Education Program	HSE Administrative Area				Total
	Dublin/Mid-Leinster	Dublin/North East	South	West	
BSc General Nursing	309	104	206	257	876
BSc Psychiatric Nursing	61	51	63	83	258
BSc Intellectual Disability Nursing	30	53	31	67	181
BSc Midwifery	33	13	15	27	88
Total	433	221	315	434	1403
Percentage	31%	16%	22%	31%	100%

Of the 625 total graduate respondents (579 nurses; 46 midwives), only one graduate nurse did not seek registration with An Bord Altranais; 408 (65%) graduated from a BSc in general nursing, 101 (16%) from a BSc in psychiatric nursing; 70 (11%) from a BSc in intellectual disability nursing and 46 (7%) from a BSc in midwifery.

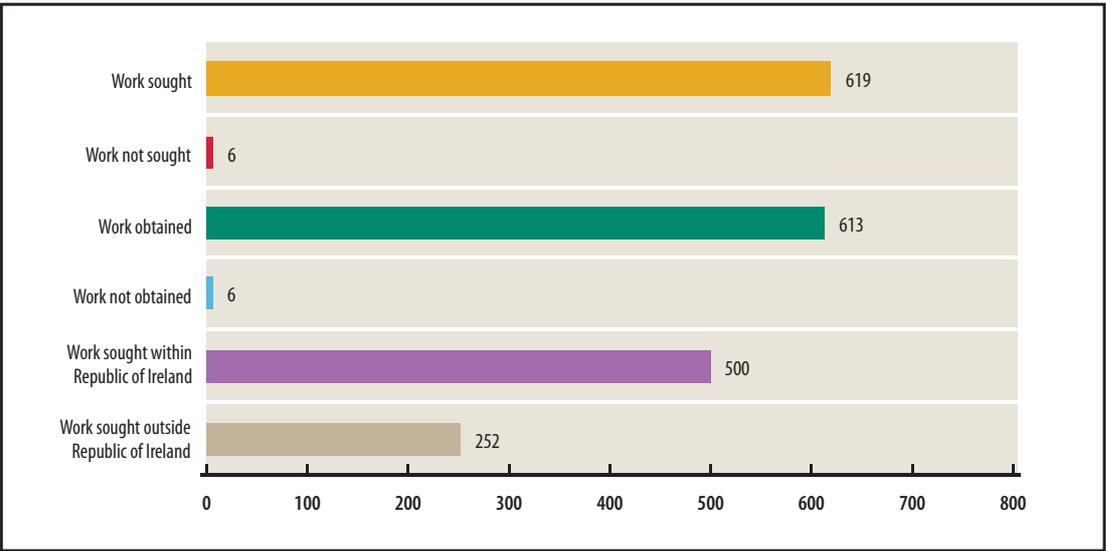
3.2 Experience Seeking Initial Employment

Of the 625 total graduate respondents, 619 (99%) sought initial work as a registered nurse (573) or midwife (46) and of these:

- 613 (99%) obtained initial work as a registered nurse (568) or midwife (45);
- 500 (81%) sought initial work in the Republic of Ireland (460 nurses; 40 midwives); and
- 252 (41%) sought initial work outside the Republic of Ireland, of which 234 (219 nurses; 15 midwives) sought work in Great Britain (Northern Ireland, England, Wales and Scotland), 15 in Australia (15 nurses), two in Canada (2 nurses), and one in United States of America (1 nurse) (see Figure 1).

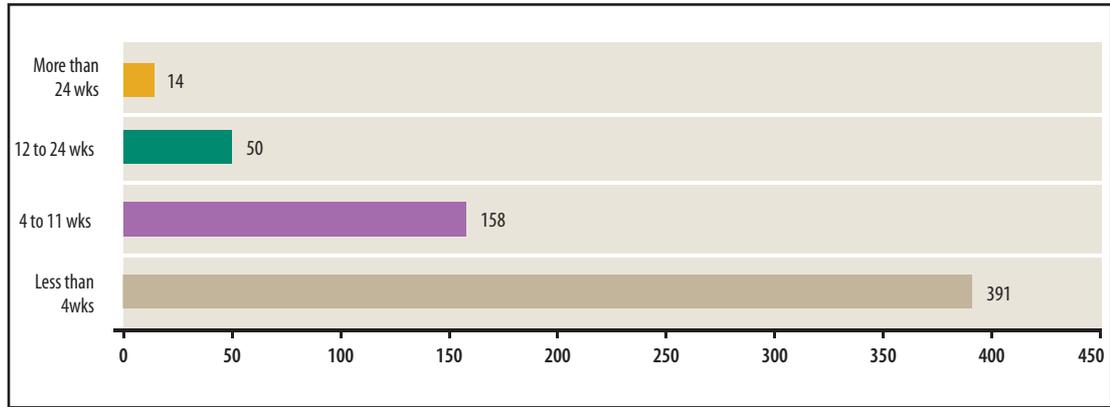
Only six (0.9%) of the 625 total graduate respondents did not seek initial work as a registered nurse. Only two of whom, indicated they were pursuing alternative careers.

Figure 1: Initial registered nurse/midwife work sought/obtained



Of the 613 graduate respondents who obtained initial work as a registered nurse/midwife, 391 (64%) (368 nurses; 23 midwives) obtained work in less than four weeks; 158 (26%) (145 nurses; 13 midwives) obtained work in four to 11 weeks; 50 (8%) (43 nurses; 7 midwives) obtained work in 12 to 24 weeks, and 14 (2%) (12 nurses; 2 midwives) obtained work in more than 24 weeks (see Figure 2).

Figure 2: Length of time taken to obtain initial registered nurse/midwife work



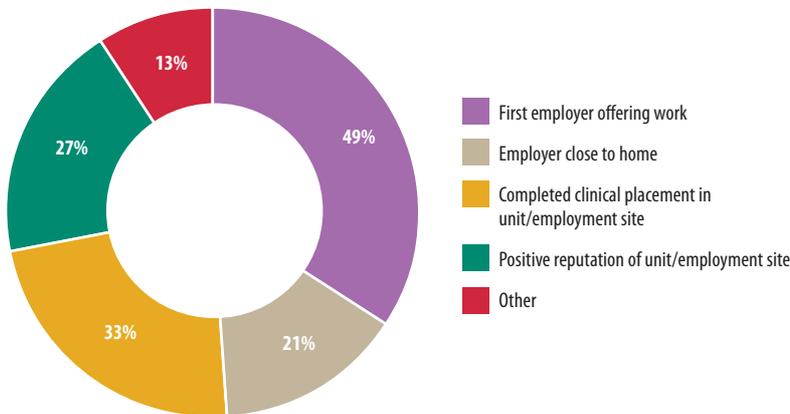
Of the 613 graduate respondents who obtained initial work as a registered nurse/midwife, 383 (62%) (347 nurses; 36 midwives) indicated they received one initial registered nurse/midwife job offer, 163 (27%) (156 nurses; 7 midwives) indicated they received two initial registered nurse/midwife job offers, and 67 (11%) (65 nurses; 2 midwives) indicated they received three or more initial registered nurse/midwife job offers.

The most common factors identified by respondents as influencing acceptance of their initial registered nurse/midwife position were:

- first employer offering work (49%);
- completion of clinical placement in unit or employment site (33%);
- positive reputation of unit or employment site (27%); and
- close proximity of workplace to home (21%).

Other graduate respondents (13%) identified other factors influencing employment decisions, including permanency of employment contract, availability of work in a desired work area or with desired hours, aspiration to work overseas, and educational opportunities (see Figure 3).

Figure 3: Factors influencing acceptance of initial registered nurse/midwife work



Of the 619 graduate respondents who sought initial work as a registered nurse/midwife, 283 (46%) (264 nurses; 19 midwives) said their experience finding initial employment was about the same as expected, 240 (39%) (218 nurses; 22 midwives) said their experience was more difficult, and 96 (15%) (91 nurses; 5 midwives) said it was less difficult than expected.

3.3 Initial Employment Status

Of the 613 graduate respondents who obtained work as a registered nurse/midwife, 610 actually commenced initial employment as a registered nurse (565) or midwife (45) [i.e. 431 (71%) (393 nurses; 38 midwives) in the Republic of Ireland; 179 (29%) outside the Republic of Ireland (172 nurses; 7 midwives)].

Of the 431 graduate respondents who commenced work as a registered nurse (393) or midwife (38) in the Republic of Ireland, in their initial position:

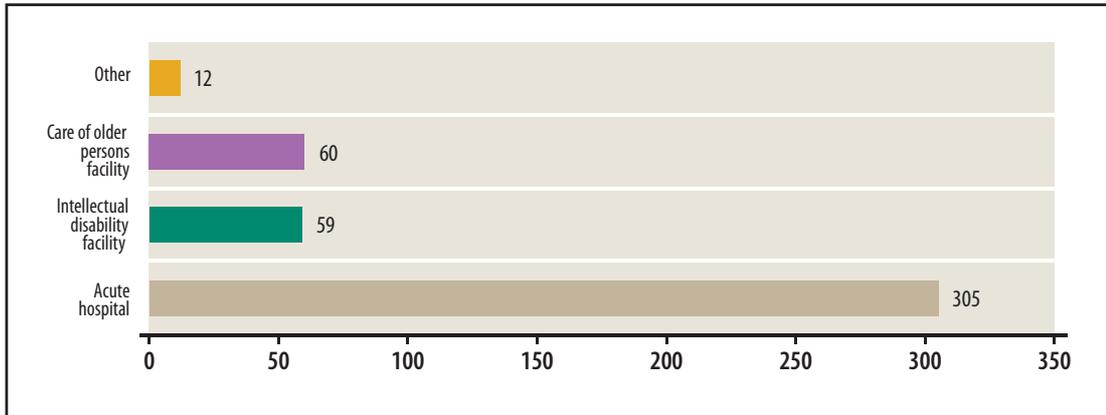
- 230 (53%) (213 nurses; 17 midwives) reported initial employment outside the Dublin area [i.e. Carlow (3), Cavan (1); Clare (2), Cork (76), Donegal (19), Galway (20), Kerry (9), Kildare (7), Kilkenny (4), Laois (7), Leitrim (2), Limerick (12), Louth (9), Mayo (9), Meath (1), Monaghan (1), Offaly (4), Roscommon (2), Sligo (14), South Tipperary (1), Waterford (14), Westmeath (7), Wexford (5), and Wicklow (1)];
- 193 (45%) (172 nurses; 21 midwives) reported initial employment within the Dublin area; and
- 8 (2%) initial employment locations of graduate nurses were not specified.
- 318 (73%) (291 nurses; 27 midwives) were employed by the public/voluntary health service sector;
- 113 (26%) (102 nurses; 11 midwives) were employed by the private health service sector, of which 65 (58%) were employed through private nursing agencies and 48 (42%) were employed by hospitals/clinics/nursing homes.
- 320 (74%) (298 nurses; 22 midwives) had full-time work hours (standard 37.5-39 hours or more per week);
- 56 (13%) (47 nurses; 9 midwives) had casual work hours (no set hours per pay period); and
- 55 (13%) (48 nurses; 7 midwives) had part-time work hours (less than standard 37.5-39 hours per week).

Of the 423 graduate respondents who reported the geographical location (city/town/county) of initial employment, the majority of graduates (383 or 90%) completed studies within that location.

The majority of graduate respondents who commenced registered nurse/midwife work in the Republic of Ireland were employed to work in acute hospitals (305 or 70%) (267 nurses; 38 midwives). See Figure 4.



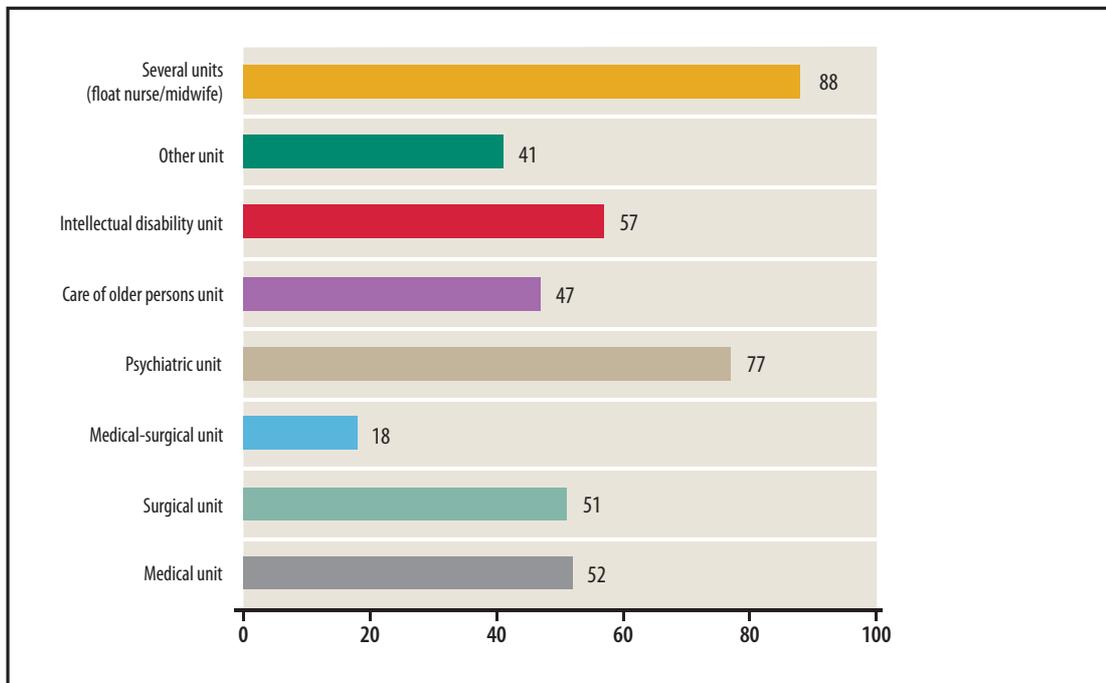
Figure 4: Health service organisation type, initial registered nurse/midwife work



Other: This includes community care (7), GP practice (3), private renal dialysis clinic (1) and pharmaceutical company (1). Acute hospital: This includes acute general, psychiatric and maternity hospitals. Note: One graduate employed through a private nursing agency reported employment both in an acute hospital and care of older persons' nursing home; one graduate employed through a private nursing agency reported employment in an acute hospital, a care of older person's nursing home and an intellectual disability facility; one graduate employed through a private nursing agency reported employment both in an acute hospital and in community care and one graduate employed through a private nursing agency reported employment both in an acute hospital and GP practice.

In their initial position, the majority of graduate nurses worked on one medical/surgical unit (121 or 31%) and almost all of the graduate midwives (37 of 38), worked on one or more maternity unit(s) (i.e. ante natal, post natal, delivery). See Figure 5.

Figure 5: Area of responsibility, initial registered nurse/midwife work



Other unit: This includes postnatal (10), antenatal (8), labour/delivery (4), accident & emergency (6), operating theatres (4), oncology (2), paediatrics (1), renal dialysis (1), intensive care (4), and outpatients (1). Several units (float nurse/midwife): This includes 73 nurses and 15 midwives.

3.4 Current Employment Status

Of the 625 total graduate respondents, 605 (97%) indicated they currently worked as a registered nurse (561) or midwife (44) at the time of the survey [i.e. 400 (66%) (366 nurses; 34 midwives) in the Republic of Ireland; 205 (34%) (195 nurses; 10 midwives) outside the Republic of Ireland].

Eighteen (3%) of the 625 total graduate respondents (all nurses) reported they were undertaking further education studies and of these:

- fifteen were engaged in nursing/midwifery studies (i.e. nine on a full-time basis and six on a part-time basis); and
- three were engaged in non nursing/midwifery studies (i.e. one on a full-time basis and two on a part-time basis).

Only 20 (3%) of the 625 total graduate respondents (all nurses) indicated they did not currently work as a registered nurse at the time of the survey and of these:

- five reported employment in a non-nursing position and indicated they were seeking registered nurse work;
- four indicated they did not intend to nurse and were pursuing alternative careers;
- four reported unemployment and were seeking registered nurse work on a full-time basis (i.e. standard 37.5 to 39 work hours or more per week);
- three were on maternity leave;
- two were engaged in advanced nursing/midwifery studies;
- one opted to be a stay at home mum and
- one was unable to work for medical reasons.

Of the 400 graduate respondents who indicated they currently worked as a registered nurse (366) or midwife (34) in the Republic of Ireland:

- 207 (52%) (193 nurses; 14 midwives) reported current employment outside the Dublin area [i.e. Carlow (3), Clare (2), Cork (68), Donegal (18), Galway (15), Kerry (8), Kildare (7), Kilkenny (3), Laois (7), Limerick (10), Leitrim (2), Louth (8), Mayo (9), Meath (2), Monaghan (2), Offaly (3), Sligo (15), South Tipperary (2), Roscommon (2), Waterford (12), Westmeath (4), Wexford (3), and Wicklow (2)];
- 185 (46%) (165 nurses; 20 midwives) reported current employment within the Dublin area; and
- 8 (2%) current employment locations of graduate nurses were not specified.
- 270 (67.5%) (246 nurses; 24 midwives) were employed by the public/voluntary health service sector;
- 130 (32.5%) (120 nurses; 10 midwives) were employed by the private health service sector, of which 74 (57%) were employed by a private hospital/clinic/nursing home, and 56 (43%) were employed through a private nursing agency;
- 24 (6%) (21 nurses; 3 midwives) were seeking registered nurse/midwife employment abroad, indicating an intent to travel and work;
- 271 (68%) (253 nurses; 18 midwives) were employed on a full-time basis (i.e. standard 37.5 to 39 work hours or more per week);



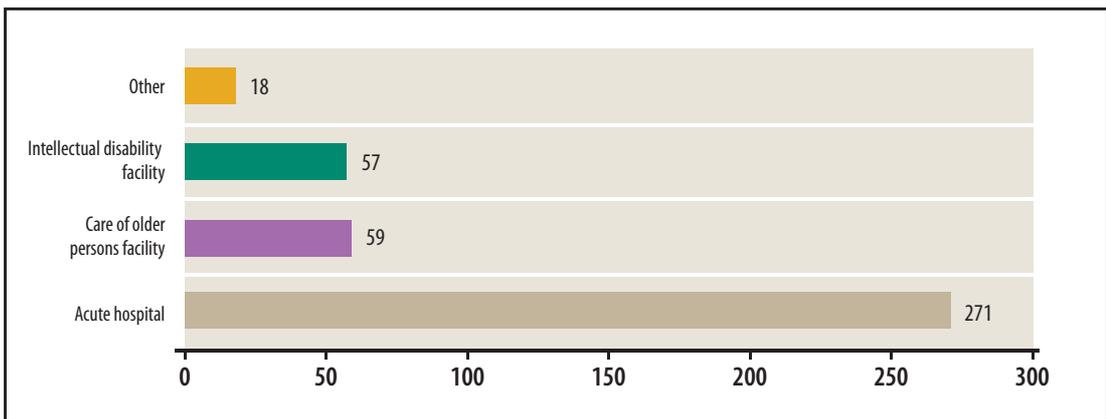
- 73 (18%) (65 nurses; 8 midwives) were employed on a casual basis (i.e. no set work hours per pay period);
- 56 (14%) (48 nurses; 6 midwives) were employed on a part-time basis (i.e. less than standard 37.5 to 39 work hours per week);

Of the 392 graduate respondents who reported the geographical location (city/town/county) of current employment, the majority of graduates (352 or 90%) completed studies in that location.

Of the 205 graduate respondents who indicated they currently worked as a registered nurse (195) or midwife (10) outside of the Republic of Ireland, 192 (182 nurses; 10 midwives) reported employment in the U.K. and 13 nurses in Australia.

The majority of graduate respondents who indicated they currently worked as a registered nurse/midwife in the Republic of Ireland were employed to work in acute hospitals (271 or 68%) (237 nurses; 34 midwives) in their current position. See Figure 6.

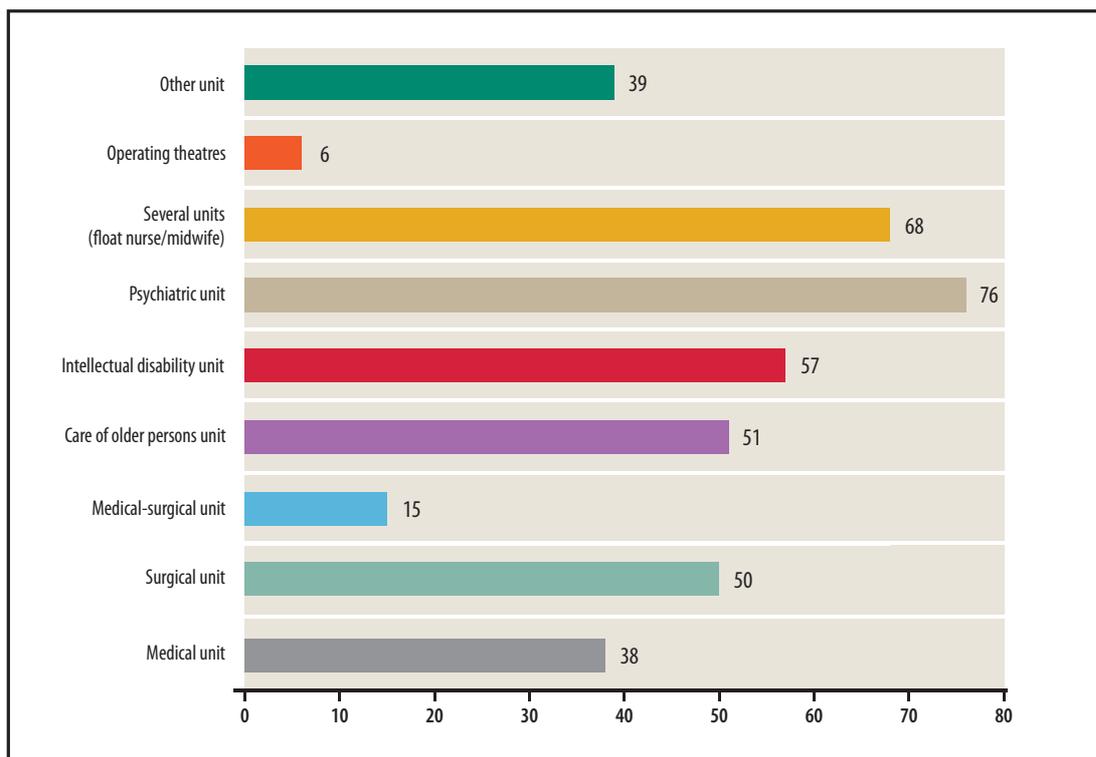
Figure 6: Health service organisation type, current registered nurse/midwife work



Other: This includes community care (13), GP practice (1), private renal dialysis clinic (1), private eating disorder clinic (1), private medical surgical clinic (1) and education institution (1). Acute hospital: This includes acute general, maternity and psychiatric hospitals. Note: Three graduates employed through a private nursing agency reported employment both in an acute hospital and care of older persons' nursing home; one graduate employed through a private nursing agency reported employment both in an acute hospital and community local health office; and one graduate employed through a private nursing agency reported employment both in an acute hospital and in an education institution.

In their current position, the majority of graduate nurses worked on one medical/surgical unit (103 or 28%), and almost all of the graduate midwives (33 of 34), worked on one or more maternity unit(s) (i.e. ante natal, post natal, delivery). See Figure 7.

Figure 7: Area of responsibility, current registered nurse/midwife work



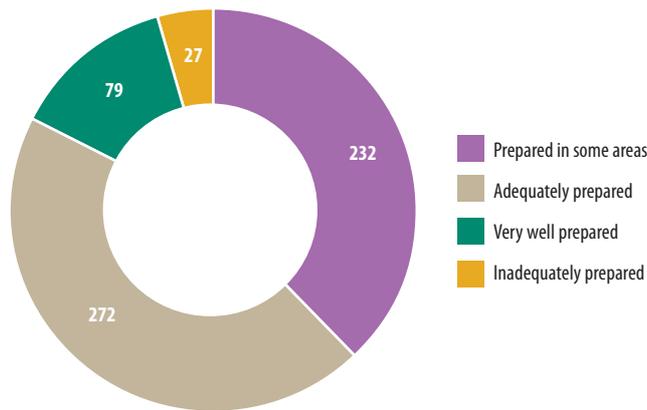
Other unit: This includes oncology (4), intensive care (3), paediatrics (2), accident & emergency (6), renal unit/dialysis (1), antenatal (9), post natal (6), labour/delivery (5), radiology (1), and out patients (2). Several units (float nurse/midwife): This includes 55 nurses and 13 midwives.

3.5 Initial Nursing/Midwifery Practice Experience

Of the 610 graduate respondents who commenced their initial work as a registered nurse/midwife within and outside of the Republic of Ireland:

- 232 (38%) (216 nurses; 16 midwives) indicated the BSc undergraduate education programme prepared them in some areas for their initial position;
- 272 (45%) (248 nurses; 24 midwives) indicated the BSc undergraduate education programme adequately prepared them for their initial position;
- 79 (13%) (76 nurses; 3 midwives) indicated the BSc undergraduate education programme prepared them very well for their initial position; and
- 27 (4%) (25 nurses; 2 midwives) indicated the BSc undergraduate education programme inadequately prepared them for their initial position (see Figure 8).

Figure 8: Perceptions of BSc preparedness for initial registered nurse/midwife work



3.6 Initial Orientation Experience

Of the 431 graduate respondents, who commenced their initial work as a registered nurse (393) or midwife (38) within the Republic of Ireland:

- 174 (40%) (154 nurses; 20 midwives) indicated they received an orientation (buddy/preceptor days) in their initial position, of “one day or less”;
- 127 (30%) (121 nurses; 6 midwives) indicated they received an orientation (buddy/preceptor days) in their initial position, of “between two to five days”;
- 18 (4%) (18 nurses; 0 midwives) indicated they received an orientation (buddy/preceptor days) in their initial position, of “more than 14 days”;
- 84 (20%) (73 nurses; 11 midwives) indicated they did not receive an orientation (buddy/preceptor days) in their initial position; and
- 28 (6%) (27 nurses; 1 midwife) indicated they received an orientation (buddy/preceptor days) in their initial position, of “between six to 14 days”.

Of the 347 graduate respondents who received an orientation in their initial position, 259 (75%) (240 nurses; 19 midwives) indicated their orientation prepared them, “satisfactorily”, “quite well” or “very well,” while 88 (25%) (80 nurses; 8 midwives) indicated their orientation prepared them “unsatisfactorily” or “not very well,” mainly because it was too short (inadequate preceptor time), lacked important content, the level of support from the preceptor was inadequate or there was no designated preceptor(s) allocated (see Figures 9 and 10).

Figure 9: Perceptions of orientation satisfaction, initial registered nurse/midwife work

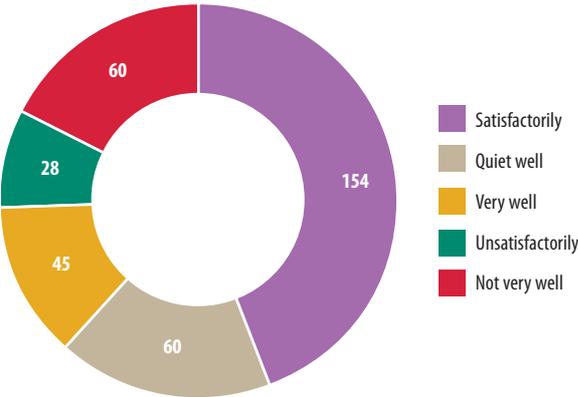
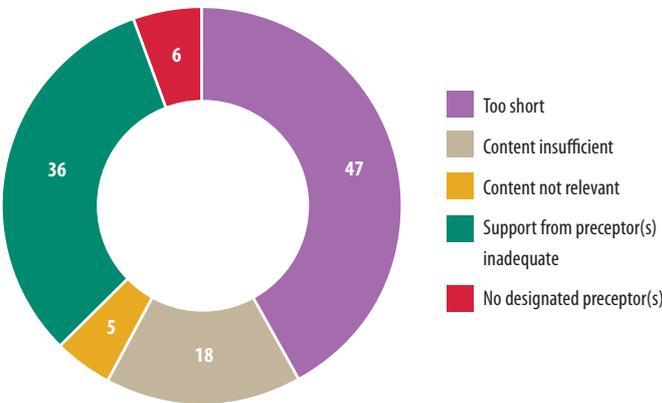


Figure 10: Perceptions of orientation deficiencies, initial registered nurse/midwife work



3.7 Feedback from New Graduates

The experiences of most new registered nurse/midwife graduates were generally very positive, however suggestions were made for modifications to the BSc undergraduate education programmes and initial workplace setting for newly qualified nurses/midwives. It must be noted that these comments are from individual students’ perspectives and that revisions in the delivery of these education programmes may have since occurred. Additionally, many of the suggestions have been made in previous surveys (2007-2009). Some respondents suggested greater clinical practice experience in the BSc undergraduate nursing or midwifery education programmes, although this may have referred to the quality of the experience rather than the amount of time on clinical practice. As noted by An Bord Altranais (2005) the clinical internship placement should support the transition to registered practitioner as a nurse or midwife. Written comments by some new graduates highlighted an opportunity during this period for enhanced skills training and competency development in the following areas: venepuncture and intravenous therapy (including management, cannulation, and the preparation administration of IV antibiotics); pharmacology and medication administration; first aid; communication (patient/family/medical team); and time management. In addition, some new graduates highlighted the need for adequate orientation/induction to the workplace and clinical practice preceptorship/mentorship support during their initial weeks of work.



3.7.1 Positive Student Experiences

A number of graduate respondents availed of the opportunity to highlight some of the favourable experiences they encountered from their BSc undergraduate education studies in nursing/midwifery. In particular, the overall education programme; college/internship hospital support; clinical practice placement; and workplace preparation were praised.

- *"I did nine months internship before qualifying. It prepared me well for life as a staff midwife but only so much can be learnt as a student. I have learnt a huge amount since qualifying through the experiences I have had. Support from other staff has been great."*
- *"I felt prepared and supported when taking up this position. In particular, the skills I learned during my rostered year stood me in good stead for my role as a RGN."*
- *"... my training in Ireland has left me with many skills and the mind-set of professionalism in nursing that I might otherwise not have had. As time goes on I feel more assured that the training I had, prepared me for questioning uncertainties and being a more compassionate nurse to my patients. I have worked with nurses from many different backgrounds and feel thoroughly happy that I was trained in Ireland."*
- *"... it was very useful to use the nine month internship to take your own bay of patients with staff nurse support i.e. checking medications, but to have the responsibility and practice in care of a caseload. I also found it good practice to work with medications and the admission and discharge process."*
- *"I felt well prepared to take up my new position, I found my scope of knowledge was sufficient to deal with most situations or at least adapt."*

3.7.2 Suggestions for the Education Programme

The majority of graduate respondents availed of the opportunity to propose changes to the programme. In this survey respondents commented on the need to learn first aid. The comments have been grouped using the themes of clinical practice placements; medicines management and professional management and career preparation.

Theme: Clinical Practice Placements

In general, respondents were of the view that more clinical placement time was required across the total programme with a focus on developing 'hands on' skills in core clinical settings.

- *"More clinical placement time is needed before the rostered year."*
- *"... longer/more placements would be beneficial in applying theory to practice on the wards."*
- *"I think student midwives should have more hands on placement during their training in order to prepare them for the workforce as newly qualified midwives."*
- *"More practical time in maternity hospital rather than outside placements would be beneficial. Not enough time spent in the hospital in first, second and third year; then in forth year you are treated like staff and expected to work at that standard."*
- *"I feel that internship student psychiatric nurses need to be given more experience in the acute admissions setting."*

This intense focus on practical skill development can also be seen in suggestions seeking skills teaching in the clinical laboratory.

- *"I feel we should have developed our clinical skills more during our training. Knowledge of pharmacology would have benefited. We spent too much time on non-clinical aspects of nursing and while I believe they are fundamental to nursing - half the time could have been allocated to these areas. Skills such as suctioning a patient and other relevant hands on skills should have been allocated more time in college to better prepare us for our clinical skills that are required for patient's needs."*
- *"More time needs to be given to practical lessons. . .with less sociology lectures."*
- *"More practical skills classes in college."*

There was variation in levels of support across clinical placements and during the internship.

- *"Some wards give a lot of support to students and allow them to take charge of patient care and guide them on how to effectively manage them. But other wards don't help students enough and don't allow them the opportunity to learn and develop skills required as a staff nurse."*
- *"Support in some areas was poor; however this may have been due to the lack of staff or staff shortages on the wards."*
- *"More time with a preceptor would be a bonus on the wards."*
- *"Clinical placement coordinators should be more hands on in the ward (i.e. be scheduled to show live catheterisation), as these skills are hard to achieve."*
- *"There needs to be a review of the internship so that more experience in a hands on manner is obtained, more structure is required as some staff nurses are unwilling preceptors and poor teachers."*

Additionally there was a need to develop professional 'responsibility'.

- *"Sometimes students are not given enough responsibility especially towards the end of their intern year. And when qualified they find it very stressful and unable to multitask."*
- *"I feel that the internship year is the best for gaining experience on the wards and feel that maybe students would benefit greater if the responsibility which you are given in your internship was introduced sooner in your course of training."*
- *"In the 4th year internship, students need to take more responsibility in order to be prepared for registration."*

Theme: Medicines Management

There was a general concern regarding the level of pharmacology knowledge including side effects and drug interactions and medication management including drug calculations and the practice of drug administration. This was specifically mentioned within the mental health programme and was a source of anxiety for the newly qualified graduates'. Additionally there was a related issue of intravenous drug therapy and ability to practice IV cannulation and venepuncture.

- *"I think the Irish curriculum needs much more pharmacology knowledge. . . When I started my new job after just graduating it was clear I did not have enough pharmacology knowledge and felt completely out of my depth."*
- *"Not enough time spent on educating graduates about medication rounds etc., need more practical work with dispensing same."*



- *"In relation to the psychiatric nurses programme, students/graduates are not educated enough in relation to medication management, i.e. in particular knowledge of drugs, their effects/side effects, appropriate dosage etc. I believe an appropriate module should be introduced to the programme."*
- *"Introduction of IV training at college level in the last few months before graduating, in my opinion would hugely benefit new graduates as it is an integral part of working as a staff nurse and it doesn't make sense to completely avoid this topic, particularly to perhaps reinforce theory and/or create clinical simulations for graduates to take part in."*
- *"Having absolutely no training in IV therapy proved a major disadvantage to my practice. It contributed hugely to workplace anxiety for me and all of my newly qualified friends in nursing. Experienced nurses on the wards are burdened by extra work that I couldn't do, and some resented this fact. We should be taught these skills on internship."*
- *"It would be very beneficial if we could have more in college about drugs, do our IV courses in college and IV cannulation."*
- *"I think that more responsibility should be given to students while training i.e. IV study days should be done, learning to take bloods should be covered with students in fourth year so that when we qualify we are more prepared for the wards which make it easier for the staff currently working on the ward... students should be allowed to get practice (supervised) taking bloods during their training."*

Theme: Professional Management and Career Preparation

In this theme, suggestions included a greater focus on time and caseload management and team communication.

- *"More emphasis on improving communication with nursing colleagues and patients (role play facility), problem solving and conflict resolution."*
- *"Include preparation on how to communicate with patient relatives and medical teams."*
- *"Include time management preparation - how to organise and prioritise your workload."*

In addition, respondents stated that a focus on skills for career preparation could be included in the programme.

- *"Doing some practice interviews in college and having advice on producing a good CV would be great for new graduates."*
- *"There is a need for more information and advice re career options/job applications."*
- *"Hardly any help was given in relation to interview techniques, many of us had never done an interview before therefore jobs were given to those with best interviews and not the best at the job."*

3.7.3 Suggestions for the First Place of Employment

Written comments by new graduates about the initial workplace setting were abundant and have been grouped using the following themes: guidance to others, the benefit of the familiar, formal support systems, the challenges of new clinical settings.

Theme: Guidance to Others

When asked for comments to support the preparedness of new graduates in the workplace the survey respondents emphasised being continually open to learning and unafraid to ask questions.

- *"Always remember even when qualified, nursing as a profession is an on-going learning process. Don't be afraid to continue to ask questions and take direction and work within your scope of practice. Put yourself forward and be prepared to learn on every new situation you come across. Work as a team member."*
- *"Be flexible and willing. Working within your own scope of practice, as being registered does not mean you are competent. Good team work and voicing opinions. Accept a job for experience as many people turn down jobs in the bid to get the position they want. Continuing education and research."*
- *"Don't be afraid to say you don't know and always ask for help, don't take chances."*
- *"Every hospital/ward/specialty is very different, so no matter where you start work there is a significant teething period. Just keep up to date regarding your specialty and don't be scared to ask questions. Most people are quite understanding.....and don't try to do everything yourself; don't be scared to delegate!!"*

Theme: The Benefit of the Familiar

Of value was obtaining an initial staff nurse position in the same organisation as student clinical placements so that these respondents felt 'lucky' as it allowed confidence building to occur and made sourcing further employment easier.

- *"Transitioning from student nurse to staff nurse was so rapid it was a little daunting! But having been placed for work where I had completed my clinical placement made this transition easier. Excellent supports from colleagues were also a great help."*
- *"I worked on the ward where I completed my final placement in for six months. This was invaluable to me as although the support/orientation to being a staff nurse was informal, it was far superior to the support that I now receive abroad and I am grateful for my training and six months experience in Ireland everyday, as it has set me up for the rest of my career."*

Theme: Formal Support Systems

Respondents noted the importance of formal support systems. These included orientation or induction and preceptorship/mentorship/buddy /clinical nurse support systems that offer feedback for graduates in their initial staff nurse position. However, the availability and quality of such systems varied.

- *"I felt well prepared after training. Having a preceptor and regular appraisals are extremely beneficial to new graduates in the workplace. Staff open to new graduates, can encourage individual development. What really helps new graduates is giving them the knowledge and practical skills to be independent at work."*
- *"I was fortunate to have a great mentorship and support in the hospital which aided me in the transition."*
- *"The most difficult part was that employment could not be sought where we trained. It was hard getting to know and live in another place as well as becoming "the nurse". However, the support and orientation we were given with our current employers was so great and very beneficial that it has really stood to me and I am glad for taking the leap!"*



- *“Following graduation I felt well prepared for my role as a RM in the workplace. I felt the step between student and RM was huge and somewhat daunting at the time. As I was taken on as an agency staff member in the same facility in which the majority of my training took place, orientation to the areas weren't a big issue for me. I feel if I was in a different unit I would need a good orientation. There should be some form of formal support to make the transition a little easier.”*
- *“Support from mentors can be varied. The workload is increasing all the time and you may feel lost if you are unable to request support.”*
- *“Better orientation, I would recommend that one to two weeks of working post-graduation; should be supervised by a preceptor so that the newly qualified nurse knows that she/he has someone to go to for support and advice.”*
- *“Should be more support in practice area for newly qualified nurses/midwives - a phased in approach rather than in at the deep end.”*
- *“As an agency nurse, there was no preceptor/buddy shifts - you were given patients and got on with it.”*
- *“There was no orientation once registered as a nurse (initial job). This was due to staff shortages. You just had to go in and get on with the job. If you were unsure of anything you would just double check your judgement with a senior member of staff whether it be a nurse manager or staff nurse. In my second and current employment we had one week of orientation but once on the ward it was the same as above. It was harder to settle into a different routine of a new hospital but after two to three weeks you find your feet. There are also many resources to continue professional development but most of the knowledge of nursing comes within your experience of nursing patients with specific diagnoses.”*
- *“Staff working in the facility should be given training on orientation of new staff. New staff should be given at least a week to familiarise themselves with the unit, including proper induction to clients, policies and procedures (i.e. local) on other staff.”*

Those working as agency staff seemed to be particularly vulnerable to lacking formal support.

- *“I had to work as an agency nurse. It was hard to get used to the hospital when I was on a different ward every day and received no orientation to the hospital.”*
- *“I work with an agency and get no orientation on arrival to a hospital...”*
- *“A work orientation programme should always be in place even for agency staff.”*

Theme: The Challenges of New Clinical Settings

A number of graduates availed of the opportunity to highlight some of the challenges they encountered during the initial staff nurse position either working abroad or encountering new clinical setting through agency or bank working.

- *“As an Irish new graduate working in England, I find we are much better prepared than the English new graduates. The only shock going from student to staff nurse is the nurse patient ratio of 1:8 with less “team nursing” approach as the Irish system... We see patients who are very ill on the wards in England who would have been nursed in ITU in Ireland. The addition of outreach nurses in the UK make this possible which gives us a new level of skills.”*

- *“My initial and current employment in London is for the NHS in a neonatal unit. My employers were very supportive as they knew I had graduated as an RGN and was entering a specialist area.”*
- *“I found forensic mental health nursing in the UK challenging as I was expected to work as a nurse in charge almost immediately after starting the post. Also, this environment was particularly stressful due to the nature of the client’s level of self-harm or risk of harm to others, and staff shortages.”*
- *“After finishing my nursing studies I wanted to continue working in my training hospital to gain experience. I appreciated being given a position on the internal nursing bank but felt it was inappropriate for me as a newly graduate to be sent from one area to another from day to day, sometimes even being in two different wards on one day. I did not feel I was gaining any experience from this and therefore applied for a permanent position in the UK, for which I was accepted. I gained great experience and had support working on the one ward in England. I felt I had no support on the nursing bank, also had no preceptorship as a newly grad.”*
- *“As a newly qualified RGN with an agency. I was put in an oncology ward when I first qualified, even though I never worked in oncology before...”*



SECTION 4.

Four Year Comparative Trend Analysis - Surveys of Nursing Graduates (2007-2010)

This section encapsulates the four-year comparative trend analysis from the 2007, 2008, 2009 and 2010 surveys of nursing graduates. A comparison of the four years of graduate nurse data from the BSc undergraduate education programmes in general, psychiatric and intellectual disability nursing allows for an examination of shifting and emerging trends.

4.1. Survey Response Rate and Number of Respondents

Between 2007 and 2009, the total survey response rate increased by 14 percent [i.e. from 33 percent in 2007 to 47 percent in 2009]. In 2010, the survey response rate of graduate nurse respondents was 44 percent. [Note: In 2010, the overall survey response rate was 45 percent, with the inclusion of the first cohort of graduate midwife respondents]. Any limitation of this survey response is counteracted by the strength of a consistent response rate across the four survey years, which enables comparative trends to emerge.

From 2007 to 2009, the total number of survey respondents increased by 215 respondents [i.e. from 453 respondents in 2007 to 668 in 2009]. In 2010, the number of graduate nurse survey respondents was 579. [Note: In 2010, the overall number of graduate survey respondents was 625, with the inclusion 46 graduate midwife respondents].

Not all graduates who could take the survey actually did. During each survey year, participants were encouraged but not required to complete the new graduate survey and reasons for non response are not proffered.

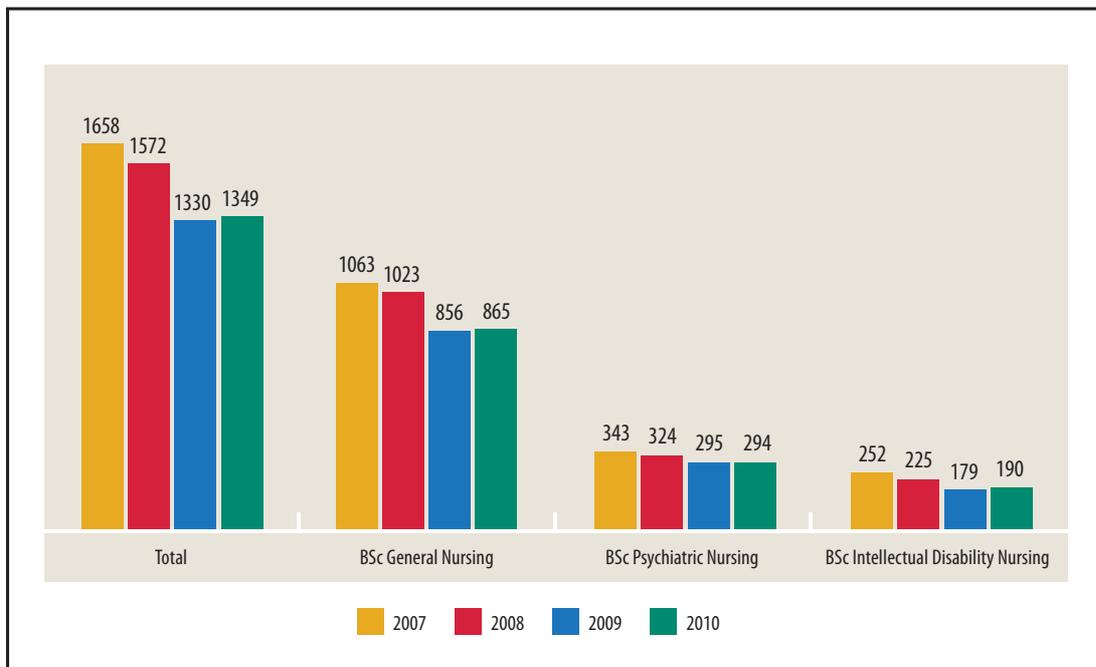
4.2 Education Programme / Registration

During 2007 and 2008, the total number of designated first year course places in the four-year BSc undergraduate education programmes in general, psychiatric and intellectual disability nursing remained constant at 1640 places for both years [i.e. BSc in general nursing (1057 places); BSc in psychiatric nursing (343 places); BSc in intellectual disability nursing (240 places)].

In 2009 and 2010, there was a reduction of 310 first year intake places to 1570 places for both years [i.e. BSc in general nursing (197 places); BSc in psychiatric nursing (60 places); BSc in intellectual disability nursing (53 places)]. The number of places was reduced to achieve economy savings of €1.65million approximately in 2009 and €3.3 million from 2010 onwards and to impinge on those areas not experiencing nurse shortages.

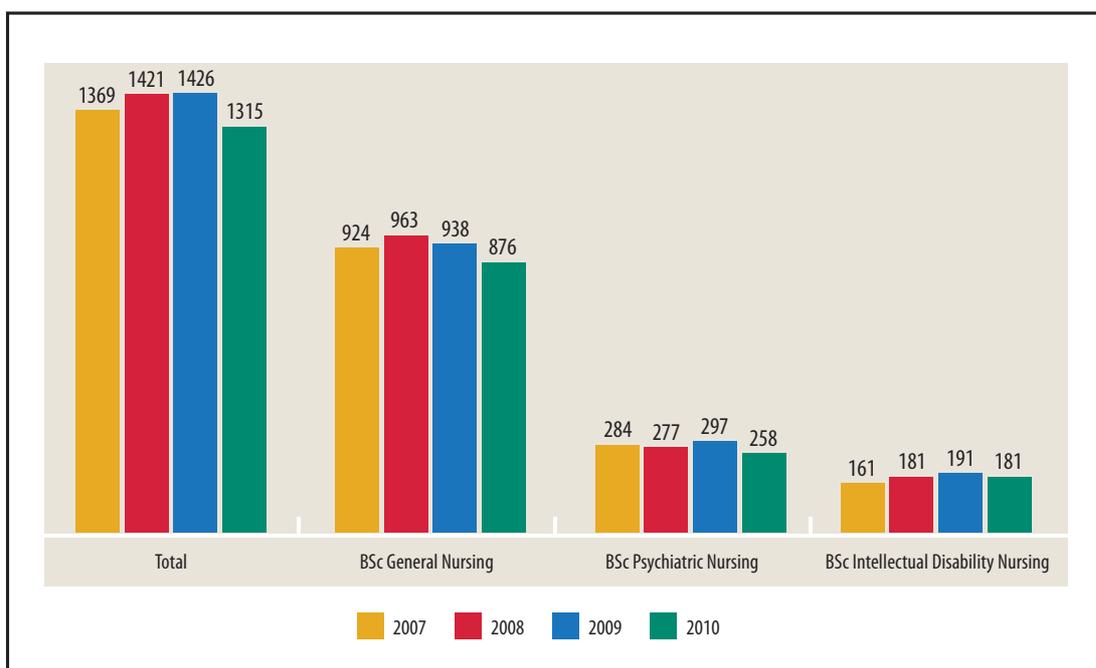
From 2007 to 2010, the total number of first year intake of students commencing studies in the four-year BSc undergraduate education programmes in general, psychiatric and intellectual disability nursing declined by 309 - 328 students. This decline was largely attributed to the reduction of 310 designated first year intake places in 2009 (see Figure 11).

Figure 11: Number of students who commenced a BSc undergraduate education programme in general, psychiatric or intellectual disability nursing (2007-2010)



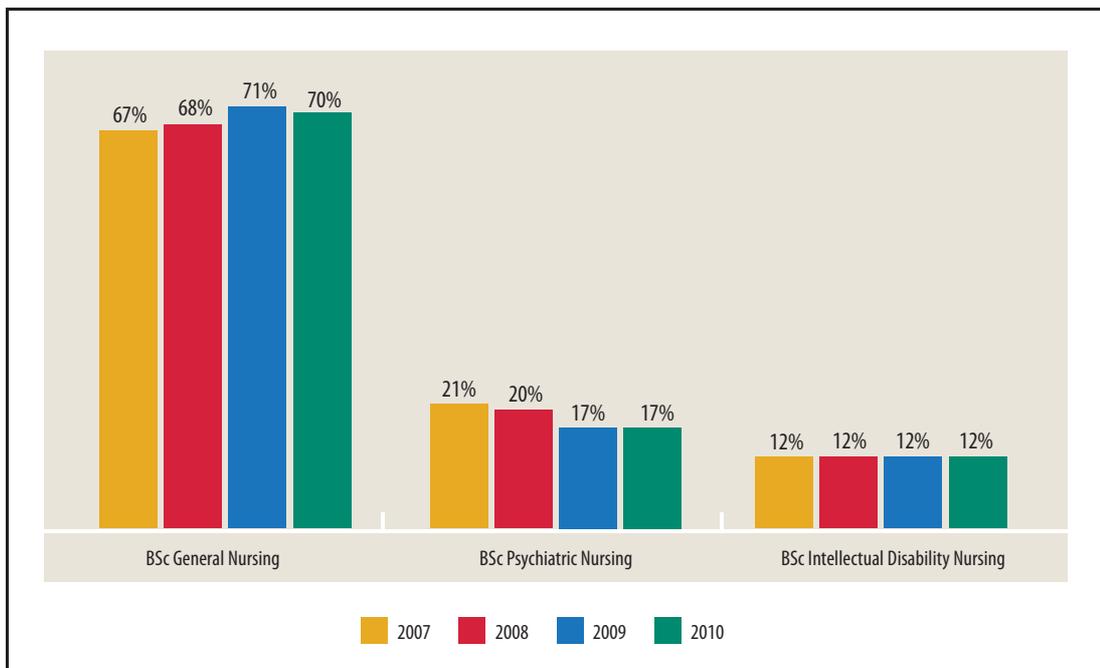
Between 2007 and 2010, the total number of students graduating from the four-year BSc undergraduate education programmes in general, psychiatric and intellectual disability nursing fluctuated by 111 graduates (see Figure 12).

Figure 12: Number of students who graduated from a BSc undergraduate education programme in general, psychiatric or intellectual disability nursing (2007-2010)



From 2007 to 2010, the percentage of graduate respondents who sought An Bord Altranais registration remained at 99 percent. During these four years, the percentage of graduate respondents who graduated from a BSc in general nursing, a BSc in psychiatric nursing and from a BSc in intellectual disability nursing remained steady (see Figure 13).

Figure 13: Percentage of graduate survey respondents (2007-2010), by BSc undergraduate education programme in nursing



4.3 Experience Seeking Initial Employment

From 2007 to 2010, the percentage of graduate respondents who sought initial work as a registered nurse remained at 99 percent. As compared to 2007 and 2008, where the majority of the one percent of graduate respondents who did not seek initial work as a registered nurse indicated that they were pursuing alternative careers. In both 2009 and 2010, the majority of the one percent of graduate respondents who did not seek initial work as a registered nurse indicated that they planned to seek work as a registered nurse in the future.

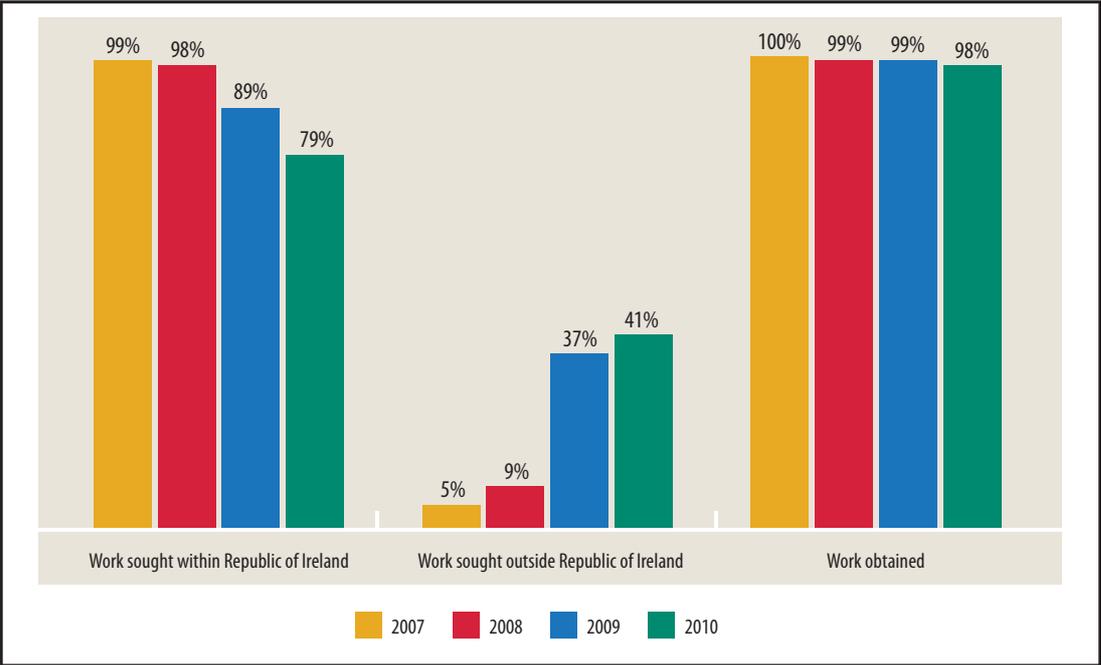
From 2007 to 2010, the most notable changes relating to the country in which graduate respondents sought initial work as a registered nurse were the:

- 36% increase in the percentage of graduates who sought initial employment outside the Republic of Ireland, and
- 20% decrease in the percentage of graduates who sought initial employment within the Republic of Ireland (see Figure 14).

These trends suggest that employment opportunities in the Republic of Ireland for new graduate nurses are on the decrease.

In contrast to the significant changes relating to the country in which graduate respondents sought initial work as a registered nurse (2007-2010), the percentage of graduate respondents who actually obtained initial work as a registered nurse during this period only decreased by two percent or remained the same (see Figure 14). This trend may indicate that employment opportunities for new graduate nurses remain stable globally, without giving consideration to the employment country.

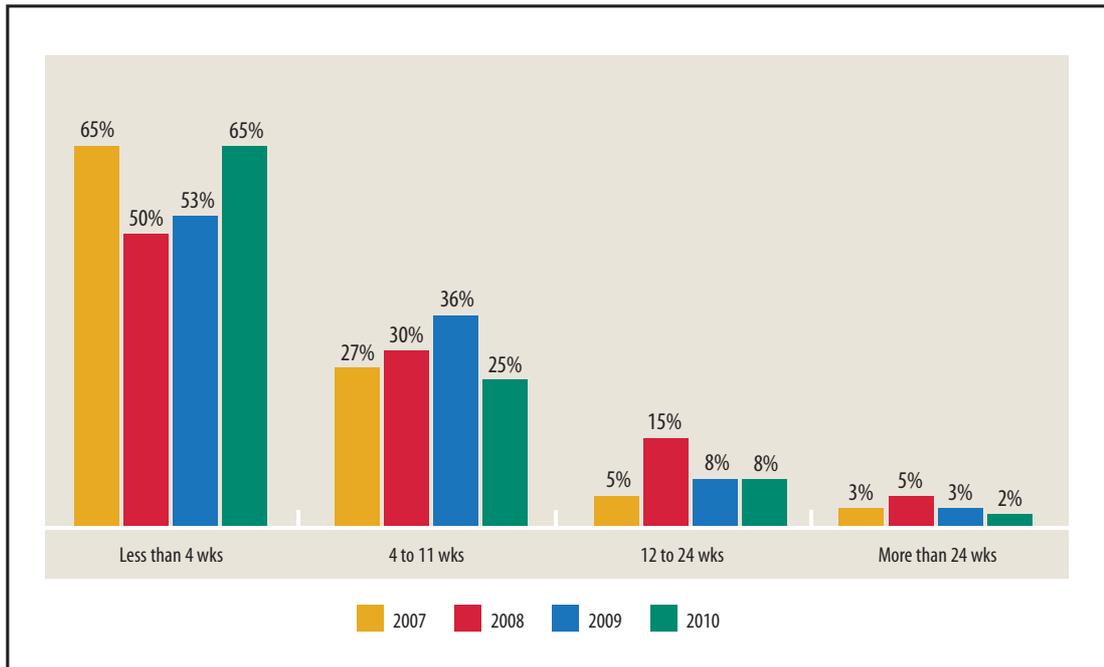
Figure 14: Initial registered nurse work sought/obtained (2007-2010)



From 2007 to 2009, the percentage of graduate respondents obtaining initial registered nurse work in 4 to 11 weeks increased by nine percent, while in 2010, the percentage of graduate respondents obtaining initial registered nurse work in the same period decreased by eleven percent as compared to 2009. As compared to 2009, in 2010, the percentage of graduate respondents obtaining initial registered nurse work in less than four weeks increased by twelve percent (see Figure 15).

As compared to 2009, in 2010, the 12 percent increase in the percentage of graduate respondents who received one job offer, combined with the four year trend increase in the percentage of graduate respondents seeking initial work *outside* of the Republic of Ireland might be attributed to an increase in nursing recruitment agency (or overseas employer's) activity seeking to employ new graduate nurses to nursing jobs *outside* of the Republic of Ireland.

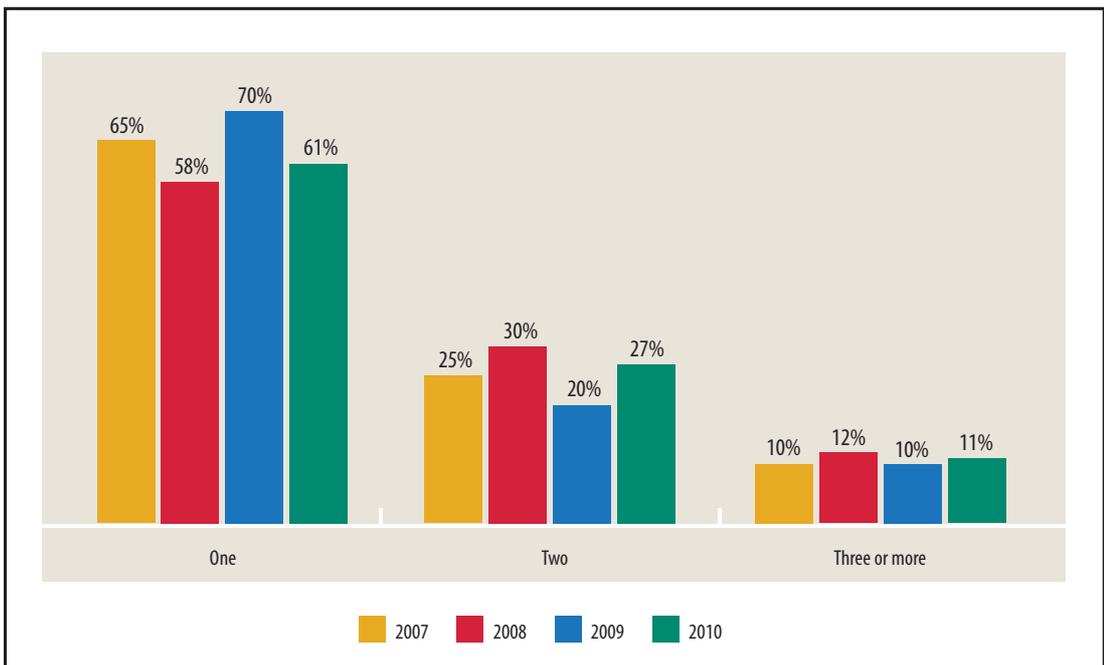
Figure 15: Length of time taken to obtain initial registered nurse work (2007-2010)



From 2007 to 2010, the percentage of graduate respondents who received a different number of initial registered nurse job offers fluctuated (see Figure 16).

The fluctuations in the percentage of graduate respondents who received one or two initial jobs, combined with the increase in the percentage of graduate respondents who sought initial employment outside of the Republic of Ireland suggest that there have been on-going changes in the recruitment practices of employers hiring new graduate nurses (for employment within and outside of the Republic of Ireland).

Figure 16: Initial registered nurse job offers (2007-2010)



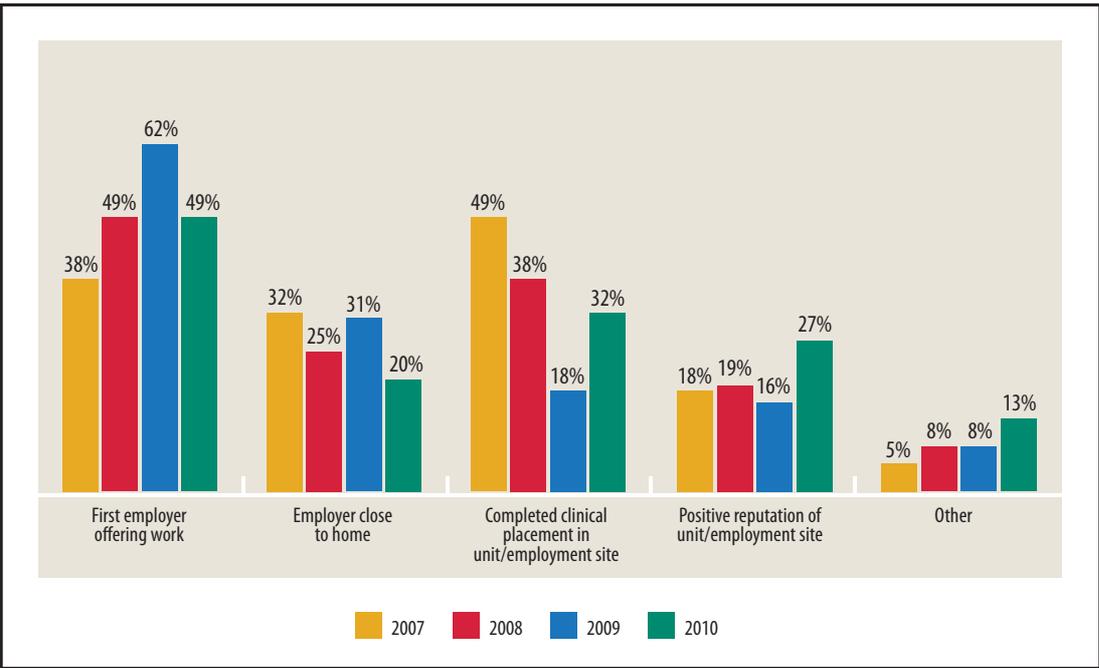
Between 2007 and 2009, the most notable changes relating to common factors identified by graduate respondents as influencing acceptance of their initial registered nurse position were the:

- 31% decrease in the percentage of factors attributed to the *completion of clinical placement in unit or employment site*, and
- 24% increase in the percentage of factors attributed to the *first employer offering work* (see Figure 27).

However as compared to 2009, in 2010, the notable percentage changes relating to common factors identified by graduate respondents as influencing acceptance of their initial registered nurse position were the:

- 14% increase in the percentage of factors attributed to the *completion of clinical placement in unit or employment site*,
- 13% decrease in the percentage of factors attributed to the *first employer offering work*, and
- 11% increase in the percentage of factors attributed to the *positive reputation of the unit or employment site* (see Figure 17).

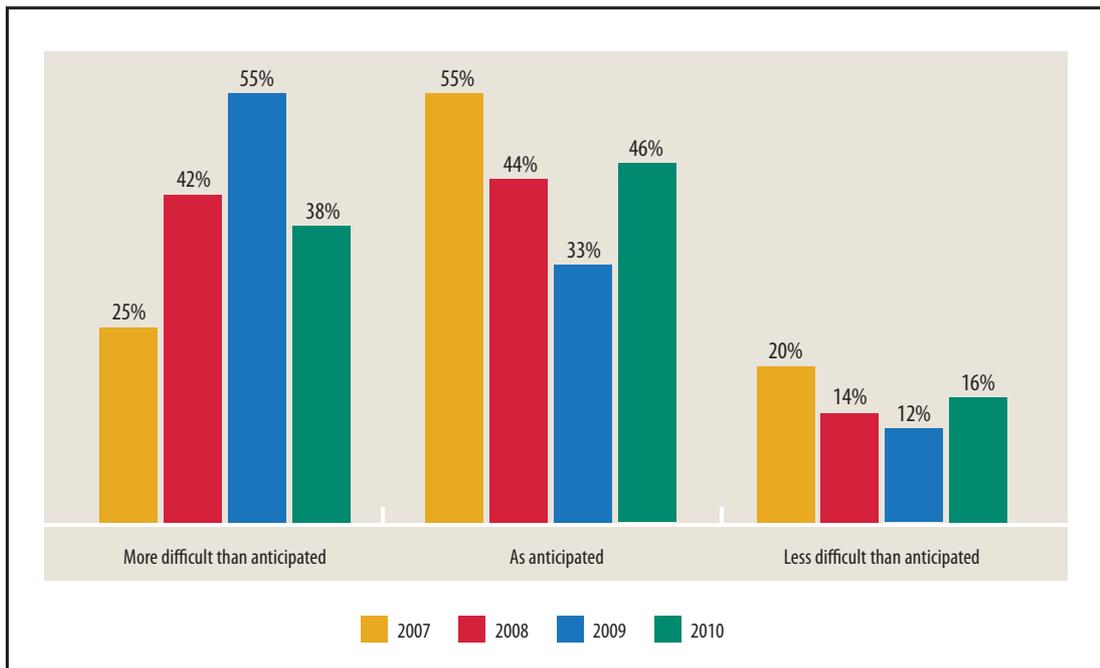
Figure 17: Factors influencing acceptance of initial registered nurse work (2007-2010)



Other: This includes educational opportunities, availability of work in a desired work area or with desired work hours, aspiration to work overseas, and permanency of employment contract.

From 2007 to 2010, there were notable fluctuations in the level of expectation, which graduate respondents encountered when seeking initial registered nurse work (see Figure 18).

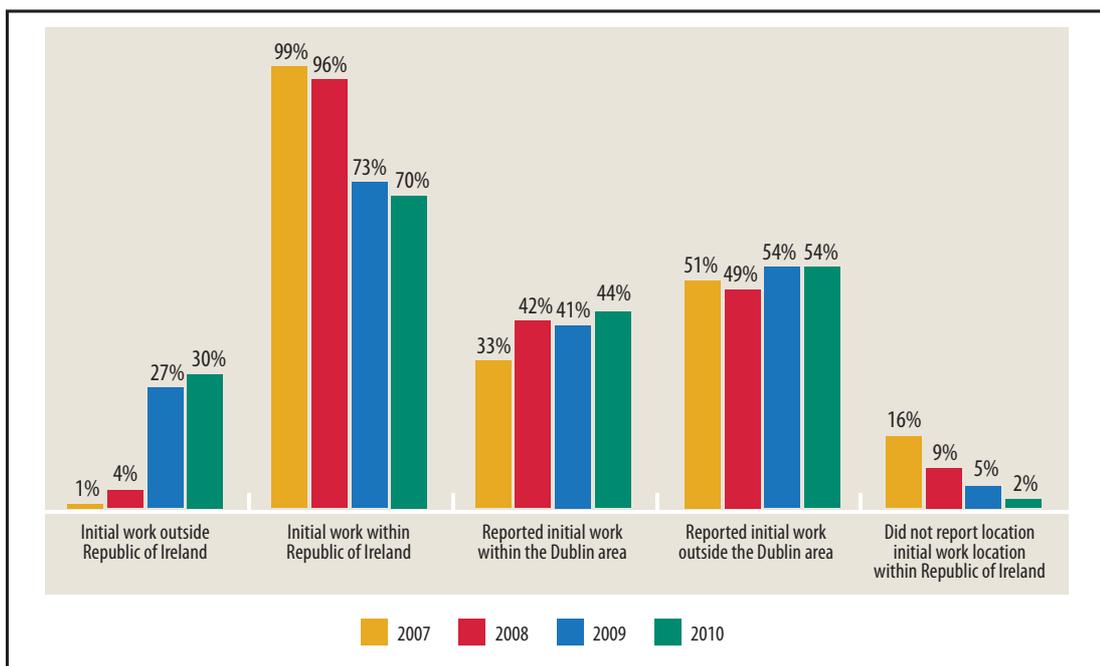
Figure 18: Expectations seeking initial registered nurse work (2007-2010)



4.4 Initial Employment Status

From 2007 to 2010, the percentage of graduate respondents who actually commenced initial employment as a registered nurse remained constant at 98 percent for all years. Over the same period, the percent of graduate respondents who commenced initial employment *within* the Republic of Ireland decreased by 29 percent, while the percent of graduates who commenced initial employment *outside* the Republic of Ireland increased by 29 percent. See Figure 19. These trends suggest that employment opportunities for new graduate nurses *within* the Republic of Ireland are on the decrease.

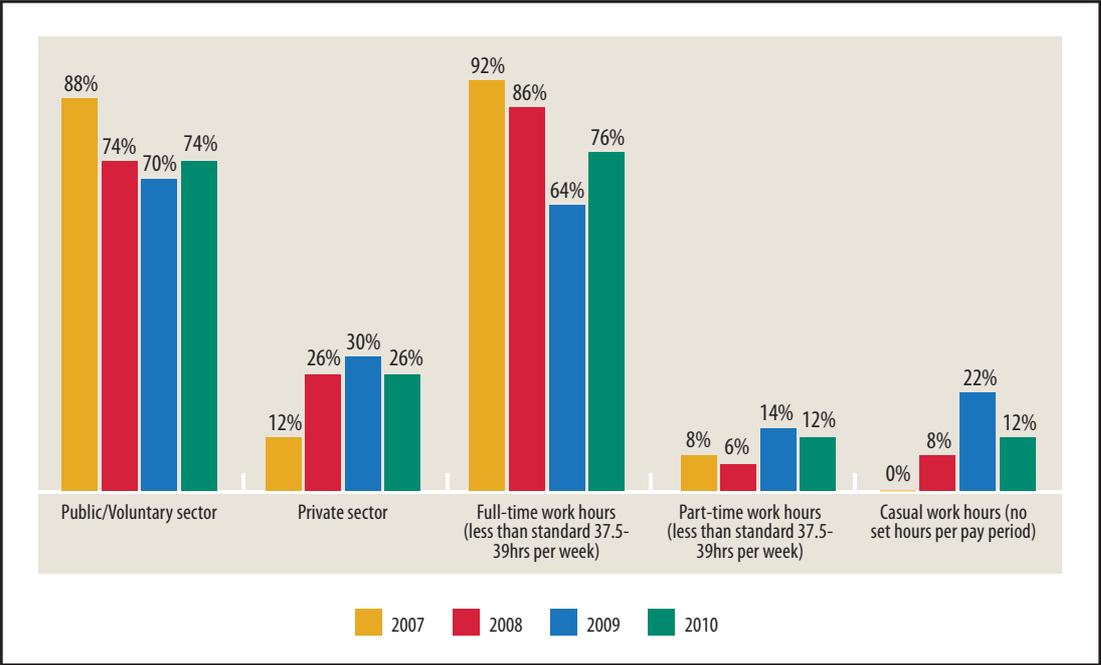
Figure 19: Employment country, initial registered nurse work (2007-2010)



In all years, of the graduate respondents who commenced registered nurse work in the Republic of Ireland, the majority of graduates were employed by the public/voluntary health sector and had work hours of 37.5-39 hours of more per week in their initial position (see Figure 20).

From 2007 to 2010, there were notable fluctuations relating to the type of health service provider within which the graduate respondents commenced their initial work and their type of work hours. These trends indicate ongoing changes in the employment opportunities for new graduate nurses to work in the public/voluntary/private sector and also in the availability of full-time work hours.

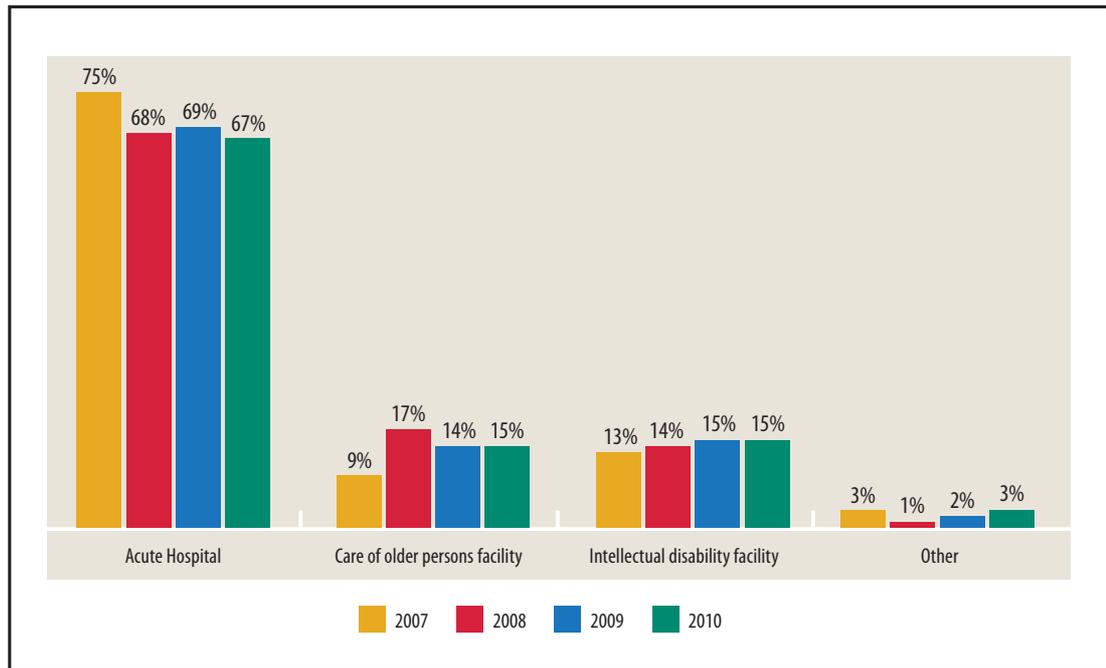
Figure 20: Health service provider type and work hours, initial registered nurse work (2007-2010)



In all years, of the graduate respondents who commenced registered nurse work in the Republic of Ireland, the majority of graduate respondents were employed to work in acute hospitals and on medical/surgical units in their initial position (see Figures 21 and 22).

From 2007 to 2010, the most notable change relating to the type of health service organisation within which the graduate respondents worked in their initial position was the eight percent decrease in the percentage of graduate respondents employed to work in acute hospitals. This trend suggests that employment opportunities for new graduates to work in acute hospitals are on the decrease.

Figure 21: Health service organisation type, initial registered nurse work (2007-2010)

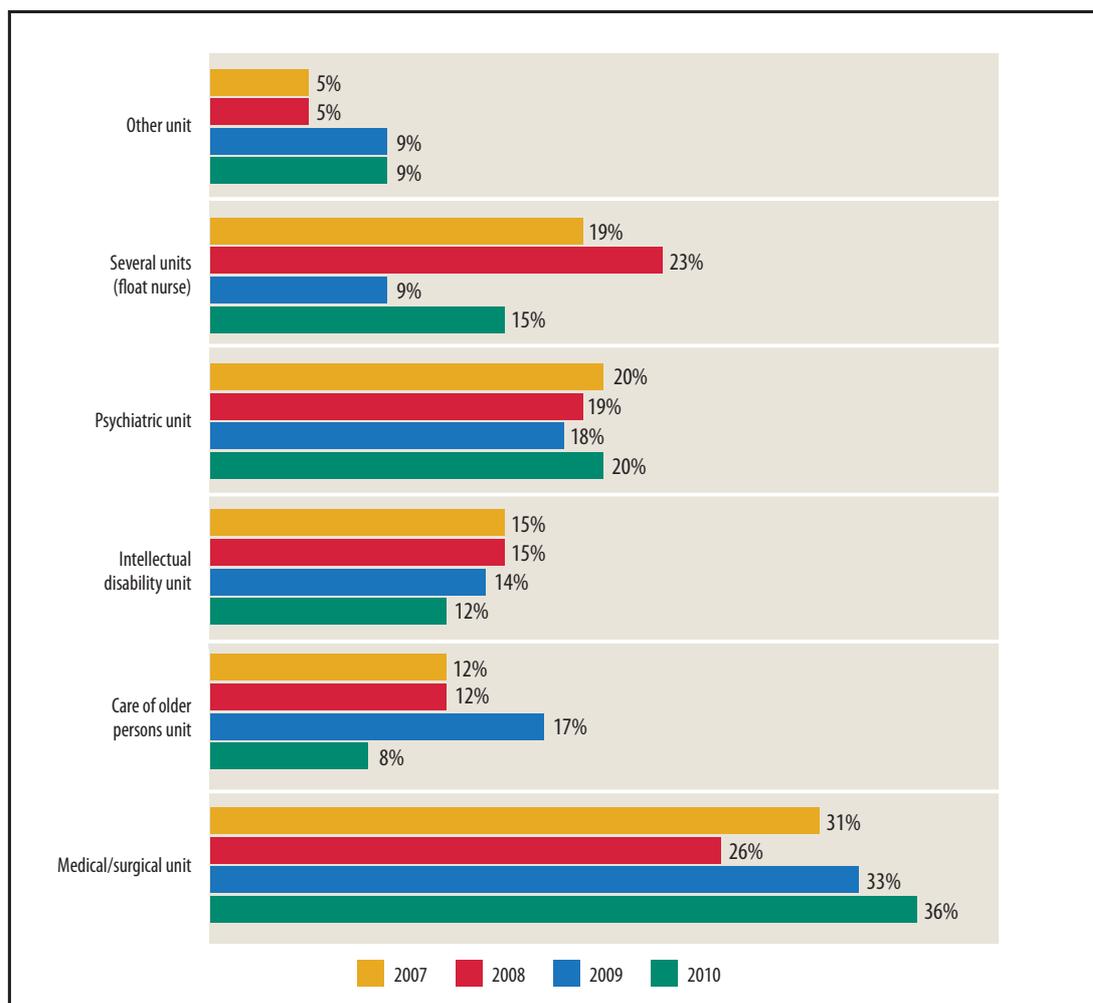


Acute hospital: This includes general and psychiatric hospitals. Other: This includes community care, hospice, educational facilities, GP practice, children's home, MS care centre, rehabilitation and prison services.

From 2007 to 2010, the most notable changes relating to the area of responsibility within which graduate respondents commenced their initial work in the Republic of Ireland were the fluctuations in the percentages of graduate respondents employed to work in several units (i.e. float nurses) and in care of the older persons units (see Figure 22).

These trends suggest that there have been ongoing changes in employment opportunities for new graduate nurses to work in several units. The increase in the percentage of graduate respondents employed to work in several units in 2009 and 2010 may be attributed to the establishment of hospital nursing banks (relief/backfill/float nurse pools) within the Dublin area and increased employment of 'float nurses' availed through private nursing agencies in the Republic of Ireland.

Figure 22: Area of responsibility, initial registered nurse work (2007-2010)



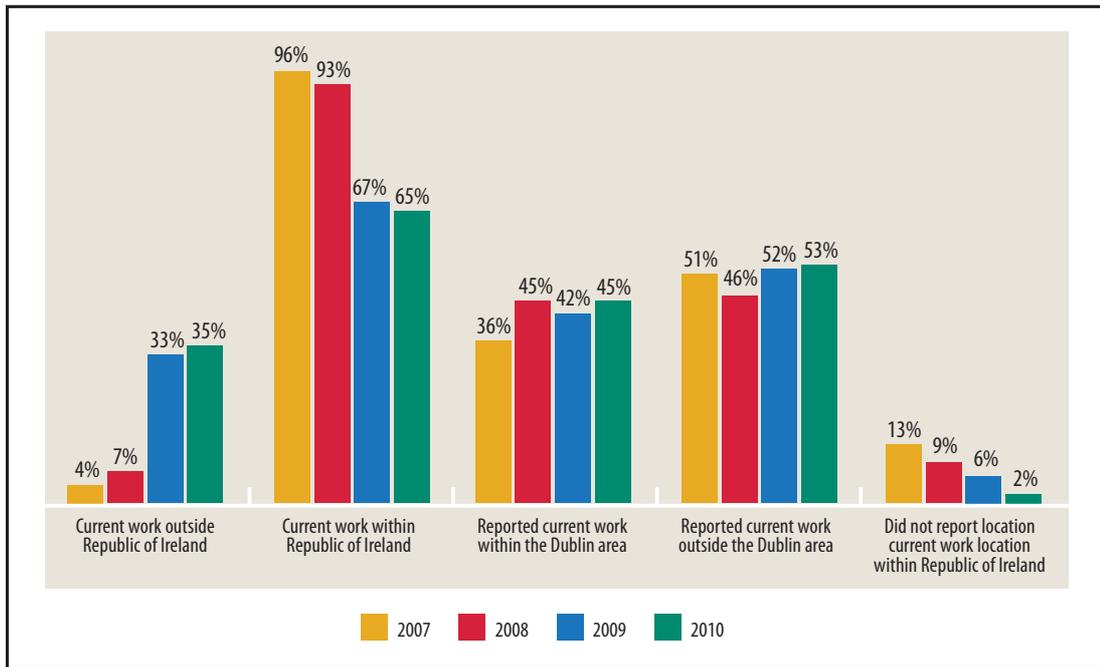
Other: This includes oncology unit, operating theatres, accident and emergency, renal dialysis/unit, coronary care/intensive care/high dependency unit, outpatients, prison unit, research unit, rehabilitation unit and children's unit.

4.5 Current Employment Status

From 2007 to 2010, the percentage of total graduate respondents who reported current employment as a registered nurse at the time of the survey remained steady [i.e. 96 percent in 2007, 94 percent in 2008, and 97 percent in both 2009 and 2010].

Of the graduate respondents who reported current employment as a registered nurse at the time of the survey, a comparison of the 2007 graduate respondents to the 2010 graduate respondents reveals a 31 percent decrease in the percentage of graduate respondents who reported current employment *within* the Republic of Ireland, and a 31 percent increase in the percentage of graduate respondents who reported current employment *outside* the Republic of Ireland (see Figure 23). These trends suggest that employment opportunities for new graduate nurses *within* the Republic of Ireland are on the decrease.

Figure 23: Employment country, current registered nurse work (2007-2010)



From 2007 to 2010, the percentage of graduate respondents who indicated they did not currently work as a registered nurse at the time of the survey remained small and relatively steady [i.e. four percent in 2007, six percent in 2008, and three percent in both 2009 and 2010].

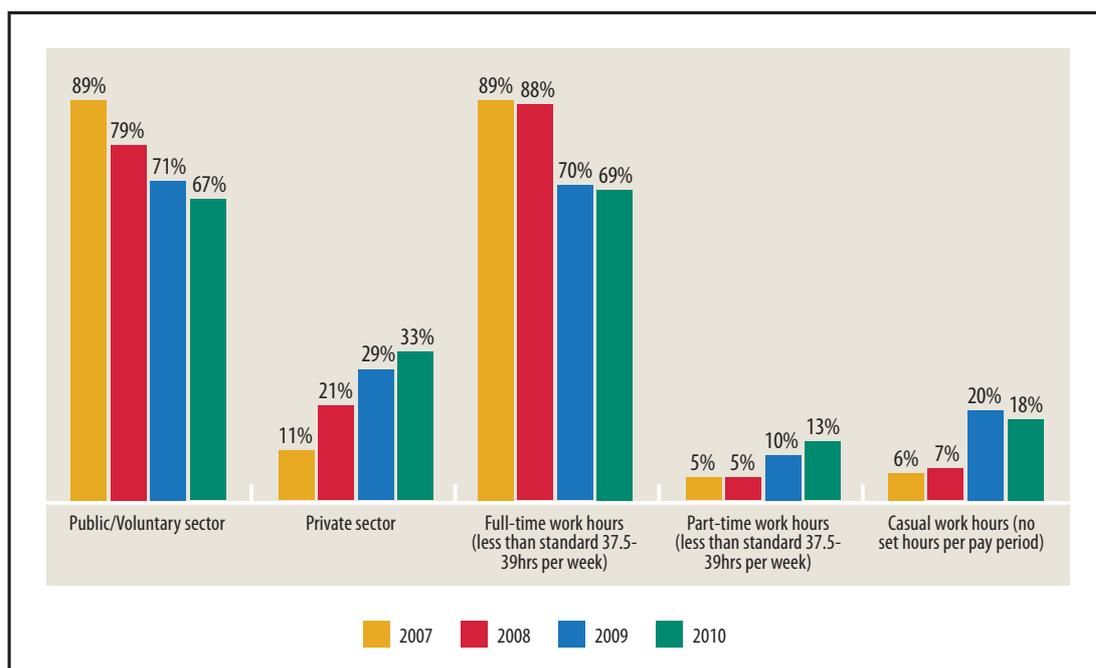
In all years, of the percentage of graduate respondents who indicated they currently worked as a registered nurse work in the Republic of Ireland, the majority of graduate respondents were employed by the public/voluntary health sector and had work hours of 37.5-39 hours or more per week in their current position (see Figure 24).

From 2007 to 2010, the most notable changes relating to the type of health service provider within which the graduate respondents worked in their current position and their type of work hours were the:

- 22% increase in the percentage of graduates employed by the private health sector;
- 22% decrease in the percentage of graduates employed by the public/voluntary health sector;
- 20% decrease in the percentage of graduates employed who had full-time work hours (standard 37.5-39 hours or more per week);
- 12% to 14 % increase in the percentage of graduates who had casual work hours (no set work hours per pay period); and
- 8% increase in the percentage of graduates who had part time work hours (less than standard 37.5 to 39 hours per pay period). See Figure 24.

These trends suggest that employment opportunities for new nurse graduates in the public/voluntary sector are on the decrease and also there is a decrease in the full-time work hours available.

Figure 24: Health service provider type and work hours, current registered nurse work (2007-2010)



From 2007 to 2010, of the percentage of graduate respondents who indicated they currently worked as a registered nurse in the Republic of Ireland, the percentage of graduate respondents seeking registered nurse employment abroad increased by one percent each year [i.e. three percent in 2007, four percent in 2008, five percent in 2009 and six percent in 2010].

Over the same period, the percentage of graduate respondents undertaking further nursing/midwifery education remained stable [i.e. four percent in 2007, five percent in 2008, and three percent in both 2009 and 2010].

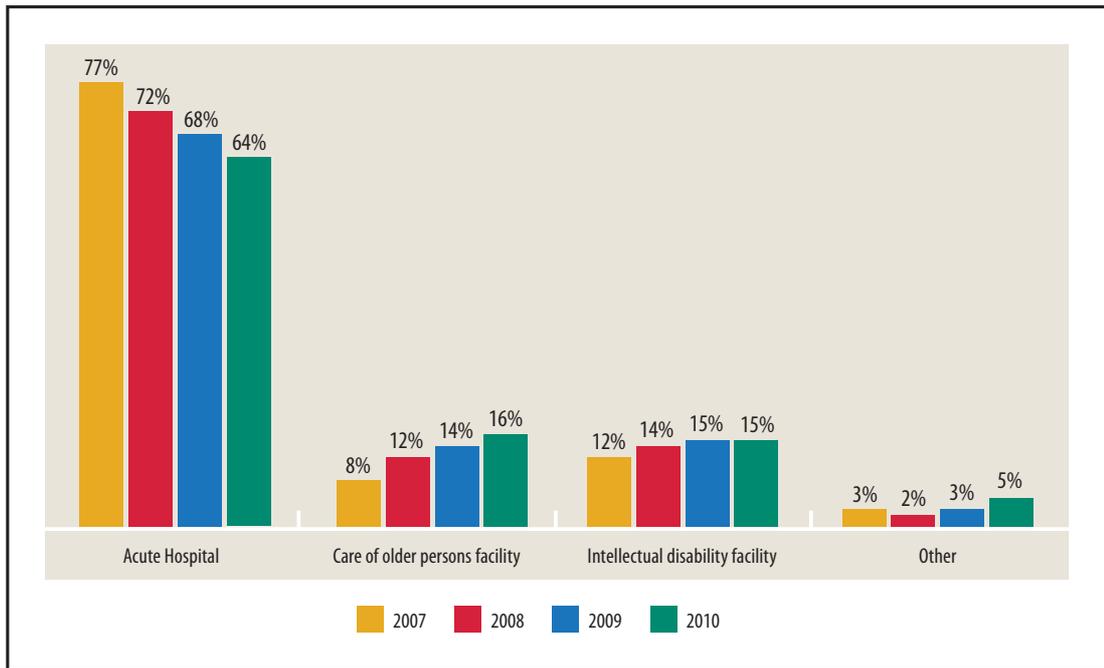
In all years, of the percentage of graduate respondents who indicated they currently worked as a registered nurse work in the Republic of Ireland, the majority of graduates were employed to work in acute hospitals and on medical/surgical units in their current position (see Figures 25 and 26).

From 2007 to 2010, the most notable changes relating to the type of health service organisation within which the graduate respondents worked in their current position were the:

- 13% decrease in the percentage of graduates employed to work in acute hospitals; and
- 8% increase in the percentage of graduates employed to work in care of older persons facilities. See Figure 25.

These trends suggest that employment opportunities for new graduate nurses to work in acute hospitals are on the decrease, while employment opportunities for graduates to work in care of older persons are on the increase.

Figure 25: Health service organisation type, current registered nurse work (2007-2010)



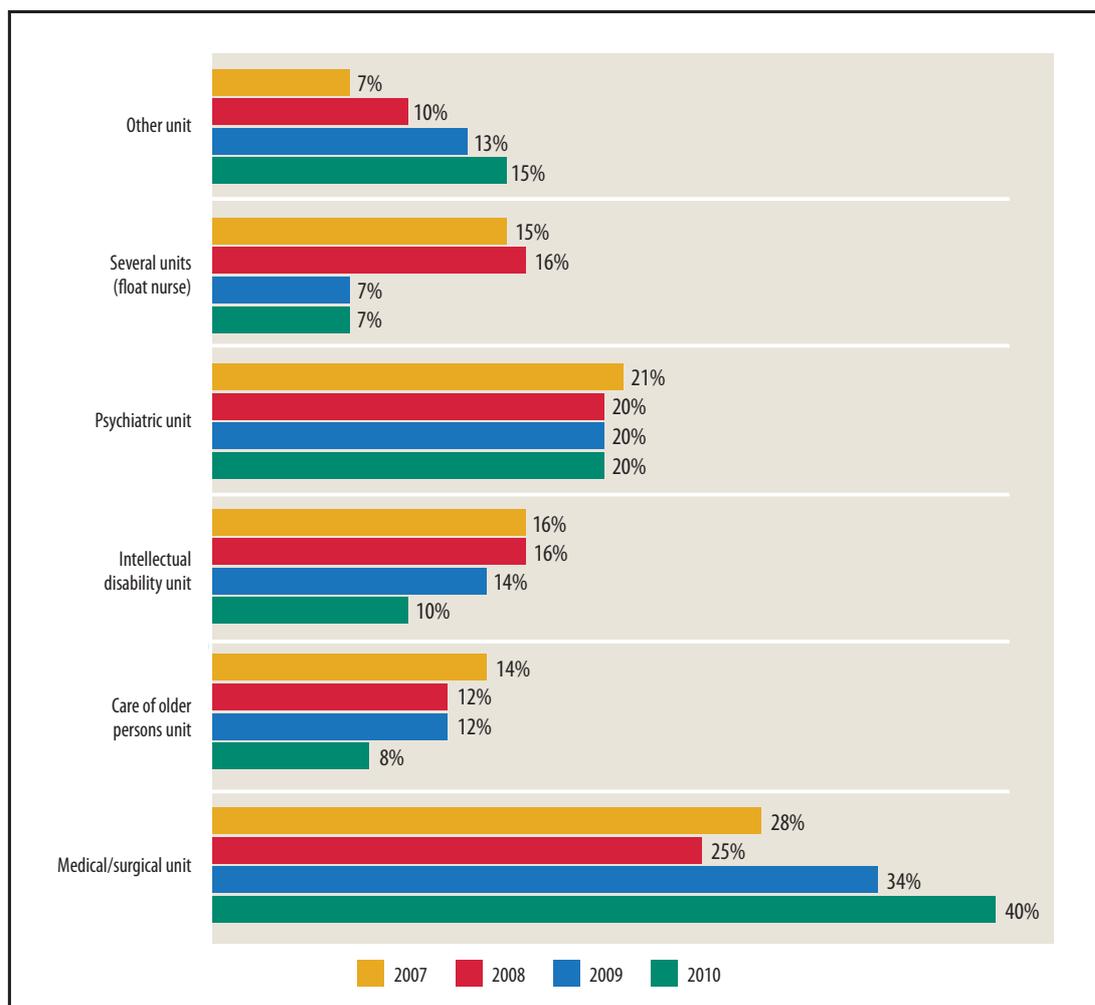
Acute hospital: This includes general and psychiatric hospitals. Other: This includes community care, non acute general and psychiatric hospitals, hospice, children's home, MS care centre, educational facilities, rehabilitation and prison services.

From 2007 to 2010, the most notable changes relating to the area of responsibility within which the graduate respondents worked in their current position were the:

- 12% to 15% decrease in the percentage of graduates employed to work in medical/surgical units; and
- 8% to 9% increase in the percentage of graduates employed to work in several units (i.e. float nurses). See Figure 26).

The increase in the percentage of graduate respondents employed to work in several units in 2009 and 2010 may be attributed to the establishment of hospital nursing banks (nurse float pools) within the Dublin area and increased employment of 'float nurses' availed through private nursing agencies in the Republic of Ireland.

Figure 26: Area of responsibility, current registered nurse work (2007-2010)



Other: This includes oncology, operating theatres, accident and emergency, renal dialysis/unit, coronary care/intensive care/high dependency, outpatients, prison unit, research unit, maternal/newborn and paediatrics.

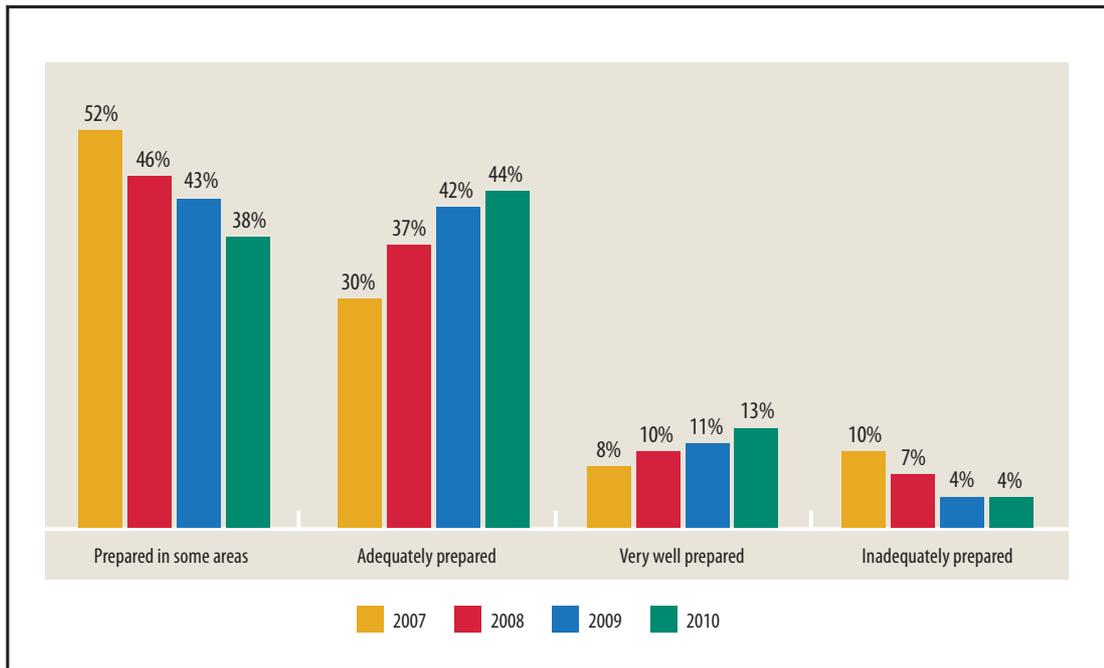
4.6 Initial Nursing Practice Experience

In all years, of the percentage of graduate respondents who commenced their initial work as a registered nurse within and outside of the Republic of Ireland, the majority [i.e. between 90 percent and 96 percent] of graduates reported the BSc undergraduate education programme prepared them for their initial position as a nurse.

From 2007 to 2009, the percentage of graduate respondents who reported the BSc undergraduate education programme prepared them for their initial position as a nurse increased by three percent each year [i.e. 90 percent in 2007, 93 percent in 2008, and 96 percent in 2009], and remained at 96 percent in 2010.

From 2007 to 2010, there was an increase of six percent in the overall percentage of graduate respondents who indicated the BSc undergraduate programme prepared them for their initial position as a nurse (see Figure 27). This trend suggests that the BSc undergraduate education programme is improving in its preparation of students for their initial workplace setting.

Figure 27: Perceptions of BSc preparedness for initial registered nurse work (2007-2010)



4.7 Initial Orientation Experience

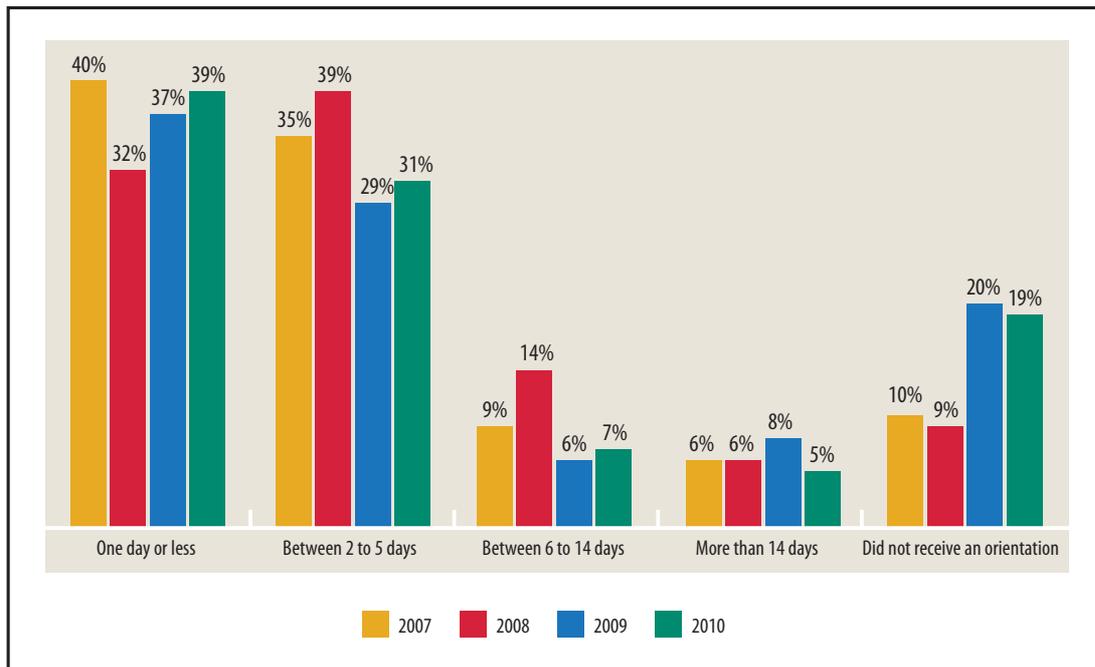
From 2007 to 2010, of the percentage of graduate respondents who commenced their initial work as a registered nurse within the Republic of Ireland, the majority [i.e. 80 percent and 91 percent] of graduates reported receiving an orientation, although there was variability in the length (see Figure 28).

During this period, the most notable changes relating to the orientation of the graduate respondents to their initial workplace setting were the:

- 9% to 11% increase in the percentage of graduates who did not receive an orientation in 2009 and 2010 as compared to 2007 and 2008;
- fluctuations in the percentage of graduates who received an orientation of “one day or less”; “between 2 to 5 days”; and “between 6 to 14 days” (see Figure 28).

In 2009 and 2010, the decrease in the percentage of graduate respondents who received an orientation may be attributed to an increase in the employment of ‘float nurses’ availed through private nursing agencies. The fluctuations in the percentage of graduate respondents who received a varying number of orientation days may be attributed to constraints within the workplace setting.

Figure 28: Orientation days (buddy/preceptor days), initial practice experience (2007-2010)

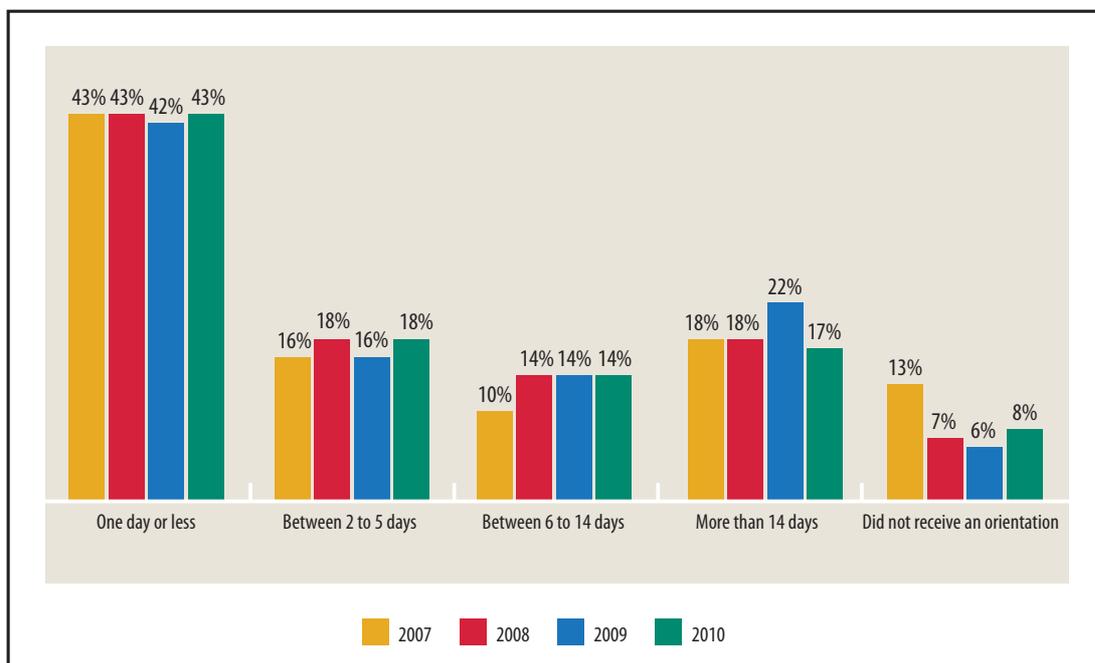


From 2007 to 2010, of the percentage of the above graduate respondents who received an orientation in their initial position, the majority [i.e. between 69 percent and 75 percent] of graduates indicated their orientation prepared them, “satisfactorily”, “quite well” or “very well”.

During the same period, the percentage of graduate respondents who indicated their orientation prepared them, “unsatisfactorily”, or “not very well,” remained relatively steady, ranging from 31 percent in 2007 to 25 percent in 2010 (see Figure 29).

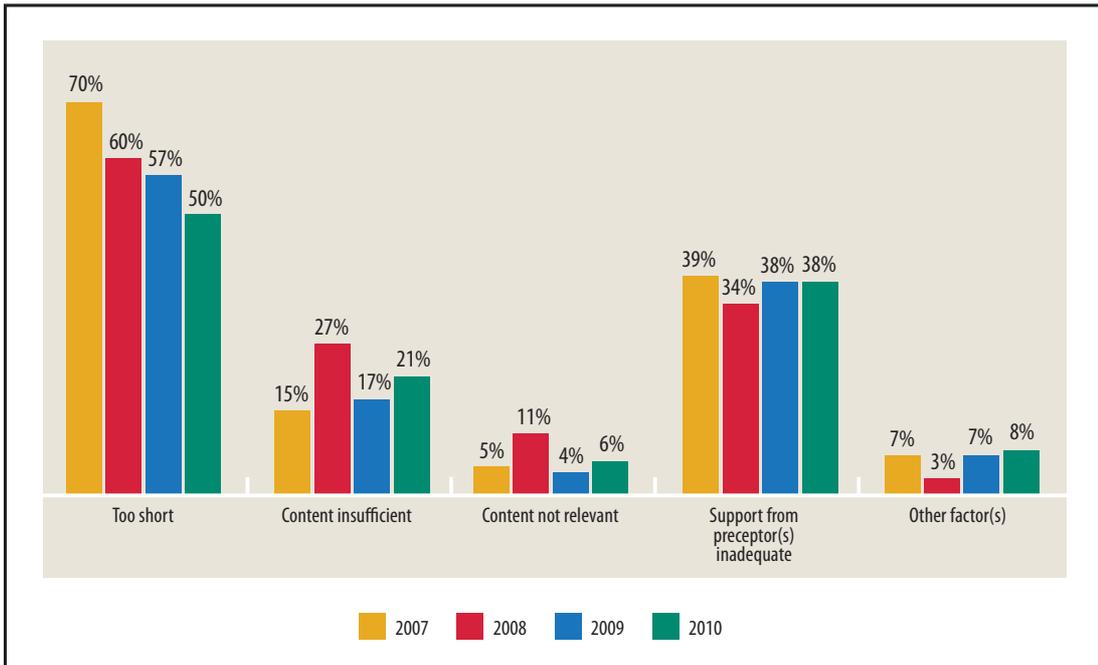
These trends suggest that there have been minimal changes in the perceptions of orientation satisfaction among new graduate nurses.

Figure 29: Perceptions of orientation satisfaction, initial registered nurse work (2007-2010)



From 2007 to 2010, of the percentage of the above graduate respondents who indicated their orientation prepared them “unsatisfactorily” or “not very well,” in their initial position; the most frequent reasons reported by graduates were attributed to orientation length and preceptorship support (see Figure 30). During the same period, of the percentage of the above graduate respondents who indicated their orientation prepared them “unsatisfactorily” or “not very well,” there was a decrease of 20 percent in the percentage of graduate respondents who indicated the reason attributed to the orientation being too short. The fluctuations in the percentage of graduate respondents who indicated reasons why they were dissatisfied with their orientation may be attributed to constraints within the workplace setting. Overall, the issue of orientation remains a concern among new graduates.

Figure 30: Perceptions of orientation deficiencies, initial registered nurse work (2007-2010)



4.8 Feedback from New Graduates

Between 2007 to 2010, while the experiences of most new registered nurse graduates were very positive, some comments suggested the need for modifications to the BSc undergraduate education programmes and initial workplace setting for newly qualified nurses. It must be noted that these comments are from individual students’ perspectives and that revisions in the delivery of these education programmes may have since occurred.

In all years, written comments by some new graduates highlighted an opportunity for enhanced education regarding: pharmacology and medication administration (including intravenous (IV) antibiotic preparation and administration), IV therapy management; communication (patient/family/medical teams); time management; acquiring venepuncture and peripheral IV cannulation competency skills during the period of clinical internship, thus aiding their transition to the role of registered nurse or midwife as per An Bord Altranais (2005) guidelines. In addition, more clinical placement time across the total programme with a focus on developing ‘hands on’ skills in core clinical settings was strongly suggested.

In addition, some new graduates also highlighted the need for adequate orientation/induction to the workplace (including agency nurses) and clinical practice preceptorship/mentorship support during their initial weeks of work.

SECTION 5.

Conclusions

This section identifies conclusions derived from the national survey findings. The 2010 graduate nurse and midwife survey provides an employment profile of 45 per cent (625) (579 nurses and 46 midwives) of new graduates from BSc undergraduate education programmes in nursing and midwifery within the Republic of Ireland so it is valuable from a service planning perspective.

1. At the time of the survey, almost all (97%) of newly qualified nurse (561) and midwife (44) respondents reported employment in health services in the Republic of Ireland and because they are new to the profession, they have specific needs that should not be overlooked if quality of care for patients and the effective delivery of health services is to be ensured.
2. As part of an increasing trend, a total of 96 percent of all newly qualified nurse (540) and midwife (43) respondents working within or outside of the Republic of Ireland felt that they were prepared for their initial position, suggesting a “bedding down” of the programme towards fit for purpose.
3. Employment opportunities for new graduates nurses and midwives within the Republic of Ireland remain confined as a result of the Moratorium on Recruitment and Promotions in the Public Service.
4. The most notable changes from a comparison of the 2007 to 2010 surveys of nursing graduates were the:
 - a. overall reduction of 310 intake places during 2009 and 2010 in BSc undergraduate education programmes in general, psychiatric and intellectual disability nursing;
 - b. 36% increase in the percentage of graduate respondents who sought initial employment outside of the Republic of Ireland;
 - c. 20% decrease in the percentage of graduate respondents who sought initial employment within the Republic of Ireland;
 - d. 29% increase in the percentage of graduate respondents who commenced initial employment outside of the Republic of Ireland;
 - e. 31% increase in the percentage of graduate respondents who at the time of the survey, reported current employment outside of the Republic of Ireland;
 - f. 22% decrease in the percentage of graduate respondents who at the time of the survey, reported current employment in the public/voluntary sector within the Republic of Ireland;
 - g. 22% increase in the percentage of graduate respondents who at the time of the survey, reported current employment in the private sector (e.g. private hospitals/nursing agencies/ nursing homes) within the Republic of Ireland;
 - h. 20% decrease in the percentage of graduate respondents who at the time of the survey, reported full-time work hours (standard 37.5-39 hours per week);
 - i. 13% decrease in the percentage of graduate respondents who at the time of the survey, reported current employment in an acute hospital within the Republic of Ireland;
 - j. 8% increase in the percentage of graduate respondents who at the time of the survey, reported current employment in an care of older person’s facility within the Republic of Ireland;

5. Regarding the theoretical component of the programmes, some suggested the need for greater knowledge and a standardised approach to pharmacology education content.
6. A number of graduates indicated that clinical competencies are best developed within the core clinical settings.
7. Several graduates indicated they would like more preparation in relation to medication administration, IV therapy and drug management, venepuncture and IV cannulation. Whilst this may vary across the Higher Education Institutions, the clinical internship is viewed as the key period for this preparation.
8. A wide variation exists in structures and processes being utilised to support and orientate the newly qualified nurse/midwife in their initial position and across the organisations/agencies through which they are employed.
9. Of concern to employers, graduates employed through nursing/midwifery agency or bank systems are particularly vulnerable to poor support during initial work placements.

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APPENDIX A

List of Higher Education Institutions

HSE Area	Higher Education Institution	BSc Undergraduate Education Programme in Nursing/Midwifery Offered in 2010
Dublin/Mid Leinster	Trinity College Dublin	BSc General Nursing BSc Psychiatric Nursing BSc Intellectual Disability Nursing BSc Children's & General Nursing (Integrated) BSc Midwifery
Dublin/Mid Leinster	University College Dublin	BSc General Nursing BSc Psychiatric Nursing BSc Children's & General Nursing (Integrated) BSc Midwifery
Dublin/Mid Leinster	Athlone Institute of Technology	BSc General Nursing BSc Psychiatric Nursing
Dublin/North East	Dublin City University	BSc General Nursing BSc Psychiatric Nursing BSc Intellectual Disability Nursing BSc Children's & General Nursing (Integrated)
Dublin/North East	Dundalk Institute of Technology	BSc General Nursing BSc Psychiatric Nursing BSc Intellectual Disability Nursing BSc Midwifery
South	University College Cork	BSc General Nursing BSc Psychiatric Nursing BSc Intellectual Disability Nursing BSc Children's & General Nursing (Integrated) BSc Midwifery
South	Waterford Institute of Technology	BSc General Nursing BSc Psychiatric Nursing BSc Intellectual Disability Nursing
South	Tralee Institute of Technology	BSc General Nursing BSc Psychiatric Nursing
West	University of Limerick	BSc General Nursing BSc Psychiatric Nursing BSc Intellectual Disability Nursing BSc Midwifery
West	National University of Ireland, Galway	BSc General Nursing BSc Psychiatric Nursing BSc Midwifery
West	Galway Mayo Institute of Technology	BSc General Nursing BSc Psychiatric Nursing
West	St. Angela's College of Education, Sligo	BSc General Nursing BSc Intellectual Disability Nursing
West	Letterkenny Institute of Technology	BSc General Nursing BSc Psychiatric Nursing BSc Intellectual Disability Nursing

APPENDIX B

Survey Data Collection Form



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Survey of 2010 Nursing and Midwifery Graduates: Where are they now?

Aim of survey:

To facilitate nursing and midwifery workforce planning and development by capturing employment information from new graduates of nursing schools in Ireland who graduated from approved nursing and midwifery programmes in 2010.

Objectives of survey:

- To ascertain the employment profile of newly graduated nurse and midwives in the Republic of Ireland; and
- To identify the self-perceived level of preparedness of these new graduates in the workplace.

Section one is to be completed by the Higher Education Institution. Please complete and return to fiona.mcmahon1@hse.ie by **06 April 2011**.

Section two is to be completed by students *who graduated in 2010* from any of the following programmes: Bachelor of Science in General Nursing, Bachelor of Science in Psychiatric Nursing, Bachelor of Science in Intellectual Disability Nursing, or Bachelor of Science in Midwifery. Please return the completed survey in the enclosed prepaid postal envelope by **22 July 2011** to:

Fiona McMahon, RGN, MHA
Project Manager
Office of the Nursing & Midwifery Services
Director
Clinical Strategy & Programmes Directorate
Health Service Executive
Room 250 Dr Steevens' Hospital
Dublin 8
Ireland
Tel: 01-6352471
E-mail – fiona.mcmahon1@hse.ie



Office of the
Nursing & Midwifery
Services Director



Office of the
Nursing & Midwifery
Services Director

Survey Data Collection Form (continued)

SECTION ONE: TO BE COMPLETED BY THE HIGHER EDUCATION INSTITUTION (HEI)

Name of HEI:

Q1 Number of **students who graduated in 2010** from the following education programmes offered through your HEI:

Undergraduate Programme	Number
BSc General Nursing	
BSc Psychiatric Nursing	
BSc Intellectual Disability Nursing	
BSc Midwifery	

Q2 Number of **designated approved first year course places in 2010** in the following education programmes offered through your HEI:

Undergraduate Programme	Number
BSc General Nursing	
BSc Psychiatric Nursing	
BSc Intellectual Disability Nursing	
BSc Children's & General Nursing (Integrated)	
BSc Midwifery	

Q3 Number of **students who actually commenced studies in 2010** in the following education programmes offered through your HEI:

Undergraduate Programme	Number
BSc General Nursing	
BSc Psychiatric Nursing	
BSc Intellectual Disability Nursing	
BSc Children's & General Nursing (Integrated)	
BSc Midwifery	

Survey Data Collection Form (continued)

SECTION TWO: TO BE COMPLETED BY THE NEW BSc NURSE/MIDWIFE GRADUATE:

PART A: GRADUATION PROGRAMME / REGISTRATION

Q1 Name of undergraduate education programme you graduated from in 2010:

Undergraduate Programme Title	√ Tick = Applicable
BSc General Nursing	
BSc Psychiatric Nursing	
BSc Intellectual Disability Nursing	
BSc Midwifery	

Q2 Have you registered with An Bord Altranais?

Registration to Practice	√ Tick = Applicable
Yes	
No (indicate reason)	

PART B: EXPERIENCE SEEKING EMPLOYMENT

Q3 Have you sought work as a registered nurse/midwife?

Employment Sought	√ Tick = Applicable
Yes	
No (indicate reason)	

Q4 In what geographic area(s) have you sought work as a registered nurse/midwife?

Geographic Area(s) Employment Sought In	√ Tick = Applicable
Republic of Ireland (specify county; city / town)	
Other countries (specify)	

Q5 Have you obtained work as a registered nurse/midwife?

Employment Obtained	√ Tick = Applicable
Yes	
No (indicate reason)	

Q6 How long did it take you to obtain work as a registered nurse/midwife?

Time Taken to Obtain Employment	√ Tick = Applicable
Less than 4 weeks	
4 to 11 weeks	
12 to 24 weeks	
More than 24 weeks	

Survey Data Collection Form (continued)

Q7 How many initial job offers did you receive to work as a registered nurse/midwife?

Number of Job Offers Received	√ Tick = Applicable
One	
Two	
Three or more	

Q8 What were the deciding factors in accepting your first position as a registered nurse/midwife?

First Position Deciding Factors	√ Tick = Applicable
First employer to offer work	
Employer close to home	
Completed a clinical nursing placement in the unit / employment site	
Positive reputation of the unit / employment site	
Other (specify)	

Q9 How did/does your experience seeking employment compare with your expectations after graduation?

Experience Seeking Employment	√ Tick = Applicable
More difficult than anticipated	
As anticipated	
Less difficult than anticipated	

PART C: INITIAL EMPLOYMENT STATUS (in First Job)

Q10 In what geographic area(s) did you first work as a registered nurse/midwife?

Geographic Area(s) (Initial Work)	√ Tick = Applicable
Republic of Ireland (specify county; city/town)	
Other countries (specify)	

Q11 For what type of health service provider(s) did you first work as a registered nurse/midwife?

Provider Type (Initial Work)	√ Tick = Applicable
Public/Voluntary Sector	
Private Sector	Private nursing agency (e.g. nurse on call)
	Private nursing home/clinic / hospital

Q12 In what type of health service organisation(s) did you first work as a registered nurse/midwife?

Organisation Type (Initial Work)	√ Tick = Applicable
Acute hospital – general / maternity / children's / psychiatric	
Care of older persons facility / hospital / nursing home	
Community Local Health office / primary care centre	
Intellectual disability facility / centre / home	
Education institution	
Other (specify)	

Survey Data Collection Form (continued)

Q13 In what unit area(s) of responsibility did you first work as a registered nurse/midwife?

Unit Type (Initial Work)	√ Tick = Applicable
Medical unit	
Surgical unit	
Care of older persons unit	
Maternal ante natal unit	
Maternal post natal unit	
Maternal labour/delivery unit	
Children's unit	
Psychiatric unit/service area	
Intellectual disability unit/service area	
Several units (float nurse/midwife)	
Other (specify)	

Q14 What type of work hours applied to your initial employment as a registered nurse/midwife?

Work Hours Type (Initial Work)	√ Tick = Applicable
Full-time hours (standard 37.5-39hrs or more per week)	
Part-time hours (less than standard 37.5-39hrs per week)	
Casual hours (no set hrs per pay period)	

PART D: CURRENT EMPLOYMENT STATUS

Q15 Which employment situation currently applies to you?

Current Employment Situation	√ Tick = Applicable
Working in the Republic of Ireland, as a registered nurse/midwife (specify county; city/town)	
Working outside the Republic of Ireland, as a registered nurse/midwife (specify country)	
Seeking employment overseas, as a registered nurse/midwife	
Employed full-time (standard 37.5-39hrs or more per week), as a registered nurse/midwife	
Employed part-time (less than standard 37.5-39hrs per week), as a registered nurse/midwife	
Employed casual (no set hours per pay period), as a registered nurse/midwife	
Employed other than as a registered nurse/midwife and seeking work as a registered nurse/midwife	
Employed other than as a registered nurse/midwife and not seeking work as a registered nurse/midwife	
Unemployed seeking full-time work (standard 37.5-39hrs or more per week), as a registered nurse/midwife	
Unemployed seeking part-time work (less than standard 37.5-39hrs per week), as a registered nurse/midwife	
Unemployed seeking casual work (no set hrs per pay period), as a registered nurse/midwife	
Full-time student undertaking further nursing/midwifery studies	
Part-time student undertaking further nursing/midwifery studies	
Full-time student undertaking further non nursing/midwifery studies	
Part-time student undertaking further non nursing/midwifery studies	
Other (specify)	

Survey Data Collection Form (continued)

Q16 For what type of health service provider(s) do you currently work in as a registered nurse/midwife?

Provider Type (Current Work)		√ Tick = Applicable
Public/Voluntary Sector		
Private Sector	Private nursing agency (e.g. nurse on call)	
	Private nursing home/clinic/hospital	

Q17 In what type of health service organisation(s) do you currently work in as a registered nurse/midwife?

Organisation Type (Current Work)	√ Tick = Applicable
Acute hospital – general/maternity/children’s/psychiatric	
Care of older persons facility/hospital/nursing home	
Community local health office/primary care centre	
Intellectual disability facility/centre/home	
Education institution	
Other (specify)	

Q18 In what unit area(s) of responsibility do you currently work in as a registered nurse/midwife?

Unit Type (Current Work)	√ Tick = Applicable
Medical unit	
Surgical unit	
Care of older persons unit	
Maternal ante natal unit	
Maternal post natal unit	
Maternal labour/delivery unit	
Children’s unit	
Psychiatric unit / service area	
Intellectual disability unit / service area	
Several units (float nurse/midwife)	
Other (specify)	

PART E: INITIAL NURSING PRACTICE EXPERIENCE

Q19 As a newly qualified BSc nursing/midwifery graduate, how well do you think you were prepared for your initial position as a registered nurse/midwife?

BSc Nursing/Midwifery Preparedness (Initial Work)	√ Tick = Applicable
Inadequately prepared	
Prepared in some areas	
Adequately prepared	
Very well prepared	

Q20 In your initial position as a registered nurse/midwife, how many orientation (include buddy / preceptor shifts) days did you receive?

Orientation Days (Initial Work)	√ Tick = Applicable
1 day or less	
Between 2 to 5 days	
Between 6 to 14 days	
More than 14 days	
Did not receive an orientation	

Survey Data Collection Form (continued)

Q21 In your initial position as a registered nurse/midwife, how well did your orientation (include buddy / preceptor shifts) prepare you for the position?

Orientation Satisfaction (Initial Work)	√ Tick = Applicable
Unsatisfactorily	
Not very well	
Satisfactorily	
Quite well	
Very well	

Q22 If your response in Q21 was “unsatisfactorily / not very well”, please indicate what was deficient in your orientation?

Orientation Deficiency (Initial Work)	√ Tick = Applicable
Too short	
Content insufficient (specify)	
Content not relevant (specify)	
Support from preceptor(s) inadequate (specify)	
Other (specify)	

Q23 Following graduation, we would welcome your comments to support the preparedness of new graduates in the workplace.

Thank you for taking the time and effort to complete this survey.

APPENDIX C

Survey Cover Letter (Higher Education Institution)



Office of the Nursing and Midwifery Services Director
 Clinical Strategy & Programmes Directorate
 Health Service Executive
 Room 250
 Dr Steeven's Hospital
 Dublin 8

23 March 2011

To: Department Head of Nursing/Midwifery Studies
 Higher Education Institution¹

Dear Colleague

Re: Survey of 2010 Nursing and Midwifery Graduates

As an education provider of nursing/midwifery pre-registration BSc education programmes in the Republic of Ireland, I am writing to you in relation to the enclosed survey entitled: *Survey of 2010 Nursing and Midwifery Graduates: Where are they now?*

The information you provide will assist us and others (e.g., health service employers) in the Republic of Ireland to better understand the national nursing/ midwifery employment situation and to better plan and meet the needs of newly graduated registered nurses.

Please take the time to answer the four questions in section one. Findings from the survey will be included in a national survey report on new BSc nurse/midwife graduates. If you have any questions about the survey, please contact me at: 01-6352187.

In order to facilitate determining the number of surveys to be issued to each Higher Education Institution, I would appreciate if you could complete **Section One** and return to fiona.mcmahon1@hse.ie by **06 April 2011**.

Once again, I would like to thank you for taking the time and effort to assist with conducting this survey.

Sincerely

Fiona McMahon
 Project Manager
 Office of the Nursing & Midwifery Services Director

¹Higher Education Institutions delivering any of the following programmes: Bachelor of Science in General Nursing, Bachelor of Science in Psychiatric Nursing, Bachelor of Science in Intellectual Disability, Bachelor of Science in Children's & General Nursing (Integrated), or Bachelor of Science in Midwifery.



APPENDIX D

Survey Cover Letter (Graduate)



Office of the Nursing and Midwifery Services Director
Clinical Strategy & Programmes Directorate
Health Service Executive
Room 250
Dr Steeven's Hospital
Dublin 8

Dear Recent BSc Nurse/Midwife Graduate

Re: Survey of 2010 Nursing and Midwifery Graduates

As a recent graduate of a nursing/midwifery pre-registration BSc education programme, I am writing to you in relation to the enclosed survey entitled: *Survey of 2010 Nursing and Midwifery Graduates - Where are they now?*

The information you provide will assist us and others (e.g. nursing schools) in the Republic of Ireland in planning for the needs of newly graduated registered nurses/midwives.

Please take the time (approximately 10 minutes) to answer the questions in the attached survey. Your response will be treated in a confidential manner. No individual will be identified. Findings from the survey will be included in a national survey report on new BSc nurse/midwife graduates. If you have any questions about the survey, please contact me at: 01-6352187.

We would appreciate if you could complete this survey and return in the enclosed prepaid postal envelope by **22 July 2011** to:

Graduate Survey
Fiona McMahon, RGN, MHA
Project Manager
Office of the Nursing and Midwifery Services Director
Health Service Executive
Room 250 Dr Steevens' Hospital
Dublin 8
Email – fiona.mcmahon1@hse.ie

I would like to thank you for taking the time and effort to complete this survey.

Sincerely

Fiona McMahon
Project Manager
Office of the Nursing & Midwifery Services Director





ISBN 978-1-906218-46-1

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December 2011

Office of the Nursing & Midwifery Services Director
Clinical Strategy and Programmes Directorate
Health Service Executive
Dr Steevens' Hospital
Dublin 8
Ireland

telephone: +353 1 635 2471

email: nursing.services@hse.ie

www.hse.ie

