

LD/MR

23 September 2014

Dr Maura Pidgeon  
Chief Executive Officer  
Nursing and Midwifery Board of Ireland  
18/20 Carysfort Avenue  
Blackrock  
Co Dublin

**Re: Review of Retention Fee - 2015**

Dear Maura

We refer to the decision by your Board to increase the retention fee, with effect from 1<sup>st</sup> January 2015, to €150.

It is noted that the primary reason given, for this increase, is the need to secure the financial resources required to implement various sections, of the Nurses and Midwives Act, and to meet other obligations, as a regulatory body, in the public interest.

On behalf of the INMO, SIPTU and PNA we must place on record that we do not believe all of the additional financial costs, which will be incurred by the Board, can reasonably be placed upon registered nurses/midwives through an increase in their retention fee.

In that regard we would remind you, and your Board, of the following:

1. The complete failure, and indeed refusal, of the Board to demonstrate support, in a public manner, for nurses and midwives working in the clinical area.

This abdication of your responsibility has left nurses and midwives, paying their current retention fee, feeling the Board's only function is to interrogate them, if an incident has occurred, but never support them to prevent the incident occurring.

2. The Department of Health directly funded the work of the National Council for the Professional Development of Nursing and Midwifery at a cost of approximately €4.5 million per annum.

- Therefore, since the abolition of the Council, the Department of Health has saved €12 million approximately and continues to save €4.5 million annually.
3. As an integral part of the abolition of the Council the NMBI was required to absorb staff. The costs pertaining to these staff, transferring to the Board, must be met by an ongoing financial contribution from the original funding agency i.e. the Department of Health.
  4. The research, development and maintenance of a Competency Assurance Scheme, as stipulated and required under the legislation, is being brought forward, as a direct result of decisions of the Oireachtas and the Department of Health.
    - the introduction of a scheme, whilst welcome by the nursing and midwifery professions, is being brought forward in the public interest and, therefore, the costs of realising this objective must be acknowledged, and shared, by the Department;
    - it should also be noted that there may be ongoing costs, from an individual registrants viewpoint, once the scheme is introduced, in terms of meeting requirements. It is not tenable to suggest that the registrant will be hit by an increase in retention fee, because the scheme has to be introduced, and then an increase in ongoing costs while they comply with the obligations of the same scheme - any such potential costs must be discussed with our organisations and must be recognised and shared by employers; and
    - we would also point out, in relation to bringing forward this scheme, that Section 37, of the Nurses and Midwives Act 2011, specifically identifies the potential for additional resources to be required in relation to the implementation of the scheme in part 11 of the Act. Indeed the further sub-sections, of Section 37, clearly indicate that the Oireachtas foresaw that other elements of the Board's duties, under the Act, may require expenses to be defrayed by a vote from the Oireachtas.

Therefore an immediate next step, which should be taken by the Board, is that it makes an application, under this section of the legislation. This should be supported by data which shows that the registrant cannot bear the additional increase, that the additional expenditure arises out of Oireachtas imposed requirements, that the registrants have already made significant contributions to dealing with the additional responsibilities of the Board - i.e. increase in retention fee in 2014 - and, consequently, in the public interest a vote from public resources is required.

5. It would appear that the Board is also incurring additional legal costs arising from a mix of finalising fitness to practice matters, under the 1985 Act, and the revised regime which applies under the 2011 Act.

- this revised fitness to practice process, brought forward unilaterally by the Department, while they refused to take amendments suggested by both the Board and our Organisations, cannot reasonably be carried solely by the registrants through an increased retention fee;
- in relation to the additional legal costs, identified by the Board, we certainly require further clarification regarding how/why these costs arise. It has been indicated that the Preliminary Proceedings Committee process (PPC process) is like a mini inquiry process. We have written, in the past, seeking details in relation to the level of legal support, provided to the PPC, as, prior to this new process, the Fitness to Practice Committee itself was still required to determine whether, or not, a prima facie case existed. In this context it is somewhat difficult to discern where all of the additional expenditure arises just because a new committee has been formed to undertake functions previously undertaken by a different committee. Full clarity on this must be provided immediately.

These are just a sample of the many reasons why it is grossly unfair, and unacceptable, for the Board, the Department or, indeed, any other entity to expect the additional financial burden should only be carried by registrants in the form of an increased retention fee. These are some of the reasons why our three organisations cannot support the proposed increase.

We are fully supportive of a strong regulatory body, for nurses and midwives, which acts in the public interests. This is best achieved by ensuring that nurses and midwives can practice in a clinical environment which respects their decision making, encourages best practice and optimises patient safety.

In that regard we will certainly participate in any roundtable process, with the Board and the Department of Health, established to discuss this whole financial situation in detail. This process should lead to a long term solution which must involve an ongoing contribution, from the Department, towards the activities of the Board as it acts in the public interest. This process must begin with a reversal of the decision to increase the retention fee to allow time and space for this discussion to take place.

Your response to the foregoing points, by return, would be greatly appreciated.

Yours sincerely



**LIAM DORAN**  
General Secretary  
INMO



**KEVIN FIGGIS**  
National Nursing Officer  
SIPTU



**DES KAVANAGH**  
General Secretary  
PNA