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This Final Report of the Implementation of the Review of Nurses and Midwives in the Prescribing and Administration of Medicinal Products is a culmination of the collaboration between An Bord Altranais and the National Council for the Professional Development of Nursing and Midwifery. We are pleased to present this implementation report which details the objectives, activities and outcomes of An Bord Altranais and the National Council in facilitating the introduction of prescriptive authority and expanded medication management practices for nurses and midwives. Our two agencies have worked together over the past three years to realise the recommendations and actions of the seminal report published in 2005, the Review of Nurses and Midwives in the Prescribing and Administration of Medicinal Products - Final Report.

The Review's main recommendation for the introduction of prescriptive authority was realised in May 2007, when the Minister for Health and Children, Mary Harney, TD, signed the medicines legislation and nursing regulation. The expedient introduction of prescriptive authority within a robust legal framework, championed by the Minister for Health and Children, is a significant accomplishment for nursing and midwifery in Ireland.

An Bord Altranais and the National Council were committed to helping create the regulatory and professional building blocks for the commencement of this national health policy initiative. The implementation project developed the supports needed by nurses and midwives for safe and responsible medication management practices. Five key components were identified for project development. They were: legislation, professional regulation, education, professional development, and communication and collaboration with key stakeholders. The achievements in these areas are detailed in this report. As a consequence of the project focus and its activities, health care organisations and professionals have begun to critically review and improve medication systems and practices. The links between medications, patient safety and clinical/corporate responsibilities are being strengthened.

We would like to acknowledge the support of the Department of Health and Children, the Health Service Executive and other stakeholders during the course of this project to realise the 2005 Recommendations. We recognise that the leadership and guidance provided by Dr. Anne-Marie Ryan and Dr. Kathleen Mac Lellan have been an integral feature in the successful completion of this project. Finally, we would like to pay tribute to the project team, Kathleen Walsh and Denise Carroll, for their dedication and professionalism.

Eugene Donoghue
Chief Executive Officer
An Bord Altranais

Yvonne O'Shea
Chief Executive Officer
National Council for the Professional Development of Nursing and Midwifery
Introduction

In 2001, An Bord Altranais and the National Council for the Professional Development of Nursing and Midwifery (the National Council) jointly established a steering group and project team to review the expansion of medication management practices, particularly prescriptive authority, to nurses and midwives. In 2005, the two organisations published the Review of Nurses and Midwives in the Prescribing and Administration of Medicinal Products - Final Report, which comprehensively detailed the results of the three-and-a-half year project that reviewed nurse and midwife prescribing and expanded scope of practice involving medicines. The project involved a series of activities, encompassing research and consultation with nurses and midwives and other key stakeholders; it also presented a critical review of the international experiences for the introduction and implementation of prescriptive authority for the professions.

At the launch of the Final Report in October 2005, the Minister for Health and Children, Mary Harney, TD, expressed support for the proposal to introduce prescriptive authority for certain nurses and midwives.

Recommendations from the Final Report of the Review of Nurses and Midwives in the Prescribing and Administration of Medicinal Products

The Final Report (pp 129-130) made five recommendations with relevant actions:

**Recommendation 1: Continuation of the Use of Medication Protocols**

The use of medication protocols (other than for controlled drugs under the Misuse of Drugs Acts) within hospitals is recognised by the Department of Health and Children as an established practice of medication management. The use of such protocols should continue to be developed and supported.

**Action 1.1: Professional guidance**

An Bord Altranais will revise the current Guidance to Nurses and Midwives on Medication Management (An Bord Altranais, 2003) to incorporate the medication protocol framework that was developed, tested and evaluated as part of the project.

**Action 1.2: Health service provider responsibility**

Provision should be made by health service providers for the development and implementation of medication protocols in hospitals. As the responsibility for the procedures and controls that are applicable to medication protocols rests with the individual hospital, it is important that local policies are devised to support the development and implementation of any medication protocols for patient/client care.

Provisions should be made:

- to enable nurses, midwives and members of the multidisciplinary health care team to devise and implement medication protocols
- to enable the education and training of nurses and midwives involved in the use of such protocols
- to disseminate information to all members of the health care team regarding organisational policies underpinning the use of medication protocols
- to establish review and audit processes to evaluate the use of medication protocols as part of quality assurance and risk management programmes.

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1 The Final Report can be downloaded from the two organisations websites: www.nursingboard.ie and www.ncnm.ie.
Recommendation 2: Expansion of the Use of Medication Protocols

It is recommended that an explicit legislative basis be provided for the supply and administration of medicinal products using medication protocols by nurses and midwives in hospital and community settings.

Recommendation 3: Supply and Administration of Over-the-Counter Medications

Nurses and midwives should be enabled to supply and administer over-the-counter medications to patients and clients in accordance with their competence and within their scope of practice and supported by medication protocols where appropriate.

Action 3.1: Professional guidance

An Bord Altranais will revise the current Guidance to Nurses and Midwives on Medication Management to incorporate guidance for the professions to supply and administer over-the-counter medications.

Action 3.2: Health service provider responsibility

Provision should be made by the health service provider for the development and implementation of policies to support the supply and administration of over-the-counter medications by nurses and midwives in health care settings. The provisions as detailed in Action 1.2 should also be made available for this action involving over-the-counter medications.

Recommendation 4: Prescriptive Authority

Prescriptive authority should be extended to nurses and midwives, subject to regulations under the relevant legislation by the Minister for Health and Children and regulation by An Bord Altranais.

Action 4.1: Legislation

A review and subsequent enactment and/or amendment of all relevant primary and secondary legislation is required in order to introduce prescriptive authority for nurses and midwives. This is a matter for the Department of Health and Children.

Action 4.2: Professional regulation and guidance

The criteria for nurse/midwife prescribing must be established. This will require defining the scope of practice for which prescriptive authority will be granted. It is recommended that the establishment of criteria for nurse/midwife prescribing should be the responsibility of An Bord Altranais.

Action 4.3: Professional regulation and guidance

The standards and requirements in respect of the education and training leading to prescriptive authority for nurses and midwives must be established. It is recommended that the establishment of such standards and requirements should be the responsibility of An Bord Altranais.

Recommendation 5: Implementation of the Recommendations and Actions

An Bord Altranais and the National Council for the Professional Development of Nursing and Midwifery should establish a Project Implementation Team to work in consultation with key stakeholders to facilitate the implementation of these recommendations and actions.
Project Implementation Plan

In order to realise and operationalise the recommendations and their accompanying actions, An Bord Altranais and the National Council in November 2005 agreed to a three-year project implementation plan, to conclude in 2008. (See Appendix 1 for project plan).

Box: 1: Project Governance Structure

Project Governance

Strategic management issues, finance issues, inter-board issues:
Mr. Eugene Donoghue (Chief Executive Officer, An Bord Altranais), Dr. Yvonne O’Shea (Chief Executive Officer, National Council)
Six monthly meetings

Operational management, progress plan issues, progress dissemination:
Dr. Anne-Marie Ryan (Chief Education Officer, An Bord Altranais) Dr. Kathleen Mac Lellan (Head of Professional Development, National Council)
Six weekly meetings or as required identified by either organisation

Project Officers
Kathleen Walsh (Project Officer) and Denise Carroll (Project Assistant), with Chief Education Officer, An Bord Altranais and Head of Professional Development, National Council.
Monthly meetings

Direct line management
Dr. Anne-Marie Ryan, Chief Education Officer, An Bord Altranais

A project implementation team was appointed and ongoing support was provided to the project team, as required, by An Bord Altranais education department and the National Council professional development team.

The issues surrounding the expansion of medication management practices of nurses and midwives, including prescribing, are complex. An Bord Altranais and the National Council requested the project implementation team to develop five critical areas:

1. Legislation
2. Professional regulation
3. Education
4. Professional development and communication
5. Collaboration with other key stakeholders and healthcare professionals.

This is a report on the achievements of the specific actions in these five development areas. Many of the project implementation activities and accomplishments cross over one area to another or merge; progress in one area may have influenced developments in another. In some instances, action points (resulting from the recommendations in the Final Report) have been dependent upon other stakeholders.

Over the past three years, An Bord Altranais and the National Council have made significant progress in implementing the recommendations and actions of the Final Report. They were supported by the Department of Health and Children, the Health Service Executive (HSE) and other stakeholders. The project implementation plan approved by An Bord Altranais and the National Council has been reviewed and revised over the three years to reflect the changing dynamics and requirements of the two organisations in supporting and advancing the introduction and implementation of nurse and midwife prescribing in collaboration with stakeholders. The swift advancement of the implementation of prescriptive authority and, indeed, expanded medication management practice in Ireland is a significant accomplishment, having regard to the resources and extensive planning required, especially in comparison with broadly similar experiences in other countries.
The recommendations of the 2005 Final Report identified the need for specific legislation to enable expanded medication management practices for prescribing and the supply and administration of medications under protocol. With the enactment of the Irish Medicines Board (Miscellaneous Provisions) Act in March 2006, the foundation was laid to enable the Minister for Health and Children to make the necessary regulations.

The action points identified for the project team included the provision of consultative services between An Bord Altranais and the National Council and the Department of Health and Children for the development of regulations and in preparing the documents required to support the regulations and guide the nursing and midwifery professions on the implementation of the regulations. The two organisations and the project team met with the nursing policy division of the Department of Health and Children to discuss the preliminary steps required for introducing prescribing.

A national consultative process on the introduction of nurse/midwife prescriptive authority was conducted by the Department of Health and Children in July 2006 and generated over 120 submissions. Both An Bord Altranais and the National Council made individual submissions. The consultative process and an analysis of the submissions informed the writing of regulations to introduce nurse/midwife prescribing.

The project team examined the relevant legislative and regulatory processes of other countries where nurse and midwife prescribing existed for consideration of the regulatory framework that would need to be created in Ireland for its introduction, and communication was established with regulatory nursing bodies in these countries. The information obtained was provided to the Department of Health and Children at various times during the initial months of the project implementation.

As the medicines regulations were being drafted, the Minister for Health and Children directed the establishment of a national resource and implementation group for nurse and midwife prescribing (RIG). The group was chaired by Dr. Siobhan O’Halloran (Nursing Services Director for the Health Service Executive (HSE)). Dr. Anne-Marie Ryan represented An Bord Altranais and the National Council was represented by Dr. Kathleen Mac Lellan. The project team has served as advisors to RIG during its lifetime. In addition, members of the National Council and the project team were members of the sub-groups for drugs and therapeutics work and clinical audit and monitoring development.

RIG’s first task was to assist in the drafting of regulations. The group had a defined project plan and timetable, which influenced the activities of An Bord Altranais’s and the National Council’s own project implementation work. Of significance at this time was the deliberation for legislation for the supply and administration of medications utilising medication protocols (Recommendation 2 of the Final Report). It was determined that medication protocols did not require legislation for their implementation in health services and RIG advised the Department of Health and Children that its examination of this expanded medication management practice, as per the group’s terms of reference, was completed.

During the time devoted to the writing of the medicines regulations and the mandatory three-month period for EU consideration, An Bord Altranais critically examined its own legal framework for the professional regulation of prescriptive authority for nurses and midwives. This included consultation with the Department of Health and Children and legal advisers to establish nursing regulations consistent with An Bord Altranais’s functions and responsibilities under the Nurses Act, 1985 and the draft medicines legislation.

The enabling medicines regulations providing the legal authority to prescribe medicinal products were signed into law on 1 May 2007. These regulations are cited as:


Medicinal Products (Prescription and Control of Supply) (Amendment) Regulations 2007 (S.I. No. 201 of 2007), and

SECTION 1

Legislation
Misuse of Drugs (Amendment) Regulations 2007 (S.I. No. 200 of 2007)

Subsequent to this legislative action, the Minister for Health and Children approved the Nurses Rules, 2007, drawn up by An Bord Altranais, which established the Nurse Prescribers Division of the Register. The creation of this division entitles a nurse or midwife who completes the education programme and meets the conditions for prescribing (as established by the medicines regulations) to be registered with An Bord Altranais as a registered nurse prescriber (RNP).

The twin track approach to the introduction of nurse and midwife prescribing was thus established by the above legislation and statutory rules.
The second critical area of project implementation was the development of a regulatory framework for the RNP. Early in 2007, the Board established a prescriptive authority committee, composed of Board members, to oversee the executive staff and project team management for constructing the appropriate systems and processes.

Box: 2: An Bord Altranais Prescriptive Authority Committee

<table>
<thead>
<tr>
<th>2007 Members</th>
<th>2008 Members*</th>
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<tbody>
<tr>
<td>Anne Carrigy</td>
<td>Anne Carrigy</td>
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<td>Chair</td>
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<td>Ken Brennan</td>
<td>Richard Dooley</td>
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<td>Mary Durkin</td>
<td>Deirdre Duffy</td>
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<tr>
<td>Aine Enright</td>
<td>Louise Gallagher</td>
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<tr>
<td>Bernadette Mackin</td>
<td>Mary Godfrey</td>
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<td>Mary McCarthy</td>
<td>Cathryn Lee</td>
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<td>Tony Morris</td>
<td>Aine McHugh</td>
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<td>Kathy Murphy</td>
<td>Peter McKenna</td>
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<td>Sheila O’Malley</td>
<td>Caitriona Molloy</td>
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<td>Anna Plunkett</td>
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<tr>
<td>Sheila Sugrue</td>
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* Following election in September 2007 a new Board took office in January 2008

A committee of representatives from An Bord Altranais’s departments of education, registration, IT and management was also an integral part to the planning and implementation of the Board’s regulatory framework. Professional regulation commences from the point of registration as a student candidate, when enrolled in the education programme, to the attainment of practice requirements as determined by the Board. The Board was directed by the Minister for Health and Children to provide for clinical governance guidance as part of its regulatory remit and incorporated this into its remit for the introduction of nurse and midwife prescribing regulations. Clinical governance involves a collective effort by the registrant and his/her health service employer to be responsible and accountable for the safe introduction of prescriptive authority. The international experiences of the methods of other nursing regulators in addressing clinical governance requirements to support safe prescribing were reviewed within the Irish context by the project team and brought to the attention of the relevant executive staff of An Bord Altranais and the prescriptive authority committee.

An Bord Altranais constructed three primary mechanisms to provide for robust regulation detailing the requirements for professional practice and clinical governance supports:

- **Decision-Making Framework for Nurse and Midwife Prescribing**
- **Collaborative Practice Agreement for Nurses and Midwives with Prescriptive Authority**
- **Practice Standards for Nurses and Midwives with Prescriptive Authority.**
**Decision-Making Framework**

The *Decision-Making Framework for Nurse/Midwife Prescribing* (An Bord Altranais, July 2007) is a flowchart diagram illustrating a step-by-step approach for nurses/midwives and health service providers to consider the context and appropriateness of prescribing and the clinical governance supports needed. This decision-making framework (DMF) was modelled on the *Scope of Nursing and Midwifery Practice Framework* (An Bord Altranais, 2000), a tool that had been utilised by practitioners and service providers alike in considering the individual’s scope of practice. The DMF details the various elements of the prescribing process (e.g., assessment, monitoring) and outlines the competencies and supports required for the nurse/midwife prescriber. Explanatory notes accompanying the steps give additional details or practice examples to assist the decision-maker.

**Collaborative Practice Agreement**

A Collaborative Practice Agreement (CPA) is a mechanism employed in other nursing jurisdictions as part of the regulators’ system for registration and regulation of nurses and/or midwives working in an expanded and advanced practice role. The concept and structure of the CPA has been moulded to fit the Irish system and it is unique in its application across the Irish health care service. Initially, there were challenges in its introduction and acceptability by some stakeholders. An Bord Altranais addressed these issues and concerns by revising the CPA in the first phase of implementation, and published a second edition in December 2007.

The *Collaborative Practice Agreement for Nurses and Midwives with Prescriptive Authority* (An Bord Altranais, 2nd edition 2007) has a number of underlying principles:

- The CPA is the vehicle that An Bord Altranais has developed to ensure that the requirements, as outlined in the medicines legislation, are upheld and that clear lines of communication have been identified within the health care setting
- The CPA serves as a tool to ensure that communication structures have been established between the RNP and the medical practitioner, and agreed by the employer, regarding the care of their patients
- The CPA defines the parameters of the RNP’s scope of practice. Whilst recognising the responsibility of the medical practitioner to the patient, the individual nurse/midwife is accountable for her/his practice. This means that she/he is professionally accountable as an individual for her/his prescribing decisions. This encompasses the consultation and referral arrangements when a patient’s care extends beyond the RNP’s scope of practice
- The CPA is drawn up with the agreement of the RNP, the medical practitioner and the employer and specifies the parameters of the RNP’s prescribing authority (i.e., her/his scope of practice). The principles of professional accountability, responsibility, competence and clinical governance underpin the CPA
- The CPA provides a template for the development, audit and evaluation of the RNP’s prescribing practices within the health care setting. It provides guidelines for developing CPAs for the implementation of nurse/midwife prescribing and provides nurses and midwives, medical practitioners and health service providers/employers with a framework for the development (and approval) of CPAs.

Specific criteria must be detailed within the CPA, such as professional and employer details, a general description of practice setting of the registered nurse prescriber, a listing of specific medications the registered nurse prescriber is competent to prescribe (as approved by the drugs and therapeutics committee). The CPA is submitted to An Bord Altranais on an annual basis. The Board must be notified if the registered nurse prescriber changes or leaves her/his location of place of employment or if the collaborating medical practitioner exits the agreement.

**Practice Standards**

*Practice Standards for Nurses and Midwives with Prescriptive Authority* (An Bord Altranais, July 2007) is the third element in An Bord Altranais’s regulatory framework for professional practice of the RNP. They were written to:

- Provide professional guidance for prescriptive authority and associated areas of medication management
- Enable RNPs to demonstrate the key competencies and practice elements associated with this authority and related principles to ensure safe, competent effective and ethical practice
- Ensure that appropriate mechanisms of clinical and self-governance are in place relating to the RNP’s scope of practice
- Outline a regulatory framework for nurses and midwives for the continuum of their prescribing
authority/practices

• Assure the public of the competence and professional accountability of the RNP
• Support the twin track approach to the regulation of registered nurse prescribers.

Each of the nine practice standards reflects best practice guidance for prescribing practice, incorporating rationales and the specific competencies indicative for the individual standard.

An Bord Altranais produced policies and protocols for the application for registration as a nurse prescriber to facilitate this process and also produced the required notification systems to registrants, employers and the general public. The project team worked collaboratively with the Board’s registration, IT and accounts departments on these activities.

Evaluation of the Regulatory Framework

The Minister for Health and Children, when signing nurse prescribing into law, stated that the regulations would be reviewed within two years. In consideration of this review, An Bord Altranais committed itself to an evaluation of its own professional regulations and professional guidance for prescriptive authority and set up an evaluation sub-committee of its prescriptive authority committee with key stakeholder representation to support the work of the project team.

Box: 3: Members of the Evaluation Committee

| Aine McHugh (chairperson) – Member of the prescriptive authority committee, An Bord Altranais |
| Elizabeth Adams – Office of the Nursing Services Director, HSE |
| Rena Creedon – University College Cork, School of Nursing and Midwifery |
| J.P. Healy – Medical Council |
| John Hislop – Pharmaceutical Society of Ireland replaced by Damhnait Gaughan |
| Kathleen Mac Lellan – National Council |
| Denis Murphy – Irish Society for Quality and Safety in Healthcare |

The sub-committee’s terms of reference were:

1. To devise the evaluation of the professional guidance and clinical governance frameworks developed by An Bord Altranais. This encompassed
   - Decision-Making Framework for Nurse/Midwife Prescribing,
   - Collaborative Practice Agreement (CPA)
   - Practice Standards for Nurses and Midwives with Prescriptive Authority
2. To support the project team in conducting the evaluation of the professional guidance and clinical governance frameworks.
3. To develop an evaluation mechanism and oversee the project team’s review of the regulatory framework for prescriptive authority as established by the Nurses Rules, 2007.
4. To assess the effectiveness of the Requirements and Standards for Education Programmes for Nurses and Midwives with Prescriptive Authority (April 2007).
5. To liaise with the prescriptive authority committee of An Bord Altranais.
6. To produce a report, with summary and recommendations, resulting from this evaluation to the prescriptive authority committee and specified stakeholders (i.e., the resource and implementation group (RIG)).

The evaluation sub-committee met regularly from June 2008, with its final meeting scheduled for January 2009. A project plan and timeline for research activities was devised, with a preliminary report due at the end of 2008 and a regulatory report to the Board for April 2009. The findings and recommendations of the Board regulatory report will be shared with key stakeholders, as there is an independent evaluation for nurse/midwife prescribing commissioned by the RIG, which is planned to commence in January 2009. An Bord Altranais has requested the project team to support and offer its experience to the organisation that is assigned to carry out this evaluation.
The research design and methodology employed by the evaluation sub-committee was a mixed method approach, with a range of data collection tools and data sources. The data collection involved analysis of all documentation related to nurse prescribing generated by An Bord Altranais and selected data from the Royal College of Surgeons in Ireland (RCSI) and University College, Cork (UCC) schools of nursing relating to the education programme curriculum and delivery.

A survey was undertaken with nurses and midwives who completed the education programme to ascertain their views in relation to the Requirements and Standards, the professional guidance provided in the decision-making framework, practice standards and CPA. Key stakeholders such as directors of nursing and midwifery and prescribing site coordinators from health care organisations that have introduced prescribing were also asked to comment on An Bord Altranais’s regulatory and professional guidance framework and the registration and application process. Initially, focus groups were to be conducted for this purpose, but, given the current climate of travel and staffing restrictions within the HSE, written submissions by means of a short answer questionnaire were sought. This allowed for greater numbers of data sources, which was an important consideration, given the increasing number of health care sites and nurses and midwives involved in the prescribing initiative.

A third arm of the evaluation involves obtaining data based on site visits in early 2009 to both higher education institutions and associated clinical placement areas for the fourth education programme, which commenced in October 2008. These visits are conducted by the Board members and education officers for registration nursing programmes of An Bord Altranais. The visits are a regulatory requirement and are specified in the Nurses Rules, 2007. The sites visits are intended to:

- Assess that all statutory and regulatory requirements of An Bord Altranais are met
- Assess the effectiveness and efficiency of the curriculum structures, processes and outcomes
- Assess the quality and appropriateness of the educational experiences.

The methods employed at the visits will include in-depth interviews with the heads of schools, course coordinators and lecturers, (including those from the schools of pharmacy and medicine) from RCSI and UCC. The project team will assist with planning and management of the site visit process as it relates to data collection and analysis for the evaluation of the regulatory report.
Early Advisory Work

When the project implementation plan to realise the recommendations of the 2005 Final Report was drawn up, An Bord Altranais and the National Council identified two principal areas of action which centred on; 1) the development of requirements and standards for education programmes in preparing nurses and midwives for prescriptive authority and 2) educational supports for expanded medication management, particularly for medication protocol use.

Based on that focus, a multidisciplinary advisory group was formed by An Bord Altranais and the National Council that included representatives from the two organisations and others from education, medicine, clinical practice, patient interest, professional unions, nursing and HSE management.

Box: 4: Advisory Group Members

Seamus Cowman, Head of Department, School of Nursing, Royal College of Surgeons in Ireland
Mary Duff, Director of Nursing, St Vincent's University Hospital, Dublin
Henry Durnin, Director, Centre of Nurse Education, St Brigid's Hospital, HSE Dublin North East
Thomas Kearns, Acting Chief Education Officer, An Bord Altranais
Catherine Killilea, Director of Nursing and Midwifery Planning and Development Unit, HSE Southern Area
Kathleen Mac Lellan, Head of Professional Development, National Council
Stephen McMahon, Chairman, Irish Patients’ Association
Mary McCarthy, Chief Nursing Officer, Department of Health and Children
Mary Power, Nursing Alliance, Irish Nurses Organisation Section Development Officer
Colm Quigley, Vice President, Medical Council
Valerie Small, Advanced Nurse Practitioner, St James’s Hospital, Dublin

The group met regularly over a five-month period from December 2005 to April 2006 to advise the project team and provide individual and collective expertise for An Bord Altranais’s development of draft education requirements and standards to prepare nurses and midwives in their expanded roles as prescribers. It also considered the supports necessary for the development of a medication protocol framework for guiding nurses and midwives in the supply and administration of medications using medication protocols. The group’s work built upon the education content and outcomes from the pilot study for collaborative prescribing conducted as part of the Review of Nurses and Midwives in the Prescribing and Administration of Medicinal Products - Final Report (2005). This material/reference for learning outcomes, competencies for prescriptive authority and indicative content was critically examined. The group emphasised the significance of interprofessional input in providing the education, and, in particular, recognised the value of medicine and pharmacy in developing the curriculum to prepare nurse and midwife prescribers.

The group completed its brief in April 2006, having progressed as far as possible with draft Requirements and Standards, in view of the fact that medicines legislation and professional regulation were not yet established. It also achieved its objective of reviewing and amending the previous medication protocol framework, a first step in educating the professions about this practice. The draft documents for the Requirements and Standards and the medication protocol framework were approved by An Bord Altranais shortly afterwards, with the proviso that
the Requirements and Standards would need to be augmented when the legislation for the implementation of nurse/midwife prescribing was enacted.

In April 2007, An Bord Altranais approved the revised Requirements and Standards for Education Programmes for Nurses and Midwives with Prescriptive Authority that included the forthcoming medicines legislation, current government policy and the revised Nurses Rules. The following month, the Minister for Health and Children signed the medicines legislation and approved the new Nurses Rules, 2007.

The Requirement and Standards document details the competencies that must be achieved through successful completion of the programme and stipulates the learning outcomes and syllabus, both theoretical and clinical instruction. The programme is of six months’ duration, with theoretical instruction comprising a minimum of 168 hours. The clinical component of ninety-six hours minimum requires the nurse/midwife to be supervised by a designated medical practitioner during this period, to have learning opportunities and gain experience for prescriptive authority.

In addition to publishing the Requirements and Standards, An Bord Altranais undertook an analysis of the education programme delivered in the pilot study of the Review of Nurses and Midwives in the Prescribing and Administration of Medicinal Products Final Report (2005) as it related to the current education and regulation requirements for nurse prescribing. This was conducted because previous participants who had completed the education programme sought recognition of their status. An Bord Altranais recommendations resulting from this analysis were shared with these nurses and midwives in order to address their issues regarding future involvement for prescriptive authority.

Links with Education Providers

Following selection by the HSE of Royal College of Surgeons in Ireland (RCSI) and University College Cork (UCC) to deliver the education programme to prepare nurses and midwives for registration as nurse prescribers, the project team and education officers of An Bord Altranais worked closely with the schools of nursing in the two colleges in processing curriculum submission and review. The six-month course carries an award of a Certificate in Nursing (Nurse/Midwife Prescribing) Minor Award, Level 8 in RCSI, and a Certificate in Nursing (Nurse/Midwife Prescribing) (National Qualifications Framework Level 8 Special Purpose Award) in UCC. Both programmes were approved by An Bord Altranais in April 2007, with conditions attached, and have been subsequently reviewed and approved in April 2008. An education officer within An Bord Altranais, has served as the link education officer for the schools for ongoing support and guidance regarding any ongoing conditions and curriculum revisions.

The project team has presented An Bord Altranais’s regulatory framework, inclusive of the Requirements and Standards and professional guidance, to each of the four cohorts of students in the schools since the first programmes began in April 2007. The project officer is a member of the RCSI education committee, which consists of the course coordinator, the head of the school of nursing, lecturers from pharmacy and medicines and a student representative, and meets regularly to discuss programme matters. The project team and the Chief Education Officer of An Bord Altranais met with the external examiner for the programmes, Maureen Duff, on two occasions in 2008 to discuss programme status and commonalities between the Irish and Scottish systems for educating prescribers.
An Bord Altranais and the National Council, in moving forward the agenda for the expansion of medication management practices and the introduction of prescriptive authority, continued to provide professional development and guidance to the nursing and midwifery professions. Both organisations recognise that not all nurses and midwives require or desire prescriptive authority for clinical practice.

The recommendations and actions of the Review of Nurses and Midwives in the Prescribing and Administration of Medicinal Products - Final Report (2005) reflected this professional development and guidance focus. The Review recommended the revision of An Bord Altranais’s Guidance to Nurses and Midwives on Medication Management (2003), as well as the provision of information and guidance about medication protocol use and the initiation and supply of over-the-counter medications.

An Bord Altranais and the National Council reviewed the medication protocol framework introduced in 2003, and subsequently revised it, as a potential aid to support the professions in providing safe and responsible care with medications. Although the legislative basis for medication protocols has not been made explicit, a national template/framework for their development and implementation now exists through the efforts of the two organisations. (See Appendix 2 for medication protocol framework). The Department of Health and Children requested An Bord Altranais to provide guidance on this issue and requested the support of other professional regulators in advancing this framework for clinical practice. In early 2007, executives of An Bord Altranais presented the framework to the Medical Council, the Pharmaceutical Society of Ireland and the Irish College of General Practitioners.

Dissemination, communication and education for professional development relating to medication management and associated issues have been accomplished in a variety of ways over the project’s lifetime. These include:

- Continued use of the education department enquiries database (EDED) of An Bord Altranais for tracking and analysis of scope of practice queries and advice provided
- Publication of Guidance to Nurses and Midwives on Medication Management (An Bord Altranais, July 2007)
- Publication of guidance for professional practice and clinical governance for prescriptive authority (described in detail under professional regulation)
- Establishment of an An Bord Altranais research project examining continued competence requirements for RNPs.

**Guidance Document**

The ongoing collection and analysis of the EDED material greatly facilitated the project team’s work for the revision of the Guidance document by illustrating topics of medication management and related scope of practice concerns (e.g., compliance aids, transcribing, delegation of medication administration, etc.) and recording the frequency/numbers relating to each subject matter. These queries, addressed and logged into the database by the team, exceed over 550 queries in over three years. A summary of this information was presented to the prescriptive authority committee and the ethics committee of An Bord Altranais during the drafting of the Guidance to familiarise the members with the issues facing nurses and midwives and seeking the Board’s advice. The database has also been used as an information source for the scope of practice column in An Bord Altranais News, the Board’s quarterly newsletter.

The structure of the 2007 Guidance is different from previous editions in introducing standards and supporting guidance for singular topics. This change was planned to help nurses and midwives quickly locate areas of
interest and provide succinct guidance in a clear format. In recognition of the increasing responsibilities of the professions’ involvement in medication management (e.g., protocol use, adverse event reporting), advances in delivery of care, and the introduction and changes for Irish and EU health and medicines legislation, new content was included and many sections were updated. A specific section was dedicated to the medication protocol framework to support its continued use and encourage a standard for its development and implementation in health care services.

**E-learning Programme**

Coinciding with this revision was the decision of the organisations to create an e-learning programme based on the content of the *Guidance* document, an educational resource tool that was interactive and allowed for self-assessment. An Bord Altranais and the National Council worked in partnership with software developer, Aurion Learning, and the HSE Learning Centre to develop the *Guide to Medication Management e-learning programme*. The project was managed by Aine McHugh, seconded from University College Dublin School of Nursing, Midwifery and Health Systems for a period of five months. She was supported by an e-learning committee, which met for six times over a seven-month time period.

**Box: 5: E-learning Committee Members**

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Áine McHugh</td>
<td>Project Officer</td>
</tr>
<tr>
<td>Ken Brennan</td>
<td>An Bord Altranais Board member and Director of Centre for Nurse Education, James Connolly Memorial Hospital, Dublin.</td>
</tr>
<tr>
<td>Anne-Marie Ryan</td>
<td>Chief Education Officer, An Bord Altranais</td>
</tr>
<tr>
<td>Kathleen Walsh</td>
<td>Project Officer, An Bord Altranais</td>
</tr>
<tr>
<td>Thomas Kearns</td>
<td>Education Officer, An Bord Altranais</td>
</tr>
<tr>
<td>Noel Moloney</td>
<td>IT Manager, An Bord Altranais</td>
</tr>
<tr>
<td>Kathleen Mac Lellan</td>
<td>Head of Professional Development, National Council</td>
</tr>
<tr>
<td>Mary Farrelly</td>
<td>Professional Development Officer, National Council</td>
</tr>
<tr>
<td>Valerie Small</td>
<td>National Council member and Advanced Nurse Practitioner</td>
</tr>
<tr>
<td>Elizabeth Adams</td>
<td>Director of Nursing and Midwifery, HSE Nursing Services</td>
</tr>
<tr>
<td>Pat Kenny</td>
<td>Manager, HSE Learning Centre</td>
</tr>
<tr>
<td>Maureen Murphy</td>
<td>Managing Director, Aurion Learning</td>
</tr>
</tbody>
</table>

The e-learning programme aims are to:

- Provide guidance to nurses and midwives on medication management
- Encourage all nurses and midwives in clinical practice, education and management to embrace the principles of medication management to ensure patient safety and best practice
- Provide guidance to nurses and midwives on developing medication protocols
- Provide guidance to nurses and midwives on utilising medication protocols
- Enable nurses and midwives to reflect on the key points associated with medication management and the related principles to ensure effective, safe and ethical practice.

The programme was piloted in June 2007 and launched by the Minister for Health and Children at An Bord Altranais’s national conference in September 2007. The project team presented the *Guide* at the National Council’s national conference in November 2007 and hosted an area at the conference where participants were able to sign on and view the programme with assistance. The directors and staff of the centres of nurse/midwife education were presented with an orientation to the *Guide*, also in November.

The project team conducted a national dissemination and orientation programme in the first quarter of 2008. The nursing and midwifery planning and development units, the centres of nurse/midwife education and a number of higher education institutions assisted in this effort by providing venues and volunteering staff to assist on the day.
Seventeen sessions were held in nine venues across the country. Among those nurses and midwives targeted to attend were those working in practice development, clinical placement and education, in order to facilitate the dissemination of the Guide throughout the health care services. The two-hour orientation sessions were held twice daily. On average, twenty to thirty places were offered at each session, depending upon the capacity of the venue. Over 700 organisations were invited to take part in the programme. A total of 240 nurses and midwives attended the sessions. (See Appendix 3).

During the sessions, special attention was given to that part of the e-learning programme that focuses on professional guidance for the supply and administration of medications under protocol. Discussion was held with participants about their familiarity and current use of medication protocols. The project team encouraged the use of the medication protocol framework devised by An Bord Altranais and the National Council to help standardise medication management practices.

**Delegation and Supervision by Nurses and Midwives**

Another area of professional development and guidance, which evolved from the project team's focus on medication management activities, was the issue of non-nurses/health care staff involvement with medications and the role of nurses and midwives in delegation and supervision of this care activity. Part of the team's remit was the provision of ongoing support and advice to the professions for medication management queries. Service providers within the HSE and others sought guidance from An Bord Altranais regarding the responsibility and accountability of nurses in relation to delegating and/or supervising unregulated health care workers in medication management. The team directed them to the delegation policy outlined in the *Scope of Nursing and Midwifery Practice Framework* (2000).

In November 2005, An Bord Altranais established a subgroup of five Board members to examine the role of the unregulated health care worker involvement with medication management. The members of the subgroup were:

**Box: 6: Board subgroup on Non-Nurse/Health Care Staff Involvement in Medication Management**

- Sheila O’Malley (chairperson)
- Aine Enright
- Eileen Kelly
- Catherine McTiernan
- Eileen Weir

The subgroup met on nine occasions from January 2006 to September 2007. At its request and direction, the project team undertook a literature review of other countries’ experiences of legislation, regulation and professional guidance to nurses and midwives for delegation/supervision and the utilisation of health care staff and, where applicable, their involvement with medication management. The EDED was analysed for the queries about delegation and supervision concerns in general. With this information, and mindful of the growing introduction of the role of the health care assistant and social care workers across the continuum of health service settings, the subgroup extended its review to the broad issues of delegation and supervision for nursing and midwifery practices, and not limited to medication management. The subgroup wrote *Guidance to Nurses and Midwives on Delegation and Supervision of Regulated/Unregulated Healthcare Workers*, which was presented to the Board and approved in September 2007, on the understanding that its publication would be delayed to provide for discussion with the HSE in relation to the health services addressing policies relating to unregulated staff. Of particular concern to the Board was the absence of recruitment policies which had stated requirements for the education and training of care staff.
An Bord Altranais and the National Council have consistently highlighted the growing scope of practice and responsibility of nurses and midwives in medication management practices and the need for collaboration and communication on national and local platforms with others to advance safe practice. This has been accomplished in various ways. The most significant has been the ongoing commitment of An Bord Altranais and the National Council in participating in, and advancing the work of, the Resource and Implementation group (RIG). The project implementation plan of An Bord Altranais and the National Council was closely aligned with the objectives and plan of RIG, with a continued shared focus on regulation, education, professional guidance and communication. In addition, the project officer and the National Council’s Head of Professional Development were active members of two RIG sub-committees, the first studying of the role of the drugs and therapeutic committees and the second studying the audit and monitoring of nurse prescribing practices. Both organisations were also represented on the group convened by the chairperson of RIG to select and oversee the independent evaluation of nurse/midwife prescribing commissioned by the HSE, which is due to commence in January 2009.

As part of the national dissemination strategy for the implementation of nurse/midwife prescribing, the project officer participated in the National Council’s regional meetings (May–September 2007) to inform the professions about the rollout of nurse and midwife prescribing and the joint work of An Bord Altranais and the National Council in supporting expanding medication management practices. Representatives from the Department of Health and Children and the HSE also participated. The project officer detailed the regulatory framework for the RNP and the development of the e-learning programme, Guide to Medication Management. The publication, The Introduction of Nurse and Midwife Prescribing in Ireland: an Overview (Department of Health and Children, HSE, An Bord Altranais, National Council, 2007), greatly supplemented the information shared at these meetings and demonstrated the collaborative approach of An Bord Altranais and the National Council.

International

Medication management is a multidisciplinary effort by nurses/midwives, medical practitioners and pharmacists to care for and support the patient/client across the health care continuum. Throughout the past three years (and, indeed, during the previous Review), the project team has fostered relationships with other regulatory and professional bodies within and outside of Ireland. This has allowed the team to draw upon the experiences and perspectives of many individuals and organisations for implementation and evaluation activities, as outlined in the project implementation plan. These include the Nursing and Midwifery Council (UK), the New Zealand Nursing Council, the College of Nurses of Ontario (Canada), and the National Council of State Boards of Nursing (US), to name just a few nursing regulators. Being able to share developments about such issues as nurse/midwife prescribing, scope of practice, continued professional development and competence for medication management provided rich material for the project. This exchange also demonstrated the significant progress Ireland has made in these areas when compared to other jurisdictions.

National

The Department of Health and Children's nursing policy division, the HSE, the Medical Council, the Pharmaceutical Society of Ireland and the Irish College of General Practitioners were all informed of the existence of the medication protocol framework and were offered the opportunity to work with An Bord Altranais and the National Council to disseminate this professional guidance with the view to support safe practice in this area. Networks have been developed with the Clinical Indemnity Scheme and Irish Medicines Board to assist the project team in responding to scope of practice queries and other matters for professional advice.

Project implementation updates were regularly provided to the directors of the nursing and midwifery planning and development units and directors of the centres for nurse/midwifery education through various meetings and presentations by the executives and project team. The quarterly newsletters, websites and annual conferences of An Bord Altranais and the National Council were used to publicise the project work and associated documents.
Presentations on project topics (i.e., regulatory framework for prescriptive authority, medication management and professional guidance, e-learning for medication management practice) have been provided to diverse organisations throughout the past three years. These include national nursing home organisations, occupational health nurses association, higher education institutions, the Healthcare Informatics Society of Ireland, the Irish Nurses Cardiovascular Association, endoscopy nurses groups, the Hospital Pharmacists Association of Ireland and HSE regional study days. The project team has also represented An Bord Altranais on national initiatives concerning medication management and medication safety with the Health and Information Quality Authority, the Pharmaceutical Society of Ireland, and the Strategy for the control of Antimicrobial Resistance in Ireland (SARI). Participation at these events has supported the ongoing focus of An Bord Altranais and the National Council in promoting the need for collaboration and communication amongst professional, statutory organisations and other stakeholders for supporting safe practice and robust clinical governance structures for nurses and midwives in the work environment/health care setting.
Conclusion

An Bord Altranais and the National Council have worked in partnership over the past three years to facilitate the expansion of the scope of practice for nursing and midwifery for medication management. The two agencies have contributed significantly to the progression of the prescribing agenda. This has been through the recommendations of the 2005 report, *Review of Nurses and Midwives in the Prescribing and Administration of Medicinal Products* the appointment and retention of a project team, the participation in RIG and ongoing dissemination of guidance for professional practice and continuing professional development.

The five recommendations of the Review and their accompanying actions have been realised with the introduction and implementation of prescriptive authority for the professions and the development of guidance and support for the nurse’s/midwife’s enhanced role and responsibilities in medication management. The swift advancement of the implementation of prescriptive authority and expanded medication management practice in Ireland is a significant accomplishment when realising the resources and planning required and in comparison with other countries’ experiences. Opportunities and structures now exist for nurses and midwives to fully employ their skills and competence for safe medication practices.

It is anticipated that, across the health care service, patients and service users will also be the beneficiaries of this expansion of practice. Benefits (as reported internationally) such as convenience and greater accessibility for patients, greater emphasis on nonpharmacological interventions, improved medication compliance and patient self-management are likely to result.

An Bord Altranais and the National Council utilised an evidence-based approach for all aspects of this project. This has ensured a transparent, high-quality process which has produced significant deliverables as outlined in the project plan. Improving the patient/service user health care journey in a safe, accountable and effective manner through the provision of quality evidence-based nursing and midwifery practice has been a central theme for An Bord Altranais and the National Council through the project activities, up to its conclusion.

The organisations’ vision of introducing nurse/midwife prescriptive authority and expanded roles in medication management is now a reality. These achievements have had a consequential positive and constructive effect for individual, organisational and national systems and processes for ensuring appropriate and responsible health care. As a result of this project focus, health service providers have identified and are developing robust frameworks for clinical governance, (e.g., establishing drugs and therapeutic committees), monitoring and audit of prescribing and medication management processes and the need for continued inter-professional collaboration and education. An Bord Altranais and the National Council believe that these associated outcomes demonstrate the significance and critical effect of the project implementation of the 2005 *Review of Nurses and Midwives in the Prescribing and Administration of Medicinal Products - Final Report*. 
References


Background

This project is a follow-up to the three an a half year joint project of An Bord Altranais and the National Council for the Professional Development of Nursing and Midwifery Review of Nurses and Midwives in the Prescribing and Administration of Medicinal Products. The Review Project in recommendation 4.1 identified a need to continue the impetus generated through the review with an Implementation Strategy. A Project Implementation Team is required to work in consultation with key stakeholders to facilitate the implementation of the recommendations and the actions of the review. The need for the continued commitment of both organisations to the review was reinforced when the Tánaiste and Minister for Health and Children expressed support for prescriptive authority for certain nurses and midwives in October 2005.

Five key areas of development emerging from the report for the Project Implementation Team have been identified as:

1. Legislation
2. Professional Regulation
3. Education
4. Collaboration with other stakeholders/healthcare professionals
5. Professional Development and Communication

Legislation

Context:

• The current Irish Medicines Board Bill will provide for enabling legislation to make regulations for nurse/midwife prescribing and for the supply of medications under protocols.

• Status of the Bill - First House Seanad Éireann First Stage Initiated 28/06/2005
  It is not yet known when the IMB Bill will progress to a second stage.

Action Points:

1. Provide consultation services between the 2 organisations and the DoHC regarding the regulations for
   • OTC’s
   • Protocols
   • Prescriptive authority
2. Prepare documentation as required to support the development of regulations for the DoHC
3. Prepare documentation as required for the profession to guide them on the implementation of the regulations

Regulation

Action Points:

1. Develop a professional regulatory framework for those being granted prescriptive authority
2. Establish a register of prescribers
3. Devise a process for continued competence/registration
4. Set criteria for initial registration as a prescriber
Education

Action Points:
1. Revise the Guidance Document to Nurses and Midwives on Medication Management (2003) to include:
   - Prescriptive authority
   - Medication protocol use
   - Initiation and supply of OTCs
   - General guidance
2. Develop Standards and Requirements for Education for prescriptive authority
3. Develop a competency framework through revision of pilot study competencies
4. Develop an educational and implementation infrastructure for protocol use
5. Develop education/guidance for all nurses regarding safe medication management through e-learning

Collaboration with key stakeholders

Action Point:
Consultation regarding educational developments with key stakeholders and other project related activities as necessary through expert groups.

Professional Development and Communication

Action Point:
Project team develops a professional development dissemination plan through national seminars and other media as appropriate.

Project Governance Structure

1. Joint Project Management Structure
   (a) Chief Executives
      - Responsible for strategic management issues, finance issues, inter board issues
      - Six monthly meetings
   (b) Chief Education Officer/Head Professional Development
      - Responsible for operational management, progress plan issues, progress dissemination
      - Six weekly meetings or as required identified by either organisation
   (c) Project Officers and Chief Education Officer/Head Professional Development
      - Monthly meetings
   (d) Line Management
      - Chief Education Officer, An Bord Altranais

2. Visible Partnership
   Joint logo on documentation as appropriate
   Joint publications

3. Project Plan
   An Bord Altranais and the National Council for the Professional Development of Nursing and Midwifery agree project plan for the implementation of The Review of Nurses and Midwives in the Prescribing and Administration of Medicinal Products.
# Project Plans

## November 2005: Project Plan

<table>
<thead>
<tr>
<th>Dates</th>
<th>Tasks</th>
<th>Documentation to Board Meetings</th>
</tr>
</thead>
<tbody>
<tr>
<td>November 2005 - June 2006</td>
<td>Guidance to nurses and midwives on medication protocols&lt;br&gt;Develop standards and requirements in respect of the education and training leading to prescriptive authority for nurses and midwives&lt;br&gt;National information sessions regarding report and recommendations. Training sessions to Centres of Nurse Education&lt;br&gt;Six-monthly progress report</td>
<td>February 2006&lt;br&gt;February 2006&lt;br&gt;June 2006</td>
</tr>
<tr>
<td>July 2006 – December 2006</td>
<td>Six-monthly progress report to boards&lt;br&gt;Commence E-Learning package for guidance to nurses and midwives on medication management</td>
<td>September 2006&lt;br&gt;November 2006</td>
</tr>
<tr>
<td>June 2007 – October 2008</td>
<td>Develop detailed project plan as appropriate depending on developments&lt;br&gt;Six monthly progress reports</td>
<td>June 2007&lt;br&gt;December 2007, June 2008, November 2008</td>
</tr>
<tr>
<td>Ongoing</td>
<td>Provide on-going information and support to DoHC, health service providers and nurses and midwives&lt;br&gt;Maintain database of medication queries&lt;br&gt;Provide quarterly newsletter and web updates</td>
<td></td>
</tr>
</tbody>
</table>

Project plan will be amended as necessary.
## February 2006: Revised Project Plan

<table>
<thead>
<tr>
<th>Dates</th>
<th>Tasks</th>
<th>Documentation to Board Meetings</th>
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<tbody>
<tr>
<td>November 2005 - June 2006</td>
<td></td>
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<tr>
<td></td>
<td>Develop medication protocol framework</td>
<td>February 2006</td>
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<tr>
<td></td>
<td>Develop requirements and standards in respect of the education and training leading to prescriptive authority for nurses and midwives</td>
<td>February 2006</td>
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<tr>
<td></td>
<td>Review of the role of the registered nurse and the supervision and delegation of the non-nurse through a sub-group set up at ABA (24th Nov 2005)</td>
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<tr>
<td></td>
<td>Publication of medication protocol framework</td>
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<tr>
<td></td>
<td>Revision of Guidance document on medication management to include:</td>
<td>June 2006</td>
</tr>
<tr>
<td></td>
<td>• Medication protocols</td>
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<tr>
<td></td>
<td>• Supply and administration of OTC’s</td>
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<td></td>
<td>• Additional items</td>
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<tr>
<td></td>
<td>Guidance to the professions on medication protocols and the supply and administration of OTC’s through national information sessions/Training sessions to Centres of Nurse Education</td>
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<tr>
<td></td>
<td>Six-monthly progress report</td>
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<td>Jan 2006 – June 2007</td>
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<tr>
<td></td>
<td>Complete E-Learning package for guidance to nurses and midwives on medication management</td>
<td>April 2007</td>
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<tr>
<td></td>
<td>Six-monthly progress report</td>
<td>June 2007</td>
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<td>June 2007 – October 2008</td>
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</table>

Project plan will be amended as necessary.
### April 2007: Revised Project Plan

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Tasks</th>
<th>Completion Dates</th>
<th>Responsibilities</th>
<th>Key Partners</th>
</tr>
</thead>
</table>
| Construct regulatory structures for Prescriptive Authority for Nurses and Midwives | Rules and Requirements and Standards for Prescriptive Authority  
• Nurses Rules, 2007  
• Requirements and Standards for Education for Prescriptive Authority  
• Practice Standards  
• Clinical governance guidance to nurses/midwives and health service providers  
  Decision-Making Framework  
  Collaborative Practice Agreement  
• Continued competency framework to maintain prescriptive authority  
  for nurses and midwives with prescriptive authority  
  Began – end of February  
  Status – ongoing | April 4 2007  
  April 4 2007  
  February 2009 | An Bord Altranais – Executive with Board Approval | DoHC |
| To devise the registration & notification process for prescribing | Registration  
• Process of initial registration notification  
• Renewal process  
• Change of employment notification  
• Accessibility to register database for confirmation of nurse/midwife authority to prescribe  
• Link to health service providers employment governance structures w/ Board requirements | June 2007  
  Ongoing | ABA: Project Office IT department Registration department | HSE, Service Providers |
| To review & approve education programmes preparing prescribers | Education  
• Amendments to Requirements and Standards for Education  
• Short term approval of RCSI and UCC programmes  
• Evaluation of education programmes  
• Committee to steer/oversee introduction of the education programme  
• Long term/future approval process | April 2007  
  March 29 2007  
  October 2007  
  Established February 2007 | ABA Education Officers and Education and Training Committee | RCSI & UCC  
  Clinical Placement sites |
| To devise & disseminate professional guidance for supply & administration of medications under protocol | Professional guidance and dissemination for the Medication Protocol Framework  
• Project management for development and communication with key partners  
  Meetings with Medical Council & ICGP  
  Communication to PSI  
• Publication and dissemination of guidance | June 2007  
  March – April 2007  
  June 2007 | ABA | NCNM, HSE, Medical Council, Pharmaceutical Society of Ireland |
| Develop E-learning Programme Informing profession of medication management initiatives (professional guidance, medication protocol use,) | E-Learning programme for medication management  
• Project Management to liaise with HSE Learning Centre, An Bord Altranais, NCNM  
• Project Officer for E-learning programme on medication management | June 2007  
  March – June 2007 | ABA, NCNM | HSE Learning Centre |
### April 2007: Revised Project Plan continued

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Tasks</th>
<th>Completion Dates</th>
<th>Responsibilities</th>
<th>Key Partners</th>
</tr>
</thead>
</table>
| To assist w/communication strategy | Assist Resource and Implementation Group on Nurse Prescribing with developing & implementing a communication strategy at national, regional and local levels (including special groupings)  
• Develop common briefing material & process for providing information & education in relation to nurse prescribing  
• Participation with regional meetings (10) | April – May 2007  
April 2007 | ABA | NCNM, HSE, DoHC |
| Provide for Professional guidance on medication management | Revision of Guidance to Nurses and Midwives on Medication Management  
• Review by Ethics Committee – December 2006  
• Review by the Board – April 18 2007  
• To coincide with e-learning programme | June 2007 | ABA |
The Medication Protocol Framework has been developed from a project supported by An Bord Altranais and the National Council. The organisations supports the developments of medication protocols using a nationally recognised template based on international evidence and best practice. The responsibility for developing and quality-assuring medication protocols rests with health service providers. It is important that local policies are devised to support the development and implementation of any medication protocols for patient/service-user care.

Provisions should be made:

- To enable nurses, midwives and members of the multidisciplinary health care team to devise and implement medication protocols where there is a service need
- To enable the education and training of nurses and midwives involved in the use of such protocols
- To disseminate information to all members of the health care team regarding organisational policies underpinning the use of medication protocols
- To establish review and audit processes to evaluate the use of medication protocols as part of quality care provision and risk management programmes.

These key provisions should be in place to facilitate nurses and midwives in safe practices for the supply and administration of medication utilising a medication protocol.

Medication Protocol Framework Template

1. Critical elements
   1.1 Name of the organisation and/or department where the protocol applies.
   1.2 Date the protocol comes into effect and a review date and/or expiration date.
   1.3 Names and signatures of protocol author(s) and reviewers, which should include the chair of the drugs and therapeutic committee (if relevant), the medical consultant, a pharmacist and nurses/midwives working within the clinical area.
   1.4 Name(s) and signature(s) of the employing authority who is authorising the implementation of the protocol (e.g., health service provider).

2. Clinical criteria
   2.1 Clinical condition for use of the protocol:
      2.1.1 Definition of the clinical condition including the criteria for confirmation of the condition.
      2.1.2 Clearly define in what circumstances the protocol applies.
   2.2 Relevant international and national guidelines/evidence-based practice.
   2.3 Inclusion criteria for patient/service-user treatment using the protocol.
   2.4 Exclusion criteria for patient/service-user treatment using the protocol.
   2.5 Actions to be taken for those who are excluded from the protocol, whether by the above exclusion criteria or because the patient/service-user does not wish to receive treatment using the protocol.
   2.6 Description of circumstances and referral arrangements when further advice or consultation is required.
   2.7 Documentation requirements of the protocol to include specific details of where the supply or the supply and administration of the medication is to be recorded.

APPENDIX 2

Medication Protocol Framework
3. Details of medication to be supplied

3.1 Name of medication, legal classification, dosage, maximum total dosage, quantity, route and frequency of administration and the minimum and maximum period over which the medication should be administered.

3.2 Warnings, including cautions, contraindications, interactions and side effects.

3.3 Potential adverse reactions and procedures for treatment of same.

3.4 Procedure for reporting adverse drug reactions to the Irish Medicines Board.

3.5 Procedure for the reporting and documentation of errors and near misses involving the medication.

3.6 Validated reference charts to be available in circumstances where calculation of dose is required.

3.7 Mechanism for storage of medication and for obtaining supply.

3.8 Resources and equipment necessary for care under the protocol to be specified. This is dependent on the assessment requirements and best practice guidelines identified for the clinical condition. All involved staff should be familiar with the availability and location of resuscitative equipment.

3.9 Audit process to identify appropriate use of the protocol or unexpected outcomes.

4. Patient/service-user care information

4.1 The advice (including written) to be given to the patient/service-user or carer before and/or after treatment.

4.2 Medication information to be provided to the patient/service-user or carer using the authorised patient information leaflet if one is available. It should include relevant warnings including possible side effects and potential adverse reactions.

4.3 Details of any necessary follow-up action and referral arrangements. This should be as specific as possible, to include how the process of referral is to be done, with whom, when and where it should occur.

5. Staff authorised to use protocol

5.1 Name(s) and signature(s) of nurses/midwives authorised to use the medication protocol, including any necessary criteria:

5.1.1 Professional qualifications, training, experience and competence seen as necessary and relevant to the clinical condition treated using the medication protocol.

5.1.2 Requirements for staff for continuing training and education for supplying medication using the specific protocol.
1. Orientation Session Planning and Delivery

The orientation sessions were promoted a month in advance via a letter inviting members of the nursing and midwifery profession to attend. Among those targeted included individuals working in practice development, clinical placement and education to facilitate the dissemination of the Guide throughout the health care services.

The orientation sessions were delivered at nine venues, covering each of the Nursing and Midwifery Planning and Development Units (NMPDUs) and the Health Service Executive (HSE) regions. On average, between 20 and 30 places were advertised, depending on the capacity of the venue and computer availability. Sessions were held twice daily in order to accommodate as many people as possible (morning and afternoon). The session was held in HSE NMPDU Dublin Mid Leinster for two full days and in HSE NMPDU West for a day and a half.

1.1 Invitation

Invitations were sent to Directors of Nursing and Midwifery and other representatives giving the relevant session details. These contacts were supplied from a number of sources including the National Council for the Professional Development of Nursing and Midwifery, NMPDUs and An Bord Altranais databases. Details were also obtained from the Nursing Homes Ireland Directory, the HSE website, National Federation of Voluntary Bodies website and the Institute of Public Administration Yearbook & Diary 2008. Potential participants were informed that there was limited capacity and seating would be reserved on a first come first served basis.

The following practice areas were targeted - General, Midwifery, Psychiatric Nursing, Intellectual Disability, Care of the Elderly, Public Health, Practice Nurses, Higher Education Institutions and other areas.

1.2 Pilot of orientation session and questionnaire

The proposed structure of the session and questionnaire were piloted prior to the national sessions. Directors from the Centre of Nurse Education were invited, or asked to nominate an individual, to attend a pilot session on the 7th November 2007. A total of twenty three individuals attended this session. The structure of future orientations and the content of the questionnaire were restructured on comments and experience gained from the pilot session. For example, a presentation was devised on background information and context for the development of the programme.

1.3 Attendance

![Chart 1: Practice Area of Attendees](attachment:image.png)

Other includes NMPDU; Radiotherapy; Drug Treatment Centre Board; Orthopaedic

APPENDIX 3

2. Content of Orientation Session

Participants were welcomed to the session and introduced to the facilitators and to each other by identifying the practice area and position.

2.1 Presentation

The seminars began with a presentation by the Project Officer, which included:

- Overview of the 2 hour session
- Linking patient safety with medication management
- Summary of An Bord Altranais and the National Council activities following on from the recommendations of the Review of Nurses and Midwives in the Prescribing and Administration of Medicinal Products - Final Report (An Bord Altranais and the National Council, 2005)
- Aims of the e-learning programme
- Outline of the programme units

2.2 Hands on learning & Project Team support

Following the brief presentation, participants were guided in the registration process in order to access A Guide to Medication Management on the HSE Learning Centre website. This first step for accessing the programme required self-completion of demographic and other personal data on the website. There was a wide variance in the level of computer skills for participants and one to one assistance (in addition to written instructions) for registering and accessing the Guide was provided. The Project Team answered queries on issues ranging from medication management to IT assistance and methods of delivering the programme in health care organisations. The time allocated for this self directed practical experience was between 1 1/4 hours to 1 3/4 hours.
2.3 Questionnaire

Participants were provided with an evaluation questionnaire to complete. The questionnaire was divided into three sections. The first section contained information about the participant (Job title, nursing/midwifery discipline and length of time of qualification). The second section included closed questions asking participants to rate the orientation session and the content of programme from 1 to 5 on a number of topics using the Likert Scale (statement with which the participant shows his/her amount of agreement or disagreement). The last section of the survey asked respondents to answer six open ended questions on the session and the content of the Guide.

3. Results of Questionnaire

Out of a total of 240 attendees 231 questionnaires were returned, representing a response rate of 96%.

3.1 Closed Questions

Table 2 indicates the responses to the closed questions. In most cases over 90% of respondents strongly agreed or agreed with the statement, indicating a very high satisfaction rate with the programme. As Table 2 shows, the majority of respondents found their experience of the programme to be a positive and worthwhile one.

The statement which received a higher level of disagreement in comparison to other statements was "The amount of information on each screen was appropriate" where:

- 7% either disagreed or strongly disagreed with the statement
- 87% either agreed or strongly agreed with the statement

The level of disagreement with the above statement also represented in responses to the open ended questions where a minority of respondents made the following comments:

- ‘not enough information’
- ‘some information could have been more detailed’
- ‘more information in the website’

However eighty six percent strongly agreed or agreed statement, that the amount of information on each screen was appropriate. A majority of the comments in the open ended question indicated there was an appropriate amount of information, with comments describing the programme as one with ‘attractive web pages’ and with many respondents describing the information as ‘concise’ and ‘to the point’.

Table 2  All figures are in percentage representing 231 valid respondents

<table>
<thead>
<tr>
<th>Question</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Undecided</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>I found it easy to navigate through the Units</td>
<td>62</td>
<td>28</td>
<td>4</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>The amount of information on each screen was appropriate</td>
<td>53</td>
<td>34</td>
<td>7</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>The material presented in this programme was relevant to my interests and learning needs</td>
<td>64</td>
<td>27</td>
<td>3</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>The material contained an appropriate mix of text, images and sound</td>
<td>41</td>
<td>44</td>
<td>10</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>The activities in the material made me reflect on what I had read</td>
<td>60</td>
<td>33</td>
<td>3</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>The number of activities included in this material was about right</td>
<td>41</td>
<td>47</td>
<td>8</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>The content and activities were at the appropriate level</td>
<td>49</td>
<td>43</td>
<td>4</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>The language used within the material was appropriate</td>
<td>62</td>
<td>31</td>
<td>3</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>I liked the look of the programme. (Design, images, colours etc)</td>
<td>63</td>
<td>29</td>
<td>3</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>This programme will assist nurses and midwives in increasing their understanding of their roles and responsibilities in medication management</td>
<td>66</td>
<td>26</td>
<td>4</td>
<td>1</td>
<td>4</td>
</tr>
</tbody>
</table>
Table 2  Continued

<table>
<thead>
<tr>
<th>Question</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Undecided</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>This programme provides a stimulating approach to learning about medication management</td>
<td>65</td>
<td>29</td>
<td>2</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Provide and explain guidance on medication management in a non-threatening manner</td>
<td>72</td>
<td>23</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Provide guidance on utilising medication protocols</td>
<td>58</td>
<td>33</td>
<td>5</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Provide a useful repository for valuable information and resources on medication management</td>
<td>62</td>
<td>33</td>
<td>2</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

3.2 Responses to open ended questions

Respondents were asked to comment on six open ended questions which were:

- How does this method of online learning compare to your previous learning experiences?
- The best thing about this programme was?
- The worst thing about this programme was?
- The programme could be improved by?
- Do you have any suggestions or ideas for disseminating this programme to Nurses/Midwives in your organisation?
- Have you any further comments?

The below sections (3.2.1 to 3.2.6) highlight the frequently occurring themes derived from an analysis of the responses.

3.2.1 Explain how this method of online learning compares to your previous learning experiences

- The most common response to this answer was the ability of nurses and midwives being able to ‘work at own individual pace’. Comments which are representative of a significant of respondents include ‘self learning- can go in your own time’, ‘This way of learning is excellent as you can do it in your own time, if you are not taking in what you are reading you can leave it and come back to it when you have a clearer head’ ‘Self directed/controlled’. The programme can be accessed 24/7 from any computer was recorded as a positive (‘Easy accessibility at any time and place’).

- The programme is ‘easy to navigate’. Descriptions which were representatives of respondents include ‘It was easy to follow’, ‘non-threatening’, ‘user friendly’ and ‘Easy to digest and understand’.

- Information was easy to take in. The main reason for this according to respondents was the ‘interactive’ approach of the programme because of the videos and quizzes; ‘the information was... clear and concise’; ‘self directed so therefore you are much more likely to remember content’; ‘information was delivered in a memorable manner’ and the ‘reviews at the end... ensures learners understand’.

- Some users highlighted the barrier presented to some people who may lack computer skills.

3.2.2 The best thing about the programme was

Many of the themes raised in this section were previously stated in the above section. The issues repeated included working at own pace, information is easily retained and easy to navigate as discussed above.

- Respondents generally agreed that there was an ‘appropriate amount of information’ which was relevant for all disciplines and areas of medication management within the programme. It should be noted; some respondents believed more information should be provided (see section 3.2.3). Comments representative of this section include ‘Covered every question I had unanswered’; ‘Most of the things you need to know are there’ and ‘Updated my knowledge on medication management’.

40
The programme was ‘self taught’. The ability to ‘refresh at anytime’; ‘spend as much or as little time as possible on the programme’, ‘as the programme is set into individual units you can complete all units in your own time’ and the ‘flexibility of the programme’ were the main reasons respondents gave for the programme being self taught.

The interactive lay out of the programme was highlighted as one of the best things about the programme (videos, quizzes, feedback, free text).

Some respondents highlighted the Resources sections as the best thing about the programme, as it allows for ‘further study’.

### 3.2.3 The worst thing about the programme was

- The principal problem reported in the programme was the lengthy downloading of the videos. One respondent reported ‘Video’s did not download [even after] waiting 8 minutes’.

- Some respondents stated that the content of the video was not applicable to a real clinical area. This was not expanded upon.

- The issue of no ‘protected time’ or ‘dedicated time’ in the work area for nurses/midwives to execute the programme

- Accessing the programme was raised as an obstacle for two reasons. Firstly, not all work areas will have internet access (‘IT equipment is poorly supplied for nurses’ ‘Not all staff will have internet access’). Secondly, a substantial number of respondents stated that some nurses who are not very computer literate may be disadvantaged in accessing the programme

- While the vast majority of respondents indicated they believed there was an appropriate amount of information in the programme, some highlighted the following omissions or areas that needed further clarification/information as:
  - Crushing of medications
  - More specific sections for Public Health Nurses
  - Information on mental health in the community setting
  - Greater information on the management of MDAs
  - Additional sample protocols
  - IV therapy
  - How medication is to be accepted by pharmacies
  - Logging in register books for MDAs
  - Include detailed information on drug calculations (and/or a link in resources)
  - Further information on transcribing
  - Increase the number of FAQ’s
  - Updating some of the listed resources

- Some respondents pointed out the process of logging on to the HSEland website was an obstacle. This was apparent at the orientation sessions when many attendees required assistance in registering onto the HSEland website.

### 3.2.4 The programme could be improved by

- Increase the speed in downloading the video

- ‘More scenarios’ and ‘giving more examples of what is being said and using more case studies to highlight how the information can be transferred to clinical practice’ e.g. using more videos.

- Some respondents suggested adding new features to the programme. These features included a ‘quick search menu’ in order ‘to find words promptly’. Respondents also suggested having a blog area or chat room for ‘practitioners to share medication management experiences and dilemmas’.

- Some individuals noted that nurses/midwives might be more inclined to complete the programme if there was a completion certificate generated at the end of the programme.
Respondents highlighted that the use of the programme could be benefited by:

‘Providing support for nurses [and midwives] not confident in computers’
‘Provision of protected time to do the programme’
‘More computers and IT support in the workplace’.

3.2.5 Suggestions/ideas for disseminating programme

Some of the suggestions/ideas mentioned here were specific to individuals in their particular clinical area. These included:

• word of mouth
• provision of similar sessions as provided by An Bord Altranais in local areas
• seek protected time for doing course
• IT and computer investment in local areas.

The below points were suggestions/ideas by respondents for An Bord Altranais, the National Council and/or HSE Learning Centre to consider in partnership for future planning:

• Encourage the programme to be rolled out in college for graduate (and post-graduate) courses.
  ‘Incorporate into education programmes for student nurse and midwives’ ‘Through the nursing curriculum on the BSc degrees’
• Have course available on CD. This was mentioned a number of times. Some work areas have computers but have no or slow internet access;
• Advertise and promote the e-learning programme in as many places as possible:
  Provide posters with information on the programme to work areas and libraries in healthcare settings
  HSE newsletter, An Bord Altranais newsletter, INO newsletter
  Promote the HSEland website and the course by providing links from other internet pages e.g. hospital homepages, colleges websites
  Attend sessions and meetings and have a stand there advertising the programme
• Inform and remind individuals working with within nursing and midwifery education and management areas of the existence of the programme on a regular basis
  ‘Utilise Centres for Nurse Education in the dissemination’;
  ‘Launch the programme through the Practice Development Units monthly meetings and
  Follow up over the year with face to face meetings’
  CNM2 and CNM3 meetings’.
• ‘Make sure it is highlighted in a way to get feedback from users’.

3.2.6 Any further comments

Many of the themes mentioned in this section are highlighted above. Particular themes which have not been raised previously include:

• ‘The session was well presented’.
• ‘Some nurses may find the course too basic’.

4. Conclusion

The orientation session was devised in order to disseminate An Bord Altranais and National Council e-learning programme, A Guide to Medication Management. Those individuals targeted included those working in practice development, clinical placement and education to facilitate the dissemination of the Guide throughout the health care services. Although there was a low number in attendance of the overall number, of those invited the majority expressed a high degree of satisfaction with the programme and orientation session. Analysis of the evaluation questionnaire indicated the intention of many attendees to disseminate the e-learning programme within their workplace.
Medication Management e-learning Orientation

Date ____________________  Job Title___________________________________

Instructions
Thank you for taking the time to complete our orientation questionnaire. We appreciate your feedback. This questionnaire should take approximately 15 minutes of your time. Please answer all questions.

About You
1. What Nursing Discipline do you belong to? (Tick all sections that apply)
   - Registered General Nurse
   - Registered Psychiatric Nurse
   - Registered Children’s Nurse
   - Registered Intellectual Disability Nurse
   - Registered Midwife
   - Registered Public Health Nurse
   - Registered Nurse Tutor
   - Other (Please Specify)

2. How long have you being qualified as a nurse?
   - Newly qualified
   - 1-5 Years
   - 6-10 Years
   - 11-15 Years
   - 15 or more Years

About the E-learning Programme
Rate each statement using the scale
1 = Strongly agree, 2 = Agree, 3 = Undecided, 4 = Disagree, 5 = Strongly disagree

<table>
<thead>
<tr>
<th>Statement</th>
<th>Rate 1-5</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. I found it easy to navigate through the Units.</td>
<td></td>
</tr>
<tr>
<td>4. The amount of information on each screen was appropriate.</td>
<td></td>
</tr>
<tr>
<td>5. The material presented in this programme was relevant to my interests and learning needs.</td>
<td></td>
</tr>
<tr>
<td>6. The material contained an appropriate mix of text, images and sound.</td>
<td></td>
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<tr>
<td>7. The activities in the material made me reflect on what I had read.</td>
<td></td>
</tr>
<tr>
<td>8. The number of activities included in this material was about</td>
<td></td>
</tr>
</tbody>
</table>
9. The content and activities were at the appropriate level.
10. The language used within the material was appropriate.
11. I liked the look of the programme. (Design, images, colours etc).
12. Three hours was sufficient time for me to complete this programme.
13. This programme will assist nurses and midwives in increasing their understanding of their roles and responsibilities in medication management.
14. This programme provides a stimulating approach to learning about medication management.

**Did the programme:**
(1 = Strongly agree, 2 = Agree, 3 = Undecided, 4 = Disagree, 5 = Strongly disagree)

<table>
<thead>
<tr>
<th>Rate 1-5</th>
</tr>
</thead>
<tbody>
<tr>
<td>15. Provide and explain guidance on medication management in a non-threatening manner?</td>
</tr>
<tr>
<td>16. Provide guidance on utilising medication protocols?</td>
</tr>
<tr>
<td>17. Provide a useful repository for valuable information and resources on medication management?</td>
</tr>
</tbody>
</table>

*Please read the following statements and make comments as appropriate. Please write in the space provided:*

<p>| 18. Explain how this method of online learning compares to your previous learning experiences: |
| 19. The best thing about this programme was: |
| 20. The worst thing about this programme was: |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>21.</td>
<td>The programme could be improved by:</td>
</tr>
<tr>
<td>22.</td>
<td>Do you have any suggestions or ideas for disseminating this programme to Nurses/Midwives in your organisation?</td>
</tr>
<tr>
<td>23.</td>
<td>Have you any further comments?</td>
</tr>
</tbody>
</table>

Once again, thank you for your time in participating in this orientation evaluation.