Findings from the Survey of
Venepuncture and Intravenous Cannulation Education and Training
among Nurses and Midwives Employed in Acute Hospitals within the Republic of Ireland
January 2009

Changing practice to support service delivery
On behalf of the Office of the Nursing Services Director at the Health Service Executive (HSE), I am delighted to publish this report of Findings from the Survey of Venepuncture and Intravenous Cannulation Education and Training among Nurses and Midwives Employed in Acute Hospitals within the Republic of Ireland.

The survey was conducted in response to a request from the Nursing and Midwifery Expert Group - European Working Time Directive (EWTD). The Office of the Nursing Services Director was commissioned to administer the survey and issue a report of its principal findings to the Expert Group.

This report presents the findings of the survey and provides quantification of the extent to which nurses and midwives in acute hospitals have received education and training on venepuncture and intravenous cannulation and use these skills in the course of their duties. The report also identifies a way forward to facilitate the implementation of the EWTD.

A fundamental component of the HSE Transformation Programme 2007-2010 is a commitment to ensuring that patients are treated in the health care setting most appropriate to their needs, while at the same time maximising the “value for money” of health care resources.

The Acute Hospital Inpatient Bed Utilisation Review conducted in 37 Acute Hospitals between November 2006 and February 2007, indicated that 12% of 3035 patients surveyed only met the Appropriateness Evaluation Protocol (AEP) Admission Criterion “intravenous/IV therapy” (fluids/medications). The review also suggested that many of these patients could have received therapy outside the acute hospital setting.

Consequently, nurses and midwives with clinical competencies in venepuncture and intravenous cannulation can play an invaluable role in the clinical frontline setting, not only by supporting the implementation of the EWTD, but also by promoting quality and continuity of care through enabling patients to be treated effectively and efficiently in the most appropriate health care setting.

Finally, I would like to thank each hospital that took time to complete the survey form and to pay particular thanks to Fiona Mc Mahon for her work in conducting the survey and compiling this report.

Dr Siobhan O’Halloran
Health Service Executive
Nursing Services Director
# Table of Contents

## Preface

## Introduction

### SECTION 1

#### HSE National Perspective
- 1.1 Overview
- 1.2 Venepuncture and intravenous cannulation training providers and facilitators
- 1.3 Comments from survey respondents

### SECTION 2

#### Administrative Area Perspective
- 2.1 Overview
- 2.2 Dublin/Mid-Leinster
- 2.3 Dublin/North East
- 2.4 South
- 2.5 West

### SECTION 3

#### HSE Hospital Network Perspective
- 3.1 Dublin South: Dublin/Midlands
- 3.2 Dublin North: North East
- 3.3 Southern: South East
- 3.4 Mid-West: West/North West

### SECTION 4

#### The Way Forward
- 4.1 Conclusions
- 4.2 Recommendations

### APPENDICES:

- **Appendix A** - EWTD Briefing
- **Appendix B** - Nursing and Midwifery Expert Group - EWTD
- **Appendix C** - List of Hospitals Surveyed
- **Appendix D** - 2007 Venepuncture and Intravenous Cannulation Category 1 Courses Approved by An Bord Altranais
- **Appendix E** - Venepuncture and Intravenous Cannulation Survey Data Collection Form
- **Appendix F** - Cover Letter Re: Survey Data Collection Form
LIST OF TABLES & FIGURES:

HSE National Perspective:

Figure 1:  WTE Number of Nurses/Midwives (Total)  7
Figure 2:  HC Number of Nurses/Midwives (Total)  7

HSE Administrative Area Perspective:

Figure 3:  WTE % of Nurses/Midwives (Area Comparison)  13
Figure 4:  HC % of Nurses/Midwives (Area Comparison)  14
Figure 5:  WTE Number of Nurses/Midwives - Dublin/Mid-Leinster  15
Figure 6:  HC Number of Nurses/Midwives - Dublin/Mid-Leinster  15
Figure 7:  WTE Number of Nurses/Midwives - Dublin/North East  17
Figure 8:  HC Number of Nurses/Midwives - Dublin/North East  17
Figure 9:  WTE Number of Nurses/Midwives - South  19
Figure 10: HC Number of Nurses/Midwives - South  19
Figure 11: WTE Number of Nurses/Midwives - West  21
Figure 12: HC Number of Nurses/Midwives - West  21

HSE Hospital Network Perspective:

Table 1:  WTE Number of Nurses/Midwives (Area Comparison)  13
Table 2:  HC Number of Nurses/Midwives (Area Comparison)  13
Table 3a: Dublin South: Dublin/Midlands  23
Table 3b: Dublin South: Dublin/Midlands  24
Table 4a: Dublin North: North East  25
Table 4b: Dublin North: North East  26
Table 5a: South: South East  27
Table 5b: South: South East  28
Table 6a: Mid-West: West/North West  29
Table 6b: Mid-West: West/North West  30
INTRODUCTION

Every year thousands of patients undergo venepuncture and intravenous cannulation in different healthcare settings, with venepuncture identified as among the most common invasive procedures in hospitals and with up to 80% of patients being admitted to hospital receiving intravenous therapy.

This report provides quantification of the extent to which nurses and midwives in acute hospitals in the Republic of Ireland have received education and training on venepuncture and intravenous cannulation and use these skills in the course of their duties.

It contains the core findings from a national survey of acute hospitals in the Republic of Ireland between February and March 2008, which was conducted in response to a request from the Nursing and Midwifery Expert Group - European Working Time Directive (EWTD). The Office of the Nursing Services Director was commissioned to administer the survey and issue a report of its principal findings to the Expert Group.

This report also identifies a way forward to facilitate the implementation of the EWTD Directive 2003/88/EC, which was introduced by the European Union to protect the health and safety of its workers through minimum requirements in relation to working hours, rest periods, annual leave for all workers and working arrangements for night workers.

The EWTD was transposed into Irish law by the European Communities (Organisation of Working Time) (Activities of Doctors in Training) Regulations 2004 (S.I. No. 494 of 2004). These regulations came into effect from 1 August 2004. The Regulations provide for a phased reduction in weekly hours for junior doctors over a five-year transition period, from 58 in 2004, to 56 by 1 August 2007 and 48 by 1 August 2009.

In 2004, the Nursing and Midwifery Expert Group - EWTD was established to consider and co-ordinate the involvement of nurses and midwives in any altered or expanded roles to emerge following implementation of the EWTD for Non Consultant Hospital Doctors (NCHDs). The Expert Group supports innovative nursing and midwifery practice, including expanding roles that are responsive to service need, and has stated that expansion of practice should occur for all nurses/midwives on the clinical career pathway from staff nurse and midwife, through to clinical nurse/midwife specialist and advanced nurse/midwife practitioners.

Within acute hospitals, intravenous cannulation is a task traditionally assigned to junior doctors more often than to nurses/midwives. Subsequently, the Expert Group’s request for a survey into the experiences of nurses/midwives in relation to venepuncture and intravenous cannulation is an example of this support, and recognition of the invaluable role that nurses/midwives with these clinical competencies play in the frontline of health care.

The survey conducted aimed to facilitate the implementation of the EWTD in acute hospitals and determine the health service requirement and funding implications for nurses and midwives employed in acute hospitals to be educated and trained in venepuncture and intravenous cannulation.

For the purposes of the survey, the terms “venepuncture” and “intravenous (IV) cannulation” were defined as follows:

- **Venepuncture (VP)** – the introduction of a needle into a vein to obtain a blood sample for haematological, biochemical or bacteriological analysis.

- **Intravenous Cannulation (IVC)** – the introduction of a flexible hollow plastic tube (i.e. cannula) containing a needle (i.e. stylet) into a peripheral vein to provide access to the vascular circulation for the administration of intravenous medications or fluids, and to take blood samples. The stylet enables the cannula to get through the skin and is removed once the cannula is in position.

The survey’s main objectives were to calculate the number of nurses and midwives educated and trained in venepuncture and intravenous cannulation, and then quantify how many of them actually used these skills in the course of their duties. It also aimed to identify current facilities for providing education and training in venepuncture and intravenous cannulation.

A total of 51 hospitals across the eight hospital networks were approached to participate, with a 98 per cent response rate (see Appendix A). Of the 50 surveys completed, 70 per cent addressed each of the 22 quantitative and two qualitative questions.

The core findings of the *Survey of Venepuncture and Intravenous Cannulation Education and Training among Nurses and Midwives* is presented in this report, which is divided into four sections:

- Section 1 outlines the HSE National Perspective.
- Section 2 outlines the HSE Administrative Area Perspective.
- Section 3 outlines the HSE Hospital Network Perspective.
- Section 4 sets out the way forward by identifying conclusions and recommendations derived from the findings.
SECTION 1 –

HSE National Perspective

The following section presents an overview of the education and training levels in venepuncture and intravenous cannulation of nurses in all four HSE Administrative Areas - Dublin/Mid-Leinster; Dublin/ North East; South; West. It also lists the range of current training providers and facilitators and highlights the variation in programs offered. The section also includes a list of comments from survey respondents regarding venepuncture and intravenous cannulation education and training.

1.1 Overview

The whole-time equivalent (WTE) data on nurses/midwives in acute hospitals indicates >20,265 are employed, and of these:

- >4,733 (23%) are educated and trained in venepuncture.
- >4,380 (22%) are educated and trained in intravenous cannulation.
- >3,341 (16%) are educated and trained in venepuncture, currently competent, and use these skills in the course of their duties.
- >2,312 (11%) are educated and trained in intravenous cannulation, currently competent, and use these skills in the course of their duties.

The headcount (HC) data on nurses/midwives in acute hospitals indicates >24,416 are employed, and of these:

- >5,134 (21%) are educated and trained in venepuncture.
- >4,625 (19%) are educated and trained in intravenous cannulation.
- >3,365 (14%) are educated and trained in venepuncture, currently competent, and use these skills in the course of their duties.
- >2,295 (9%) are educated and trained in intravenous cannulation, currently competent, and use these skills in the course of their duties.
- >4,028 (16%) received venepuncture education and training in the acute hospitals.
- >3,540 (14%) received intravenous cannulation education and training in the acute hospitals.
Figures 1 and 2 provide an overview of the data for all whole-time equivalent (WTE) and headcount (HC) nurses/midwives.

**Figure 1: WTE Number of Nurses/Midwives (Total)**

![WTE Number of Nurses/Midwives Diagram]

**Figure 2: HC Number of Nurses/Midwives (Total)**

![HC Number of Nurses/Midwives Diagram]

Of the **5,134** headcount number of nurses/midwives, educated & trained in venepuncture:

- **1138** (22%) include international nurses/midwives who received venepuncture education & training outside the Republic of Ireland.
- **41** (1%) include nurses/midwives who received venepuncture education & training as part of an undergraduate programme in the Republic of Ireland.
- **169** (3%) include specialist nurses/midwives who received venepuncture education & training as part of specialist training in the Republic of Ireland.
- **108** (2%) include nurses/midwives who received venepuncture education & training in another organisation (e.g. private provider) in the Republic of Ireland.
- **423** (8%) include other nurses/midwives who received venepuncture education & training (e.g. National Ambulance Training (NAT) phlebotomy conversion course).
Of the 4,625 headcount number of nurses/midwives, educated & trained in intravenous cannulation:
- 929 (20%) include international nurses/midwives who received intravenous cannulation education & training outside the Republic of Ireland.
- 19 (0%) include nurses/midwives who received intravenous cannulation education & training as part of an undergraduate programme in the Republic of Ireland.
- 135 (3%) include specialist nurses/midwives who received intravenous cannulation education & training as part of specialist training in the Republic of Ireland.
- 93 (2%) include nurses/midwives who received intravenous cannulation education & training in another organisation (e.g. private provider) in the Republic of Ireland.
- 117 (3%) include other nurses/midwives who received intravenous cannulation education & training.

1.2 Venepuncture and Intravenous Cannulation Education and Training Providers/Facilitators

The range of public and voluntary sector providers/facilitators in or associated with acute hospitals that deliver venepuncture and intravenous cannulation education and training to nursing/midwifery staff employed in acute hospitals include:
- Centres of Nurse/Midwife Education (includes Centre for Learning and Development).
- Nursing/Midwifery Practice Development Units.
- Acute Hospital Clinical Nursing/Midwifery Staff (e.g. Clinical Nurse Managers, Clinical Nurse Specialists, Clinical Nurse Facilitators, Clinical Placement Co-ordinators and other nursing/midwifery staff employed in specific acute hospital service units e.g. Phlebotomy, Outpatients, Intensive Care, High Dependency, Post Anaesthetic Recovery, Coronary Care, Oncology, Accident and Emergency, Radiology, Neonatal, Labour and Delivery, Short Stay Acute Care, Renal Care).
- Acute Hospital Medical Staff.
- Schools of Nursing and Midwifery in Higher Education Institutions in the Republic of Ireland.

In addition, two private sector providers of venepuncture and/or intravenous cannulation education and training to nursing/midwifery staff employed in acute hospitals were identified:
- Biological Safety Advisory Practice (BSAP) Ltd., County Dublin, Ireland. (Information available by emailing bsap@eircom.net)
1.3 Comments from Survey Respondents

Survey respondents included a range of comments regarding venepuncture and intravenous cannulation education and training for nurses/midwives employed in acute hospitals, including:

Quality of Care

- Evidence shows patient care and safety can greatly improve with timely intervention by nurses/midwives.
- Nurses/Midwives with intravenous cannulation and venepuncture skills are key to timely treatments.
- The service can impact positively on patients and staff.
- Venepuncture and intravenous cannulation should be a mandatory requirement for nurses in acute hospitals with appropriate training readily available.
- Venepuncture and intravenous cannulation training and competency need to be mandatory and linked to An Bord Altranais registration.
- Specific clinical areas have been identified where the skill is beneficial to enhance patient care and meet service need.

Demand

- There is demand, especially for intravenous cannulation re-site, thereby reducing related delays in medication management initiation or continuity of care.
- High demand for nursing/midwifery staff to complete venepuncture and intravenous cannulation education and training.
- Constant demand for venepuncture and intravenous cannulation education and training placements.
- Waitlist for venepuncture and intravenous cannulation education and training placements.
- Venepuncture and intravenous cannulation education and training courses well attended.
- Venepuncture and intravenous cannulation nursing/midwifery skills are of great value in all specialised areas.

Nursing and Midwifery Staff Interest

- Interest and enthusiasm from nursing/midwifery staff for venepuncture and intravenous cannulation education and training, and use of these skills.
- Need to change culture and perception that venepuncture and intravenous cannulation is a “special”/extended skill and have it seen more as a skill that will enable nurses to respond to patients’ needs in a more timely manner.
- Can be difficult to get staff to engage with this practice if lack of leadership at unit level.
Findings from the survey of venepuncture & intravenous cannulation education & training among nurses & midwives employed in acute hospitals within the Republic of Ireland

Nursing and Midwifery Staff Backfill

- Time constraints and workload can make it difficult for nurses/midwives to attend the venepuncture/intravenous cannulation training and complete their required supervision.
- There can be difficulty releasing nursing/midwifery staff from clinical areas due to replacement issues.
- There is a demand from a nursing/patient care perspective; however, with a stretched nursing resource it would be difficult for nurses to take on this role.
- Clinically based facilitators must be also allowed leave their clinical area to facilitate the theory-based days.

Assessment / Competency

- Need to accredit/validate international nurses/midwives with venepuncture and intravenous cannulation skills.
- While many international nurses have been trained in the skills of venepuncture and cannulation, they do not currently use these skills.
- Need for continued competence to be monitored at unit level to help maintain competency.
- After classroom portion, there may be difficulty gaining clinical experience prior to sign-off due to constraints in releasing staff from unit commitments.
- Retaining skills outside of clinical specialities can be an issue and some areas will not have enough staff exposure to retain competencies.
- Any new approach to training should not mean that those already trained and using the skill would not be recognised.
- Education and training should be facilitated by senior clinical nursing staff in designated areas that have the education and experience to do so.

Funding

- Variation in programme cost.
- Variation in budget access, allocation and expenditure.
- Should funding become available, intravenous cannulation would be considered a priority so as to improve the quality of care to the patient in a timely fashion in all departments.

Dublin Academic Teaching Hospitals (DATHs):

- Venepuncture and intravenous cannulation is considered a transferable skill within DATHs hence; the policy among DATHs is to accept a venepuncture/ intravenous cannulation certificate issued by any one of the DATHs (i.e., St James’s Hospital, St Vincent’s University Hospital, AMNCH (Adelaide Meath inc. the National Children’s Hospital), Connolly Memorial Hospital, Mater Misericordiae Hospital, and Beaumont Hospital). If a nurse employed in a DATH has been previously deemed competent by another institution and does not hold a certificate issued by a DATH, the DATH hospital must be satisfied that the content of the training programme is similar to one offered by DATHs.
Variation in Venepuncture and Intravenous Cannulation Education and Training Programmes

Qualitative comments provided by survey respondents indicate significant variation in venepuncture and intravenous cannulation education and training programmes in areas such as:

- Programme structure, which can range from formal to informal.
- Programme objectives/content, with some programs leaning more towards the theoretical, while others focus primarily on the clinical component.
- Programme delivery mode, with limited/no scope for blended learning delivery options such as CD ROM and e-learning.
- Training (generic/unit/product specific).
- Training equipment requirements (e.g. anatomical models/practical aids - Manikin training arms, phlebotomy units, intravenous cannulation equipment, sharps disposal units, body-fluids spillage kits, hand-hygiene products, student handout material-notes/competency assessment tool/written examination paper).
- Length of classroom-based study (3 hours - 2 days).
- Required number of successful supervised clinical assessments prior to achieving competency "sign-off" (5-10 venepunctures, 5-10 intravenous cannulation, and maximum completion timeframe).
- An Bord Altranais Category One course approval.
- Number of programmes offered (on demand-monthly-every 6 months).
- Number of placements available (1-14), student-instructor ratio (minimum/maximum).
- Distribution of nursing/midwifery staff trained (all/some staff; day/night staff; specialty/non specialty staff).
- Programme evaluation (content/length/relevance/presentation/practical involvement).
HSE Administrative Area Perspective

HSE Administrative Area Data Comparison:

This section provides a comparison of regional data from the four HSE Administrative Areas – Dublin/Mid-Leinster; Dublin/North East; South; West).

2.1 Overview

Of the **whole-time equivalent (WTE)** data on nurses/midwives employed in acute hospitals in the four HSE Administrative Areas between:

- 23 - 24% are educated and trained in venepuncture, with the slightly higher percentages in HSE South and Dublin/Mid-Leinster, and the lower percentage in HSE West and Dublin/North East.
- 20 - 25% are educated and trained in intravenous cannulation, with the higher percentage in HSE South and all other HSE Areas at 20%.
- 16 - 17% are educated and trained in venepuncture, currently competent, and use these skills in the course of their duties, with the slightly lower percentage in HSE Dublin/Mid-Leinster, and all other HSE Areas at 17%.
- 9 - 14% are educated and trained in intravenous cannulation, currently competent, and use these skills in the course of their duties, with the higher percentage in HSE Dublin/North East and lower percentage in HSE West.

Of the **headcount (HC)** data on nurses/midwives employed in acute hospitals in the four HSE Administrative Areas between:

- 20 - 23% are educated and trained in venepuncture, with the higher percentage in HSE Dublin/Mid-Leinster and lower percentages in HSE West and Dublin/North East.
- 18 - 21% are educated and trained in intravenous cannulation, with the higher percentage in HSE South and lower percentage in HSE West.
- 11 - 15% are educated and trained in venepuncture, currently competent, and use these skills in the course of their duties, with the higher percentages in HSE Dublin/Mid-Leinster and South, and lower percentage in HSE West.
- 7 - 11% are educated and trained in intravenous cannulation, currently competent, and use these skills in the course of their duties, with the higher percentage in HSE South and lower percentage in HSE West.
- 13 - 20% received venepuncture education and training in the acute hospitals, with the higher percentage in HSE West and lower percentage in HSE Dublin/Mid-Leinster.
- 12 - 18% received intravenous cannulation education and training in the acute hospitals, with the higher percentage in HSE South and lower percentages in HSE Dublin/Mid-Leinster and Dublin/North East.
Tables 1 and 2 provide a comparison of the data for the HSE Administration Areas.

**Table 1: WTE Number of Nurses/Midwives (HSE Administrative Area Comparisons)**

<table>
<thead>
<tr>
<th>HSE Area</th>
<th>Employed</th>
<th>Educated &amp; Trained in Venepuncture</th>
<th>Educated &amp; Trained in IV Cannulation</th>
<th>Educated &amp; Trained in Venepuncture, Currently Competent &amp; Use Skills</th>
<th>Educated &amp; Trained in IV Cannulation, Currently Competent &amp; Use Skills</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dublin/Mid-Leinster</td>
<td>6437</td>
<td>1519</td>
<td>1296</td>
<td>1014</td>
<td>647</td>
</tr>
<tr>
<td>Dublin/North East</td>
<td>4690</td>
<td>1079</td>
<td>1014</td>
<td>774</td>
<td>681</td>
</tr>
<tr>
<td>South</td>
<td>4516</td>
<td>1088</td>
<td>1132</td>
<td>756</td>
<td>556</td>
</tr>
<tr>
<td>West</td>
<td>4622</td>
<td>1047</td>
<td>939</td>
<td>797</td>
<td>428</td>
</tr>
<tr>
<td>Total</td>
<td>20265</td>
<td>4733</td>
<td>4380</td>
<td>3341</td>
<td>2312</td>
</tr>
</tbody>
</table>

**Table 2: HC Number of Nurses/Midwives (HSE Administrative Area Comparisons)**

<table>
<thead>
<tr>
<th>HSE Area</th>
<th>Employed</th>
<th>Educated &amp; Trained in Venepuncture</th>
<th>Educated &amp; Trained in IV Cannulation</th>
<th>Educated &amp; Trained in Venepuncture, Currently Competent &amp; Use Skills</th>
<th>Educated &amp; Trained in IV Cannulation, Currently Competent &amp; Use Skills</th>
<th>Received Venepuncture Education &amp; Training in Acute Hospitals</th>
<th>Received IV Cannulation Education &amp; Training in Acute Hospitals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dublin/Mid-Leinster</td>
<td>7572</td>
<td>1718</td>
<td>1395</td>
<td>1146</td>
<td>739</td>
<td>975</td>
<td>904</td>
</tr>
<tr>
<td>Dublin/North East</td>
<td>5327</td>
<td>1073</td>
<td>985</td>
<td>728</td>
<td>499</td>
<td>840</td>
<td>659</td>
</tr>
<tr>
<td>South</td>
<td>5679</td>
<td>1179</td>
<td>1212</td>
<td>833</td>
<td>622</td>
<td>1040</td>
<td>1000</td>
</tr>
<tr>
<td>West</td>
<td>5838</td>
<td>1164</td>
<td>1033</td>
<td>658</td>
<td>435</td>
<td>1173</td>
<td>977</td>
</tr>
<tr>
<td>Total</td>
<td>24416</td>
<td>5134</td>
<td>4625</td>
<td>3365</td>
<td>2295</td>
<td>4028</td>
<td>3540</td>
</tr>
</tbody>
</table>

Figures 3 and 4 provide a comparison of the percentage data for all WTE and HC nurses/midwives in each of the four HSE Administrative Areas.

**Figure 3: WTE Percentage of Nurses/Midwives (HSE Administrative Area Comparisons)**

Educated & Trained in IV Cannulation, Currently Competent & Use Skills

- Dublin/Mid-Leinster: 10%
- Dublin/North East: 15%
- South: 12%
- West: 9%

Educated & Trained in Venepuncture, Currently Competent & Use Skills

- Dublin/Mid-Leinster: 16%
- Dublin/North East: 17%
- South: 17%
- West: 17%

Educated & Trained in IV Cannulation

- Dublin/Mid-Leinster: 20%
- Dublin/North East: 22%
- South: 25%
- West: 20%

Educated & Trained in Venepuncture

- Dublin/Mid-Leinster: 24%
- Dublin/North East: 23%
- South: 24%
- West: 23%
2.2 Dublin/Mid-Leinster

The whole-time equivalent (WTE) data on nurses/midwives in acute hospitals in the HSE Dublin/Mid-Leinster Administrative Area indicates >6,437 are employed, and of these:

- >1,519 (24%) are educated and trained in venepuncture.
- >1,296 (20%) are educated and trained in intravenous cannulation.
- >1014 (16%) are educated and trained in venepuncture, currently competent, and use these skills in the course of their duties.
- >647 (10%) are educated and trained in intravenous cannulation, currently competent, and use these skills in the course of their duties.

The headcount (HC) data on nurses/midwives in acute hospitals in the HSE Dublin/Mid-Leinster Administrative Area indicates >7,572 are employed, and of these:

- >1,718 (23%) are educated and trained in venepuncture.
- >1,395 (18%) are educated and trained in intravenous cannulation.
- >1146 (15%) are educated and trained in venepuncture, currently competent, and use these skills in the course of their duties.
- >739 (10%) are educated and trained in intravenous cannulation, currently competent, and use these skills in the course of their duties.
- >975 (13%) received venepuncture education and training in the acute hospitals.
- >904 (12%) received intravenous cannulation education and training in the acute hospitals.
Figures 5 and 6 provide an overview of the data for the HSE Dublin/Mid-Leinster Administrative Area.

**Figure 5: WTE Number of Nurses/Midwives data for the HSE Dublin/Mid-Leinster Administrative Area**

**Figure 6: HC Number of Nurses/Midwives for the HSE Dublin/Mid-Leinster Administrative Area**

Of the 1718 headcount number of nurses/midwives educated and trained in venepuncture for the HSE Dublin/Mid-Leinster Administrative Area:

- **633** (37%) include international nurses/midwives who received venepuncture education & training outside the Republic of Ireland.
- **5** (0%) include nurses/midwives who received venepuncture education and training as part of an undergraduate programme in the Republic of Ireland.
- **76** (4%) include specialist nurses/midwives who received venepuncture education and training as part of specialist training in the Republic of Ireland.
- **42** (2%) include nurses/midwives who received venepuncture education and training in another organisation (e.g. private provider) in the Republic of Ireland.
- **91** (5%) include other nurses/midwives who received venepuncture education and training (e.g. NAT phlebotomy conversion course).
Of the 1395 headcount number of nurses/midwives educated and trained in intravenous cannulation, the HSE Dublin/Mid-Leinster Administrative Area:

- **596** (43%) include international nurses/midwives who received intravenous cannulation education and training outside the Republic of Ireland.
- **5** (0%) include nurses/midwives who received intravenous cannulation education and training as part of an undergraduate programme in the Republic of Ireland.
- **63** (5%) include specialist nurses/midwives who received intravenous cannulation education and training as part of specialist training in the Republic of Ireland.
- **19** (1%) include nurses/midwives who received intravenous cannulation education and training in another organisation (e.g., private provider) in the Republic of Ireland.
- **29** (2%) include other nurses/midwives who received intravenous cannulation education & training.

### 2.3 Dublin/North East

The whole-time equivalent (WTE) data on nurses/midwives in acute hospitals in the HSE Dublin/North East Administrative Area indicates >4,690 are employed, and of these:

- **>1,079** (23%) are educated and trained in venepuncture.
- **>1014** (22%) are educated and trained in intravenous cannulation.
- **>774** (17%) are educated and trained in venepuncture, currently competent, and use these skills in the course of their duties.
- **>681** (15%) are educated and trained in intravenous cannulation, currently competent, and use these skills in the course of their duties.

The headcount (HC) data on nurses/midwives in acute hospitals in the HSE Dublin/North East Administrative Area indicates >5,327 are employed, and of these:

- **>1073** (20%) are educated and trained in venepuncture.
- **>985** (18%) are educated and trained in intravenous cannulation.
- **>728** (14%) are educated and trained in venepuncture, currently competent, and use these skills in the course of their duties.
- **>499** (9%) are educated and trained in intravenous cannulation, currently competent, and use these skills in the course of their duties.
- **>840** (16%) received venepuncture education and training in the acute hospitals.
- **>659** (12%) received intravenous cannulation education and training in the acute hospitals.
Figures 7 and 8 provide an overview of the data for the HSE Dublin/North East Administrative Area.

**Figure 7: WTE Number of Nurses/Midwives for the HSE Dublin/North East Administrative Area**

- Employed
- Educated & Trained in Venepuncture
- Educated & Trained in IV Cannulation
- Educated & Trained in Venepuncture, Currently Competent & Use Skills
- Educated & Trained in IV Cannulation, Currently Competent & Use Skills

**Figure 8: HC Number of Nurses/Midwives for the HSE Dublin/North East Administrative Area**

- Employed
- Educated & Trained in Venepuncture
- Educated & Trained in IV Cannulation
- Educated & Trained in Venepuncture, Currently Competent & Use Skills
- Educated & Trained in IV Cannulation, Currently Competent & Use Skills
- Who Received Venepuncture Education & Training in Acute Hospitals
- Who Received IV Cannulation Education & Training in Acute Hospitals

Of the 1073 headcount number of nurses/midwives educated and trained in venepuncture in the HSE Dublin/North East Administrative Area:

- 374 (35%) include international nurses/midwives who received venepuncture education & training outside the Republic of Ireland.
- 20 (2%) include nurses/midwives who received venepuncture education and training as part of an undergraduate programme in the Republic of Ireland.
- 33 (3%) include specialist nurses/midwives who received venepuncture education and training as part of specialist training in the Republic of Ireland.
- 32 (2%) include nurses/midwives who received venepuncture education and training in another organisation (e.g. private provider) in the Republic of Ireland.
- 18 (2%) include other nurses/midwives who received venepuncture education and training (e.g. NAT phlebotomy conversion course).
Of the 985 headcount number of nurses/midwives educated and trained in intravenous cannulation in the HSE Dublin/North East Administrative Area:

- **269** (27%) include international nurses/midwives who received intravenous cannulation education and training outside the Republic of Ireland.
- **14** (1%) include nurses/midwives who received intravenous cannulation education and training as part of an undergraduate programme in the Republic of Ireland.
- **23** (2%) include specialist nurses/midwives who received intravenous cannulation education and training as part of specialist training in the Republic of Ireland.
- **53** (5%) include nurses/midwives who received intravenous cannulation education and training in another organisation (e.g. private provider) in the Republic of Ireland.
- **0** (0%) include other nurses/midwives who received intravenous cannulation education and training.

### 2.4 South

The **whole-time equivalent (WTE)** data on nurses/midwives in acute hospitals in the HSE South Administrative Area indicates >4,516 are employed, and of these:

- >1088 (24%) are educated and trained in venepuncture.
- >1132 (25%) are educated and trained in intravenous cannulation.
- >756 (16%) are educated and trained in venepuncture, currently competent, and use these skills in the course of their duties.
- >556 (12%) are educated and trained in intravenous cannulation, currently competent, and use these skills in the course of their duties.

The **headcount (HC)** data on nurses/midwives in acute hospitals in the HSE South Administrative Area indicates >5,679 are employed, and of these:

- >1179 (21%) are educated and trained in venepuncture.
- >1212 (21%) are educated and trained in intravenous cannulation.
- >833 (15%) are educated and trained in venepuncture, currently competent, and use these skills in the course of their duties.
- >622 (11%) are educated and trained in intravenous cannulation, currently competent, and use these skills in the course of their duties.
- >1040 (18%) received venepuncture education and training in the acute hospitals.
- >1000 (18%) received intravenous cannulation education and training in the acute hospitals.
Figures 9 and 10 provide an overview of the data for the HSE South Administrative Area.

**Figure 9: WTE Number of Nurses/Midwives for the HSE South Administrative Area**

![Circle chart showing WTE number of nurses/midwives](image)

**Figure 10: HC Number of Nurses/Midwives for the HSE South Administrative Area**

![Circle chart showing HC number of nurses/midwives](image)

Of the 1179 headcount number of nurses/midwives educated and trained in venepuncture in the HSE South Administrative Area:

- **37 (3%)** include international nurses/midwives who received venepuncture education and training outside the Republic of Ireland.
- **0 (0%)** include nurses/midwives who received venepuncture education and training as part of an undergraduate programme in the Republic of Ireland.
- **20 (2%)** include specialist nurses/midwives who received venepuncture education and training as part of specialist training in the Republic of Ireland.
- **28 (2%)** include nurses/midwives who received venepuncture education and training in another organisation (e.g. private provider) in the Republic of Ireland.
- **199 (17%)** include other nurses/midwives who received venepuncture education and training (e.g. NAT phlebotomy conversion course).
Of the 1212 headcount number of nurses/midwives educated and trained in intravenous cannulation in the South Administrative Area:

- 37 (3%) include international nurses/midwives who received intravenous cannulation education and training outside the Republic of Ireland.
- 0 (0%) include nurses/midwives who received intravenous cannulation education and training as part of an undergraduate programme in the Republic of Ireland.
- 20 (2%) include specialist nurses/midwives who received intravenous cannulation education and training as part of specialist training in the Republic of Ireland.
- 18 (1%) include nurses/midwives who received intravenous cannulation education and training in another organisation (e.g. private provider) in the Republic of Ireland.
- 54 (4%) include other nurses/midwives who received intravenous cannulation education and training.

2.5 West

The whole-time equivalent (WTE) data on nurses/midwives in acute hospitals in the HSE West Administrative Area indicates >4,622 are employed, and of these:

- >1047 (23%) are educated and trained in venepuncture.
- >939 (20%) are educated and trained in intravenous cannulation.
- >797 (17%) are educated and trained in venepuncture, currently competent, and use these skills in the course of their duties.
- >428 (9%) are educated and trained in intravenous cannulation, currently competent, and use these skills in the course of their duties.

The headcount (HC) data on nurses/midwives in acute hospitals in the HSE West Administrative Area indicates >5,838 are employed, and of these:

- >1,164 (20%) are educated and trained in venepuncture.
- >1033 (18%) are educated and trained in intravenous cannulation.
- >658 (11%) are educated and trained in venepuncture, currently competent, and use these skills in the course of their duties.
- >435 (7%) are educated and trained in intravenous cannulation, currently competent, and use these skills in the course of their duties.
- >1,173 (20%) received venepuncture education and training in the acute hospitals.
- >977 (17%) received intravenous cannulation education and training in the acute hospital.
Figures 11 and 12 provide an overview of the HSE West Administrative Area.

**Figure 11: WTE Number of Nurses/Midwives in the HSE West Administrative Area**

![Figure 11: WTE Number of Nurses/Midwives in the HSE West Administrative Area]

**Figure 12: HC Number of Nurses/Midwives in the HSE West Administrative Area**

![Figure 12: HC Number of Nurses/Midwives in the HSE West Administrative Area]

Of the 1164 headcount number of nurses/midwives in the HSE West Administrative Area educated and trained in venepuncture:

- 94 (8%) include international nurses/midwives who received venepuncture education and training outside the Republic of Ireland.
- 16 (1%) include nurses/midwives who received venepuncture education and training as part of an undergraduate programme in the Republic of Ireland.
- 40 (3%) include specialist nurses/midwives who received venepuncture education and training as part of specialist training in the Republic of Ireland.
- 6 (1%) include nurses/midwives who received venepuncture education and training in another organisation (e.g. private provider) in the Republic of Ireland.
- 115 (10%) include other nurses/midwives who received venepuncture education and training (e.g. NAT phlebotomy conversion course).
Of the **1033** headcount number of nurses/midwives in the HSE West Administrative Area educated and trained in intravenous cannulation:

- **27** (3%) include international nurses/midwives who received intravenous cannulation education and training outside the Republic of Ireland.
- **0** (0%) include nurses/midwives who received intravenous cannulation education and training as part of an undergraduate programme in the Republic of Ireland.
- **29** (3%) include specialist nurses/midwives who received intravenous cannulation education and training as part of specialist training in the Republic of Ireland.
- **3** (0%) include nurses/midwives who received intravenous cannulation education and training in another organisation (e.g. private provider) in the Republic of Ireland.
- **34** (3%) include other nurses/midwives who received intravenous cannulation education & training.
### SECTION 3 -

**HSE Hospital Network Perspective**

#### 3.1 Dublin South and Dublin/Midlands Hospital Networks

Table 3a indicates the number of nurses/midwives per hospital in the Dublin South and Dublin/Midlands hospital networks who are educated and trained in venepuncture and/or intravenous cannulation, those currently competent and who use these skills in the course of their duties, and the number of nurses and midwives who have received their education and training within the acute hospital setting.

**Table 3a: Nurses/Midwives educated and trained in venepuncture and intravenous cannulation in the Dublin South and Dublin/Midlands Hospital Networks**

| St James’s Hospital | St Vincent’s University Hospital | St Columcille’s Hospital | St Michael’s Hospital | National Maternity Hospital | St Luke’s Hospital | Royal Victoria Eye & Ear Hospital | St Luke’s Hospital | National Maternity Hospital | Our Lady’s Hospital for Sick Children | TOTAL |
|---------------------|--------------------------------|-------------------------|----------------------|-----------------------------|-------------------|---------------------------------|-------------------|-----------------------------|-----------------------------------|_______|
| **WTE No. Nurses/Midwives Employed:** | 1460 | 960 | 226 | 165 | 303 | 82 | 107 | 988 | 140 | 249 | 303 | 407 | 252 | 329 | 466 | 6437 |
| **HC No. Nurses/Midwives Employed:** | 1652 | 1082 | 178 | 172 | 361 | 82 | 139 | 1137 | 170 | 284 | 377 | 480 | 309 | 371 | 778 | 7572 |
| **WTE No. Nurses/Midwives Educated & Trained in VP:** | 253 | 218 | 51 | 112 | 242 | 12 | 0 | 250 | 19 | 100 | 65 | 51 | 73 | 67 | 7 | 1519 |
| **HC No. Nurses/Midwives Educated & Trained in VP:** | 253 | 224 | 65 | 112 | 300 | 12 | 0 | 275 | 20 | 113 | 124 | 62 | 79 | 69 | 10 | 1718 |
| **WTE No. Nurses/Midwives Educated & Trained in IVC:** | 191 | 218 | 51 | 112 | 152 | 36 | 0 | 250 | 19 | 57 | 65 | 42 | 37 | 54 | 13 | 1296 |
| **HC No. Nurses/Midwives Educated & Trained in IVC:** | 191 | 224 | 65 | 112 | 180 | 36 | 0 | 275 | 20 | 65 | 71 | 44 | 40 | 59 | 13 | 1395 |
| **WTE No. Nurses/Midwives Educated & Trained in VP, Currently Competent & Use Skills:** | 226 | 106 | 3 | 55 | 242 | 8 | 0 | 67 | 19 | 87 | 12 | 50 | 71 | 61 | 7 | 1014 |
| **HC No. Nurses/Midwives Educated & Trained in VP, Currently Competent & Use Skills:** | 226 | 132 | 3 | 62 | 300 | 8 | 0 | 67 | 20 | 99 | 18 | 61 | 77 | 63 | 10 | 1146 |
| **WTE No. Nurses/Midwives Educated & Trained in IVC, Currently Competent & Use Skills:** | 141 | 106 | 3 | 55 | 90 | 11 | 0 | 25 | 19 | 49 | 35 | 42 | 37 | 22 | 13 | 647 |
| **HC No. Nurses/Midwives Educated & Trained in IVC, Currently Competent & Use Skills:** | 141 | 132 | 3 | 58 | 96 | 11 | 0 | 25 | 20 | 57 | 71 | 44 | 40 | 28 | 13 | 739 |
| **HC No. Nurses/Midwives Who Received VP Education & Training in Hospital:** | 253 | 209 | 65 | 112 | 50 | 7 | 0 | 73 | 17 | 51 | 59 | 35 | 0 | 36 | 8 | 975 |
| **HC No. Nurses/Midwives Who Received IVC Education & Training in Hospital:** | 174 | 209 | 65 | 112 | 50 | 28 | 0 | 31 | 17 | 60 | 65 | 44 | 0 | 36 | 13 | 904 |
Of the number of nurses/midwives educated and trained in venepuncture/intravenous cannulation per hospital in the Dublin South and Dublin/Midlands Hospital Networks, table 3b indicates per category, the number of:

- international nurses/midwives who received venepuncture/intravenous cannulation education and training outside the Republic of Ireland.
- nurses/midwives who received venepuncture/intravenous cannulation education and training as part of an undergraduate programme in the Republic of Ireland.
- specialist nurses/midwives who received venepuncture/intravenous cannulation education and training as part of specialist training in the Republic of Ireland.
- nurses/midwives who received venepuncture/intravenous cannulation education and training in another organisation (e.g. private provider) in the Republic of Ireland.
- other nurses/midwives who received venepuncture/intravenous cannulation education and training.

### Table 3b: Category of nurses/midwives educated and trained in venepuncture/intravenous cannulation in the Dublin South and Dublin/Midlands Hospital Networks

<table>
<thead>
<tr>
<th>Category</th>
<th>Dublin South</th>
<th>Dublin/Midlands</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>International nurses/midwives who received VP education &amp; training outside Rep. of Ireland</td>
<td>34 250 N/A 20 N/A 5 15</td>
<td>250 8 10 18 0 10 11 2</td>
<td>633</td>
</tr>
<tr>
<td>Nurses/midwives who received VP education &amp; training as part of undergraduate programme in Rep. of Ireland</td>
<td>0 0 0 0 N/A 5 0</td>
<td>0 0 0 0 0 0 0 0</td>
<td>5</td>
</tr>
<tr>
<td>Specialist nurses/midwives who received VP education &amp; training as part of specialist training in Rep. of Ireland</td>
<td>35 14 0 0 N/A 0 0</td>
<td>4 0 0 0 21 0 2 0</td>
<td>76</td>
</tr>
<tr>
<td>Nurses/midwives who received VP education &amp; training in another organisation (e.g. private provider) in Rep. of Ireland</td>
<td>0 0 N/A 0 N/A 2 0</td>
<td>0 0 10 0 0 20 3 7</td>
<td>42</td>
</tr>
<tr>
<td>Other Nurses/midwives who received VP education &amp; training</td>
<td>0 0 0 0 0 0 0 0</td>
<td>0 0 42 0 0 49 0 0</td>
<td>91</td>
</tr>
<tr>
<td>International nurses/midwives who received IVC education &amp; training outside Rep. of Ireland</td>
<td>22 250 N/A 20 N/A 7 15</td>
<td>250 8 0 6 0 4 9 5</td>
<td>596</td>
</tr>
<tr>
<td>Nurses/midwives who received IVC education &amp; training as part of undergraduate programme in Rep. of Ireland</td>
<td>0 0 0 0 N/A 5 0</td>
<td>0 0 0 0 0 0 2 0</td>
<td>5</td>
</tr>
<tr>
<td>Specialist nurses/midwives who received IVC education &amp; training as part of specialist training in Rep. of Ireland</td>
<td>33 14 0 0 N/A 0 0</td>
<td>4 0 0 0 10 0 2 0</td>
<td>63</td>
</tr>
<tr>
<td>Nurses/midwives who received IVC education &amp; training in another organisation (e.g. private provider) in Rep. of Ireland</td>
<td>2 0 N/A 0 N/A 2 0</td>
<td>0 0 5 0 0 7 3 0</td>
<td>19</td>
</tr>
<tr>
<td>Other Nurses/midwives who received IVC education &amp; training</td>
<td>0 0 0 0 0 0 0 0</td>
<td>0 0 0 0 29 0 0</td>
<td>29</td>
</tr>
</tbody>
</table>

N/A = not available
### 3.2 Dublin North and North East Hospital Networks

Table 4a indicates the number of nurses/midwives per hospital in the Dublin North and North East Hospital Networks who are educated and trained in venepuncture/intravenous cannulation, those currently competent and who use these skills in the course of their duties, and the number of nurses and midwives who have received their education and training within the acute hospital setting.

**Table 4a: Nurses/Midwives educated and trained in venepuncture/intravenous cannulation in the Dublin North and North East Hospital Networks**

<table>
<thead>
<tr>
<th></th>
<th>Dublin North</th>
<th>North East</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mater Hospital</td>
<td>Connolly Memorial</td>
<td>North Wicklow Hospital</td>
</tr>
<tr>
<td>WTE No. Nurses/Midwives Employed:</td>
<td>517</td>
<td>1094</td>
<td>999</td>
</tr>
<tr>
<td>HC No. Nurses/Midwives Employed:</td>
<td>539</td>
<td>1060</td>
<td>1149</td>
</tr>
<tr>
<td>WTE No. Nurses/Midwives Educated &amp; Trained in VP:</td>
<td>151</td>
<td>43</td>
<td>104</td>
</tr>
<tr>
<td>HC No. Nurses/Midwives Educated &amp; Trained in VP:</td>
<td>158</td>
<td>50</td>
<td>104*</td>
</tr>
<tr>
<td>WTE No. Nurses/Midwives Educated &amp; Trained in IVC:</td>
<td>118</td>
<td>43</td>
<td>82</td>
</tr>
<tr>
<td>HC No. Nurses/Midwives Educated &amp; Trained in IVC:</td>
<td>119</td>
<td>50</td>
<td>82*</td>
</tr>
<tr>
<td>WTE No. Nurses/Midwives Educated &amp; Trained in VP, Currently Competent &amp; Use Skills:</td>
<td>31</td>
<td>43</td>
<td>104</td>
</tr>
<tr>
<td>HC No. Nurses/Midwives Educated &amp; Trained in VP, Currently Competent &amp; Use Skills:</td>
<td>49</td>
<td>50</td>
<td>104*</td>
</tr>
<tr>
<td>WTE No. Nurses/Midwives Educated &amp; Trained in IVC, Currently Competent &amp; Use Skills:</td>
<td>18</td>
<td>43</td>
<td>82</td>
</tr>
<tr>
<td>HC No. Nurses/Midwives Educated &amp; Trained in IVC, Currently Competent &amp; Use Skills:</td>
<td>19</td>
<td>50</td>
<td>82*</td>
</tr>
<tr>
<td>HC No. Nurses/Midwives Who Received VP Education &amp; Training in Hospital:</td>
<td>56</td>
<td>50</td>
<td>104</td>
</tr>
<tr>
<td>HC No. Nurses/Midwives Who Received IVC Education &amp; Training in Hospital:</td>
<td>28</td>
<td>50</td>
<td>82</td>
</tr>
</tbody>
</table>

* Proxy estimate
Of the number of nurses/midwives educated and trained in venepuncture/intravenous cannulation per hospital in the Dublin North and North East Hospital Networks, table 4b indicates per category, the number of:

- international nurses/midwives who received venepuncture/intravenous cannulation education and training outside the Republic of Ireland.
- nurses/midwives who received venepuncture/intravenous cannulation education and training as part of an undergraduate programme in the Republic of Ireland.
- specialist nurses/midwives who received venepuncture/intravenous cannulation education and training as part of specialist training in the Republic of Ireland.
- nurses/midwives who received venepuncture/intravenous cannulation education and training in another organisation (e.g. private provider) in the Republic of Ireland.
- other nurses/midwives who received venepuncture/intravenous cannulation education and training.

Table 4b: Category of nurses/midwives educated and trained in venepuncture/intravenous cannulation in the Dublin North and North East Hospital Networks

<table>
<thead>
<tr>
<th>Category</th>
<th>Connolly Memorial Hospital</th>
<th>Mater Misericordiae University Hospital</th>
<th>Beaumont Hospital</th>
<th>Rotunda Hospital</th>
<th>Children's University Hospital</th>
<th>Connolly Orthopaedic Hospital</th>
<th>Our Lady's Lourdes Hospital</th>
<th>Louth County Hospital</th>
<th>Cavan General Hospital</th>
<th>Our Lady's Hospital Monaghan General Hospital</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>International nurses/midwives who received VP education &amp; training outside Rep. of Ireland</td>
<td>205</td>
<td>N/A</td>
<td>62</td>
<td>20</td>
<td>5</td>
<td>59</td>
<td>6</td>
<td>0</td>
<td>17</td>
<td>0</td>
<td>374</td>
</tr>
<tr>
<td>Nurses/midwives who received VP education &amp; training as part of undergraduate programme in Rep. of Ireland</td>
<td>0</td>
<td>N/A</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>14</td>
<td>6</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>20</td>
</tr>
<tr>
<td>Specialist nurses/midwives who received VP education &amp; training as part of specialist training in Rep. of Ireland</td>
<td>4</td>
<td>N/A</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>4</td>
<td>18</td>
<td>7</td>
<td>0</td>
<td>0</td>
<td>33</td>
</tr>
<tr>
<td>Nurses/midwives who received VP education &amp; training in another organisation (e.g. private provider) in Rep. of Ireland</td>
<td>12</td>
<td>0</td>
<td>0</td>
<td>3</td>
<td>6</td>
<td>5</td>
<td>6</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>32</td>
</tr>
<tr>
<td>Other Nurses/midwives who received VP education &amp; training</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>18</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>18</td>
</tr>
<tr>
<td>International nurses/midwives who received IVC education &amp; training outside Rep. of Ireland</td>
<td>108</td>
<td>N/A</td>
<td>61</td>
<td>41</td>
<td>0</td>
<td>42</td>
<td>0</td>
<td>0</td>
<td>17</td>
<td>N/A</td>
<td>269</td>
</tr>
<tr>
<td>Nurses/midwives who received IVC education &amp; training as part of undergraduate programme in Rep. of Ireland</td>
<td>0</td>
<td>N/A</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>14</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>14</td>
</tr>
<tr>
<td>Specialist nurses/midwives who received IVC education &amp; training as part of specialist training in Rep. of Ireland</td>
<td>2</td>
<td>N/A</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>1</td>
<td>18</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>23</td>
</tr>
<tr>
<td>Nurses/midwives who received IVC education &amp; training in another organisation (e.g. private provider) in Rep. of Ireland</td>
<td>13</td>
<td>0</td>
<td>0</td>
<td>6</td>
<td>4</td>
<td>30</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>53</td>
</tr>
<tr>
<td>Other Nurses/midwives who received IVC education &amp; training</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

N/A = not applicable; NR = no response
3.3 South and South East Hospital Networks

Table 5a indicates the number of nurses/midwives per hospital in the South and South East Hospital Networks who are educated and trained in venepuncture/intravenous cannulation, those currently competent and who use these skills in the course of their duties, and the number of nurses and midwives who have received their education and training within the acute hospital setting.

Table 5a: Nurses/midwives educated and trained in venepuncture/intravenous cannulation in the South and South East Hospital Networks

<table>
<thead>
<tr>
<th></th>
<th>South</th>
<th>South East</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Cork University Hospital</td>
<td>Mercy University Hospital</td>
<td>St. Infirmary Victoria Hospital</td>
</tr>
<tr>
<td>WTE No. Nurses/Midwives Employed:</td>
<td>960</td>
<td>396</td>
<td>315</td>
</tr>
<tr>
<td>HC No. Nurses/Midwives Employed:</td>
<td>1219</td>
<td>391</td>
<td>366</td>
</tr>
<tr>
<td>WTE No. Nurses/Midwives Educated &amp; Trained in VP:</td>
<td>139*</td>
<td>71</td>
<td>9</td>
</tr>
<tr>
<td>HC No. Nurses/Midwives Educated &amp; Trained in VP:</td>
<td>139</td>
<td>71</td>
<td>12</td>
</tr>
<tr>
<td>WTE No. Nurses/Midwives Educated &amp; Trained in IVC:</td>
<td>145*</td>
<td>125</td>
<td>3</td>
</tr>
<tr>
<td>HC No. Nurses/Midwives Educated &amp; Trained in IVC:</td>
<td>145</td>
<td>125</td>
<td>4</td>
</tr>
<tr>
<td>WTE No. Nurses/Midwives Educated &amp; Trained in VP, Currently Competent &amp; Use Skills:</td>
<td>93*</td>
<td>71</td>
<td>9</td>
</tr>
<tr>
<td>HC No. Nurses/Midwives Educated &amp; Trained in VP, Currently Competent &amp; Use Skills:</td>
<td>93</td>
<td>71</td>
<td>12</td>
</tr>
<tr>
<td>WTE No. Nurses/Midwives Educated &amp; Trained in IVC, Currently Competent &amp; Use Skills:</td>
<td>85*</td>
<td>81</td>
<td>3</td>
</tr>
<tr>
<td>HC No. Nurses/Midwives Educated &amp; Trained in IVC, Currently Competent &amp; Use Skills:</td>
<td>85</td>
<td>81</td>
<td>4</td>
</tr>
<tr>
<td>HC No. Nurses/Midwives Who Received VP Education &amp; Training in Hospital:</td>
<td>138</td>
<td>71</td>
<td>12</td>
</tr>
<tr>
<td>HC No. Nurses/Midwives Who Received IVC Education &amp; Training in Hospital:</td>
<td>131</td>
<td>71</td>
<td>4</td>
</tr>
</tbody>
</table>

* Proxy estimate
Of the number of nurses/midwives educated and trained in venepuncture/intravenous cannulation per hospital in the South and South East Hospital Networks, table 5b indicates per category, the number of:

- international nurses/midwives who received venepuncture/intravenous cannulation education and training outside the Republic of Ireland.
- nurses/midwives who received venepuncture/intravenous cannulation education and training as part of an undergraduate programme in the Republic of Ireland.
- specialist nurses/midwives who received venepuncture/intravenous cannulation education and training as part of specialist training in the Republic of Ireland.
- nurses/midwives who received venepuncture/intravenous cannulation education and training in another organisation (e.g. private provider) in the Republic of Ireland.
- other nurses/midwives who received venepuncture/intravenous cannulation education and training.

Table 5b: Category of nurses/midwives educated and trained in venepuncture/intravenous cannulation in the South and South East Hospital Networks

<table>
<thead>
<tr>
<th>Category of Nurses/Midwives Educated and Trained</th>
<th>South</th>
<th>South East</th>
</tr>
</thead>
<tbody>
<tr>
<td>International nurses/midwives who received VP education &amp; training outside Rep. of Ireland</td>
<td>14 N/A 0 2 0 6 N/A 5</td>
<td>N/A 10 0 N/A 0 37</td>
</tr>
<tr>
<td>Nurses/midwives who received VP education &amp; training as part of undergraduate programme in Rep. of Ireland</td>
<td>N/A 0 0 0 0 0 0 0</td>
<td>N/A 0 0 N/A 0 0</td>
</tr>
<tr>
<td>Specialist nurses/midwives who received VP education &amp; training as part of specialist training in Rep. of Ireland</td>
<td>N/A 0 0 0 0 0 0 0</td>
<td>N/A 0 20 N/A 0 20</td>
</tr>
<tr>
<td>Nurses/midwives who received VP education &amp; training in another organisation (e.g. private provider) in Rep. of Ireland</td>
<td>0 6 0 0 0 9 N/A 4</td>
<td>N/A 9 0 N/A 0 28</td>
</tr>
<tr>
<td>Other Nurses/midwives who received VP education &amp; training</td>
<td>70 0 0 0 8 0 0 121</td>
<td>0 0 0 0 0 0 199</td>
</tr>
<tr>
<td>International nurses/midwives who received IVC education &amp; training outside Rep. of Ireland</td>
<td>14 N/A 0 2 0 6 N/A 5</td>
<td>N/A 10 0 N/A 0 37</td>
</tr>
<tr>
<td>Nurses/midwives who received IVC education &amp; training as part of undergraduate programme in Rep. of Ireland</td>
<td>0 0 0 0 0 0 0 0</td>
<td>N/A 0 0 N/A 0 0</td>
</tr>
<tr>
<td>Specialist nurses/midwives who received IVC education &amp; training as part of specialist training in Rep. of Ireland</td>
<td>0 0 0 0 0 0 0 0</td>
<td>N/A 0 20 N/A N/A 20</td>
</tr>
<tr>
<td>Nurses/midwives who received IVC education &amp; training in another organisation (e.g. private provider) in the Rep. of Ireland</td>
<td>0 0 0 0 0 0 0 0</td>
<td>N/A 9 0 N/A N/A 18</td>
</tr>
<tr>
<td>Other Nurses/midwives who received IVC education &amp; training</td>
<td>0 0 0 0 0 54 0 0 0 0 54</td>
<td></td>
</tr>
</tbody>
</table>

N/A = not available
### 3.4 Mid West and West/North West Hospital Networks

Table 6a indicates the number of nurses/midwives per hospital in the Mid West and West/North West Hospital Networks who are educated and trained in venepuncture/intravenous cannulation, those currently competent and who use these skills in the course of their duties, and the number of nurses and midwives who have received their education and training within the acute hospital setting.

**Table 6a: Nurses/Midwives educated and trained in venepuncture/intravenous cannulation in the Mid West and West/North West Hospital Networks**

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Mid West Employed</th>
<th>West/North West Employed</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>St. Brigid Hospital</td>
<td>133 WTE 708 HC</td>
<td>1390 WTE 706 HC</td>
<td>4690</td>
</tr>
<tr>
<td>Mid Western Regional Hospital - Dooradoyle</td>
<td>165 WTE 935 HC</td>
<td>1690 WTE 850 HC</td>
<td>5838</td>
</tr>
<tr>
<td>Mid Western Regional Hospital - Ennis</td>
<td>106 WTE 213 HC</td>
<td>263 WTE 151* HC</td>
<td>1047</td>
</tr>
<tr>
<td>Mid Western Regional Hospital - Nenagh</td>
<td>132 WTE 249 HC</td>
<td>263 WTE 151 HC</td>
<td>1164</td>
</tr>
<tr>
<td>Mid Western Regional Maternity Hospital</td>
<td>106 WTE 213 HC</td>
<td>263 WTE 123* HC</td>
<td>939</td>
</tr>
<tr>
<td>Mid Western Regional Orthopaedic Hospital</td>
<td>132 WTE 249 HC</td>
<td>263 WTE 123 HC</td>
<td>1033</td>
</tr>
<tr>
<td>University Hospitals of Galway &amp; Merlin Park</td>
<td>106 WTE 213 HC</td>
<td>263 WTE 125* HC</td>
<td>797</td>
</tr>
<tr>
<td>Sligo General Hospital</td>
<td>132 WTE 249 HC</td>
<td>263 WTE 125 HC</td>
<td>658</td>
</tr>
<tr>
<td>Letterkenny General Hospital</td>
<td>106 WTE 213 HC</td>
<td>263 WTE 125* HC</td>
<td>428</td>
</tr>
<tr>
<td>Mayo General Hospital</td>
<td>106 WTE 213 HC</td>
<td>263 WTE 125* HC</td>
<td>435</td>
</tr>
<tr>
<td>Portiuncula Hospital</td>
<td>106 WTE 213 HC</td>
<td>263 WTE 125* HC</td>
<td>1173</td>
</tr>
<tr>
<td>Roscommon County Hospital</td>
<td>106 WTE 213 HC</td>
<td>263 WTE 125* HC</td>
<td>977</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Mid West Educated &amp; Trained in VP</th>
<th>West/North West Educated &amp; Trained in VP</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0 WTE 195 HC</td>
<td>263 WTE 125* HC</td>
<td>797</td>
</tr>
<tr>
<td></td>
<td>0 HC 235 HC</td>
<td>63 WTE 125 HC</td>
<td>658</td>
</tr>
<tr>
<td></td>
<td>0 WTE 130 HC</td>
<td>75 WTE 86* HC</td>
<td>428</td>
</tr>
<tr>
<td></td>
<td>0 HC 138 HC</td>
<td>63 WTE 86* HC</td>
<td>435</td>
</tr>
<tr>
<td></td>
<td>106 WTE 346 HC</td>
<td>263 WTE 151 HC</td>
<td>1173</td>
</tr>
<tr>
<td></td>
<td>106 WTE 346 HC</td>
<td>263 WTE 123 HC</td>
<td>977</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Mid West Educated &amp; Trained in IVC</th>
<th>West/North West Educated &amp; Trained in IVC</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0 WTE 130 HC</td>
<td>75 WTE 86* HC</td>
<td>428</td>
</tr>
<tr>
<td></td>
<td>0 HC 138 HC</td>
<td>63 WTE 86* HC</td>
<td>435</td>
</tr>
<tr>
<td></td>
<td>106 WTE 346 HC</td>
<td>263 WTE 151 HC</td>
<td>1173</td>
</tr>
<tr>
<td></td>
<td>106 WTE 346 HC</td>
<td>263 WTE 123 HC</td>
<td>977</td>
</tr>
</tbody>
</table>

* Proxy estimate; NR = no response
Of the number of nurses/midwives educated and trained in venepuncture/intravenous cannulation per hospital in the Mid West and West/North West Hospital Networks, table 6b indicates per category, the number of:
- international nurses/midwives who received venepuncture/intravenous cannulation education and training outside the Republic of Ireland.
- nurses/midwives who received venepuncture/intravenous cannulation education and training as part of an undergraduate programme in the Republic of Ireland.
- specialist nurses/midwives who received venepuncture/intravenous cannulation education and training as part of specialist training in the Republic of Ireland.
- nurses/midwives who received venepuncture/intravenous cannulation education and training in another organisation (e.g. private provider) in the Republic of Ireland.
- other nurses/midwives who received venepuncture/intravenous cannulation education and training.

Table 6b: Category of nurses/midwives educated and trained in venepuncture/intravenous cannulation in the Mid West and West/North West Hospital Networks

<table>
<thead>
<tr>
<th></th>
<th>Mid West</th>
<th>West/North West</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>St. John's Hospital</td>
<td>Mid Western Regional Hospital - Dooradoyle</td>
<td>Mid Western Regional Hospital - Ennis</td>
</tr>
<tr>
<td>International nurses/midwives who received VP education &amp; training outside Rep. of Ireland</td>
<td>0</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Nurses/midwives who received VP education &amp; training as part of undergraduate programme in Rep. of Ireland</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Specialist nurses/midwives who received VP education &amp; training as part of specialist training in Rep. of Ireland</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Nurses/midwives who received VP education &amp; training in another organisation (e.g. private provider) in Rep. of Ireland</td>
<td>0</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Other Nurses/midwives who received VP education &amp; training</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>International nurses/midwives who received IVC education &amp; training outside Rep. of Ireland</td>
<td>0</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Nurses/midwives who received IVC education &amp; training as part of undergraduate programme in Rep. of Ireland</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Specialist nurses/midwives who received IVC education &amp; training as part of specialist training in Rep. of Ireland</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Nurses/midwives who received IVC education &amp; training in another organisation (e.g. private provider) in the Rep. of Ireland</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other Nurses/midwives who received IVC education &amp; training</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

N/A = not available; NR = no response
SECTION 4 -

The Way Forward

This section sets out the way forward by identifying conclusions and recommendations derived from the national survey findings. It must be noted, however, that although the survey data is valuable from a service planning perspective, it has limitations that must be taken into consideration. For example, one acute hospital with less than 100 inpatient beds did not submit any data, and of the 50 hospitals that responded, 15 had difficulty in furnishing complete responses.

4.1 Conclusions

4.1.1 The survey data concludes that nurses and midwives with clinical competence in venepuncture and intravenous cannulation are in significant enough numbers to be influential in enabling the implementation of the European Working Time Directive and in enhancing quality care for patients. This conclusion is equally applicable across the acute hospital sector and primary, community and continuing care settings.

4.1.2 The survey confirms that a significant number of nurses and midwives employed in acute hospitals have received venepuncture and intravenous cannulation education both nationally and internationally.

4.1.3 The survey points to the need to develop a national transferable nursing and midwifery education and training programme in venepuncture and intravenous cannulation for existing employees.

4.1.4 The survey data demonstrates that, in the main, development of venepuncture and intravenous cannulation competencies are not included in pre-registration undergraduate preparation of nurses and midwives.

4.1.5 The survey highlights a wide variation in structures and processes being utilised to support the delivery and management of venepuncture and intravenous cannulation education and training for nurses and midwives.

4.1.6 The survey identifies an opportunity for the inclusion of blended learning options (e.g. CD ROM and e-learning) in the delivery of venepuncture and intravenous cannulation education and training programmes to nurses and midwives.

4.1.7 The survey acknowledges that venepuncture and intravenous cannulation clinical competencies are best developed within the clinical setting (i.e. alongside the patient).

4.1.8 The survey points to the absence of national venepuncture and intravenous cannulation clinical practice guidelines or standard operating policy and procedure to support the practice of nurses and midwives.
4.1.9 The survey data illustrates the absence of specifically targeted funding to support the development and implementation of a national nursing and midwifery venepuncture and intravenous cannulation education and training programme and related requirements.

4.2 Recommendations:

The Health Service Executive - Office of the Director of Nursing Services, in partnership with other stakeholders, will work towards increasing the number of nurses and midwives with clinical competence in venepuncture and intravenous cannulation who have the opportunity to use these skills by implementing the following recommendations:

4.2.1 Develop a national plan for the further implementation of competency development of all nurses and midwives in venepuncture and intravenous cannulation based on service need. The plan will include timeframes, deliverables and lead responsibilities, and take into account the following elements:

- Prioritisation of service need;
- Educational preparation and delivery;
- Clinical guidance;
- Communication; and
- Resource implications.

4.2.2 Include venepuncture and intravenous cannulation competency development in the curriculum of all nursing and midwifery undergraduate education programmes (i.e. Bachelor of Science in General Nursing, Bachelor of Science in Psychiatric Nursing, Bachelor of Science in Intellectual Disability Nursing, Bachelor of Science in Children’s & General Nursing (Integrated), Bachelor of Science in Midwifery).

4.2.3 Encourage each health service agency within the Health Service Executive to develop a management position, which supports and drives the implementation of venepuncture and intravenous cannulation competency in response to changes in service need and delivery.

4.2.4 Ensure that a national transferable venepuncture and intravenous cannulation education and training programme is developed for nurses and midwives, based on best practice evidence and which incorporate blended learning delivery options (e.g. CD ROM and e-learning). This could be facilitated through the Centres of Nurse/Midwife Education.

4.2.5 Ensure that a national venepuncture and intravenous cannulation education and training competency framework for nurses and midwives is developed, based on best practice evidence. This could be facilitated through the Centres of Nurse/Midwife Education.
4.2.6 Ensure that a tool and process is developed and implemented for assessing and deeming competent, where necessary, nurses and midwives employed in the healthcare systems who have received venepuncture and intravenous cannulation education and training. This could be facilitated through the Centres for Nurse/Midwife Education in conjunction with local Nurse/Midwife Practice Development co-ordinators or the equivalent.

4.2.7 Drive and monitor the further introduction of venepuncture and intravenous cannulation in the Health Service Executive. The HSE Area Directors of Nursing and Midwifery Planning, supported by the relevant Centres of Nurse/Midwife Education, could manage this.

4.2.8 Develop and implement a national venepuncture and intravenous cannulation policy and clinical practice guidelines for nurses and midwives, based on best practice evidence.

4.2.9 Prepare and submit a funding application in accordance with guidelines to support the development and implementation of a national nursing and midwifery venepuncture and intravenous cannulation education and training programme and related activities. The application would be made to the Department of Health and Children to access funding in the Budget 2008/09 that has been ring-fenced to support new and/or innovative ways of delivering services which lead to greater efficiencies and/or improved patient outcomes. The funding has been included in Vote 40 as a separate sub-head (A3) and requires the Minister’s formal approval for expenditure.
APPENDIX A -

EWTD Briefing

The European Working Time (EWTD), Directive 2003/88/EC, is a directive of the European Union to protect the health and safety of workers in the European Union. It lays down minimum requirements in relation to working hours, rest periods, annual leave for all workers and working arrangements for night workers.

The main features of the EWTD are:

- a limit of an average of 48 hours work per week (workers can choose to work more if they want to)
- a limit of an average of eight hours work in 24 for night workers
- a right for night workers to receive free health assessments
- a right to 11 hours rest a day
- a right to a day off each week or two days off every other week
- a right to an in-work rest break if the working day is longer than six hours
- a right to four weeks paid leave per year.

The EWTD originally did not apply to doctors in training (junior doctors) but the Amending Directive 2000/34/EC removed this exclusion so that:

- by August 2004 average working time did not exceed 58 hours per week
- by August 2007 there will be a 56 hour week
- by August 2009 there will be a 48 hour week although this could be extended to 2012 with a maximum of 52 hours.

The EWTD is important because it seeks to regulate working hours in such a manner that minimised current dangers to the health and safety of workers who are obliged to work excessively long periods without adequate breaks and anti-social hours. It should stop excessive hours and the culture of working long hours, and improve work-life balance for employees.

The EWTD was transposed into Irish law by the European Communities (Organisation of Working Time) (Activities of Doctors in Training) Regulations 2004 (S.I. No. 494 of 2004). These regulations came into effect from 1 August 2004. The Regulations provide for a phased reduction in weekly hours for junior doctors over a five-year transition period, from 58 in 2004, to 56 by 1 August 2007 and 48 by 1 August 2009. In addition, provisions were included in relation to rest breaks, rest periods and compensatory rest. These include a 30-minute rest break for every six hours worked, 11 hours daily rest or equivalent compensatory rest before the next period of work and 35 hours of consecutive rest every seven days; or two periods of 35 hours or one period of 59 hours of consecutive rest every 14 days.

1 Directive 2003/88/EC consolidates Directives 93/104/EC and 2000/34/EC which are now repealed. The EWTD defines working time to mean any period during which the worker is working, at the employer’s disposal and carrying out his activity or duties, in accordance with national laws and/or practice.
The Labour Relations Commission (LRC), which is facilitating negotiations between health service employers and the Irish Medical Organisation (IMO) on the implementation of the EWTD for Non Consultant Hospital Doctors (NCHDs), had given a deadline of 1 November 2007 for the conclusion of the discussions.

In September 2004 the European Commission adopted a proposal for a modification to the existing Directive. The new proposal changes the provision regarding the opt-out, ‘on-call time’, the reference periods for calculating the maximum working week, and the time limits for granting compensatory rest. These are still to be agreed and are unlikely to come into effect prior to 2009 therefore planning needs to be based on the existing law.

In May 2005 the European Parliament voted to scrap the opt-out clause, possibly by 2010. The proposed changes still need to be approved by the Council of Ministers but at subsequent meetings no agreement has been reached.
Nursing and Midwifery Expert Group - EWTD

The Nursing and Midwifery Expert Group - EWTD was established in 2004 to consider and co-ordinate the involvement of nurses and midwives in any altered / expanded roles to emerge following implementation of the EWTD for NCHDs. The Group is comprised of representation from the Department of Health and Children, the Irish Nurses Organisation, Services Industrial Professional and Technical Union, Psychiatric Nurses Association, Directors of Nursing and Midwifery, Health Service Executive, An Bord Altranais and the National Council for the Professional Development of Nursing and Midwifery, a Director of Nursing and Midwifery Planning and Development.

The Group supports innovative nursing and midwifery practice, including expanding roles which are responsive to service need, and has stated that expansion of practice should occur for all nurses/midwives on the clinical career pathway from staff nurse and midwife through to clinical nurse/midwife specialist and advanced nurse/midwife practitioners.

Terms of Reference of Nursing and Midwifery Expert Group – EWTD

The terms of reference for the work of the Nursing and Midwifery Sub Group, were agreed with the nursing unions on 24 November 2004, and were as follows:

The Nursing and Midwifery Sub Group will examine and report on issues as advised and requested by the National Implementation Group1 including:

a. Areas and issues relating to the scope of practice of nurses and midwives arising during the EWTD implementation process which will require a basis in legislation;

b. All measures/issues arising from extending the role of the staff nurse/midwife;

c. Measures deemed necessary to facilitate the process of creating additional nursing and midwifery posts including Nurse/Midwife Specialist posts and Nurse/Midwife Advanced practitioner posts in sufficient numbers to meet the need for altered roles and functions that may arise from EWTD implementation;

d. Skill-mix issues related to EWTD implementation where further clarification regarding i) scope of practice and ii) delegation is required from the appropriate professional and regulatory bodies; and

e. Other issues which may be referred to it by the National Implementation Group.

1 The National Implementation Group - EWTD was established 7th February 2005 following discussions between the Health Service Executive and Irish Medical Organisation, facilitated by the Labour Relations Commission. The functions of the National Implementation Group – EWTD is to oversee the implementation of the conditions of the EWTD by co-ordinating the work of the Local Implementation Groups in the sites and assisting them to identify the measures needed to achieve the EWTD compliance while measuring safe patient care and high quality NCHD training.
Since this agreement, a number of discussions have taken place between members of the Irish Nurses Organisation, the Irish Medical Organisation, the Health Service Executive-Employers Agency and the Labour Relations Commission. Arising from these discussions the following clarifications were made to the terms of reference:

- The title of the group is changed to the Nursing and Midwifery Expert Group.
- The Expert Group now enjoys equal status with the National Implementation Group in regard to nursing and midwifery issues. The Expert Group will continue to examine and report on issues as advised and requested by the National Implementation Group.
- It is agreed that communication between the National Implementation Group and the Expert Group will be through the respective chairs.
- All communication with Local Implementation Groups\(^2\) will be through the National Implementation Group.
- The National Implementation Group will co-ordinate the work of the Local Implementation Groups.
- A Conjoint Group\(^3\) will be established to facilitate discussion between the National Implementation Group and the Expert Group on issues of a mutual interest.

---

2 Local Implementation Groups were developed following a proposal by the Labour Relations Commission in 2004 and an agreement reached between employers and the Irish Medical Organisation to establish Local Implementation Groups in nine pilot sites. The pilot sites were chosen to reflect the range of regional demands and specialities. The main function of the Local Implementation Groups is to agree a template for local implementation of the EWTD.

3 In 2006, a Conjoint Group was established, composed of representatives of the National Implementation Group - EWTD and the Nursing and Midwifery Expert Group. The Group has met on several occasions and these meetings ensure that the Nursing and Midwifery Expert Group is fully informed of the work and progress of the National Implementation Group – EWTD.

## Appendix C -

### List of Hospitals Survey Sent To:

<table>
<thead>
<tr>
<th>HSE Region</th>
<th>HSE Network Group</th>
<th>Hospital Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dublin Mid Leinster</td>
<td>Dublin South</td>
<td>St. James’ Hospital</td>
</tr>
<tr>
<td>Dublin Mid Leinster</td>
<td>Dublin South</td>
<td>St. Vincent’s University Hospital</td>
</tr>
<tr>
<td>Dublin Mid Leinster</td>
<td>Dublin South</td>
<td>St. Columcille’s Hospital</td>
</tr>
<tr>
<td>Dublin Mid Leinster</td>
<td>Dublin South</td>
<td>St. Michael’s Hospital</td>
</tr>
<tr>
<td>Dublin Mid Leinster</td>
<td>Dublin South</td>
<td>National Maternity Hospital</td>
</tr>
<tr>
<td>Dublin Mid Leinster</td>
<td>Dublin South</td>
<td>City of Dublin Skin &amp; Cancer Hospital*</td>
</tr>
<tr>
<td>Dublin Mid Leinster</td>
<td>Dublin South</td>
<td>St. Luke’s Hospital</td>
</tr>
<tr>
<td>Dublin Mid Leinster</td>
<td>Dublin South</td>
<td>Royal Victoria Eye &amp; Ear Hospital</td>
</tr>
<tr>
<td>Dublin Mid Leinster</td>
<td>Dublin Midlands</td>
<td>AMNCH</td>
</tr>
<tr>
<td>Dublin Mid Leinster</td>
<td>Dublin Midlands</td>
<td>Naas General Hospital</td>
</tr>
<tr>
<td>Dublin Mid Leinster</td>
<td>Dublin Midlands</td>
<td>Midlands Regional Hospital - Mullingar</td>
</tr>
<tr>
<td>Dublin Mid Leinster</td>
<td>Dublin Midlands</td>
<td>Midlands Regional Hospital - Tullamore</td>
</tr>
<tr>
<td>Dublin Mid Leinster</td>
<td>Dublin Midlands</td>
<td>Midlands Regional Hospital - Portlaoise</td>
</tr>
<tr>
<td>Dublin Mid Leinster</td>
<td>Dublin Midlands</td>
<td>Coombe Women’s Hospital</td>
</tr>
<tr>
<td>Dublin Mid Leinster</td>
<td>Dublin Midlands</td>
<td>Our Lady’s Hospital for Sick Children</td>
</tr>
<tr>
<td>Dublin North East</td>
<td>Dublin North</td>
<td>Connolly Memorial Hospital</td>
</tr>
<tr>
<td>Dublin North East</td>
<td>Dublin North</td>
<td>Mater Misericordiae University Hospital</td>
</tr>
<tr>
<td>Dublin North East</td>
<td>Dublin North</td>
<td>Beaumont Hospital</td>
</tr>
<tr>
<td>Dublin North East</td>
<td>Dublin North</td>
<td>Rotunda Hospital</td>
</tr>
<tr>
<td>Dublin North East</td>
<td>Dublin North</td>
<td>Children’s University Hospital</td>
</tr>
<tr>
<td>Dublin North East</td>
<td>Dublin North</td>
<td>Cappagh National Orthopaedic Hospital</td>
</tr>
<tr>
<td>Dublin North East</td>
<td>North East</td>
<td>Our Lady’s of Lourdes Hospital</td>
</tr>
<tr>
<td>Dublin North East</td>
<td>North East</td>
<td>Louth County Hospital</td>
</tr>
<tr>
<td>Dublin North East</td>
<td>North East</td>
<td>Cavan General Hospital</td>
</tr>
<tr>
<td>Dublin North East</td>
<td>North East</td>
<td>Our Lady’s Hospital, Navan</td>
</tr>
<tr>
<td>Dublin North East</td>
<td>North East</td>
<td>Monaghan General Hospital</td>
</tr>
<tr>
<td>South</td>
<td>South</td>
<td>Kerry General Hospital</td>
</tr>
<tr>
<td>South</td>
<td>South</td>
<td>Bantry General Hospital</td>
</tr>
<tr>
<td>South</td>
<td>South</td>
<td>Mercy University Hospital</td>
</tr>
<tr>
<td>South</td>
<td>South</td>
<td>Mallow General Hospital</td>
</tr>
<tr>
<td>South</td>
<td>South</td>
<td>Cork University Hospital</td>
</tr>
<tr>
<td>South</td>
<td>South</td>
<td>Cork University Maternity Hospital</td>
</tr>
<tr>
<td>South</td>
<td>South</td>
<td>South Infirmary Royal Victoria Hospital</td>
</tr>
<tr>
<td>HSE Region - Continued</td>
<td>HSE Network Group</td>
<td>Hospital Name</td>
</tr>
<tr>
<td>------------------------</td>
<td>-------------------</td>
<td>-----------------------------------</td>
</tr>
<tr>
<td>South</td>
<td>South</td>
<td>St Mary’s Orthopaedic Hospital</td>
</tr>
<tr>
<td>South</td>
<td>South East</td>
<td>Wexford General Hospital</td>
</tr>
<tr>
<td>South</td>
<td>South East</td>
<td>St Luke’s Hospital</td>
</tr>
<tr>
<td>South</td>
<td>South East</td>
<td>Waterford Regional Hospital</td>
</tr>
<tr>
<td>South</td>
<td>South East</td>
<td>South Tipperary General Hospital</td>
</tr>
<tr>
<td>South</td>
<td>South East</td>
<td>Our Lady’s Hospital, Cashel*</td>
</tr>
<tr>
<td>South</td>
<td>South East</td>
<td>Lourdes Orthopaedic Hospital</td>
</tr>
<tr>
<td>West</td>
<td>Mid-West</td>
<td>St John’s Hospital, Limerick</td>
</tr>
<tr>
<td>West</td>
<td>Mid-West</td>
<td>Mid Western Regional Hospital - Dooradoyle</td>
</tr>
<tr>
<td>West</td>
<td>Mid-West</td>
<td>Mid Western Regional Hospital - Ennis</td>
</tr>
<tr>
<td>West</td>
<td>Mid-West</td>
<td>Mid Western Regional Hospital - Nenagh</td>
</tr>
<tr>
<td>West</td>
<td>Mid-West</td>
<td>Mid Western Regional Maternity Hospital</td>
</tr>
<tr>
<td>West</td>
<td>Mid-West</td>
<td>Mid Western Regional Orthopaedic Hospital</td>
</tr>
<tr>
<td>West</td>
<td>West/North West</td>
<td>Sligo General Hospital</td>
</tr>
<tr>
<td>West</td>
<td>West/North West</td>
<td>Letterkenny General Hospital</td>
</tr>
<tr>
<td>West</td>
<td>West/North West</td>
<td>University Hospitals Galway - UCHG</td>
</tr>
<tr>
<td>West</td>
<td>West/North West</td>
<td>University Hospitals Galway - Merlin Park</td>
</tr>
<tr>
<td>West</td>
<td>West/North West</td>
<td>Roscommon County Hospital</td>
</tr>
<tr>
<td>West</td>
<td>West/North West</td>
<td>Portiuncula Hospital</td>
</tr>
<tr>
<td>West</td>
<td>West/North West</td>
<td>Mayo General Hospital</td>
</tr>
</tbody>
</table>

* City of Dublin Skin & Cancer Hospital and Our Lady’s Hospital (Cashel): These are no longer acute hospitals hence data has not been included from these two sites.
# 2007 Venepuncture and Intravenous Cannulation Category 1 Courses Approved by An Bord Altranais (ABA)

An Bord Altranais awards Post-Registration Category 1 approval to education courses which include study days and in-service training/education for hospital staff. Approval is given by the Chief Education Officer, An Bord Altranais. The process for Approval involves submission of the philosophy of the course, its aims and objectives, course membership, course personnel, duration, venue, educational facilities, structure, methodology, clinical input, theoretical input, assessment, evaluation, course fee, and copy of certificate. On completion of each course, an evaluation report must be submitted to An Bord Altranais together with the names and personnel numbers of all participants who successfully completed the course (ABA Policy for the Approval of Courses, October 1989).

<table>
<thead>
<tr>
<th>ABA Ref.</th>
<th>Course Name</th>
<th>Site Name</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>33</td>
<td>Adult Venepuncture Course</td>
<td>Addiction Services, Bridge House, Cherry Orchard Hospital, Ballyfermot, Dublin 10</td>
<td>15/02/2007</td>
</tr>
<tr>
<td>58</td>
<td>Venepuncture and Cannulation Programme</td>
<td>Naas General Hospital, Naas, Co Kildare</td>
<td>06/03/2007</td>
</tr>
<tr>
<td>118</td>
<td>Admin of Drugs Intravenously, Subcutaneous admin. Of fluids, phlebotomy and Intravenous Cannulation, train the trainers study day</td>
<td>Gervaise Maher, Clonee, Co Meath</td>
<td>25/5/2007</td>
</tr>
</tbody>
</table>
| 140      | 1) Venepuncture & Cannulation  
2) Anaesthetics & Recovery Care  
3) Pre-operative Assessment  
4) The ECG Workshop  
5) Understanding Blood Results  
6) Clinical History Taking & Physical Examination  
7) Ear Care Workshop | M & K Update Ltd., The Old Balery, St John's Street, Keswick, Cumbria, CA12 SAS, UK | 29/6/2007 |
| 215      | IV Cannulation & Venepuncture In-Service Training | St. Vincent’s University Hospital, Elm Park, Dublin 4 | 2/10/2007 |
| 224      | IV Cannulation & Skills Assessment Course | Smith’s Medical, Hertfordshire, UK | 08/10/2007 |
| 266      | Intravenous Drug Administration Assessors Study Day & Venepuncture and Intravenous Cannulation Study Day | Cavan General Hospital, Cavan | 4/12/2007 |

Source: An Bord Altranais Education Department 2008.
APPENDIX E -

Venepuncture and Intravenous Cannulation Survey
Data Collection Form
**Aim of survey:**
To determine the health service requirement and funding implications for nurses and midwives to be educated and trained in venepuncture and intravenous cannulation.

**Purpose of survey is to ascertain:**
1) The number of nurses and midwives educated and trained in venepuncture and intravenous cannulation employed in the health service
2) The number of nurses and midwives educated and trained in venepuncture and intravenous cannulation who use these skills in the course of their duties
3) Current facilities for providing education and training in venepuncture and intravenous cannulation.

The survey should be completed by senior nursing / midwifery personnel and verified by the Director of Nursing / Midwifery. The deadline for returns is **29th February 2008**. All returns should be sent to:

**Dr Siobhan O’Halloran**
Office of the Nursing Services Director
26 Harcourt Street
Dublin 2
E-mail - siobhan.ohalloran@mail.hse.ie
<table>
<thead>
<tr>
<th>Name of Acute Hospital on which this report is made:</th>
<th>Report compiled by - Name</th>
<th>Report verified by - Name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. Number of Nurses / Midwives employed in your hospital (WTE and headcount):

   - WTE
   - Headcount

2. Number of Nurses / Midwives employed in your hospital educated and trained in venepuncture:

   - WTE
   - Headcount

3. Number of Nurses / Midwives employed in your hospital educated and trained in intravenous cannulation:

   - WTE
   - Headcount

4. Of those Nurses / Midwives educated and trained in venepuncture, how many are currently competent and use these skills in the course of their duties:

   - WTE
   - Headcount

5. Of those Nurses / Midwives educated and trained in intravenous cannulation, how many are currently competent and use these skills in the course of their duties:

   - WTE
   - Headcount
6. Of those Nurses / Midwives educated and trained in venepuncture, how many fall into the following categories:

<table>
<thead>
<tr>
<th>Category</th>
<th>Number (headcount)</th>
</tr>
</thead>
<tbody>
<tr>
<td>International nurses / midwives who received venepuncture education and training outside the Republic of Ireland</td>
<td></td>
</tr>
<tr>
<td>Nurses / midwives who received venepuncture education and training as part of undergraduate programme in the Republic of Ireland</td>
<td></td>
</tr>
<tr>
<td>Specialist nurses / midwives who received venepuncture education and training as part of specialist training in the Republic of Ireland</td>
<td></td>
</tr>
<tr>
<td>Nurses / midwives who received venepuncture education and training within your hospital</td>
<td></td>
</tr>
<tr>
<td>Nurses / midwives who received venepuncture education and training in another organisation (for example: private provider) in the Republic of Ireland</td>
<td></td>
</tr>
<tr>
<td>Other (please give details)</td>
<td></td>
</tr>
</tbody>
</table>

7. Of those Nurses / Midwives educated and trained in intravenous cannulation, how many fall into the following categories:

<table>
<thead>
<tr>
<th>Category</th>
<th>Number (headcount)</th>
</tr>
</thead>
<tbody>
<tr>
<td>International nurses / midwives who received intravenous cannulation education and training outside the Republic of Ireland</td>
<td></td>
</tr>
<tr>
<td>Nurses / midwives who received intravenous cannulation education and training as part of undergraduate programme in the Republic of Ireland</td>
<td></td>
</tr>
<tr>
<td>Specialist nurses / midwives who received intravenous cannulation education and training as part of specialist training in the Republic of Ireland</td>
<td></td>
</tr>
<tr>
<td>Nurses / midwives who received intravenous cannulation education and training within your hospital</td>
<td></td>
</tr>
<tr>
<td>Nurses / midwives who received intravenous cannulation education and training in another organisation (for example: private provider) in the Republic of Ireland</td>
<td></td>
</tr>
<tr>
<td>Other (please give details)</td>
<td></td>
</tr>
</tbody>
</table>
8. Please provide details on the range of education and training providers and sources of venepuncture and intravenous cannulation education and training in or affiliated to your hospital (e.g. Centres of Nurse / Midwife Education, Practice Development Unit etc.):


9. Additional comments on the demand for venepuncture and intravenous cannulation education and training for nurses / midwives in your hospital: (optional)


I would like to thank you for taking the time and effort to complete this survey.
13th February 2008

To: Director of Nursing Acute Hospital

Re: Survey on venepuncture and intravenous cannulation education and training among nurses and midwives

Dear Colleague,

I am writing to you in relation to a survey on the numbers of nurses and midwives, educated and trained in venepuncture and intravenous cannulation. The survey is being conducted on behalf of the Nursing and Midwifery Expert Group - EWTD, chaired by Ms Anne Carrigy, President of An Bord Altranais & Director of Nursing in the Mater Misericordiae University Hospital. This group includes representatives from the Department of Health and Children, INO, SIPTU, PNA, Directors of Nursing and Midwifery, HSE, An Bord Altranais, and the National Council for the Professional Development of Nursing and Midwifery. It supports innovative nursing and midwifery practice including expanding roles which are responsive to service need in order to respond to challenges of implementing the European Working Time Directive.

It is the opinion of the Nursing and Midwifery Expert Group - EWTD that the acuity of patients in general medical wards demand that nurses and midwives are skilled in venepuncture and intravenous cannulation and that a programme of education and training for registered nurses and midwives would facilitate patient care, expand the role of nurses and midwives, and assist compliance with the European Working Time Directive.

To this end, I am conducting a survey of Directors of Nursing in Acute Hospitals to determine the service requirement and funding implications for nurses and midwives to be educated and trained in venepuncture and intravenous cannulation. The survey requests information on the number of nurses and midwives educated in venepuncture and/or intravenous cannulation in your hospital, the number of educated nurses and midwives who use these skills in the course of their duties, and current facilities for providing education and training in venepuncture and intravenous cannulation.

I would appreciate if you could complete this survey and return by Friday 29th February 2008. All returns should be made by e-mail (preferably) or post to:

Dr Siobhan O’Halloran
Office of the Nursing Services Director
26 Harcourt Street
Dublin 2
E-mail: siobhan.ohalloran@mailw.hse.ie

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

Thanks and Kind Regards,

Dr Siobhan O’Halloran
Director of Nursing Services

Cc: Ann Doherty, Acting Director, HSE National Hospitals Office
    Acute Hospital Chief Executive Officers/General Managers
    HSE Hospital Network Managers

1 53 acute hospitals funded by the HSE, National Hospitals Office
Findings from the Survey of Venepuncture and Intravenous Cannulation Education and Training among Nurses and Midwives Employed in Acute Hospitals within the Republic of Ireland January 2009