HSE HR Circular 03/2006

To: Assistant National Directors N.H.O. and P.C.C.C.
Hospital Network Managers
Local Health Office Managers

RE: Nurse Managers Reporting Relationships

I am writing to clarify the position in relation to Nurse Managers reporting relationships.

An element of confusion arose following the issue of recent letters by the INO and PNA (copies attached).

The position is that it has been confirmed to the nursing unions that establishment of the HSE did not change the agreement reached in 1999 on this matter. This agreement formed part of a Labour Court recommendation following industrial action by nursing unions and stated:

"It is agreed that the Nursing Directors will co-operate with the revised management structures in Community and Hospital Programmes. The reporting/ liaison/access relationships with regard to strategic matters will continue as heretofore. The management principles intended in the Health Legislation including 1996 Accountability Legislation and reflected in the management structures with regard to service direction and accountability are accepted. In practice, we would expect that the Partnership ethos to continue to prevail."

In practice this means that where, at that time, a post-holder reported to a Programme Manager such reporting would now be to an LHO Manager. Where a post-holder reported to a General Manager or other designated manager such reporting would continue. HSE establishment did not change matters in this regard.

There is no question of "down-grading" or "up-grading" reporting relationships. If changes in reporting relationships across the sector are required the matter will be discussed at national level.

Yours sincerely,

[Signature]

Martin Mc Donald,
National Director of Human Resources.
To: Directors of Nursing  
20th January 2006.

Dear Colleagues,

Issues continue to rumble on apparent attempts by some Local Managers to vary the established Reporting Relationships of Directors of Nursing.

In recent weeks it is noted that in one Area the L.H.O. Manager has advised Directors of Nursing Mental Health that their Reporting Relationship is to the General Manager.

In another Area the L.H.O. Manager has confirmed that the Director of Nursing report to the L.H.O. Manager but added the caveat that "this is under review".

I raised this issue again today at a meeting with Mr. Martin McDonald, A/National Director of H.R. and Mr. Rory Costelloe, Industrial Relations Executive, H.S.E.E.A.

Mr. McDonald confirmed as follows:

- The C.E.O. Deputy C.E.O. structure of the Health Boards era is gone
- The L.H.O. Manager equates to the Deputy C.E.O. (Programme Manager)
- The Reporting Relationship of the Director of Nursing Mental Health, which was in the past to the Programme Manager (Deputy C.E.O.) is now to the L.H.O. Manager.

It is clearly the case that our Directors of Nursing work WITH the General Managers for Mental Health but their Reporting Relationships is to the L.H.O. Manager.

Under no circumstances should any Director of Nursing permit a lesser Reporting Relationship to be foisted on them.

To facilitate clarity on this issue I am copying this correspondence to all L.H.O. Managers and indeed to Mr. McDonald.

Yours sincerely

[Signature]

Des Kavanagh
General Secretary
LD/MR
07 December 2005

To: Directors of Nursing/Midwifery
   Directors of Public Health Nursing
   Directors of Nursing and Midwifery Planning and Development Units

From: Liam Doran, General Secretary

Re: Senior Nurse Management Structures - Health Service Reform

Dear Colleague

This is a note to confirm that the INO met with the Health Service Executive’s Acting Director of HR, Mr. Martin McDonald, on Tuesday, 6th December 2005, to discuss all outstanding issues arising from the health service reforms and how they will impact upon Senior Nurse/Midwife Managers.

At this meeting the following was, in particular, discussed:

1. **The Reporting Relationship of Directors of Nursing/Midwifery**
   At the meeting Mr. McDonald confirmed that the 1999 agreement regarding reporting structures still stands and, in that context, the reporting relationship of the Director of Nursing/Midwifery is to the Network Manager (Acute Sector) and the Local Health Office Manager (LHO) in the PCCC Directorate.

2. **Senior Nurse Management Involvement at HSE Corporate Level**
   Under this heading we restated our position of Assistant Director appointment in the NHO, PCCC and HR Directorates together with the establishment of a Nursing and Midwifery Directorate within the corporate management structures of the HSE.

3. **Future Role of Directors of Nursing**
   Under this heading we restated the requirement, of the INO, that the role of Directors of Nursing/Midwifery be enhanced, as part of the reform structures, and not, in any way, relegated, reduced or minimised.

4. **Nursing and Midwifery Planning and Development Units**
   The future structures of the Nursing and Midwifery Planning and Development Units, including the contracts of employment pertaining to existing staff, was

SERVING NURSES & MIDWIVES
also discussed and it was confirmed that existing contracts would be extended for the full duration of all negotiations regarding the health service reform programme.

In addition it was also agreed that project staff, who have guaranteed funding for a definite period i.e. two years would be maintained in that role to allow completion of their stated project.

In response to all of the foregoing the HSE have now agreed that they will provide the INO with their vision statement, for the future role of Senior Nurse/Midwife Managers within the reformed health service, within two weeks i.e. before the Christmas break.

In addition we are to meet with the HSE again, to discuss their document, on Wednesday afternoon, 18th January 2006. We will be inviting the previously nominated negotiating team to that meeting.

Summary
While all issues remain outstanding I think it can now be stated that a negotiating process has finally commenced with regard to the health service reforms and their implications for Senior Nurse/Midwife Managers.

We will continually liaise with you with regard to developments and, at the appropriate time, convene a meeting of Directors of Nursing/Midwifery to consider all developments and issues which arise over the coming weeks.

In the interim it is imperative that Directors of Nursing/Midwifery adhere to the reporting relationship, stated above, and not allow, in any way, general management to erode the agreed structure by having Directors report to grades other than LHO/Network Managers.

Thank you for your attention to this note.

Yours sincerely

LIAM DORAN
General Secretary