

DEVELOPMENT FRAMEWORK
Implementation Project

FINAL PROJECT REPORT
January 2007 - September 2008

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ACKNOWLEDGEMENT FROM THE CHIEF EXECUTIVE

Following the launch of the Development Framework in 2006, NIPEC began to scope the implications of raising awareness and providing training for registrants across Northern Ireland to use the online resources. The appointment of five Support Officers working within the Health and Social Care Trusts has proven to be an immensely successful initiative, due to the level of enthusiasm shown by the Officers and also the commitment of the Executive Directors of Nursing, their teams and operational managers to release staff to attend training. This has been a noteworthy achievement given that the past year has provided many challenges for organisations both inside and outside Health and Social Care Northern Ireland, not least of which has been the reconfiguration of the Trusts and the invariable difficulties such mergers produce for all staff.

I would like to take this opportunity to thank the Support Officers for the enthusiasm and dedication demonstrated towards their work during the secondment period. Their commitment to the promotion and further development of the website during the past twenty-one months has been greatly valued by NIPEC and colleagues within the Trusts.

I would also like to take this opportunity to extend my thanks to the five Health and Social Care Trust Executive Directors of Nursing and their senior teams who have been instrumental in the success of this initiative, not least through the release of the five Support Officers on secondment to NIPEC, and staff to attend training sessions.

Miss Lesley Barrowman
Acting Chief Executive
NIPEC

1.0 BACKGROUND AND INTRODUCTION

1.1 NIPEC was established in March 2002, with the legislative remit to promote high standards of practice, education and development, and the professional development of the registrant¹ workforce.

1.2 In 2003 a comprehensive Project structure was established to produce a Development Framework that supported registrants' professional development. Work progressed to completion in March 2006 with a series of publications² produced throughout the Project that resulted in a body of information incorporating evidence-based papers and guidance documents. The development of the website, www.nipecdf.org provided a secure, individual online version of the Development Framework components. These resources have the potential to be valuable to organisations employing registrants, in supporting workforce development strategies and appraisal systems. For further information about the Project please go to:

http://www.nipec.n-i.nhs.uk/pw_developmentframework.htm

1.3 A number of broad recommendations to support effective implementation of the Development Framework were detailed in the Final Project Report including that: *NIPEC should develop and implement a comprehensive communication and marketing strategy to promote awareness and understanding of the Development Framework Project's five components and support their use across Northern Ireland.* Following the appointment of a Senior Professional Officer (SPO) with responsibility for professional development, NIPEC recruited, in the late autumn of 2006, a Band 6 Support Officer, Jennifer Hamilton (South Eastern Health and Social Care

¹ The term *registrant* throughout this document refers to all Nursing and Midwifery Council (NMC) registrants in Northern Ireland and includes: Registered Nurse, Registered Midwife and Registered Specialist Community Public Health Nurse (SCPHN).

² For further information regarding the publications produced as a result of the project, please go to http://www.nipec.n-i.nhs.uk/pub/fr_publications06.htm

Trust), to assist the SPO in promoting the *nipecdf* website with registrants in organisations across the statutory, independent and education sectors, in Northern Ireland. The Support officer was to be responsible for implementing a training programme for registrants - in consultation with organisations and key stakeholders, across all disciplines - to access the *nipecdf* resources, and specifically to create their own professional portfolio online.

- 1.4 Whilst initial uptake of training sessions was very good, it became evident to the NIPEC senior management team during spring 2007 that it would be useful to have individual Support Officers placed in each of the newly formed Trusts within Health and Social Care (HSC) Northern Ireland. In the summer of 2007, therefore, recruitment began of four Support Officers (Band 6), initially for a six-month period to March 2008. The secondments were subsequently agreed and extended during early 2008 to include a further six-month contract. The appointments were:

Carol Brown, Belfast Health and Social Care Trust³

Deirdre McCann, Northern Health and Social Care Trust

Jocelyn Davidson, Southern Health and Social Care Trust

Janette McRory, Western Health and Social Care Trust

Following the appointment of further officers, Jennifer Hamilton took on responsibility for the South Eastern Health and Social Care Trust.

- 1.5 This report is an account of the Project to implement the Development Framework resources within the Statutory, Independent and Voluntary care sectors in Northern Ireland.

³ The Support Officer for the Belfast Health and Social Care Trust commenced secondment 19th November 2008.

2.0 PROJECT AIM

2.1 The aim of the implementation project was to disseminate widely information relative to the Development Framework (DF) and to facilitate the use of resources by training and supporting registrants in managing their Continuing Professional Development through www.nipecdf.org In order to achieve this aim the key duties of the DF Support Officer Role were:

1. To be proactive in facilitating the use of the DF by registrants to support their continuous professional development.
2. To enable registrants across Northern Ireland to access and utilise the DF Resources through facilitation and training.
3. To contribute to increased activity on the *nipecdf* website, in terms of the number of individuals who register and length of time spent visiting the site.
4. To be proactive in assisting registrants and teams to access the DF resources.
5. To seek actively opportunities to disseminate information about the DF.
6. To make presentations on aspects of the *nipecdf* website and other aspects of the DF as requested.
7. To contribute to the development of promotional and guidance material to support the DF.

3.0 APPROACH

3.1 The approach adopted by the five Support Officers was to assist registrants in Northern Ireland to understand the relevance of the resources of the DF to their practice, fostering ownership of continual professional development. Following an intensive induction week, officers began work within Trusts, which included the Independent and Voluntary

sectors for their geographical areas. Officers reported directly to an SPO within NIPEC and also to a designated Assistant Director/ Co-director (Nursing and Midwifery) within their HSC Trust. Objectives and monthly targets had been defined and agreed for each Officer. The Officers were provided with 4-6 weekly professional supervision sessions to support their practice, when they had the opportunity to present issues for discussion within a group supervision setting.

3.2 To facilitate training, it was essential to recognise and understand the management structures within each Trust, appreciating the need to work with key people in the organisation. Officers engaged with Assistant Directors/ Co-directors, Managers and Education Facilitators within each of the Trust directorates to explain the usefulness of the DF resources and how training would be achieved. A variety of methods were used to generate interest including telephone calls, visits to team leaders/ ward managers, promoting the DF in Trust Newsletters and speaking at staff forums. The use of electronic media proved useful in accessing staff throughout organisations both through global emails and the Trusts' intranet portals. Direct links to the website were uploaded to many of the Trust intranet sites to allow ease of access from clinical areas. The Support Officers also 'walked' the Trust sites, speaking to registrants in an effort to generate interest for the DF resources.

3.3 Training was provided via the following approaches:

- Workshops lasting between one and two hours in IT Training suites on a variety of sites within Trusts
- During Directorate team meetings
- Tutorial type training sessions in work base areas
- Awareness sessions as part of Trust conferences or other professional training, such as staff inductions.

The variety of training types on offer supported the aim of promoting the benefits of the DF. Different venues suited the diversity of registrants accessed, with community and specialist staff typically preferring workshops in IT suites, and tutorial sessions within the work setting being the preferred method for acute care teams. During this time, the Officers learned to be flexible in their approaches, utilising their facilitation skills and working closely with Managers to enable staff to be released for training.

4.0 USE OF THE COMPETENCY PROFILE

- 4.1 An area of interest noted by some Managers across Trusts was the usefulness of the Competency Profile (CP) resource in assisting staff to prepare for Agenda for Change (AfC) appraisals through self assessment online. Managers and other peers could conduct a 360 assessment also using the online tool. This information was deemed beneficial in providing evidence to support ongoing competency development within the Knowledge and Skill Framework (KSF).

- 4.2 The Southern Health and Social Care Trust (SHSCT), in agreement with its Human Resources Department, conducted a small pilot to test this approach within the Medicine and Unscheduled Care Directorate. This proved successful, staff commenting on the value of the CP to prepare for appraisal through competence assessment and the selection of suitable personal and professional objectives for the incoming year. The outcome of the pilot resulted in appraisals becoming a 'reality in practice' through a process by which Managers could identify learning and development related to specific individual needs.

- 4.3 In the Independent Sector, the Southern Area Hospice also successfully adopted the Competency Profile as a tool to assist appraisal systems, facilitated by the Support Officer for the SHSCT.

5.0 ALLIED HEALTH PROFESSIONS

5.1 Towards the latter half of the Support Officers' secondments, a number of Allied Health Professions (AHPs) became interested in using the DF, in particular the Portfolio section. The Support Officers offered sessions to a number of AHP groups, notably Physiotherapists, Physiologists and Social Workers who were interested in the utility of the resources. This work was particularly successful in the Western and South Eastern Health and Social Care Trusts.

6.0 WEBSITE DEVELOPMENT

6.1 From the outset of the Implementation Project, it became apparent that the *nipecdf* would require updating and amending, as system difficulties were revealed through increased use by registrants. The Support Officers logged relevant issues on an administration tracking system housed with Aurion, the E-learning company which designed the website. Larger design upgrades were discussed and agreed at 4-6 weekly supervision sessions. Other regional initiatives also influenced ongoing website development, such as the *Regional Implementation Project for the Chief Nursing Officer's Standards for Supervision in Nursing*⁴ and the development of a student version of the DF for all pre-registration nursing and midwifery courses in Northern Ireland. This resulted in significant changes to the website which have streamlined and upgraded the online resources available to registrants.

7.0 REGIONAL INFORMATION

7.1 The launch of the website www.nipecdf.org took place in February 2006. In December 2006, there were 717 registered users who were spending an average of 6 minutes looking at the content of the website.

⁴ For further information about this project got to: http://www.nipec.n-i.nhs.uk/pw_supervision.htm

- 7.2 During the period between January 2007 and September 2007, there was one Support Officer working regionally throughout all Trusts, raising awareness of the DF and training registrants to use its resources. At the end of September 2007, there were 2409 registered users.
- 7.3 Following the appointment of Officers for all of the Trusts, there was an increase of 4496 users between September 2007 and September 2008, with an increase in the average length of stay for individuals using the web resource from around 5 minutes (2006/2007) to 12.5 minutes (2007/2008) in the same 12 month period. At the end of September 2008, there were 6905 users registered with *nipecdf*.
- 7.4 During the total period between January 2007 and September 2008, there was direct engagement with 5992 individuals across health and care organisations, including practice nurses and the Independent and Voluntary sectors.

8.0 TRUST INFORMATION

- 8.1 Individual reports of the activity within each of the five HSC Trusts in Northern Ireland have been compiled with the assistance of the individual Support Officer for each Trust. These reports can be found in Appendix 1, page 14.

9.0 PERSONAL REFLECTIONS

- 9.1 Throughout the secondment period, each Support Officer was encouraged to reflect on her practice. The Review of Public Administration and the subsequent re-configuration of eighteen 'legacy' Trusts into five posed a significant challenge for the Support Officers, in terms of identifying the most appropriate professional and/ or operational contacts within Directorates or Service Groups. During this period of intense change,

Officers also found, on occasion, difficulty in ensuring that staff could be released to attend training sessions, and challenges with regard to the promotion of the resources in environments with competing priorities.

- 9.2 Through professional supervision sessions and personal reflection, the Officers built on existing problem-solving skills, each one finding new methods of resolution and engagement with staff in the Trusts.
- 9.3 In the final month of secondment, the Executive Directors of Nursing for the five HSC Trusts were invited to an event, at which the Support Officers presented their work. Part of this presentation was a reflective account of the personal and professional learning and development experienced by the Support Officers, collectively and individually, as well as their vision for maintaining the use of the DF resources within organisations in the future.
- 9.4 The period of secondment with NIPEC provided the Officers with a unique opportunity to develop many new skills and competencies and also to consider their individual career progression. Each Officer reflected in particular, the advantage of having had regional experience and wider recognition within their organisations.
- 9.5 At the end of their secondments, the Officers all showed significant commitment to furthering the DF resources, as they returned to their substantive posts.

10.0 CONCLUSION AND RECOMMENDATIONS

10.1 The successful completion of the Development Framework Implementation Project has been greatly assisted by the Executive Directors of Nursing and their teams of Assistant/ Co-directors. In particular, HSC Trust liaison Assistant/ Co-directors provided significant support to Support Officers during their secondments and in some cases, provided professional supervision.

10.2 From January 2007 onward, the Support Officers made a substantial contribution to raising awareness of the DF and to the further development of the website, following both use of the site in training, and feedback from registrants who had used the site. At the end of the secondment period, the significant enthusiasm and commitment of the Officers to promoting the DF resources resulted in increased activity on the *nipecdf* website which is evidenced by the regional figures: 150% increase in time spent in the website and 863% increase in the number of registered users (from year end 2006). The maintenance and continual improvement of www.nipecdf.org and resources linked to the website is part of NIPEC's Annual Corporate Business Plan.

10.3 There are a number of specific recommendations regarding future work for NIPEC and for organisations within Health and Social Care Northern Ireland to promote the development and use of www.nipecdf.org . Following the completion of the formal Implementation Project it is recommended that NIPEC should:

1. Continue to raise awareness of the Development Framework and provide ongoing support for registrants using www.nipecdf.org
2. Seek nominations from health and care organisations of individuals who could act as champions for the DF, would be regularly updated about improvements made to the website and would be responsible

for the dissemination of information to DF users within their organisation.

3. Continue the production of a Personal Development Plan template for the website.
4. Develop a “Planning positively for retirement” section for the website.
5. Seek to promote the use of the DF resources with the Allied Health Professions.
6. Continue links with the Universities and In-service Education Consortia and continue to promote the use of the DF within pre and post-registration and in-service education programmes.
7. Promote the purposeful use of portfolios within service provider organisations at for example, job interviews, appraisal/ KSF development reviews, induction programmes, capability procedures, triennial reviews of mentors/ sign off mentors.

APPENDIX 1

Individual Health and Social Care Trust Reports

BELFAST HEALTH AND SOCIAL CARE TRUST (BHSCT)

The nursing and midwifery workforce within the Belfast Trust consists of 7500 registrants covering over 100 acute inpatient wards and 30 other specialisms with a vast range of community and primary care settings. Prior to November 2007, a total of 173 registrants had been trained in using the resources of the Development Framework (DF). The total number of staff trained in the BHSCT between November 2007 and the end of September 2008 is 1316, which equates to a total of 20% of the registrant workforce.

This number can be sub-divided within Trust Service Groups as follows:

Service Group	Number of Registrants Trained
Clinical Services	232
Head and Skeletal	170
Mental Health and Learning Disability	88
Older People Medical and Surgical	304
Social Services, Family and Child Health	259
Specialist Services	254
Association Networks (NVQ coordinators etc.)	17

Presentations were also provided at a number of Trust Nursing and Midwifery Road shows, which have not been included in the numbers.

As well as teaching skills relevant to using the resources available within the five sections of the website, the opportunity arose to assist some members of staff with the practicalities of using the Competency Profile and Supervision sections and assistance with preparation for interviews, using the online support available within the DF and connected links.

Evaluation

Evaluations received from participants within the BHSCCT included the following comments:

- The timing of each session was appropriate
- Sessions assisted in simplifying the DF, demystifying the whole concept of portfolios and tying in well with KSF Appraisal
- Managers found the convenience of 'on site' training beneficial, in that it did not require staff to be sent away from the ward area
- Presentations were straight forward, the 'step-by-step' nature of the DF facilitating ease of use
- The resources were a good way of keeping an up-to-date record of learning and reflection
- The sessions encouraged registrants to update and organise information relative to their learning and development.

During August 2008, a short evaluation⁵ was carried out for registrants attending sessions within the BHSCCT. 88 registrants were sampled and a summary of the results is as follows:

- 67% said they have no up-to-date portfolio
- Of the 39% who did have portfolios, 68% had included reflections
- Following the sessions, 83% stated they were motivated to commence and maintain a portfolio
- 61% would use the online option
- The three most useful sections of the website were: portfolio (71%), Competency Profile (54%) and Learning Activities (39%).

⁵ Please see Appendix 2 for a sample of the Evaluation Questionnaire used.

SOUTHERN HEALTH AND SOCIAL CARE TRUST (SHSCT)

The Southern Health and Social Care Trust (SHSCT) has 3996 registered nurses and midwives. Prior to 1st October 2007, there was a total of 206 registrants who had attended training within the old 'legacy' Trusts of the Southern Area. The total overall activity in the 12 months since then is recorded as 991 registrants who have attended DF training, representing 25% of the total registrant workforce.

This number can be sub-divided within Trust Directorates as follows:

Directorate	Number of Registrants Trained
Acute Services	448
Children's & Young Peoples	137
Mental Health & Disability	226
Older People & Primary Care	180
Human Resources & Organisational Development	13

Training has also been provided for 188 registrants within the private sector of the Southern Trust geographical area.

In early February 2008, some managers within the Trust became interested in using the Competency Profile resource to assist staff to prepare for Agenda for Change appraisal through self-assessment using the online version. Managers could also carry out an online managerial assessment when asked. The information generated proved beneficial in providing evidence to support ongoing competency development as laid down within the Knowledge and Skill Framework (KSF).

Following some discussion with Human Resources staff and senior nursing colleagues, a small pilot was conducted to test this approach within the Medicine and Unscheduled Care Service Group. This proved to be very positive; staff

involved commented on the ease of use of the Competency Profile to assist them to prepare to meet their manager. This process ensured a systematic approach to appraisal for staff, focussing efforts on the achievement of objectives and preparation for review year on year, providing evidence for KSF requirements. The overall outcome of the pilot resulted in appraisals becoming a reality in practice. Managers were able to identify learning and development objectives related specifically to individual needs.

Evaluation

During August and September 2008, a short evaluation⁶ was carried out for registrants attending sessions within the SHSCT. 145 registrants were sampled and the following feedback was given:

- 96% stated they were now motivated to start using the Development Framework within their practice, with 4% remaining unsure
- 92% stated they would prefer to keep an online portfolio, whilst 7% still preferred the paper version
- The three resources within the DF site which registrants stated they would access and use the most were Portfolio, Competency Profile and Learning Activities.

⁶ Please see Appendix 2 for a sample of the Evaluation Questionnaire used.

WESTERN HEALTH AND SOCIAL CARE TRUST (WHSCT)

There are approximately 3700 registrants currently employed by the Western Health and Social Care Trust (WHSCT). Prior to 1st October 2007, 234 registrants from the three 'legacy' trusts had completed training. As of 30th September, 1229 members of staff have completed training, which translates to 39% of WHSCT employed registrants now supported to use the Development Framework (DF) and understand its benefits. This excludes AHPs and the Independent and Voluntary Sector within the geographical area of the WHSCT.

This number can be sub-divided within Trust Directorates as follows:

Directorate	Number of Registrants Trained	
	1/10/07 – 31/03/08	1/04/08 – 30/09/08
Acute Services	226	236
Women and Children	93	143
Mental Health	101	94
Primary Care & Older Person	127	147
Allied Health Professionals	N/A	24
Independent and Voluntary Sector	12	57

The Allied Health Professions (AHPs) have, in recent months, become interested in the usefulness of the DF to support their own continuing professional development. During August 2008, a tutorial was held for a number of AHPs who wished to be trained in the resources of the DF. It became apparent during this session that many aspects of the framework were applicable to their roles, the portfolio section, in particular, being useful for collecting evidence relative to continual professional development to satisfy the requirements of their regulating bodies for re-registration, as well as Agenda for Change appraisals. Those who attended included individuals from physiotherapy, occupational therapy, dietetics, clinical physiologists, phlebotomy and podiatry backgrounds. Training was formally opened to AHPs in August 2008, following the initial tutorial.

Evaluation

During July 2008, a simple evaluation tool (Appendix 2) was developed and tested in collaboration with the other Support Officers, to help gain insight into the opinions of registrants immediately after training sessions. The tool highlighted the fact that 76% of registrants sampled in the WHSCT prior to the training did not keep an up-to-date professional portfolio. Of the 24% of registrants who had kept a portfolio, 55% had recorded reflections relative to learning and development or practice.

Even though 24% of staff stated they had a professional portfolio, 98% of the total number of registrants asked to take part in the evaluation stated that attending the training session had helped motivate them to keep or change the way they kept their portfolio. Other aspects of the evaluation included:

- 87% of registrants felt that they would prefer to keep their professional portfolio online as opposed to on paper
- The three resources within the DF site which registrants stated they would access and use the most were Portfolio (43%), Competency Profile (24%) and Learning Activities (25%) sections.

This short evaluation reflected the user-friendly aspect of the online resource and ease with which the site may be navigated.

NORTHERN HEALTH AND SOCIAL CARE TRUST (NHSCT)

The Northern Trust has a total of 3513 registered nurses and midwives. Prior to 1st October 2007, 135 registrants from the three 'legacy' trusts had completed training. The total number trained is now 883, or 29% of registrants within the NHSCT trained to use the resources of the Development Framework (DF).

The number of registrants trained within each Directorate of the NHSCT is as follows:

Directorate	Number of Registrants Trained
Acute and Elective Services	214
Women's and Children's	252
Mental Health & Disability	107
Emergency Primary Care & Older People	310

There were also 146 nurses trained within the Independent and Voluntary Sector. The opportunity arose to visit HM Prison at Magilligan and provide training for 10 of the nurses at the prison hospital. Training was also provided for 20 practice nurses employed within General Practitioner practices in the Northern Health and Social Services Board (NHSSB).

General feedback from registrants who attended training was positive, with many commenting on the usefulness of the resources within the DF.

Evaluation

In July 2008, an evaluation form (Appendix 2) was developed in consultation with the other NIPEC Support Officers. In the NHSCT, 176 registrants were sampled using this evaluation questionnaire. Of the 176 sampled:

- 91% stated that they were motivated to use the Development Framework to build their portfolio

- 85% stated that they would prefer to develop an online portfolio
- The 2 resources within the Development Framework which registrants stated they felt of most value to their professional development were Portfolio and Competency Profile sections.

SOUTH EASTERN HEALTH AND SOCIAL CARE TRUST (SEHSCT)

There are approximately 2940 registrants in the SEHSCT, of which 1313 registrants have attended sessions. This equates to 45% of the registrant workforce, which is a significant achievement, given the current climate of competing demands on the time of nurses and midwives. Registrants who participated in the sessions came from all Directorates and were fairly evenly spread across the whole Trust, in terms of geographical location of their work setting. A number of student nurses, Health Care Assistants and Allied Health Professionals also received training. The night staff were a particularly challenging group to engage in sessions, resulting in only a few participating in training during the 21 months period of secondment for the Support Officer. Even though night-time sessions were offered, it appeared to be difficult to release staff to attend what were short, targeted information sessions. During this time, training was also delivered to 128 nurses in the Independent and Voluntary sectors within the geographical area of the Trust.

The number of registrants trained within each Legacy Trust of the SEHSCT is as follows:

Legacy Trust	Number of Registrants Trained
Down Lisburn	499
Ulster Community & Hospitals	814
Independent and Voluntary Sector	128

Reflections relative to the DF resources from the nursing and midwifery staff were positive overall, many commenting on the usefulness of the resources particularly in relation to keeping a record for Nursing and Midwifery Council PREP requirements, storing records of supervision online and preparing for appraisal or development reviews using the Competency Profile.

Evaluation

During August and September 2008, a short, informal and anonymous survey⁷ of those who attended sessions was carried out. The results were as follows:

- 68% of those surveyed admitted not having a portfolio
- 12% said they used reflection in their portfolio
- 88% said they would prefer to use online resources rather than paper format.

⁷ Please see Appendix 2 for a sample of the Evaluation Questionnaire used.



EVALUATION FORM – Development Framework Training

1. Before this session did you keep an up to date professional portfolio?
YES (go to Q2) NO (go to Q3)

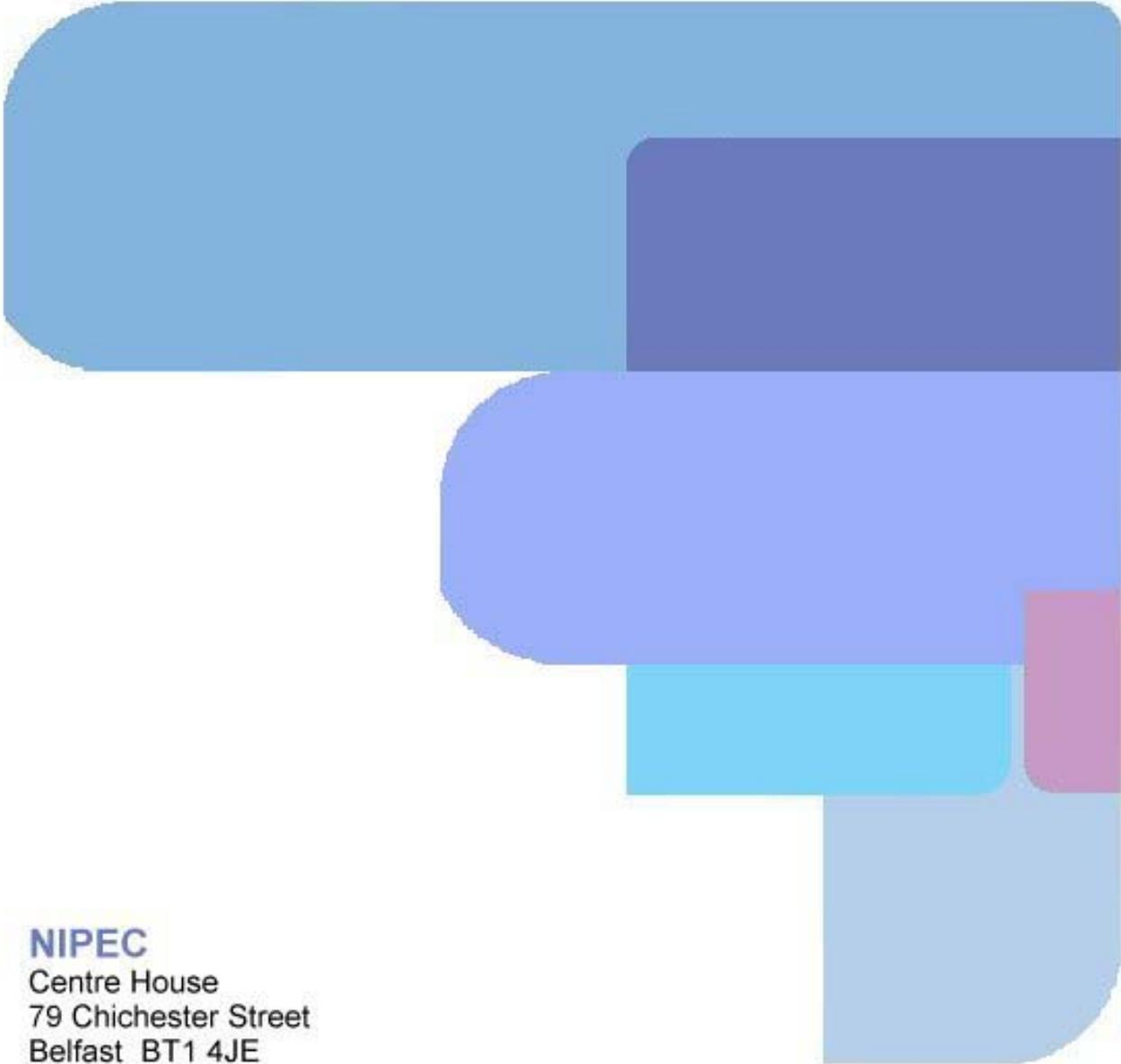
2. Does your portfolio contain reflections on practice or learning activities?
YES (go to Q3) NO (go to Q3)

3. Has this teaching session helped motivate you to keep a portfolio or change the way you keep your portfolio?
YES NOT SURE NO

4. Following this teaching session would your preferred method of keeping a portfolio be?
Paper Online

5. Please underline from the list which 2 sections you feel will be of most value to you at present;
Portfolio Competency Profile Learning Activities
Career Planning New Roles

6. Any other comments or suggestions?



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