



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive



Office of the  
**Nursing & Midwifery**  
Services Director

# Professional Development Plan For Nurses & Midwives



## Section A: Profile Details

| Profile Details                    |  |  |          |
|------------------------------------|--|--|----------|
| Name                               |  |  |          |
| Job Title                          |  |  |          |
| Staff Grade                        |  |  |          |
| Employee Number <sup>1</sup>       | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; height: 30px;"></td> <td style="width: 40%; padding: 5px;">NMBI PIN</td> </tr> </table> |  | NMBI PIN |
|                                    | NMBI PIN   |  |          |
| Ward/Department                    |  |  |          |
| Length of Time in Current Position |  |  |          |
| Line Manager Name                  |  |  |          |
| Line Manager Email Address         |  |  |          |
| Date of PDP meeting                |  |  |          |

## Section B: Previously Agreed Professional Development Plan Goals

Date of Last Meeting: .....

| No. | Previous Professional Goals | Achieved (A)<br>Partially Achieved (PA)<br>Not Achieved (NA) | Supports that Enabled Achievement | Challenges to Achieving Goals |
|-----|-----------------------------|--|-----------------------------------|-------------------------------|
| 1.  |                             |  |                                   |                               |
| 2.  |                             |  |                                   |                               |
| 3.  |                             |  |                                   |                               |
| 4.  |                             |  |                                   |                               |

<sup>1</sup> Employee number and NMBI PIN are obtained for the purpose of the Professional Development Planning process only and will not be used for any other purpose.

## Section C: Self Assessment

### Professional Development Plan

1. Identify the strengths that you bring to the role

2. Describe how you are using your knowledge, skills and experience in your role

3a). Do you think your knowledge, skills and experience are being optimally utilised?

Yes \_\_\_ No \_\_\_ Sometimes \_\_\_\_\_

3b). If no or sometimes, how can this be achieved?

4a). What are the areas in relation to knowledge, skills and experience that you would like to develop?

4b). Describe how you would like to further develop these areas

5. What are the challenges for you in your role and how can you be supported to manage them?

**Section D: Current Professional Development Plan Goals**

| No. | Professional Goals | Required Actions | Supports Required to Achieve Goals | NMBI Code of Conduct & Ethics Principles <sup>1</sup> | Date to be Achieved<br>Month/Year |
|-----|--------------------|------------------|------------------------------------|---|-----------------------------------|
| 1.  |                    |                  |                                    |   |                                   |
| 2.  |                    |                  |                                    |   |                                   |
| 3.  |                    |                  |                                    |   |                                   |
| 4.  |                    |                  |                                    |   |                                   |
| 5.  |                    |                  |                                    |   |                                   |

## Collaboration and Agreement

### Comments / Discussion

We agree to the development of the professional goals and actions presented in this PDP and we commit to jointly reviewing the progress.

Employee Signature .....

Line Manager Signature .....

Date .....

**Professional Development Plan  
Reflections on Progress and Development  
(For personal use only)**

|           | <b>Professional Goal</b> | <b>Date</b> | <b>Reflection</b> |
|-----------|--------------------------|-------------|-------------------|
| <b>1.</b> |                          |             |                   |
| <b>2.</b> |                          |             |                   |
| <b>3.</b> |                          |             |                   |
| <b>4.</b> |                          |             |                   |