

COMMONWEALTH NURSES FEDERATION



ANNUAL REPORT 2011-2012



Inaugural Commonwealth Nurses Conference March 2012



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1. INTRODUCTION

The Commonwealth Nurses Federation (CNF) was established in 1973. The CNF works with its membership, national nursing and midwifery associations from Commonwealth countries, in order to influence health policy, develop nursing networks, improve nursing standards and competence, and strengthen nursing leadership throughout the Commonwealth. The CNF was first accredited to the Commonwealth in 2004.

The CNF maintains close links with Commonwealth bodies and civil society organisations within the Commonwealth 'family' and liaises with international bodies, such as the World Health Organization, the International Labour Organisation, the International Council of Nurses and the International Confederation of Midwives. These links enable the CNF to plan strategically on issues of concern to nursing and midwifery in a global context. Additionally, the CNF is affiliated with other international bodies such as the Global Health Workforce Alliance, the White Ribbon Alliance, and Health Information for All by 2015. The CNF participates actively in the work of Commonwealth bodies: the Commonwealth Foundation, the Commonwealth Secretariat, the Commonwealth Health Professions Alliance and the Commonwealth HIV and AIDS Action Group. The CNF's work is supported by the provision of office space within the Royal College of Nursing, United Kingdom. The strategic directions for the CNF focus on seven key areas: governance, membership, projects, communication, liaison, administration, and finance. This annual report is structured under those headings. The CNF *Strategic Plan 2011-2012* and the 2011-2012 audit report form part of this annual report.

2. GOVERNANCE

The CNF is governed by an elected Board consisting of a President, Vice President and six Board members from each of the six CNF Regions (Atlantic; Asia; East, Central and Southern Africa; Europe; the Pacific; and West Africa). Board members are elected for a four year term and are eligible for re-election for a second four year term. A quarterly report to the Board is provided by the Executive Secretary. During 2011-2012, CNF members were contacted for their views on a name change from the Commonwealth Nurses Federation to the Commonwealth Nurses and Midwives Federation. This name change was overwhelmingly supported by members on the basis of inclusiveness and a constitutional change will go to the 21st CNF Biennial Meeting in London March 2014. The CNF Board is also exploring options for expanding membership categories.



Susie Kong
(Singapore)
President



Satish Chawla
(India)
Vice President

Current CNF Board members are: **Atlantic:** Marion Howard (Barbados); **Asia:** Ramziah bt Ahmad (Malaysia); **West Africa:** Alice Asare-Allotey (Ghana); **East, Central and Southern Africa:** Donal Epaalat (Kenya); **Europe:** Paula Hancock (United Kingdom); **Pacific:** Lee Thomas (Australia).



3. APPOINTED OFFICERS

Jill Iliffe has been CNF Executive Secretary since April 2008. Jill is the former National Secretary of the Australian Nursing Federation and has extensive clinical experience in a wide range of nursing areas including midwifery, remote areas, intensive care, aged care, community health and women's health and broad experience in management, policy development and political lobbying. Angela Neuhaus is the CNF Honorary Treasurer. Angela is a nurse with a strong background in rural and remote health and nursing management. Angela currently lives in Zimbabwe.



Jill Iliffe



Angela Neuhaus

4. PROJECTS

The CNF is focussing more on in-country project work to extend its reach, reduce costs, and achieve a greater impact with a critical in-country mass enhancing effect and outcome. The CNF is also seeking partners from a broader field than the traditional Commonwealth sources. There is a focus on building up national associations so they can have a greater impact at government level (leadership, governance, media, lobbying) and working with national associations to provide them with evidence to support their lobbying (surveys and research).

4.1 Inaugural Commonwealth Nurses Conference

The Inaugural Commonwealth Nurses Conference was held 10-11 March 2012 at the Royal Commonwealth Society in London UK on the eve of Commonwealth week. Nearly 200 participants from 27 Commonwealth countries heard from a wonderful line-up of international speakers. The conference was hosted by the Commonwealth Nurses Federation and the CNF Europe Region and supported by the Royal College of Nursing UK. Concurrent sessions were presented by speakers from every region of the Commonwealth, covering a range of themes including meeting the health Millennium Development Goals; using information technology to improve care; developing a healthy workforce and healthy systems of care; and innovation and excellence in clinical practice. The Conference was opened by the Commonwealth Secretary General, HE Mr Kamalesh Sharma. The Commonwealth Secretariat provided funding for four speakers from developing countries to attend and present at the conference.



4.2 Commonwealth Fellowships

The CNF was successful in being awarded two Commonwealth Professional Fellowships in 2012 as part of the Commonwealth Scholarship Commission scheme (<http://cscuk.dfid.gov.uk/>). The Fellowships are the first in a proposed regular program to develop young nurse leaders in developing countries. The two successful Fellows were Ms Clarisse Bombi Lamnyam and Mr Tita Pale Isa Ndognjem from Cameroon who spent ten weeks in London increasing their skills in leadership, governance, administration, and communication which will enhance their contribution to nursing and health in their own country. Both Clarisse and Tita successfully completed their Fellowships and were wonderful ambassadors for nursing and for Cameroon.



4.3 Seychelles ‘Nurses as Agents of Change’ workshops

In July 2011, the Nurses Association of the Republic of the Seychelles (NARS) and the Seychelles Ministry of Health partnered with the CNF to conduct the first in the ‘Nurses as Agents of Change’ series with one leadership workshop and two safety workshops. The leadership workshop was attended by 46 potential future nurse leaders. The workshop covered areas such as: leadership theories and models; strategic thinking and planning; working with the media; and becoming a change agent. Two safety workshops were attended by 33 and 34 participants respectively where the focus was on a safe patient; a safe workplace; a safe profession; and a safe nurse.



4.4 Maternal Health Updates for Sierra Leone

The CNF was funded by the Burdett Trust for Nursing, to conduct education and training in maternal and infant health in five districts in Sierra Leone (Freetown, Western District, Makeni, Kenema and Bo) in partnership with the Sierra Leone Nurses Association and supported by the Sierra Leone Ministry of Health and Sanitation. The education and training covered key updates in relation to antenatal care, intrapartum care and postnatal care with an emphasis on managing obstetric and neonatal emergencies.



4.5 ‘Nurses as Agents of Change’ – Swaziland

A ‘Nurses as Agents of Change’ workshop was conducted in Swaziland in September 2011. The workshop explored the meaning of professionalism and the responsibility of nurses to their profession, their patients and themselves. The workshop also explored the obligation, either voluntary or mandatory, of nurses to participate in continuing professional development (CPD) and to work to improve standards and regulation in order to enhance quality of care. The Swaziland senior nursing leadership presented a draft national CPD framework for nurses in Swaziland, developed through a grant by the African Regulatory Collaborative. The CPD framework was examined in detail and the nurses encouraged to become champions of CPD in their workplaces and advocates for change. The workshop was funded by the Commonwealth Foundation.



4.6 'Nurses as Agents of Change' – Lesotho

A second 'Nurses as Agents of Change' workshop was conducted in Lesotho also in September 2011. The workshop explored the meaning of professionalism and the responsibility of nurses to their profession, their patients and themselves and the obligation, either voluntary or mandatory, of nurses to participate in continuing professional development (CPD) and to work to improve standards and regulation in order to enhance quality of care. The Lesotho senior nursing leadership presented a draft national CPD framework for nurses in Lesotho developed through a grant by the African Regulatory Collaborative. The CPD framework was examined in detail and the nurses encouraged to become champions for CPD in their workplaces and advocates for change. The workshop was funded by the Commonwealth Foundation.



4.7 Reaching out – Zimbabwe

In October 2011, in another of the 'Nurses as Agents of Change' series, the CNF partnered with the Zimbabwe Nurses Association (ZINA) to conduct a safety workshop for thirty-six nurses and midwives in Harare. The workshop explored issues related to a safe patient; a safe workplace; a safe profession; and a safe nurse. The key factors to ensure patient safety were identified as the availability of competent nurses; a conducive environment; adequate resources; patients actively involved in their own care and being well informed and knowledgeable. Although Zimbabwe is not a member of the Commonwealth, the Zimbabwe Nurses Association (ZINA) is a long standing member of the CNF. The workshop generated a series of recommendations for ZINA to consider:

- * That ZINA advocate for adequate staffing levels and appropriate conditions of service and remuneration.
- * That ZINA advocate for improved infrastructure for nursing education and educational opportunities to upgrade the qualifications of nursing tutors.
- * That ZINA advocate for enhanced autonomy for nursing without intimidation, so the Zimbabwe Nursing Council has the capacity to ensure that nurses are competent and safe practitioners.
- * That ZINA plan to conduct Safety Workshops in other provinces of Zimbabwe so the information provided can be accessible to other nurses.



And in June 2012, meetings were held with the senior nursing leadership and the Zimbabwe Nurses Association to discuss conducting education and training in other districts particularly in relation to maternal and child health. It is anticipated this education and training will take place February 2013. Meetings were also held with the leadership of Chitungwiza Central Hospital with a view to partnering with the hospital and using their training facilities to conduct education and training.



4.8 Safety Workshop – DENOSA

A further 'Nurses as Agents of Change' workshop was conducted in partnership with the Democratic Nursing Organisation of South Africa (DENOSA) at DENOSA headquarters in Pretoria. The focus of the workshop was on a safe patient, a safe workplace, a safe profession, and a safe nurse. Participants were DENOSA trainers from all provinces of South Africa. The CNF training materials were made available to the participants as DENOSA plans to replicate the training in other areas of South Africa.



4.9 Website Development Program

The majority of CNF members do not have websites. The website development program is an ongoing project to support the development of individual websites for small, less developed member associations to enable them to have an internet presence and be able to communicate more readily both within and outside their countries. We live in an age where increasingly, electronic communication is the medium of choice. Without access to email and the internet, organisations and individuals experience considerable disadvantage and without an internet presence, national nursing organisations are unable to effectively communicate with their members or promote themselves, their mission, their goals and their views on current issues. The project includes purchase of a discrete domain name for each organisation, web space for each organisation, the customisation of an individual and unique website, purchase of necessary software, and training for website maintenance so that countries can be independent.

During 2011-2012, websites were developed for the Nurses Association of the Commonwealth of the Bahamas and the Cameroon Nurses Association. Website development training was provided to the Sierra Leone Nurses Association and the Cameroon Nurses Association and software provided to the associations so they could manage their own websites. Website training for Lesotho and the Bahamas will take place during 2012-2013. Websites are currently under construction for Zimbabwe and Jamaica.



<http://www.bahamasnursesassociation.org>

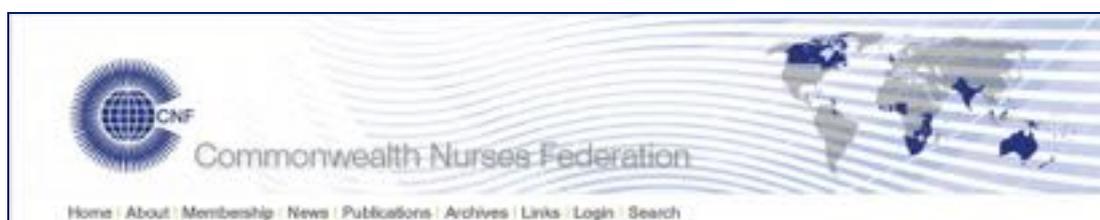


<http://www.cameroonnursesassociation.org>

5. COMMUNICATION

5.1 Website <http://www.commonwealthnurses.org>

The CNF website provides an interactive environment in which to publicise and report on CNF activities. The website is an essential and integral component of the CNF communication strategy. The website is managed in-house to reduce operating costs. Website statistics are collected monthly and form part of the quarterly Executive Secretary report to CNF Board members. During 2011-2012 a 'resources' section was added to their website where information about the wide range of training resources available can be accessed.



5.2 CNF e-News

Since May 2008, the CNF has produced a monthly e-News bulletin to keep members and other relevant organisations informed of CNF activities. The e-News has a wide circulation and is extremely popular with over 1300 email addresses on its data base. A subscription form is available on the CNF website (subscriptions are free). Copies of the e-News are uploaded to the CNF website where previous copies are also available. The CNF e-News allows the CNF to keep in touch with members and to let them know not only what activities the CNF is undertaking, but also bring to them up to date information about other things that are happening throughout the Commonwealth. The CNF e-News is sponsored by the RCN Publishing Company.



5.3 CNF Journal: *The Commonwealth Nurse*

The CNF journal, *The Commonwealth Nurse*, is produced twice yearly and provided free to members. The journal is produced in-house to reduce costs. *The Commonwealth Nurse* has a print run of 800 copies and is distributed to 450 subscribers (subscription is free). Apart from providing an overview of CNF activities, *The Commonwealth Nurse* provides information and also publishes articles submitted by members.



6. LIAISON

6.1 The Commonwealth Health Professions Alliance (CHPA)



The CHPA is an alliance of Commonwealth health professional associations. By working together, members of the CHPA can more efficiently and effectively represent and support health professionals in Commonwealth countries and promote high standards of care and equity in access to care for Commonwealth peoples. The CNF is the elected secretary for the CHPA.

6.2 The Commonwealth Health Ministers' meeting 2011

The annual Commonwealth Health Ministers' (CHMM) meeting was held in Geneva on Sunday 20 May 2012. The theme for the 2012 CHMM was: *Linking communicable and non-communicable disease*. The Commonwealth Health Professions Alliance was invited by the Commonwealth Secretariat to make a presentation to the Commonwealth Health Ministers as part of the agenda for the CHMM. The focus of the CHPA address was the need to embed culture in messages about preventing both communicable and non-communicable disease. The address included examples from countries across the Commonwealth where successful cultural approaches have been used, particularly in messages about preventing communicable disease. A copy of this presentation is available on the CHPA website: <http://www.chpa.co>. The Commonwealth Health Ministers' meeting was followed by the 65th World Health Assembly.

6.3 2012 Commonwealth Partners' Forum

The CHPA in partnership with McKinsey and Company and the Commonwealth Foundation hosted a Commonwealth Partner's Forum in conjunction with the annual Commonwealth Health Ministers' meeting (CHMM) The Forum was titled: *Culture connects: linking communicable and non-communicable disease*. Delegates were challenged by two international keynote speakers, Dr Airhuhenbuwa from Pennsylvania State University and Dr Christoph Benn from the Global Fund, who both emphasised the importance of cultural approaches when designing programs to prevent communicable and non-communicable disease, with a particular focus on young people. The forum was chaired by Dr Sundaram Arulraj, Chairperson of the CHPA and moderated by Dr Nicolaus Henke from McKinsey and Company. Copies of the presentations at the forum and a report of the forum are available on the CHPA website: <http://www.chpa.co>.



6.4 Commonwealth Liaison

The CNF maintains close relationships with the Commonwealth Foundation and the Commonwealth Secretariat, attending Commonwealth Civil Society consultations and joining the celebrations during Commonwealth Week March 2012. The CNF represents the CHPA on the Commonwealth Advisory Committee for Health.

6.5 Commonwealth Peoples' Forum and CHOGM



The Commonwealth People's Forum was held in Perth Australia 24-27 October 2011. The CNF Executive Secretary addressed a plenary meeting on behalf of the Ramphal Commission on Migration and Development to report on the findings and recommendations of the Commission's work. CNF members had input into the CPF communiqué through attendance at Commonwealth Foundation regional consultations. The Commonwealth Heads of Government held their Biennial meeting in Perth Australia 28-30 October 2011. At their meeting the Heads of Government considered the report of the Eminent Persons Group which was commissioned to do a review of the Commonwealth at the 2009 CHOGM in Trinidad and Tobago.

6.6 International Liaison

The CNF has a close relationship with the International Council of Nurses (ICN) and attends ICN Committee of National Representatives meetings as an observer. The CNF participates in celebrations for International Midwives Day 7 May and International Nurses Day 12 May. The CNF President, Miss Susie Kong, is a member of the ICN Global Nursing Leadership Institute and the WHO Global Advisory Group on Nursing and Midwifery. The CNF is also a member of the Global Health Workforce Alliance; Health for All by 2015 (HIFA 2015); and the White Ribbon Alliance for Safe Motherhood.



6.7 Ramphal Commission on Migration and Development



The final meeting of the Ramphal Commission on Migration and Development was held in Oxford UK July 2011. The third and last report was finalised and recommendations formulated to go to CHOGM in Perth Australia October 2012. A strategy for raising the issue of migration for discussion at CHOGM and having migration a part of the CHOGM communiqué was also discussed. This was achieved with clause (h) i-iv of the CHOGM communiqué specifically addressing the issue of migration, that Commonwealth Heads of Government are ... *committed to maximise the economic and social benefits of migration to improve the resilience and prosperity of Commonwealth members, whilst addressing the challenges posed by irregular migration which undermines legal migration policies.*

6.8 The African Health Profession Regulatory Collaborative

The CNF is a partner with the CDC Centre, Atlanta; Emory University; the East, Central and Southern Health Community; and the Commonwealth Secretariat in the African Health Profession Regulatory Collaborative which aims to work with countries in the region to enhance nursing and midwifery standards and regulation through small targeted funding grants. The CNF provides administrative support, technical assistance and writes the reports of the three meetings held each year. This provides additional income to the CNF as well as raising our profile, keeping us in close contact with members in the region, and making a valuable contribution to improving nursing and midwifery regulations and standards. Meetings throughout the year were held in Arusha in Tanzania and Johannesburg and Pretoria in South Africa. Additionally, the CNF provided technical support to Swaziland and Lesotho in the development of a national continuing professional development framework for nurses and midwives.



7. ADMINISTRATION

CNF administrative processes are constantly evaluated for their efficiency and timeliness. All CNF member associations, Chief Nursing Officers and Nursing Registrars addresses are updated annually to ensure reliable and consistent communication. The CNF website is regularly updated. The CNF bank account allows online access and electronic transfer of funds. During 2011-2012 a comprehensive data base was designed and implemented to meet the growing communication needs of the CNF. All data has now been merged within the one data base. This includes regular contacts as well as subscriptions to the monthly e-News and the bi-annual CNF journal: *The Commonwealth Nurse*. A further administrative improvement is that the CNF is aiming to eliminate paper files by 1 July 2012. From that date, all future files will be stored in an electronic format. Electronic access to files, email, the website, the internet and the CNF bank account allows seamless and timely administration regardless of geographic location.

8. FINANCES

The CNF is funded through a combination of membership fees; grants from the Commonwealth Foundation, the Commonwealth Secretariat and other funding bodies; consultation fees; and gifts. An active plan is in place to increase the number of financial members and to diversify the CNF funding base. The CNF financial records are independently audited. The auditor's report forms part of this report. Accessing additional funding is a perennial and time consuming problem. The activities and impact of the CNF is limited only by access to funding. Considerable savings are generated by the use of Skype and email to maintain contact with members rather than using the telephone. Savings are also generated by the opportunistic planning of activities to coincide with other events.

9. MEMBERSHIP

The CNF actively pursues membership. In 2011-2012 the CNF had 45 financial members. Not all Commonwealth countries have national nursing associations as some of the small island states are too small to support a national nursing association. The CNF membership fees are small and are published on the CNF website: <http://www.commonwealthnurses.org>. More than two thirds of CNF members pay the lowest membership rate; currently £75.00 per annum. Transaction costs for these small amounts are quite high. Contact with members has increased considerably, largely as a result of interest generated by the monthly CNF e-News. At the CNF 21st Biennial Meeting in London March 21014, the CNF Board will be recommending to members a change of name for the CNF to the Commonwealth Nurses and Midwives Federation in recognition that, in some countries, midwifery is seen as a separate, although closely linked, profession to nursing. The CNF operates on a model of inclusiveness and the CNF Board considers it important that the work the CNF does in relation to midwifery is clearly reflected in our title. The CNF Board is also discussing increasing CNF membership categories and will be circulating a proposal to members during the latter half of 2012 which will include affiliate, associate and individual membership together with an appropriate voting and subscription structure. The CNF has always operated on a consensus model and the CNF Board is convinced that the integrity of the existing CNF structure can be maintained while opening up the organisation to other members.

10. FORWARD PLANS

The first Executive Secretary of the CNF, Miss Margaret Brayton, who led the CNF for twenty years from its inception in 1973, recently celebrated her 93rd birthday. Miss Brayton still talks very fondly of the time she spent with the CNF and all the wonderful friends she made.



Margaret with Maura Buchanan former President of the Royal College of Nursing



Margaret with Maura, Dorothy Turner (Nurses Association of Jamaica UK) and Betty Why (Association of Guyanese Nurses and Allied Professionals UK)

An evaluation of CNF activities is currently being undertaken with members and within the CNF's extended network. The CNF Work Plan for 2012-2013 will be influenced by the result of the evaluation.

The CNF Europe Region will be holding their 10th CNF Europe Region Conference 15-16 March 2013 in Cyprus.

The CNF has applied for two further Commonwealth Fellowships for two young nurse leaders from Zimbabwe. The Fellowships, if successful, will provide training and experience in leadership, education and training, project management, and communication. The CNF Board would like to make the Fellowships an annual event so that potential young nurse leaders in all CNF regions can benefit.

The 21st CNF Biennial Meeting will be held on 7 March 2014 in London, UK in conjunction with the 2nd Commonwealth Nurses Conference 8-9 March 2014 also in London, UK.

During 2012-2013, the CNF will continue its partnership with the African Regulatory Collaborative; writing reports and providing administrative and technical assistance. The CNF will also maintain the same level of activity in relation to the monthly e-News, the bi-annual journal, and the website, although it is anticipated that the website will have a slightly different look in line with the CNF Board's vision for a dynamic and interesting website.

The purpose of the CNF is to support members with capacity building, education and training, networking, and developing leadership. There is great need among CNF members and our capacity to respond to those needs is limited only by access to funding. The time spent in making funding applications is onerous for small organisations however the CNF has demonstrated that a great deal can be achieved with relatively small grants. The search for a diversified funding base will continue during 2012-2013 in order to expand our activities on behalf of members.



**COMMONWEALTH NURSES FEDERATION
RECEIPTS AND PAYMENTS ACCOUNT**

Year ended 30 June 2012

Receipts

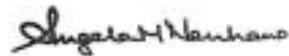
	£ 2012
Grant Income - Commonwealth Foundation	18,000
Grant Income - Other	43,525
Reimbursement	66,916
Sponsorship	600
Consultancy	13,736
Member subscriptions	10,050
Biennial Meeting	3,036
Interest on deposit accounts	0
	155,863

Payments

Executive Secretary - consultancy fee	17,053
Meetings - members' travel/accommodation	9,088
Meetings - officers' travel/accommodation	13,325
Biennial Meeting expenses	0
Field activities	33,730
Publications (including Newsletter)	1,557
Office attendance	2,900
Office services - stationery, printing, postage, telephone etc	3,550
Bank fees	735
Auditor's fee	400
Website	863
Capital equipment	560
CHPA	967
African Regulatory Collaborative	57,989
Ramphal Commission on Migration and Development	7,448
Subscriptions	50
Reimbursement	923
Commonwealth Fellowships	2,396
	153,534
Surplus/(Deficit) for the year	2,329
Surplus b/fwd at 1 July 2011	12,285
Surplus c/fwd at 30 June 2012	14,614

Surplus represented by:

Bank balance at 30 June 2012	8,246
Add debtors and prepayments	6,375
	14,621
Less creditors and un-presented cheques	(7)
	14,614



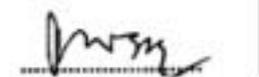
Honorary Treasurer



Executive Secretary

AUDITOR'S REPORT

I have audited the Receipts and Payments Account of the Commonwealth Nurses Federation (CNF) with the books and vouchers of CNF, and have obtained all the necessary information and explanations. In my opinion the receipts and payments are properly drawn up so as to exhibit a true and fair view of the affairs of the CNF for the year ended 30 June 2012.



Peter Westley BA, FCCA
Chartered Certified Accountant
15 October 2012



THE COMMONWEALTH NURSES FEDERATION STRATEGIC PLAN 2011-2012

The purpose of the CNF is to contribute to the improved health of citizens of the Commonwealth by fostering access to nursing education, influencing health policy, developing nursing networks and strengthening nursing leadership.

GOVERNANCE

The CNF will be a well governed, responsive, responsible and transparent organisation.

1. The President, Vice President and Board members will be actively engaged with all aspects of the organisation.
2. Democratic elections will be held in a timely manner.
3. Reports will be provided quarterly by the Executive Secretary to the President, Vice President and Board members covering all key strategic areas.
4. The Constitution of the organisation will be reviewed in consultation with members prior to each CNF Biennial Meeting.
5. The Annual Report of the organisation will be circulated to members and other stakeholders and made available on the CNF website.

ADMINISTRATION

The CNF will maintain effective and efficient administrative processes with specific consideration to reducing costs and environmental impact.

1. All files of the CNF from 1 July 2012 will be held in a secure electronic format.
2. A process will be established to securely archive old paper format files and a permanent archival site sought.
3. A single comprehensive and secure data base will be established to service communication with members and other stakeholders.
4. All complaints received will be responded to in a timely manner and a report provided to the Board.
5. A project will be developed and funding sought to develop a history of the organisation to celebrate its 40th anniversary in 2013.

FINANCE

The CNF will have a financial growth strategy, a diversified financial base and operate within open and transparent financial systems.

1. An annual budget will be approved by the Board.
2. Membership subscriptions will be invoiced annually and payment of membership subscriptions will be actively pursued by the Executive Secretary and by Board members on request.
3. Opportunities will be actively sought to apply for grants, consultancies and sponsorships; and where feasible, work provided on behalf of other organisations will be on a cost recovery basis.
4. End of year financial statements will be prepared which include a comprehensive breakdown of income and expenditure.
5. The financial accounts of the CNF will be subject to an annual audit which will be publicly available to members, be uploaded to the CNF website, and form part of the CNF Annual Report.

COMMUNICATION

The CNF will have a dynamic communication strategy which will effectively and attractively promote its purpose and activities to members and other stakeholders.

1. The CNF e-News will continue to be published monthly and sponsorship maintained.
2. The *Commonwealth Nurse* will be published bi-annually; member contributions actively sought; and advertisements and sponsorship sought to offset costs.
3. The CNF website will be updated regularly.
4. Opportunities will be sought to have CNF activities publicised in other communication media.
5. Opportunities will be sought to publish on issues of interest and importance to CNF members in relevant journals.

LIAISON

The CNF will maintain active links with relevant stakeholders within the Commonwealth and the wider international community in order to fulfil its purpose.

1. Close links with the Commonwealth Foundation and the Commonwealth Secretariat will be maintained and opportunities pursued to partner with these organisations particularly in relation to Commonwealth Ministers' meetings.
2. Active participation in the Commonwealth Health Professions Alliance will be maintained in order to influence policy at Commonwealth level.
3. Opportunities will be actively sought to partner with other organisations in activities which support the objectives of the CNF.
4. Close links will be maintained with the International Council of Nurses and the International Confederation of Midwives.
5. Formal links will be established and maintained with other relevant organisations.

MEMBERSHIP

The CNF will provide a high quality service to members providing information, regular communication, and supporting capacity building and leadership development.

1. Current membership will be actively maintained and new membership sought.
2. Members will be provided with regular communication on issues of interest to them.
3. Input from members will be sought when preparing CNF responses to issues of interest or concern.
4. The membership data base will be kept current.
5. The feasibility and acceptability of expanding membership categories will be explored.

PROGRAMS

The CNF will provide a wide range of programs and activities in consultation with and in partnership with members.

1. Programs will be developed in response to identified needs and emerging issues.
2. Programs conducted by the CNF will be determined in consultation with members and the CNF Board.
3. Board members will be actively involved in delivering CNF programs.
4. All programs will be evaluated and a report made publicly available on the CNF website.
5. Programs will be provided across all regions of the CNF.