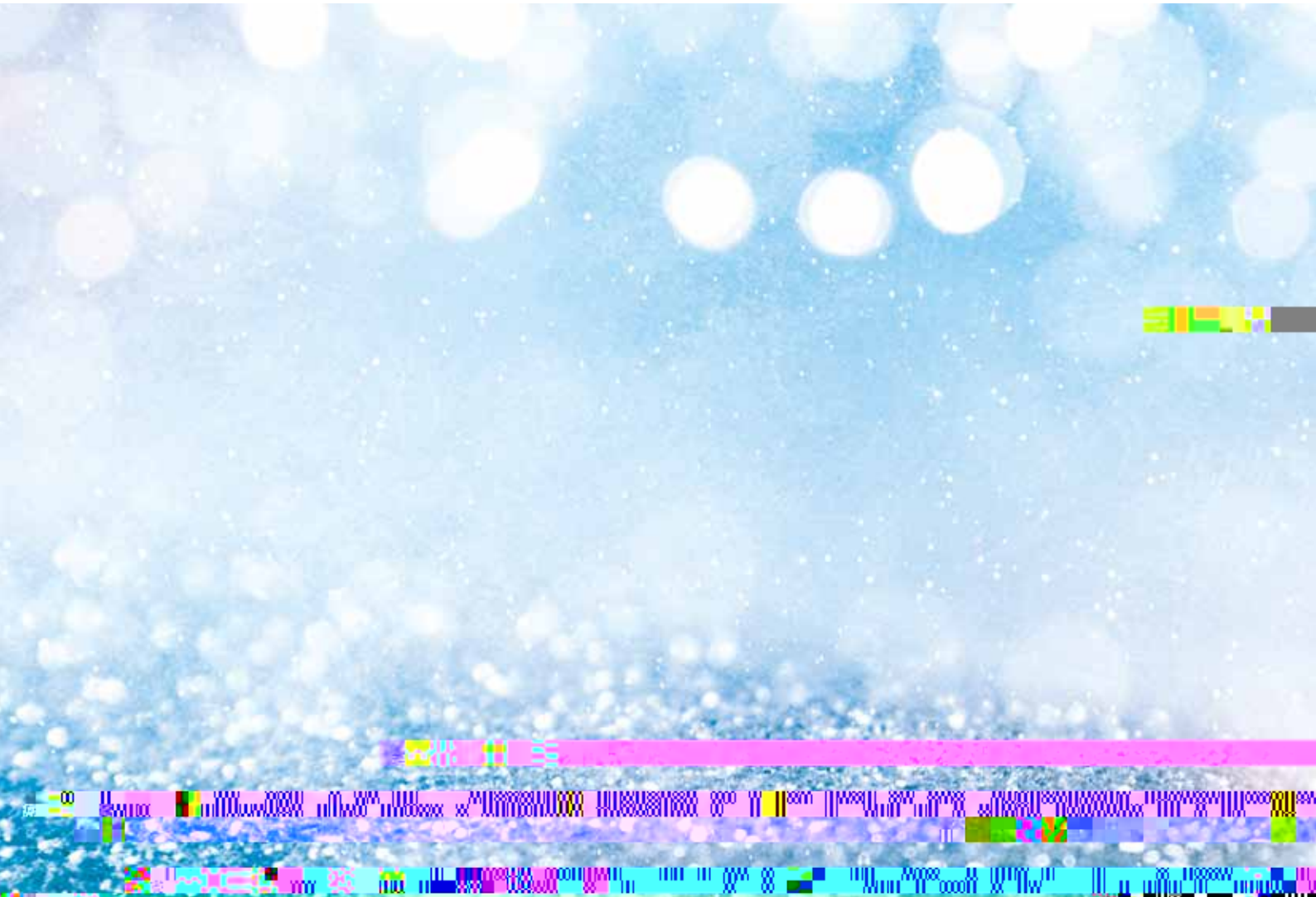


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RCN Nursing Education in Termination of Pregnancy Services





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Nursing practice is dynamic and progressive, extending the expertise available to meet the requirements of 21st century health care. In relation to defined arenas of practice the need to continually grow and enhance skills and knowledge are key to developing nursing practice to meet the needs of those accessing health care services.

This report looks at the education and training of registered nurses, midwives, and non-registered health care assistants working in a range of services where women are accessing termination of pregnancy (TOP)/abortion services, both in the NHS and independent sector across England, Wales and Scotland.

Note about language

We have chosen to use the term Termination of Pregnancy (TOP) rather than abortion to provide consistency with previous publications, whilst recognising that some organisations now use the term abortion (eg, NICE).

This project excluded Northern Ireland (NI), because at the time of survey development the legislation in NI meant that TOP could only be lawfully performed in very exceptional circumstances when there is an immediate risk to the life or long-term mental health of the woman.

The project team are also aware of the new registered role of nursing associates, and will be mindful of this role when looking at further work.

TOP is a service that is undergoing change, and is currently bound by specific legislation in England, Wales and Scotland, which has informed the direction of this survey and report. At the time of going to press (Dec 2019) the legislation around TOP in Northern Ireland is

proactive in preparing for ACP/ANP roles and



Figure 2: Qualifications/registration of respondents

The majority of the respondents were registered nurses (81%), and the remainder were midwives who made up 19% of the participants.

The educational qualifications are shown in figure 2, 62% describing the highest educational qualification as a registered nurse, 56.6% with a degree and 9.8% with a masters.

Of those nurses working within TOP there was a slightly higher proportion with a degree than when looked at as the total response from all of the groups.



Figure 5: Field of practice

Most of the respondents identified with working in TOP services (82.8%), of those who worked in other areas the most common was gynaecology and early pregnancy care and some of the comments came from others who were working in day surgery or short stay wards. These nurses commented that they did not have education about TOP and this may be an area for education as these staff are often on the periphery of the care of women.

What is your field of practice? Select more than one if you have more than one role		
Answer choice	Response percent	Response total
Abortion services	82.8%	101
Contraception and sexual health services	75%	91
Women's health	23.8%	29
Early pregnancy care	19.7%	24
Gynaecology ward	16.4%	



Figure 6: Second fields of practice

59% of the nurses were working full time, which was similar to the total survey population (54%). Of those who worked part time the most common other area to work in was sexual health as outlined in Figure 6.

You selected part time, what other area of practice do you work in? Select more than one if you have more than one role

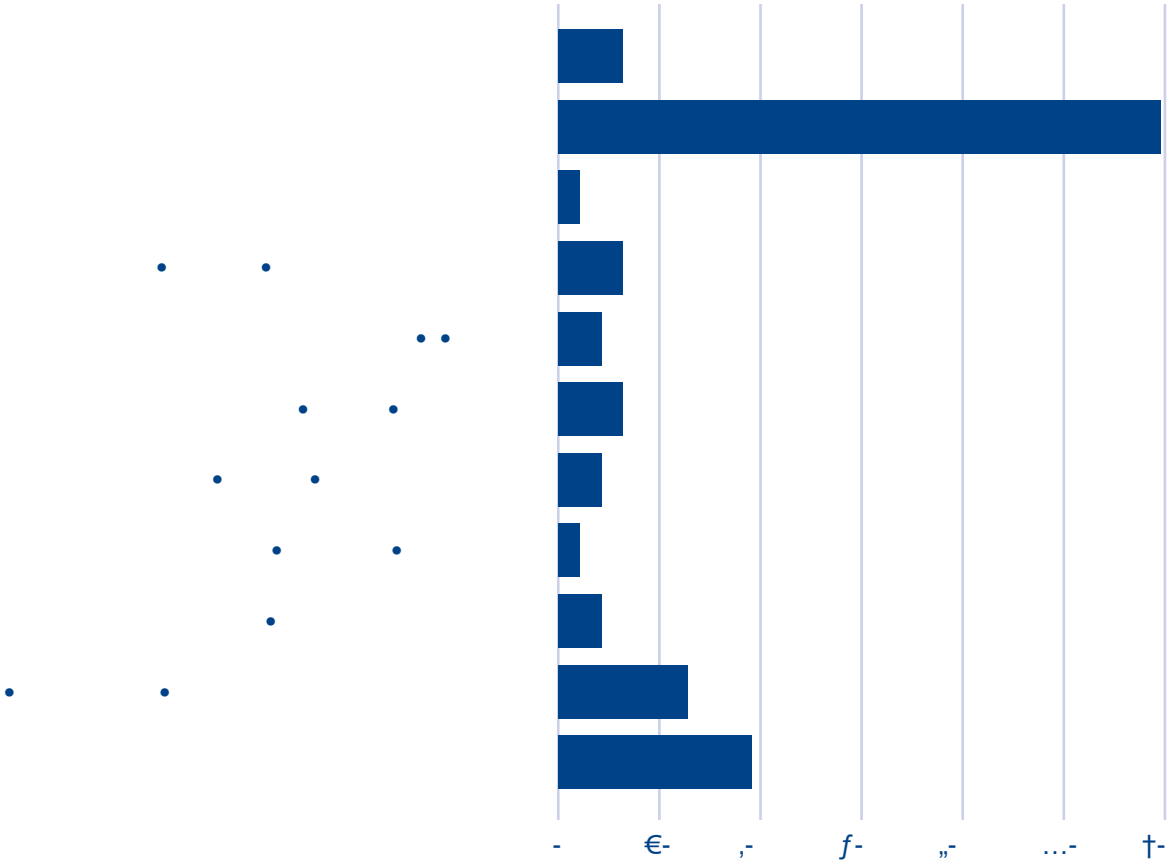


Figure 7: Skills assessment

The skills and education of those working in TOP are varied, as shown in Figure 7, however this data requires further interrogation to establish a baseline set of skills and education. Figure 7 identifies some of the key skills that were asked about. Many of these skills are generic to general nursing practice, whilst some are restricted by the current legislation, such as non-medical prescribing and Manual Vacuum Aspiration (MVA). Within the answers there are some who are using skills gained elsewhere and there is a willingness to take on new skills (or expand skills in other areas) if there was a change in the law such as MVA and non-medical prescribing.

Some nurses responded with a willingness to extend their skills should there be a change in the law highlighting a need for more education. It was also noted that some responded with a need for further education on skills which were not governed by legislation and which should form part of normal practice for a registrant, using their Code of Practice (e.g. NMC Code 2018)

	For other area of practice outside of TOP	Would like this skill if there was a change in the law
Clinical skills: history taking	20	8
Clinical skills: such as nurse-led clinic	18	7
Clinical skills: vaginal examination	20	15
Clinical skills: assisting with surgical management in theatre or clinic	9	11
Clinical skills: assisting with or undertaking medical management on directions of medical practitioners	7	5
Communication skills	18	4
Counselling skills	10	12
Confirming consent	7	7
Undertaking consent	8	11
Contraception – advice and choices	11	10
Contraception – fitting (IUS/IUCD/)	5	22
Contraception – fitting (implants)	5	19
Sexual health awareness and advice	7	9
Sexual health, screening, management and treatment	9	11
Ultrasound scanning – location and gestation	3	8
Ultrasound scanning – other such as gynaecology scanning	4	20
Manual vacuum aspiration (not in TOP, but in miscarriage)	2	21
Medicine management including using PGD	15	8
Non-medical prescribing (not for medicines related to termination)	7	18
Management of safeguarding issues such as under 16 years, domestic violence, abuse	9	5



As the service provision and law stands now three quarters of the respondents (74.4%) felt that they have received the training to perform the role they had currently, and 75.8% have access to CPD, but of these only just over half (55%) have the funding and the time off from an employer for this. Much of the education provided had been delivered in-house by employers.

Figure 8: Comments

The survey had space for free text and there were many comments. These have been themed below.

More needed in pre-registration education	5
More needed in post-registration education	4
Counselling needs of staff	1
Counselling needs of women	1
TOP conference	1
Abortion training – this was not specified	8
One identified provider had positive comments about their employer being supportive and providing training	3
Modification of FRSH contraceptive training for those in TOP	1
Role of ANP could be expanded into TOP	1

1B. Nurses advising on TOP

Figure 9: Arena of practice

The number of nurses who answered the survey who were advising on TOP was 80. They have a similar split geographically to those working in TOP but included a nurse from the Isle of Man, there were fewer midwives in this group (1%), 95% were registered nurses and three were non-registered practitioners.

The qualifications held were similar although fewer had degrees (46.3%) and more had masters qualifications (20%).

The places of work were also similar as seen in below.

28% were from GP practice, 23% from NHS community and 23% from NHS hospital.

Which best describes the sector you work in?			
	Answer choice	Response percent	Response total
1	GP practice	28.8%	23
2	Independent sector	5.0%	4
3	Local authority	1.3%	1
4	NHS community	23.8%	19
5	NHG7ork inet11 T9h23.8%0		

Figure 10: Field of practice

These nurses worked in a variety of settings, mainly in contraception and sexual health services and 57.5% were full time, which echoes the close links for the responses of those working in TOP services.



You selected part time, what other area of practice do you work in? Select more than one if you have more than one role

1C. Non-registered health care assistants

When the data for health care assistants/nursing support workers was examined it was found that there were five registered nurses within this number out of the nine. By looking at all of the individual responses the project team were not confident in the data quality of this subset so excluded them from further analysis.

Of the four nursing support workers working in TOP, three identified themselves as health care assistants and had on the job training and one described herself as a registered nursing associate (NA) but was a student nurse working in oncology. These have therefore been excluded and this will need a separate piece of work to try and understand the roles of nursing associates and nursing support workers within this environment.

Expert discussion amongst the project team also revealed a wide range of skills required by nursing

This survey has highlighted some areas of good practice and those that answered seemed to have access to in-house and commissioned education. However there is little tailored for TOP and it is clear that there is a view that this needs to be covered in both pre and post registration education. This is important because a nurse in any situation

Nurses and midwives who work in TOP services come from a variety of different backgrounds and each bring different skills and educational needs.

Figure 12a identifies how these nurses and midwives may enter TOP services, demonstrating the array of skills they may come with, as well as broad career pathways on offer throughout the services.



Figure 12b: Training and education needs for nurses working in TOP services

This diagrammatic representation expands on the education and skills identified in 12a, and should form the basis for a more comprehensive career progression framework.







8. You selected part time, what other area of practice do you work in? Select more than one if you have more than one role	
1	Abortion services
2	Contraception and sexual health services
3	Early pregnancy care
4	Early pregnancy unit
5	Education provider
6	Fetal medicine unit
7	Gynaecology outpatients
8	Gynaecology ward
9	Midwifery
10	Primary care
11	Service education and commissioning
12	Service provider / management
13	Sexual and reproductive health
14	Women's health
15	I don't have another job
16	Other (please specify):

9. With regard to working in TOP services, which of the following best describes your current role?	
1	Not working in TOP Services
2	Advise / refer women to TOP Services
3	Non registrant working in TOP services
4	Registered practitioner working in TOP services

10. In the table below, please select the type of training you have received for each of the areas of practice. Please select all that apply

	No formal training	Pre-registration training	Post qualification training	Single training session 1/2 day or full day	Module run by HEI	Module run by other	On the job training and assessment of competence	For other area of practice outside of TOP	Would like this skill if there was a change in the law?
Clinical skills: history taking									
Clinical skills: such as nurse led clinic									
Clinical skills: vaginal examination									
Clinical skills: assisting with surgical management in theatre or clinic									
Clinical skills: assisting with or undertaking medical management on directions of medical practitioners									
Communication skills									
Counselling skills									
Confirming consent									
Undertaking consent									
Contraception – advice and choices									
Contraception – fitting (IUS/IUCD/)									
Contraception – fitting (implants)									
Sexual health awareness and advice									
Sexual health, screening, management and treatment									
Ultrasound scanning – location and gestation									
Ultrasound scanning – other such as gynaecology scanning									
Manual vacuum aspiration (not in TOP, but in miscarriage)									
Medicine management including using PGD									
Non medical prescribing (not for medicines related to termination)									
Management of safeguarding issues such as under 16 years, domestic violence, abuse									

10.1 Clinical skills: history taking	
1	No formal training
2	Pre-registration training
3	Post qualification training
4	Single training session 1/2 day or full day
5	Module run by HEI
6	Module run by other
7	On the job training and assessment of competence
8	For other area of practice outside of TOP
9	

10.11 Contraception – fitting (IUS/IUCD/)	
1	No formal training
2	Pre-registration training
3	Post qualification training
4	Single training session 1/2 day or full day
5	Module run by HEI
6	Module run by other
7	On the job training and assessment of competence
8	For other area of practice outside of TOP
9	Would like this skill if there was a change in the law?

10.12 Contraception - fitting (implants)	
1	No formal training
2	Pre-registration training
3	Post qualification training
4	Single training session 1/2 day or full day
5	Module run by HEI
6	Module run by other
7	On the job training and assessment of competence
8	For other area of practice outside of TOP
9	Would like this skill if there was a change in the law?

10.13 Sexual health awareness and advice	
1	No formal training
2	Pre-registration training
3	Post qualification training
4	Single training session 1/2 day or full day
5	Module run by HEI
6	Module run by other
7	On the job training and assessment of competence
8	For other area of practice outside of TOP
9	Would like this skill if there was a change in the law?

10.14 Sexual health, screening, management and treatment	
1	No formal training
2	Pre-registration training
3	Post qualification training
4	Single training session 1/2 day or full day
5	Module run by HEI
6	Module run by other
7	On the job training and assessment of competence
8	For other area of practice outside of TOP
9	Would like this skill if there was a change in the law?

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11.6 Communication skills	
1	In house
2	HEI
3	FSRH
4	BAASH
5	FPA
6	RCN guidance
7	

11.16 Ultrasound scanning – other such as gynaecology scanning	
1	In house
2	HEI
3	FSRH
4	BAASH
5	FPA
6	RCN guidance
7	Other – please state below
8	N/a

11.17 Manual vacuum aspiration (not in TOP, but in miscarriage)	
1	In house
2	HEI
3	FSRH
4	BAASH
5	FPA
6	RCN guidance
7	Other – please state below
8	N/a

11.18 Medicine management including using PGD	
1	In house
2	HEI
3	FSRH
4	BAASH
5	FPA
6	RCN guidance
7	Other – please state below
8	N/a

11.19 Non medical prescribing (not for medicines related to termination)	
1	In house
2	HEI
3	FSRH
4	BAASH
5	FPA
6	RCN guidance
7	Other – please state below
8	N/a

11.20	

