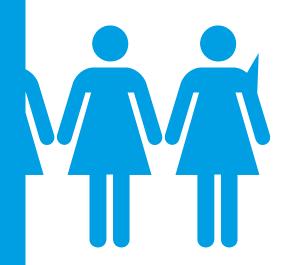
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## Acknowledgements

The RCN would like to thank the original project team who worked on this publication in 2017. It was reviewed and updated in 2024 by Dr. Wendy Norton, RCN Fellow and Tori Heppell, Women's Health Forum Committee member.

This document has been designed in collaboration with our members to ensure it meets most accessibility standards. However, if this does not fit your requirements, please contact corporate.communications@rcn.org.uk

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It is recognised that care may be provided by registered nurses and midwives, health care support workers, assistant practitioners, nursing associates, student nurses and midwives, and trainee nursing associates. For ease of reading, the generic terms 'nurse', 'nursing' and 'nurses' are used throughout this document, unless specified.

The RCN recognises and embraces our gender diverse society and encourages this guideline to be used by and/or applied to people who identify as non-binary, transgender, or gender fluid.

The RCN also recognises that not all those born female or male will identify with the same gender nouns, but for ease of reading we use the term woman/man/men and where appropriate, acknowledge non-binary terms.

## 1. Introduction

Early pregnancy care (EPC) is conducted predominately in the first trimester of pregnancy, however service provision may extend to when a woman is 24 weeks pregnant. NICE (2023) focuses its standard specifically on the first trimester (Figure 1.1) (usually defined from

#### Figure 1.2: Types of pregnancy loss and key facts

Miscarriage is the spontaneous loss of a pregnancy before 24 weeks gestation. It may only happen once, whereas some women may suffer recurrent miscarriages.

An ectopic pregnancy is one that develops outside of the womb/uterus (the word ectopic means 'out of place'). In the UK, 11 in 1,000 pregnancies are ectopic (NICE, 2021a), with an estimated 12,000 ectopic pregnancies diagnosed each year [HSIB, 2020]. For some women, it can be life threatening, identified as a leading cause of death in the first trimester of pregnancy.

A molar pregnancy (also called a hydatidiform mole) is one where an abnormal fertilised egg implants in the uterus. The cells that should become the placenta grow far too quickly and take over the space where the embryo would normally develop. The consequences of a molar pregnancy may lead to persistent trophoblastic disease and the possible need for chemotherapy (Miscarriage Association, 2024).

Pregnancy of unknown location (PUL) occurs when a woman has a positive pregnancy test, however there is no evidence of an intrauterine or extra-uterine pregnancy on trans-vaginal ultrasound examination.

#### **Key facts**

Early miscarriages are very common and 1 in 5 women have a miscarriage. Most miscarriages are a one-off event and there is a good chance of a successful pregnancy in the future.

rcog.org.uk/for-the-public/browse-our-patient-information/early-miscarriage

The risk of miscarriage is increased by:

- age at the age of 30, the risk of miscarriage is 1 in 5 (20%); over the age of 40, the risk of miscarriage is 1 in 2 (50%)
- medical problems such as poorly controlled diabetes
- lifestyle factors such as smoking, being overweight or heavy drinking.
  rcog.org.uk/for-the-public/browse-our-patient-information/early-miscarriage

In the UK, around 1 in every 90 pregnancies is ectopic. This is around 11,000 pregnancies a year. nhs.uk/conditions/ectopic-pregnancy

If over 35, the risk of having an ectopic pregnancy rises from 2 out of 100 (under 35)

In 2021, the RCN published guidance on *Advanced Level Nursing Practice and Care of Pregnant and Postnatal Women* (RCN, 2021a) which provides principles of good practice to clarify the role and care for pregnant and postnatal women. It confirms the need to have clear multidisciplinary pathways of care to support best practice between nurses and midwives, between EPC and maternity care.

## 2. The role of the clinical nurse specialist

The role of the CNS in managing and supporting women in early pregnancy care was defined to take account of the need to:

lead and develop services

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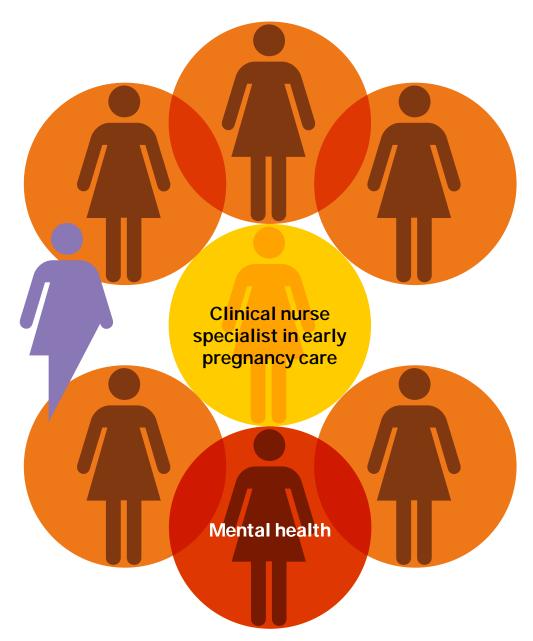


Figure 2.1: Multi-professional engagement

# 3. CNS in early pregnancy care role: skills and knowledge

The role of the CNS in early pregnancy care is complex and will demand a range of clinical practice skills, alongside management and leadership insightfulness. This senior role will require the nurse to be able to:

- provide excellent nursing clinical care, including counselling and psychological support
- be an inspiration and source of knowledge for others
- take account of the woman's fertility needs and aspirations
- use evaluation of practice and audit tools
- enhance their own and others education
- consider the need for research to further enhance practice.

It is recognised that this is a developing role and that not all nurses will come with the full skills set required to fulfil all components outlined below.

#### 3.1 Clinical practice skills

- Have an expert knowledge of early pregnancy, management options (including associated side effects and evidence based use of complementary therapies) and be able to sign post to other services or support groups.
- Be able to communicate with women and health care professionals at all levels, in both primary and secondary care; demonstrate excellence in written, verbal and telephone skills, including documentation.
- Provide telephone and online triage for clinical decision making conversations.
- Provide compassionate care to pregnant women, including breaking bad news effectively and providing emotional support.
- Empower women to make the right choices for them as individuals.
- Be able to undertake informed consent and provide management planning advice.

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- Undertake referrals both to other professionals and local support groups.
- Ensure the woman has contact details for the CNS and can make contact if problems develop or issues need clarifying.
- To create and evaluate clinical management plans for individuals.

#### 3.2 Leadership skills

Be the woman's advocate.

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#### 3.5 Service provision/pathway management/co-ordination

- Teamwork, including working with the multidisciplinary team to co-ordinate the care in outpatient clinics, during interventions and with other specialties.
- Ensure a streamlined service in all areas of care.
- Be the central point of contact for women.
- Co-ordinate services, eg, appointments and referrals to other services.
- Liaise with support groups and related disciplines such as AEPU.
- Design and the monitoring of care pathways.
- Engage with local service commissioners.
- Work with quality monitoring systems such as the Care Quality Commission.

#### 3.6 Early pregnancy care profile development

- To raise awareness with women, within primary and acute care and to work with support groups to highlight the needs of women (and their partners) when confronted with an early pregnancy complication.
- Understand the local and political landscape where care is set.
- Understand local service providers' priorities to ensure active engagement in primary and secondary care commissioning and provision.
- Spark interest and engage with others about early pregnancy care.
- Conduct audits and consider research opportunities to expand practice.
- Responsible for mentoring and developing junior health care professionals in understanding the needs of women in early pregnancy care.

#### 3.7 Continuing professional development

The level of education needed for the role is at master's level, with evidence of master's level thinking and problem solving.

#### This could include:

- consultation skills
- communication skills module (breaking bad news, etc.)
- non-medical prescribing
- presentation skills
- early pregnancy care module
- evidenced-based practice
- advanced nursing competencies
- counselling
- ultrasound
- leadership

- sexual health and contraception
- advanced physical assessment skills
- political and economic leadership.
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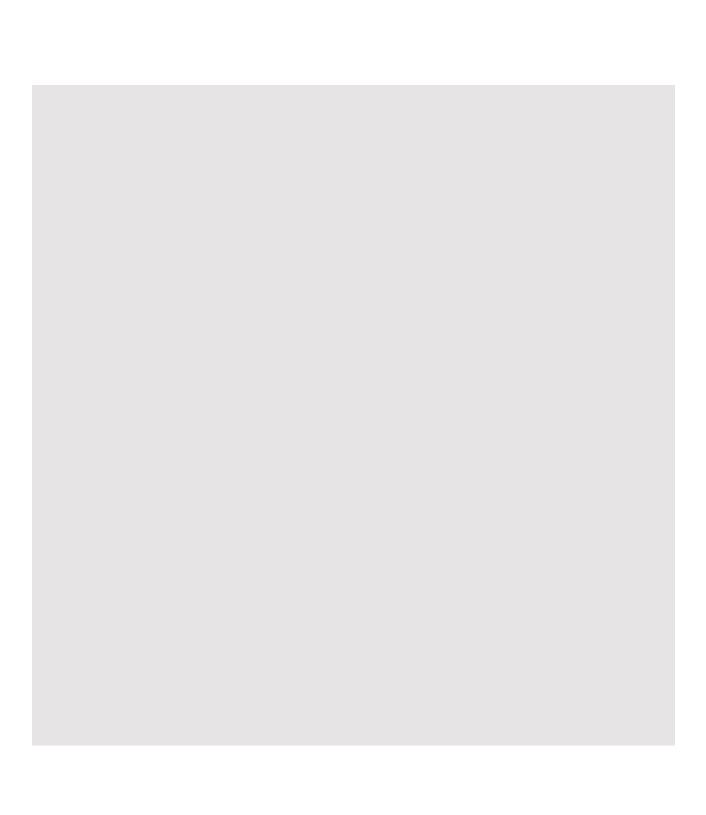


Figure 3.1: Overview of a clinical nurse specialist in early pregnancy care

## 4. Conclusion

The clinical nurse specialist in early pregnancy care is a key role within the early pregnancy care team and the opportunity represents an exciting career option for nurses to develop into a leadership role in a collaborative environment.

It is a strategic pathway for nurses who specialise in an important aspect of woman's health care, which can be under resourced and poorly understood, requiring leadership and political astuteness to ensure the role is expanded to meet the needs of women who suffer early pregnancy complications.

This standard was developed in 2017, and in 2021 it was reviewed, following an impact assessment of its usefulness in fulfilling the overall aim of the original publication. The standard outlined the key s9(p)-3.1 (u)2 (bl)16.1(l)16.1 (i)18e)13.9 (d i)10.2 (nk(r)b5(n)-3[(i)11.3 (l)27. (a)10.2 (nk(r)b5(n)-3

## 5. References and further reading

Miscarriage Association (2024) *Types of pregnancy loss.* Available at: www.miscarriageassociation.org.uk/information/worried-about-pregnancy-loss/types-of-pregnancy-loss

National Institute for Health and Care Excellence (updated 2023) *Ectopic pregnancy and miscarriage: diagnosis and initial management*, London: NICE. Available at: www.nice.org.uk/guidance/ng126

National Institute for Health and Care Excellence (2014) *Ectopic pregnancy and miscarriage*, London: NICE. Available at: https://pathways.nice.org.uk/pathways/ectopic-pregnancyand-miscarriage-overview

National Institute for Health and Care Excellence (2019) Quality standard 46, *Multiple pregnancy: twin and triplet pregnancies*, London: NICE. Available at: www.nice.org.uk/guidance/qs46

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NHS England (2023) *Quality and Outcomes Framework guidance for 2023/24*. Available at: www.england.nhs.uk/publication/quality-and-outcomes-framework-guidance-for-2023-24

Prior M, Bagness C, Brewin J, et al., (2017) Priorities for research in miscarriage: a priority setting partnership between people affected by miscarriage and professionals following the James Lind Alliance methodology. *BMJ.* Available at: https://bmjopen.bmj.com/content/7/8/e016571

Royal College of Nursing (2020)

## 6. Useful resources

AEPU – The Association of Early Pregnancy Units provides support and resources to support women's choice and maintain standards in early pregnancy care. <a href="mailto:aepu.org.uk">aepu.org.uk</a>

British Association of Counselling and Psychotherapy (BACP) bacp.co.uk

British Fertility Society (BFS) britishfertilitysociety.org.uk

British Infertility Counselling Association (BICA) britishfertilitysociety.org.uk

European Society of Human Reproduction and Embryology eshre.eu

Miscarriage Association miscarriageassociation.org.uk

The Ectopic Pregnancy Trust ectopic.org.uk

Pregnancy Sickness Support pregnancysicknesssupport.org.uk

Royal College of Nursing rcn.org.uk

Royal College of Obstetricians and Gynaecologists **rcog.org.uk** 

#### RCN quality assurance

#### **Publication**

This is an education framework/curriculum guidance. An evidence-based consensus document specifying the educational content, intended learning outcomes, approaches to teaching, learning and assessment that are required to prepare nursing staff for a specified area of practice.

#### Description

This updated publication outlines the key skills and knowledge required to develop the role of a specialist nurse/midwife in early pregnancy care.

Publication date: September 2024 Review date: November 2027

#### The Nine Quality Standards

This publication has met the nine quality standards of the quality framework for RCN