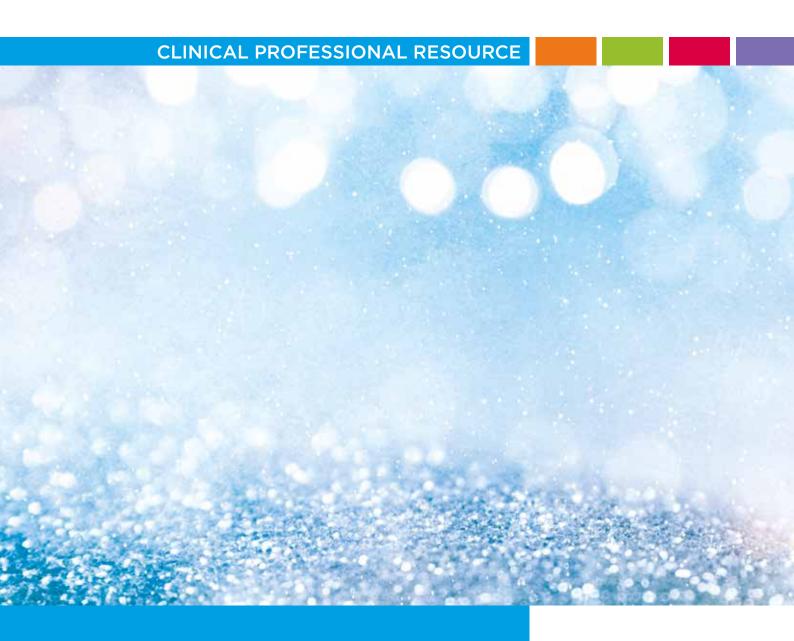


# RCN Nursing Education in Termination of Pregnancy Services





# Acknowledgements

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This publication is due for review in January 2023. To provide feedback on its contents or on your experience of using the publication, please email **publications.feedback@rcn.org.uk** 

#### **Publication**

This is an RCN clinical professional resource.

#### Description

This report outlines the results from an online survey conducted by the RCN, across the Termination of Pregnancy services in England, Wales and Scotland, to assess the current and future education requirements of nurses, midwives and non-registered health care support workers. It provides an outline career pathway and recommendations for the future education and training needs of those providing nursing care in this health care sector.

 $Publication\ date: January\ 2020\ Review\ date: January\ 2023.$ 

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### 1. Introduction

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 under review and consultation.

Further information on TOP can be found at:

www.rcn.org.uk/clinical-topics/womenshealth/termination-of-pregnancy

The RCN is keen to better understand the needs of nursing practice across this service provision and so established a project to scope the current education and training needs of the nursing workforce supporting TOP services. The use of *nurse* in this report, includes midwives working in TOP services, for ease of reading, while recognising that midwifery is a separate profession. The project also took account of the need to look at Advanced Clinical Practice (ACP)/Advanced Nursing Practice (ANP) opportunities currently and consider requirements should the legislation change in the near future.

The ambition of the project began with a wide remit to take account of the diversity of clinical areas, where nurses and midwives might require educational support. This was to include primary and secondary care, where women and girls might seek advice, information and/or referral to TOP services, and included post procedure care needs. However, following discussion by the project team, it was agreed to restrict this project to look at:

- those nurses working within TOP
- those nurses referring or advising women on TOP
- non registered health care assistants working in TOP.

It also acknowledged the specific needs midwives may have around managing TOP in maternity services, in particular those who choose TOP following diagnosis of fetal abnormality, however it was felt that this would dilute the key purpose of this survey and agreed that it would be better to consider the need for this work elsewhere.

There was further acknowledgement that the legislative framework focused on was the same in England, Wales and Scotland. The project team also considered the needs of nurses working in the Isle of Man (IOM) where the legislation has changed recently, and Channel Islands where the legislation is also different.

The first aim of the group was to establish a baseline for nurses, midwives and health care assistants working in TOP services and the extent and the range of the roles that they were undertaking, using a survey methodology. This included consideration of areas for development of clinical skills and knowledge should there be a change in the current UK legislation towards decriminalisation (BMA 2017, RCN 2018, RCN 2019). This aim focused on the need to be

proactive in preparing for ACP/ANP roles and identify specific educational support nurses might need to meet service requirements in the future. The range of stakeholders included in the project team is reflective of the fact that the majority of the care of women undergoing Termination of Pregnancy is outside of the NHS.

The survey was designed by the project team, drawn from experts across the sector and sent out electronically via the RCN, BPAS, Marie Stopes International - UK and BSACP. It was also promoted via the RCN women's health Twitter account and Facebook page. This meant that the survey went out to a wide audience, some of whom would not be working in the target areas, however there was no easy way to identify the specific target group for this scoping exercise.

One of the challenges faced in distributing the survey was access to nurses working in services where they would be caring for women accessing TOP. This proved to be a limitation of the final data collected. The wide distribution of the survey resulted in responses from nurses who were not working in or supporting women in TOP services, so these responses were withdrawn. It is important to remember that this was a scoping exercise to sense check the educational standards of nurses and health care assistants in this arena of practice, consequently, the final recommendations are drawn from both the survey results and the expert project team members.

# 2. Results of the survey

The questions can be seen in Appendix 1. There were 748 responses to the survey and of these 391 were complete responses. The report and the data was analysed by the project team and a decision was made to look at:

- a. those nurses working within TOP
- b. those nurses referring or advising women on TOP
- c. non registered health care assistants working in TOP.

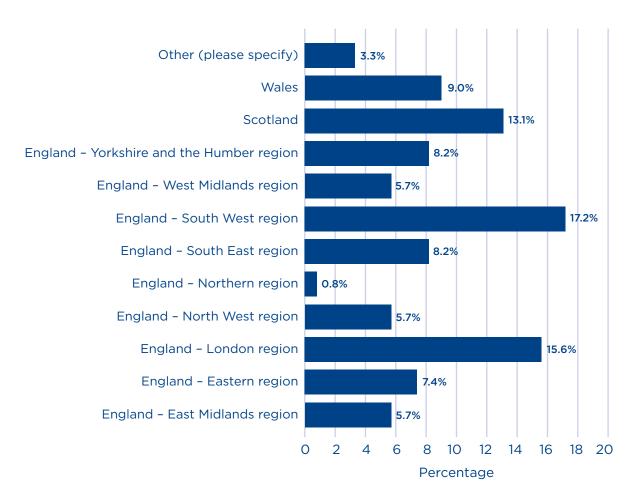
#### 1A. Nurses working within TOP

#### Figure 1: Region of practice

There were a total of 122 nurses who described themselves as working in TOP. Figure 1 shows the distribution of responses, including 3% other such as Hong Kong.

The majority of responses were from England (72%), Scotland (13%) and Wales (9%) as these were the target areas.

#### Which country or region do you work in?



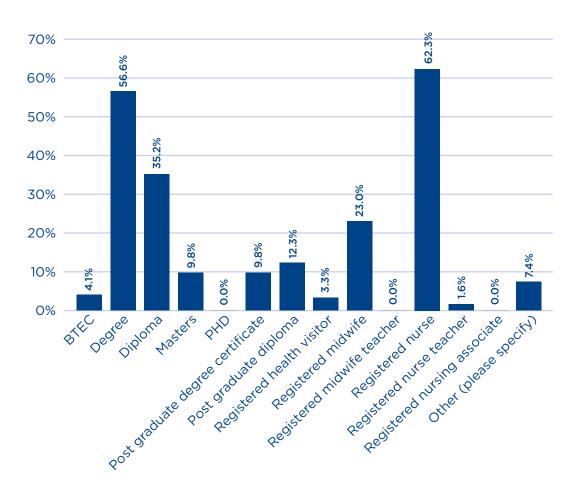
#### Figure 2: Qualifications/registration of respondents

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.

#### What qualifications/registration do you currently hold? Select all that apply



#### Figure 3: Arena of practice

The areas that the respondents work in was somewhat unexpected with 43.4% within the NHS, the others were all from the independent sector (BPAS and Marie Stopes).

This is surprising as the majority of TOP's take place within the independent sector as services are commissioned out of the NHS. There are very few TOP units within the NHS so the expectation would have been that this would be greater than NHS employee responses.

Which best describes the sector you work in?		
Answer choice	Response percent	Response total
Independent sector	20.5%	25
NHS community	8.2%	10
NHS hospital	43.4%	53
NHS other	1.6%	2
Private - hospital/service	16.4%	20
Third sector	2.5%	3
University/college of further education/higher education	0.0%	0
Other (please specify)	7.4%	9

#### Figure 4: Salary scales

Figure 4 outlines the salary scales, this is a useful indicator of Agenda for Change (AfC) bands and grades, and the level of expected practice for that area of work, with the majority of nurses (86.7%) on bands 5-7 or equivalent salary in the independent sector.

Band/pay	Response total
AfC band 1	1
AfC band 2	2
AfC band 5	35
AfC band 6	29
AfC band 7	41
AfC band 8	6
AfC band 8a	5
AfC band 8b	1
AfC band 9	1

#### Figure 5: Field of practice

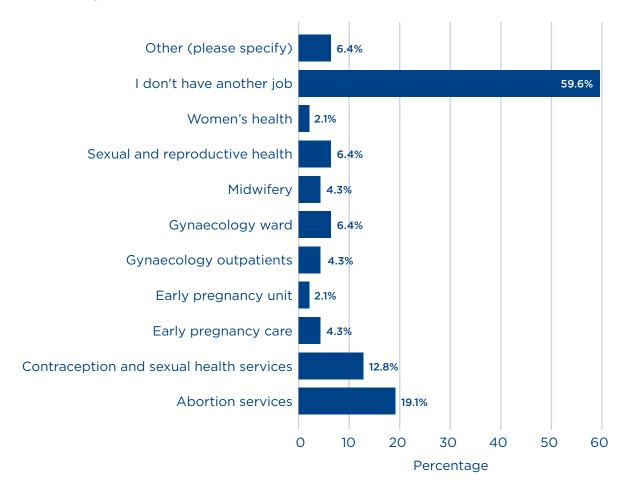
Most of the respondents identified with working in TOP services (82.8%), of those who worked in other areas the most common was gynaecology and early pregnancy care and some of the comments came from others who were working in day surgery or short stay wards. These nurses commented that they did not 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%	20
Early pregnancy unit	15.6%	19
Gynaecology outpatients	15.6%	19
Midwifery	10.7%	13
Education provider	4.9%	6
Service provider/management	4.1%	5
Primary care	1.6%	2
Service education and commissioning	0.8%	1
Other (please specify)	9.0%	11

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

#### 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.

Whi	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	NHS hospital	23.8%	19
6	NHS other	6.3%	5
7	Private - hospital/service	3.8%	3
11	University/college of further education/higher education	2.5%	2
12	Other (please specify)	5.0%	4

#### 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.

What	What is your field of practice? Select more than one if you have more than one role		
	Answer choice	Response percent	Response total
1	Abortion services	7.5%	6
2	Contraception and sexual health services	100.0%	80
3	Early pregnancy care	8.8%	7
4	Early pregnancy unit	5.0%	4
5	Education provider	6.3%	5
7	Gynaecology outpatients	10.0%	8
8	Gynaecology ward	8.8%	7
9	Midwifery	2.5%	2
10	Primary care	36.3%	29
11	Service education and commissioning	3.8%	3
12	Service provider/management	1.3%	1
14	Women's health	32.5%	26
15	Other (please specify)	12.5%	10

#### Figure 11: Other roles (those working part time)

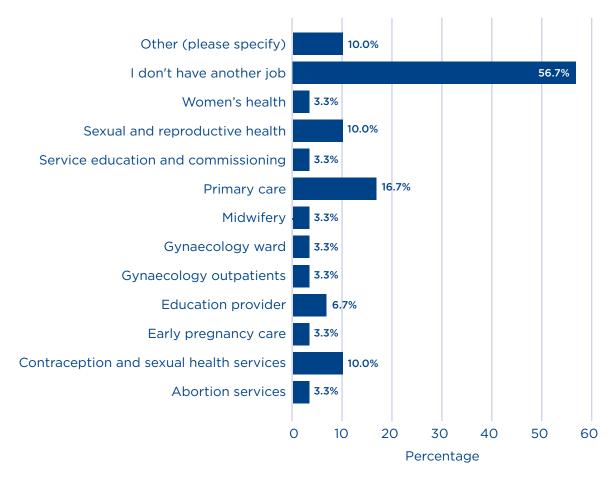
87.5% felt they had access to CPD when they needed it, but only 45% had both funding and time off from employers.

As the survey was the same there was also free text comments and these have been themed as before:

- · sexual health clinics offering abortion on demand
- training x 5
- no lead nurse for TOP in hospital setting
- neglected areas of women's health because services are being commissioned outside of the NHS, there was a sense that it was not considered a priority for training
- counselling and support.

These comments are also mirrored within those not working within TOP, especially in relation to the lack of education and those working in day surgery having no training at all.





#### 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 support workers, and it became clear as the project progressed that a focus on the educational needs of nursing support workers would complement consideration of the registered nurse's role and responsibilities. Career progression should always take account of the wider nursing workforce, in particular clearer identification of role definition for nursing support workers and nursing associates.

## 3. Education needs

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 can be asked to care for a women undergoing a TOP, as highlighted by those within the day surgery and short stay settings. It also needs to examine the role of those nurses who opt out of termination of pregnancy services. Every nurse and midwife should have their professional hat on, needing to understand their role in caring for women regardless of their personal views on the subject.

As the law currently stands nurses are acting and working within its constraints. If, however, there was a move to decriminalisation (RCN 2019, BMA 2017) then there is scope for nurseled services, nurse prescribing and MVA for early surgical abortions to be undertaken by nurses. There are currently courses on offer for this via the RCOG, and standard prescribing courses, but a change in the law would need to be factored into any educational content. There would also potentially be some implications for scope of practice, which would need to be considered by the regulators, as well as understanding the impact on employment.

The comments from the Isle of Man suggest that changes in the law need to be backed up by education and clear communication, otherwise nurses are left confused and not able to signpost women effectivity.

It is critically important that adequate awareness raising, training and education are planned and provided for all health care professionals, both those in direct care situations, and those who are likely to encounter women requiring unbiased information about access to services, not least as legislative changes may have an impact on peoples' understanding of provision.

There is a need to look at current provision, and how this might be expanded across both pre and post qualifying education.

# 4. Career pathways

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.

Some nurses will enter from being newly qualified into roles in TOP services, whilst many will move from other services including gynaecology, sexual health services or community nursing, as well as midwives from maternity care. Once in the service, there are a number of opportunities for registered nurses and midwives, including management, research, teaching and assessing, extending their skills to specialist areas of practice and Advanced Clinical Nurse practice opportunities, should the legislation change.

From the survey results, the project team have concluded that further work is required to establish clear competence guidance and skills development pathways to enable all those working in TOP services to be the best they can be, and advance their careers to meet the needs of women. Figure 12b outlines possible skills development required.

**Gynaecology** Sexual and Community **Midwifery** and women's reproductive nursing health health **New to TOP** nursing **Senior TOP Newly qualified TOP nurse** nurse **Research nurse Education and skills** Scanning, counselling, contraception and sexual NP/ANP health, pre- and post-op care **Surgical practitioner skills Prescribing Nurse manager** Dependant on experience

Figure 12a: Career progression for nurses working in TOP 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.



## 5. Recommendations

The conclusion from the work carried out is that there are a range of nurses, midwives and health care assistants working across the NHS and the independent sector in TOP services.

The results and expert discussions amongst the project team demonstrate the need to focus on career pathways, progression and skills development for current and future service provision, anticipating possible legislative changes, which will enable nurses to advance their practice.

#### The recommendations are that:

- 1. Future work should focus on expanding the career pathway with greater detail and more direction. This could include progression competencies to look at the role of the registered nurse within TOP services at all levels of practice. It should also take account of both the current situation and the proposals post decriminalisation if this happens.
- Career progression should also take account of the wider nursing workforce, in particular clearer identification of role definition for health care assistants and nursing associates.

- 3. There is also a need to consider how educational provision around TOP in both pre and post registration training ensures adequate understanding of TOP, in particular for those working in day surgery and short stay surgical areas, as well as areas where nurses are likely to encounter women requiring information and/or care related to TOP, for example general practice.
- 4. Further work is also required to consider how RCN can engage and collaborate with other key stakeholders to ensure all nurses and midwives have a better understanding of any proposed changes to legislation across the UK. This may include online learning and workshops provided locally.

# 6. References and further reading

British Medical Association (BMA) (2019) How will abortion be regulated in the United Kingdom if the criminal sanctions for abortion are removed? Available at: www.bma.org.uk/ advice/employment/ethics/ethics-a-to-z/ abortion

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World Health Organization (2018) *Medical management of abortion*. Available at: https://apps.who.int/iris/handle/10665/278968

#### **Further reading**

ARC Antenatal Results and choices. www.arc-uk.org/about-arc

BPAS. www.bpas.org

Faculty of Sexual and Reproductive Healthcare (FSRH). www.fsrh.org

Marie Stopes. www.mariestopes.org.uk/abortion-services

Royal College of Obstetrics and Gynaecology. www.rcog.org.uk

# Appendix 1: Nursing education in TOP services – questions for survey

The RCN is engaged in a project to look at the current and further educational requirements for nurses, midwives, nursing associates and non-registrants working in (Termination of Pregnancy) TOP services across England, Wales and Scotland. We are also looking to explore what changes to CPD might be required in the future, should the current legislation on TOP change.

1. Wh	1. Which country or region do you work in?	
1	England - East Midlands region	
2	England - Eastern region	
3	England - London region	
4	England - North West region	
5	England - Northern region	
6	England - South East region	
7	England - South West region	
8	England - West Midlands region	
9	England - Yorkshire and the Humber region	
10	Scotland	
11	Wales	
12	Other (please specify):	

2. Ho	2. How do you describe your qualification?	
1	Registered nurse	
2	Registered midwife	
3	Registered nursing associate	
4	Non registered health practitioner	

3. What qualifications/registration do you currently hold? Select all that apply	
1	BTEC
2	Degree
3	Diploma
4	Masters
5	PHD
6	Post graduate degree certificate
7	Post graduate diploma
8	Registered health visitor
9	Registered midwife
10	Registered midwife teacher
11	Registered nurse
12	Registered nurse teacher
13	Registered nursing associate
14	Other (please specify):

4. Which best describes the sector you work in?		
1	GP practice	
2	Independent sector	
3	Local authority	
4	NHS community	
5	NHS hospital	
6	NHS other	
7	Private - hospital/service	
8	Private - nursing agency	
9	Private - self employed	
10	Third sector	
11	University/college of further education/higher education	
12	Other (please specify):	

5. What Agenda for Change (AfC) band or equivalent salary scale are you on? Select one		
1	AfC band 1	
2	AfC band 2	
3	AfC band 3	
4	AfC band 4	
5	AfC band 5	
6	AfC band 6	
7	AfC band 7	
8	AfC band 8	
9	AfC band 8a	
10	AfC band 8b	
11	AfC band 8c	
12	AfC band 9	
13	Salary scale £10,000 - £15,000	
14	Salary scale £16,000 - £20,000	
15	Salary scale £21,000 - £30,000	
16	Salary scale £31,000 - £40,000	
17	Salary scale £41,000 - £50,000	
18	Salary scale £51,000 - £80,000	
19	£81,000 plus	

	hat is your field of practice? Select more than ne 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	Other (please specify):

7. Thinking about your main job, do you work			
1	Full time		
2	Part time		
3	Sessional		

pra	u selected part time, what other area of actice do you work in? Select more than one if u 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):

of the following best describes your current role?					
1	Not working in TOP Services				
2	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 t practice. Please select all that apply	rainin	g you	have r	eceive	d for e	ach o	the are	as of	
	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	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	Would like this skill if there was a change in the law?			

10.2	Clinical skills: such as nurse led clinic
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?

10.3 Clinical skills: vaginal examination			
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?		

10.4	10.4 Clinical skills: assisting with surgical management in theatre or clinic				
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?				

10.5	Clinical skills: assisting with or undertaking medical management on directions of medical practitioners
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?

10.6	10.6 Communication skills			
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?			

10.7	Counselling skills
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?

10.8 Confirming consent	
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?

10.9	Undertaking consent
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?

10.10 Contraception - advice and choices	
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?

10.11 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?

10.15 Ultrasound scanning- location and gestation	
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?

10.16 Ultrasound scanning- other such as gynaecology scanning	
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?

10.17	Manual vacuum aspiration (not in TOP, but in miscarriage)
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?

10.18	10.18 Medicine management including using PGD	
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?	

	10.19 Non medical prescribing (not for medicines related to termination)			
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?			

	10.20 Management of safeguarding issues such as under 16 years, domestic violence, abuse				
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?				

	In house	HEI	FSRH	ВААЅН	FPA	RCN guidance	Other - please state below	N/a
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								

11.1	11.1 Clinical skills: history taking		
1	In house		
2	HEI		
3	FSRH		
4	BAASH		
5	FPA		
6	RCN guidance		
7	Other – please state below		
8	N/a		

11.2 Clinical skills: such as nurse led clinic		
1	In house	
2	HEI	
3	FSRH	
4	BAASH	
5	FPA	
6	RCN guidance	
7	Other - please state below	
8	N/a	

11.3 Clinical skills: vaginal examination		
1	In house	
2	HEI	
3	FSRH	
4	BAASH	
5	FPA	
6	RCN guidance	
7	Other - please state below	
8	N/a	

11.4	11.4 Clinical skills: assisting with surgical management in theatre or clinic		
1	In house		
2	HEI		
3	FSRH		
4	BAASH		
5	FPA		
6	RCN guidance		
7	Other - please state below		
8	N/a		

	11.5 Clinical skills: assisting with or undertaking medical management on directions of medical practitioners				
1	In house				
2	HEI				
3	FSRH				
4	BAASH				
5	FPA				
6	RCN guidance				
7	Other - please state below				
8	N/a				

11.6 Communication skills		
1	In house	
2	HEI	
3	FSRH	
4	BAASH	
5	FPA	
6	RCN guidance	
7	Other – please state below	
8	N/a	

11.7	11.7 Counselling skills		
1	In house		
2	HEI		
3	FSRH		
4	BAASH		
5	FPA		
6	RCN guidance		
7	Other - please state below		
8	N/a		

11.8 Confirming consent		
1	In house	
2	HEI	
3	FSRH	
4	BAASH	
5	FPA	
6	RCN guidance	
7	Other - please state below	
8	N/a	

11.9	11.9 Undertaking consent		
1	In house		
2	HEI		
3	FSRH		
4	BAASH		
5	FPA		
6	RCN guidance		
7	Other - please state below		
8	N/a		

11.10	11.10 Contraception - advice and choices	
1	In house	
2	HEI	
3	FSRH	
4	BAASH	
5	FPA	
6	RCN guidance	
7	Other – please state below	
8	N/a	

11.11 Contraception - fitting (IUS/IUCD/)	
1	In house
2	HEI
3	FSRH
4	BAASH
5	FPA
6	RCN guidance
7	Other - please state below
8	N/a

11.12 Contraception - fitting (implants)	
1	In house
2	HEI
3	FSRH
4	BAASH
5	FPA
6	RCN guidance
7	Other - please state below
8	N/a

11.13 Sexual health awareness and advice	
1	In house
2	HEI
3	FSRH
4	BAASH
5	FPA
6	RCN guidance
7	Other – please state below
8	N/a

11.14 Sexual health, screening, management and treatment	
1	In house
2	HEI
3	FSRH
4	BAASH
5	FPA
6	RCN guidance
7	Other - please state below
8	N/a

11.15	Ultrasound scanning - location and gestation
1	In house
2	HEI
3	FSRH
4	BAASH
5	FPA
6	RCN guidance
7	Other - please state below
8	N/a

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 Management of safeguarding issues such as under 16 years, domestic violence, abuse	
1	In house
2	HEI
3	FSRH
4	BAASH
5	FPA
6	RCN guidance
7	Other – please state below
8	N/a

12. Do you feel the training you received has equipped you well to perform the tasks?	
1	Yes
2	No
3	Not sure

13. Do you have access to CPD when you feel you need it?				
1	Yes			
2	No			

14. Does your employer provide funding and/or time off for you to attend training each year?				
1	Yes - my employer provides all or most of the funding, but no time off			
2	Yes - my employer provides all or most of the time off, but no funding			
3	Yes my employer provides all or most of the time off and and all or most of the funding			
4	No I don't receive time off or funding, I have to use my own time and self fund			
5	Other (please specify):			

15. How much are you prepared to pay for CPD on an annual basis?				
1	Up to £200			
2	£201 to £400			
3	£401 to £600			
4	More than £600			

# 16. Please add any comments about nursing education in TOP services that hasn't been covered in this survey. 100 characters maximum 1 Open-ended question

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Published by the Royal College of Nursing 20 Cavendish Square London W1G ORN

020 7409 3333

January 2020 Review date: January 2023 Publication code: 007 959

