

RCN competences for nurses undertaking bimanual pelvic examinations



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for nurses undertaking bimanual pelvic examinations

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Introduction

Nurses working in sexual and reproductive health are increasingly extending their role, benefitting both nurses and their client groups. Clients are offered more choices about how they want to receive care. The ability to carry out pelvic and bimanual examinations is now a key requirement for nurses working in these specialisms in primary, secondary and community care (RCN, 2009; 2011).

In order to enhance service delivery, contraceptive, women's and sexual health services have identified a need for nurses to gain skills in carrying out pelvic and bimanual examinations. In 2004, the RCN undertook a scoping exercise with relevant stakeholders (see Stakeholders) and the results of this exercise have been built on and developed to create these Royal College of Nursing (RCN) competences.

Purpose and scope of the RCN competency framework

Competence can be defined as: *'The state of having the knowledge, judgement, skills, energy, experience and motivation required to respond adequately to the demands of one's professional responsibilities'* (Roach, 1992).

The purpose of the RCN competency framework is to ensure that women requiring a pelvic examination are cared for safely, and that training and assessment processes are congruent with local guidance.

The RCN competency framework can be used to:

- help all professionals to identify their individual training needs
- ensure nurses/midwives have the skills and knowledge to undertake bimanual pelvic examination competently and safely
- provide a basis for assessing competency
- inform the commissioning, development and delivery of education and training.

The competences represent current best practice. They are not exhaustive, and nurses should ensure that they take into account local governance and training requirements.

Stakeholders

In 2004, the RCN Sexual Health Forum consulted a group of contraception and sexual health nurses, in partnership with the London Standing Conference (now the London Network), including the following stakeholders:

- National Association of Nurses for Contraception and Sexual Health UK (NANCSH)
- Genito-Urinary Nurses Association (GUNA)
- Faculty of Family Planning and Reproductive Health Care (FFPRHC) - now the Faculty of Sexual and Reproductive Healthcare (FSRH)
- British Association of Sexual Health and HIV (BASHH)
- Staff and patients at West Kent Primary Care Trust
- RCN Sexual Health Forum.

Competences for nurses undertaking bimanual pelvic examinations

Broadening sphere of competence

Level	Competence	KSF	Performance criteria	Knowledge and understanding	Attitudes and behaviours	Contextual factors
6	<ul style="list-style-type: none"> Prepares environment/equipment for undertaking pelvic bi-manual examination and specimen collection. 	HWB6	<p>The practitioner:</p> <ul style="list-style-type: none"> prepares the environment, taking into account any specific requirements ensures environment enables the maintenance of privacy and dignity for the woman prepares the equipment required, e.g. ensuring various sizes of speculum are at hand. ensures provision of latex free products available ensures access for women with disabilities such as access to couches and specific positioning requirements. 	<ul style="list-style-type: none"> Procedures required to ensure: <ul style="list-style-type: none"> the examination room is correctly prepared for safe and efficient care to be provided, e.g. equipment required. the examination takes place in a closed room that ensures interruptions cannot occur while the examination takes place. the couch is positioned away from the doorway. Infection control procedures, e.g. disposal of waste. 	<ul style="list-style-type: none"> Efficient. Anticipates what is needed in advance of procedures. Respect dignity. Calming and reassuring manners. Act as advocate for woman. 	<ul style="list-style-type: none"> Local policies and procedures for infection control.
6	<ul style="list-style-type: none"> Prepares the client physically and psychologically for pelvic bimanual examination. 	HWB6	<p>The practitioner:</p> <ul style="list-style-type: none"> explains procedure fully and ensures woman understands procedure and reasons for it undertakes a comprehensive history undertakes an individual client assessment for consent advises client if a student is present, and ascertains consent if the student is to deliver care under supervision advises woman on correct position for procedure and offers assistance where appropriate implements the chaperoning policy implements confidentiality policy ensures privacy and dignity for the woman is maintained at all times recognises women with psychosexual problems/sexual dysfunction or those affected by female genital mutilation (FGM). 	<ul style="list-style-type: none"> Chaperoning policy. Confidentiality policy. Legal framework surrounding the examination of a minor. Manual handling techniques. How to take accurate history. Has knowledge to understand client's distress and to recognise verbal and non verbal cues. 	<ul style="list-style-type: none"> Maintains privacy and dignity. Sensitive to dignity of client. Appreciates need to comply with policies, procedures and guidelines. Sensitive to needs of young people. Non-judgemental. Possesses good communication skills. 	<ul style="list-style-type: none"> Local policies on chaperoning and confidentiality. NMC advice sheet on chaperoning (2008a). Local manual handling policies. NMC consent advice (NMC, 2008c). DH guidelines on consent. Local policies on safeguarding. Fraser Guidelines and Vulnerable Adult Policy where appropriate. BASHH & FSRH guidelines on history taking. BASHH, FSRH, RCOG, RCN and DH guidelines on pelvic/intimate examination. FSRH guidance on IUDs/IUS. RCN training guidelines for nurses on inserting IUDs/IUS.

Level	Competence	KSF	Performance criteria	Knowledge and understanding	Attitudes and behaviours	Contextual factors
Level 6	<ul style="list-style-type: none"> • Safely and effectively performs pelvic bi-manual examination. 	HWB6	<p>The practitioner:</p> <ul style="list-style-type: none"> • ensures woman empties her bladder (if appropriate) • demonstrates understanding of the menstrual cycle and how this affects/alters the examination • ensures the correct positioning of the woman whilst maintaining her dignity and safety • informs the patient what will happen at every point of the procedure • demonstrates an understanding of the appearance of the normal genital anatomy, including external genitalia and female pelvic organs • recognises female genital mutilation (FGM) and refers as appropriate • recognises any signs of genital tract infection observed during the procedure • demonstrates an understanding of common dermatological conditions, for example, dermatitis, lichen planus, psoriasis and candidiasis • recognises abnormal masses and presentations, for example fibroids, ovarian cysts, acute pelvic inflammatory disease (PID)/tenderness or cervical excitation • recognises the signs and interprets the clients symptoms of genital tract infections observed during the examination • understands the common signs of pregnancy e.g. softer cervix • recognises the signs of pregnancy • recognises vaginal bleeding in pregnancy, miscarriage, ectopic pregnancy • explains all procedures to the client and addresses any queries • ensures safe disposal of all equipment following health and safety guidelines and infection control policies. 	<ul style="list-style-type: none"> • Has specialist knowledge and skills to undertake extended role. • How to undertake an effective clinical examination. • Performs skilful abdominal and vaginal examination. • How to differentiate between normal and abnormal presentations. • Own limitations, role and responsibilities. • Familiar with referral process. • Related anatomy and physiology. • Applies knowledge to practice. • The appearance of normal genital anatomy and the general pathological processes affecting the genitalia. • Familiar with evidence-based practice and how to access information. 	<ul style="list-style-type: none"> • Professional approach. • Recognises when intervention as the client advocate is appropriate. • Recognises possible distress in client when a need to refer and explains the situation. • Sensitive manner. • Acts as advocate for client regardless of race, culture, sexuality, religion. • Ensures client dignity and privacy. 	<ul style="list-style-type: none"> • Female Genital Mutilation Act 2003 and the Female Genital Prohibition of Female Circumstances Act 1985. • BASHH guidelines on standards (2010). • RCN FGM educational resource (2006).

Level	Competence	KSF	Performance criteria	Knowledge and understanding	Attitudes and behaviours	Contextual factors
6	<ul style="list-style-type: none"> Interprets findings of examination to identify clients' needs. 	HWB6	<p>The practitioner:</p> <ul style="list-style-type: none"> applies knowledge to interpret findings initiates appropriate referral for women with psychosexual problems/sexual dysfunction or those affected by FGM plans care appropriately involving woman and others, where relevant in the decision making process recognises own limitations and refers appropriately. 	<ul style="list-style-type: none"> Recognises the presentation of psychosexual issues and their importance. Aware of the range of psychological attributes, e.g. sexual dysfunction. Familiar with local referral pathways and support. Recognises abnormalities to normal presentations and refers appropriately. 	<ul style="list-style-type: none"> Utilises knowledge base in practice. Recognises own limitations and seeks appropriate assistance. Protects confidence unless need to share with external agency. 	NMC Code of conduct (2008b).
6	<ul style="list-style-type: none"> Provides clear and accurate results to the woman. 	Core 1 HW6	<ul style="list-style-type: none"> Can interpret findings correctly. Ensures results are communicated to the woman in a sensitive and confidential manner according to local guidelines. Discusses the implications of results and further care with the client. 		<ul style="list-style-type: none"> Sensitive to needs of client. Maintains confidentiality. Appreciates need to comply with policies, procedures and guidelines. 	<ul style="list-style-type: none"> Data Protection Act. Follow local and national policies for communicating results. BASHH. FSRH guidelines on IUD insertion and follow up. Cervical Screening Local guidelines on confidentiality.
6	<ul style="list-style-type: none"> Provides holistic information, advice and support to meet the client's needs. 	Core 1 HWB6	<p>The practitioner:</p> <ul style="list-style-type: none"> ensures woman has appropriate leaflets and contact details understands referral process if unintended pregnancy, or referral to antenatal care. 	<ul style="list-style-type: none"> Aware of relevant information resources available, e.g. client leaflets, internet sites. Knowledge and skills to give clear answers to any questions posed. 	<ul style="list-style-type: none"> Sensitive to client needs. Acts as advocate for client. 	<ul style="list-style-type: none"> FPA leaflets www.fpa.org.uk/professionals/publicationsandresources. Local leaflets if available.
6	<ul style="list-style-type: none"> Maintains accurate records of interventions and outcomes. 		<ul style="list-style-type: none"> Makes accurate records of interventions undertaken and outcomes. 	<ul style="list-style-type: none"> Local policies and guidelines on documentation. 	<ul style="list-style-type: none"> Commitment to accuracy. 	<ul style="list-style-type: none"> NMC Code of conduct (2008b).

References

- British Association for Sexual Health and HIV (2010) *Standards for the management of sexually transmitted infection*, BASHH: London.
- British Association for Sexual Health and HIV (2006) *National Guidelines on consultations requiring sexual history-taking*, BASHH: London.
- Department of Health (2010) *Clinical practice guidelines for the assessment of young women aged 20-24 with abnormal vaginal bleeding*, DH: London.
- Department of Health (2003) *Confidentiality: NHS code of practice*, DH: London
- Department of Health – consent to treatment forms and guidance (various). Available from: www.dh.gov.uk/consent
- Faculty of Sexual and Reproductive Healthcare (2007) *Clinical guidance: intrauterine contraception*, FSRH: London.
- Family Planning Association (FPA) Professional leaflets – available from <http://www.fpa.org.uk/professionals/publicationsandresources> (Accessed 29 July 2011) (Web).
- National Health Service (Web) *NHS Cervical screening service* <http://www.cancerscreening.nhs.uk/cervical/>
- National Institute For Health and Clinical Excellence (2005) *Referral guidelines for suspected cancer. Clinical guideline 27*, National Collaborative Centre For Primary Care: London.
- Nursing and Midwifery Council (2008a) *Chaperoning advice sheet*, NMC: London. Available from <http://www.nmc-uk.org/Nurses-and-midwives/Advice-by-topic/A/Advice/Chaperoning/> (Accessed Aug 2011).
- Nursing and Midwifery Council (2008b) *Code of Conduct*, NMC: London.
- Nursing and Midwifery Council (2008c) *Consent advice sheet*, NMC: London. Available from <http://www.nmc-uk.org/Nurses-and-midwives/Advice-by-topic/A/Advice/Consent/> (Accessed Aug 2011)
- Royal College of Nursing (2011) *RCN competences for nurses assessing and counselling women who request and/or receive long-acting reversible methods of contraception (LARC)*, RCN: London. Publication code 004 122.
- Royal College of Nursing (2010) *Intrauterine techniques: RCN accreditation and training guidance for nurses and midwives*, London: RCN. Publication code 003 179.
- Royal College of Nursing (2009) *Sexual health competences: an integrated career and competence framework for sexual and reproductive health nursing across the UK*, RCN: London. Publication code 002 469.
- Royal College of Nursing (2006) *Vaginal and pelvic examination. Guidance for nurses and midwives*, London: RCN. Publication code 003 036.
- Royal College of Nursing (2005) *Female genital mutilation. An RCN educational resource for nursing and midwifery staff*, RCN: London. Publication code 003 037.
- Royal College of Obstetricians and Gynaecologists (2002) *Gynaecological Examinations: Guidelines for Specialist Practice*, RCOG Press: London.



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