



Royal College
of Nursing

Advanced Nursing Practice for Gynaecology and Women's Health

CLINICAL PROFESSIONAL RESOURCE



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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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Notes:

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

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, you should use the term women/men and where appropriate acknowledge non-binary terms.

Introduction

In contemporary health care specialist, enhanced and advanced practice for nurses is a critical part of improving and developing clinical care and the patient experience. Career progression through advanced practice roles is a cornerstone to developing the profession of nursing.

Gynaecology and women's health care has many sub-specialties which are not always identified in education pathways for advanced level roles such as advanced nurse practitioner and advanced clinical practitioner (which can be multiprofessional) roles, including hysteroscopy, general gynaecology, early pregnancy, emergency gynaecology, colposcopy, urogynaecology, menopause, endometriosis and gynaecology oncology.

Evidence suggests that there is a wide variation in employer understanding and approach to these roles with differing expectations (Devereux, 2023). The need for regulation and standardisation of the roles has recently been considered in an independent report from the Nuffield Trust in 2023. The aim of this guide is to standardise expectations, as well as provide direction for career progression.

There are a number of resources and tools used to articulate the requirements for advanced practice, including the RCN Advanced Nurse Practice standards (Table 1), the RCN Professional Framework (Table 2), and RCN Workforce Standards, which are used to outline the expectations of these roles.

Advanced Nurse Practice (ANP) standards

ANP's or ACP's are educated at master's level and have been assessed as competent in practice using their expert clinical knowledge and skills. They have the freedom and authority to act, making autonomous decisions in the assessment, diagnosis, and treatment of patients (RCN, 2023). To read *RCN Standards for Advanced Level Nursing Practice*, visit: rcn.org.uk/Professional-Development/publications/pub-007038

Registered nurses working at this advanced level must meet the following standards:

- have an active registration with the Nursing and Midwifery Council (NMC)
- practice within the four pillars of nursing: clinical, education, leadership and research
- have a job plan that demonstrates advanced nursing practice and has equity with peers working at this level
- be educated to master's level
- be an independent prescriber (where appropriate)
- meet NMC revalidation requirements
- demonstrate autonomous evidence.

The key points around working at an advanced level include:

- advanced knowledge and clinical skills
- accountable practitioners working at the boundaries of the profession
- innovative practice, using a clear evidence base
- skilled at assessing and managing risks

- freedom and authority to act and takes responsibility for decisions and actions made
- experienced in women’s health with master level thinking and relevant women’s health courses/development
- provide holistic assessment
- look at the whole person through different health care models from health promotion, caring, counselling, assessment, diagnosis, referral, treatments, and discharge
- enhance the solution to workforce challenges.

RCN Professional Framework

The RCN Professional Framework aims to articulate and clarify the differing roles and responsibilities in nursing and clarify role progression. **Table 2** outlines the possible career pathways from nursing support workers to advance practice in women’s health.

Table 1 - Role progression in women’s health care

Role progression in nursing	Opportunities to enhance knowledge and understanding of women’s health care practice
Nursing support worker/support workers, pre-registration nursing student, trainee nurse associate (working under supervision) and registered nursing associates	Foster interest in gynaecology/women’s health care
Registered nurses and nurse associates at all levels providing care across all ages in general/non-specialist settings	All nurses should have some understanding of women’s health care, from menstruation to menopause and beyond, as it may impact on patient wellbeing
Registered nurses at registration providing care to adults in specialist services/roles	Develop knowledge and skills at looking after women in settings such as gynaecology wards, outpatients’ clinics, sexual health services, early pregnancy settings
Registered nurses at enhanced level providing care to adults in specialist services/roles	Undertaking specialist post-registration courses in women’s health to underpin specialist roles, such as in early pregnancy, outpatients, endometriosis, menopause
Registered nurses at advanced level providing care to adults in specialist services/roles	Develop a sub specialist or generalist role in gynaecology and women’s health – undertake a master’s degree and courses to enhance practice, such as nurse hysteroscopist, colposcopists, early pregnancy, sexual health
Registered nurses at consultant level providing care to adults in specialist services/roles	Undertake specialist courses to lead and develop chosen specialty, undertake PhD in chosen area

RCN Nursing Workforce Standards

Workforce standards can be used by all nurses to support and direct safer and effective staffing in all areas of women's health. The RCN Nursing Workforce Standards can be used by all to enhance care provision. The standards are set out in three distinct themes (below), which can be used to constantly assess, agree and support safe and effective staffing levels.

- Responsibility and Accountability (Standards 1,2,3 & 4): These four standards outline where the responsibility and accountability lie within an organisation for setting, reviewing and taking decisions and actions regarding the nursing workforce.
- Clinical Leadership and Safety (Standards 5,6,7,8,9 & 10): These six standards outline the need for registered nurses with lead clinical professional responsibility for teams, their role in nursing workforce planning and the professional development of that workforce.
- Health, Safety and Wellbeing (Standards 11-14): These four standards outline the health, safety, dignity, equality and respect values of the nursing workforce to enable them to provide the highest quality of care.

The RCN's Nursing Workforce Standards can be found at: [rcn.org.uk/Professional-Development/publications/rcn-workforce-standards-uk-pub-009681](https://www.rcn.org.uk/Professional-Development/publications/rcn-workforce-standards-uk-pub-009681)

Advanced practice in gynaecology/ women's health

The emergence of advanced practice, together with the expansion of nursing skills, has led to the development of specialist nurses and advanced nurse practitioners within the field of gynaecology and women's health, in an unstructured way.

There are many different titles such as clinical nurse specialist (CNS), nurse practitioner (NP), advanced nurse practitioner (ANP) and nurse consultant (NC), with limited guidance or regulation on the educational background or requirements of the role that these nurses are undertaking. This can create difficulties for nurses and other health care professionals and patients who may be unsure of the scope of practice and the limits or remits of the role. Nurses work within specialities across all levels of practice.

The roles may be grouped by bands of pay and some may have a specific skill attached to the title such as colposcopist or hysteroscopist. The areas in which nurses have advanced and developed their practice are widespread in gynaecology, with each sub-specialty developing or adapting different educational courses to address aspects of the role.

Advanced nursing practice is about having the right professional, in the right place at the right time to ensure that the patient has the correct care and senior decision making needed, and not necessarily about having direct medical support, for example, in a clinic.

Whatever the career path, there are many sources of help and inspiration in practice, from identifying the gaps to developing the skills and knowledge required, as well as devising new roles and networking with others.

There are many factors that can impact on the expansion and development of the roles, including:

- clarity around the role

recognition of prior learning and credentialing ([rcn.org.uk/Credentialing](https://www.rcn.org.uk/Credentialing))

- availability and financial support for education for these expanded roles in provider terms
- individuals' ideas/understanding of the breath/depth of the role
- support from peers and other professionals, patients and organisations
- overall costs and salary
- an appropriate mentor in place and ongoing mentorship with protected time and funding should be standard to aid learning
- the learner should have access to and work alongside a clinical mentor* who can provide feedback and support, and who can assess their competence and development
- the unit should have a peer review system in place, so that once qualified, ANPs' practice is continually assessed, in line with the NMC Code (NMC, 2018), and they have access to ongoing mentorship and support, and regular clinical reviews of cases.

* Helpful tools to support development include: *Coaching and Mentoring* (NHS Leadership Academy): leadershipacademy.nhs.uk/programmes/coaching-and-mentoring

The difference between a clinical nurse specialist and an advanced practice nurse

There are growing demands on health care because of changing population health needs, which coupled with service re-design, has provided opportunities for the nursing profession to develop and expand roles, scope and practice. The International Council of Nurses (ICN, 2020) has recently updated its position statement on APN's. The ICN stated that the APN *"is fundamentally a nursing role, built on nursing principles"*, and identifies a CNS and a NP as the two most common. There is confusion and ambiguity with the many titles and roles, and there is little correlation between job title and pay. The ICN draws a clear distinction between the roles of CNS and NP (both of which are APN roles), and acknowledges the confusion suggesting that these are best understood as being on a 'continuum'.

Table 2 - Adapted from ICN regarding a Professional Framework (ICN 2020):

The CNS as expert clinician has a focus on clinical excellence, a specialist area of practice and is more likely to engage in non-clinical and indirect care activities
ANP has greater direct involvement in patient care particularly in relation to activities such as diagnosis, prescription and treatment of conditions
There is a different scope of practice and focus, although both are expected to be educated to at least masters level, practice autonomously and are accountable to an advanced level.

The CNS is a job role, not a level of practice, and can fall within the enhanced or advanced level of practice definition.

Specialist nurses and/or midwives may be clinical specialists within a specific clinical area. The specialist may be focused on a specific population, type of care or gynaecological problem. They are an essential part of a service model and practice in an integrated manner within the multi-disciplinary team, to deliver safe, effective, clinical evidence-based, efficient high quality patient care.

The degree of autonomy exercised in utilising extended skills and the level of practice demonstrated across the four pillars (Table 3) relates to whether the clinician is working at an enhanced or advanced level of practice.

The four pillars identified for defining advanced practice are:

- leadership and management
- education
- research
- clinical practice.

Table 3 - Four pillars of advanced nursing

Leadership and management	Education	Research	Clinical practice
<ul style="list-style-type: none"> • Identify change • Innovate • Manage change • Service development • Build and develop cases for change • Negotiating and influencing skills • Significant network • Development of team/s 	<ul style="list-style-type: none"> • Understand the principles of teaching and learning, and the different styles • Support others to develop both knowledge and skills • Promote and foster a culture and environment of learning • Teaching clients/ patients and giving information to patients • Teaching and developing other health care professionals • Mentoring • Coaching 	<ul style="list-style-type: none"> • Use research in clinical and educational practice to underpin and develop protocols and guidelines • Critical appraisal skills • Involvement in research, audits and leading service change • Publications • Stay up-to-date on changes to practice through research • Critically engage with research or quality improvement projects within service or area of expertise • Utilise evidence-based practice • Disseminate best practice and research findings to other team members • Network with other academic and clinical colleagues to work on research projects and advance the chosen field of practice 	<ul style="list-style-type: none"> • High level decision making • Clinical judgement skills • Ability to problem solve • Critical thinking • Reflection

Advanced nursing practice: Leadership and management

Nurses, regardless of their role or practice setting, embody qualities of both a leader and manager. Whilst managers and leaders may share similar traits, they have distinct roles that emphasise and utilise leadership in different capacities.

Nurse managers are responsible for ensuring that specific health care settings function smoothly, providing a vital link between an organisation's vision and patient care. They act as a valuable resource for advice and information, oversee service delivery, supervise staff schedules, review employee performance and professional development, budget, and improve health care operational quality.

Nurse leaders are responsible for advancing the organisation's vision and strategic long-term plans. They act as role models to inspire and influence others, ensure regulatory compliance, oversee quality measures, develop and implement new standards, and lead organisational change.

The most influential factor in shaping and driving organisational culture is leadership. Providing compassionate, authentic, and collaborative leadership greatly impacts on team cohesion, people's sense of belonging, and may increase job satisfaction and retention, which in turn, influences care delivery. Organisations need the important contribution of advanced level nurses to provide leadership in clinical expertise, quality improvement efforts to optimise patient outcomes, and professional advancement of nursing staff. This must be negotiated within legal, ethical, professional, organisational policies, governance arrangements and the financial challenges now facing the health care system.

The NHS Leadership Academy developed the Healthcare Leadership Model (leadershipacademy.nhs.uk/healthcare-leadership-model), to enable nurses to become better leaders in their day-to-day roles. The model comprises nine leadership dimensions, with each dimension shown on a four-part scale, ranging from 'essential' through to 'proficient', 'strong' and 'exemplary'. This can help ANPs understand their leadership development needs.

The nine dimensions (listed below) contain a description of what it is and why it's important. There are a series of questions to guide people's thoughts and result in effective leadership behaviour. The questions can also help nurses to explore intentions, motivations and strengths, as well as areas for development.

1. Inspiring shared purpose
2. Leading with care
3. Evaluating information
4. Connecting our service
5. Sharing the vision
6. Engaging the team
7. Holding to account
8. Developing capability
9. Influencing for results.

An online library of quality, service improvement and redesign tools, can be found at: england.nhs.uk/wp-content/uploads/2022/01/qsir-healthcare-leadership-model.pdf

And/or: leadershipacademy.nhs.uk/healthcare-leadership-model

Advanced practice: Education

There is currently no one educational pathway to support development in all areas of advanced practice in gynaecology, and consequently, it can be complex to understand the differences in the roles from an academic viewpoint. Advanced nursing practice stems from nurses development of themselves and is always underpinned by nursing education and critical thinking.

It is generally recognised that education for advance practice and critical thinking should be at masters level, and investment in nurses, to enhance their practice, is critically important for patients/women and for professional development, both individually and in support of better health care provision.

Demonstrating learning at master's level is also important for career development. There are processes available for those who may not have the opportunity to complete a full programme at this academic level, which includes demonstrating and recognising former learning from experience such as Recognition of Prior Learning and Credentialing.

Recognition of Prior Learning (RPL):

Many students enter higher education with valuable knowledge and skills developed through a range of professional contexts. Both formal study (certificated) and informal learning (via work experience) may be accredited for either entry to a programme of study or, where the learning is at the right level, to gain exemption from parts of the programme.

It is important to stress that credit is not given for experience alone but rather for the learning gained through that experience. To receive RPL, evidence must be provided prior to achievements which are formally mapped and assessed against the course learning outcomes. This process enables an academic judgment to be made for the amount of credit that can be granted, or for course enrolment without the formal entry requirements. In making this assessment, universities are assured that all students receiving an award have demonstrably achieved the course requirements through studying the course in full or using some of their previous experience or qualifications.

Learners wishing to claim RPL should contact their university admissions office. Further information can also be found at: qaa.ac.uk/docs/qaa/quality-code/making-use-of-credit.pdf

Credentialing:

Credentialing is an RCN process for assessing the background and legitimacy of nurses to practice at an advanced level through assessing their qualifications, experience and competence. It allows nurses and midwives to gain formal recognition of their level of expertise and skill in their clinical practice, leadership, education and research in a way that is recognisable to colleagues, employers, patients and the public. RCN Credentialing is open to nurses and midwives who can demonstrate they are working at an advanced

level, practise in either the NHS, independent sector or voluntary sector, and are either members or non-members of the RCN.

Further information can be found at: rcn.org.uk/Credentialing

Advanced nursing practice: Research

The nursing profession has an obligation to strengthen the research culture and support evidence-based nursing practice, to optimise the health and wellbeing of people and society.

Whilst ANPs are uniquely positioned to actively participate in and contribute to the professional body of knowledge in their field of advanced practice, some continue to feel reluctant or uncertain about how to initiate or negotiate their involvement (Fielding et al., 2022). Although limited time and resources may be a perceived barrier to motivate and support research activity, opportunities exist to enable ANPs to become active researchers whilst meeting the competing demands of their clinical role.

Examples of meaningfully integrating research into clinical practice include:

- identifying an issue of clinical relevance stemming from practice experience / clinical observation that requires further research to strengthen evidence for best practice
- keeping abreast of peer-reviewed research publications in your field of advanced practice and disseminate findings to inform and underpin the team's practice
- evaluating and auditing your own and others' clinical practice to highlight gaps in clinical practice and develop ideas for improving care / outcomes
- attending annual scientific meeting/research conference in your specialism to be fully informed of innovations
- considering submitting abstracts/posters on innovations in practice
- seeking out 'in-house' research networking opportunities, for example, offering your assistance to collect data on established research projects
- liaising with other ANPs to explore concerns or commonalities across practice disciplines to inform a co-creation research proposal to answer important practice questions
- conducting a structured literature review to identify innovative research questions or new ways of looking at a phenomenon of interest
- meeting the organisation's clinical research team to discuss opportunities to collaborate on research projects, offering your specialist knowledge in return for guidance from more experienced research staff
- contacting a higher education institute for their list of open research seminars/events to enable you to network with local researchers
- discussing the possibility of a research mentor at your next appraisal.

Join the RCN's Research Society for information on using and developing research to enhance practice: rcn.org.uk/Professional-Development/research-and-innovation

Recommended content for developing practice

Knowledge and skills:	
<ul style="list-style-type: none"> • Anatomy and physiology • Menstruation • Investigations and imaging • Heavy menstrual bleeding and bleeding problems • Pain and periods • Pelvic pain - including endometriosis, chronic pain • Early pregnancy issues and loss • Contraception and sexual health • Cervical screening programme • Fertility and fertility issues 	<ul style="list-style-type: none"> • Menopause • Urogynaecology • Gynaecology oncology - screening and colposcopy • Gynae Endocrine i.e., PCOS, premature ovarian failure • Paediatric gynaecology i.e., disorders of sexual development • Inclusion and diversity – care for trans, non-binary and intersex • Safeguarding including FGM, domestic violence and trafficking

Leadership

- Advocating for women in their care and on a wider scale within service.
- Working autonomously as a clinical leader and within the service and multidisciplinary teams (MDTs).
- Contributing to policies, procedures, development, and care pathways within service, particularly with reference to complex cases.
- Being aware of and contributing to ensuring service is cost effective and efficient.
- Ensuring service change is patient led, for example, look at patient feedback, perform audits.
- Being responsible for your own learning and acting as a positive role model for others, and be open to colleague feedback.
- Performing clinical supervision for junior colleagues and ensure own clinical supervision needs are met.
- Performing advanced practice peer audit as needed.
- Knowledge of local pathways for referral ie, contraception prescribing / LARC fitting if an ANP doesn't do this as part of their current role, termination of pregnancy (TOP) referral, miscarriage pathways, fertility pathways.
- Knowledge of local/national resources for women and sexual health information.

- Knowledge of age of consent/domestic abuse/modern slavery/mandatory reporting and local safeguarding pathways.
- Knowledge of local referral pathways for abortion care/post-abortion care and be familiar with NMC conscientious objection guidance.

Education

- Playing a key part in educating junior colleagues and the wider team.
- Becoming a Faculty of Sexual and Reproductive Healthcare (FSRH) faculty registered trainer to contribute towards educating others in the chosen fields, both within the service and externally.
- Contributing to the training pathways of peers and junior and multi-professional colleagues.
- Being involved in the education of nursing colleagues, doctors, GPs, practice nurses and the wider MDT.

Research

- Keeping abreast of the developing literature within the chosen field.
- Critically appraising the outcomes of audit and service evaluations.
- Gaining confidence in evaluating the quality of published research, and interpreting results to work out what applies to your clinical practice.
- Understanding different research methodologies, their strengths and weaknesses, to be able to identify biases in research conduct and reporting.
- Contributing to local and national professional forums.
- Disseminating evidence-based practice findings through local and national networks / conferences.

Table 4 Flowchart: Education requirements for newly qualified registered nurses working in gynaecology and women’s health or those wishing to change roles

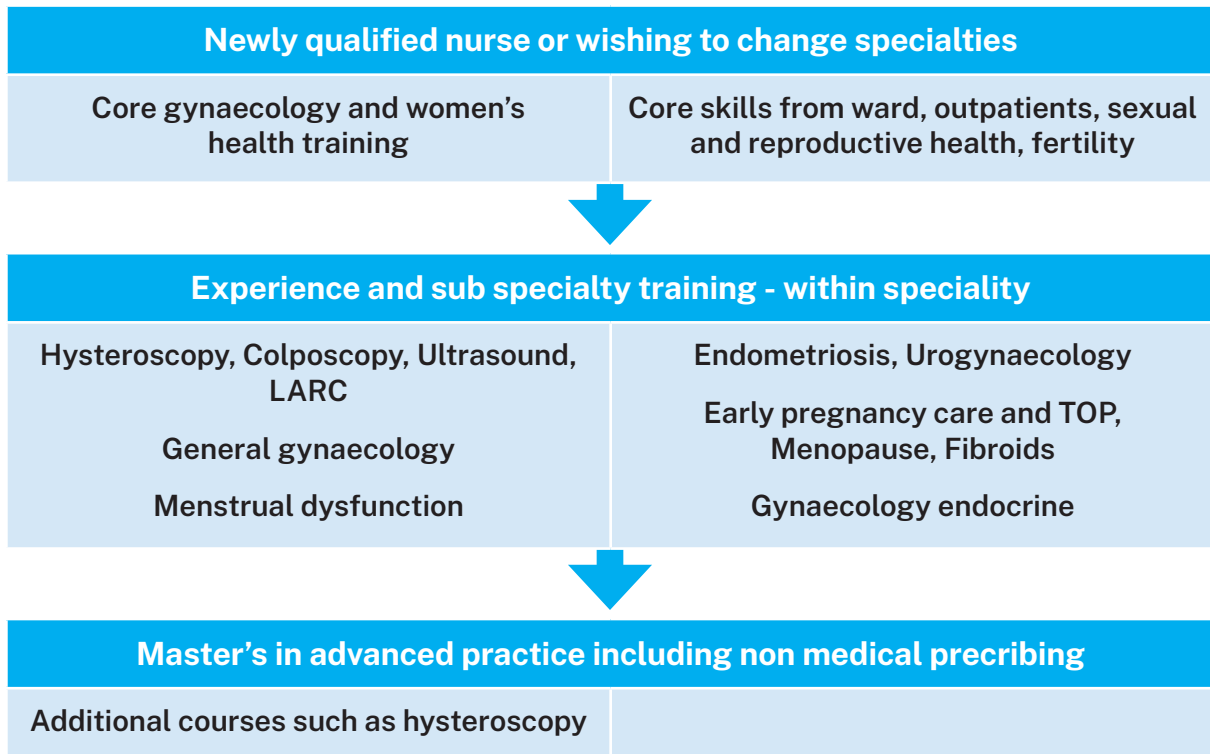
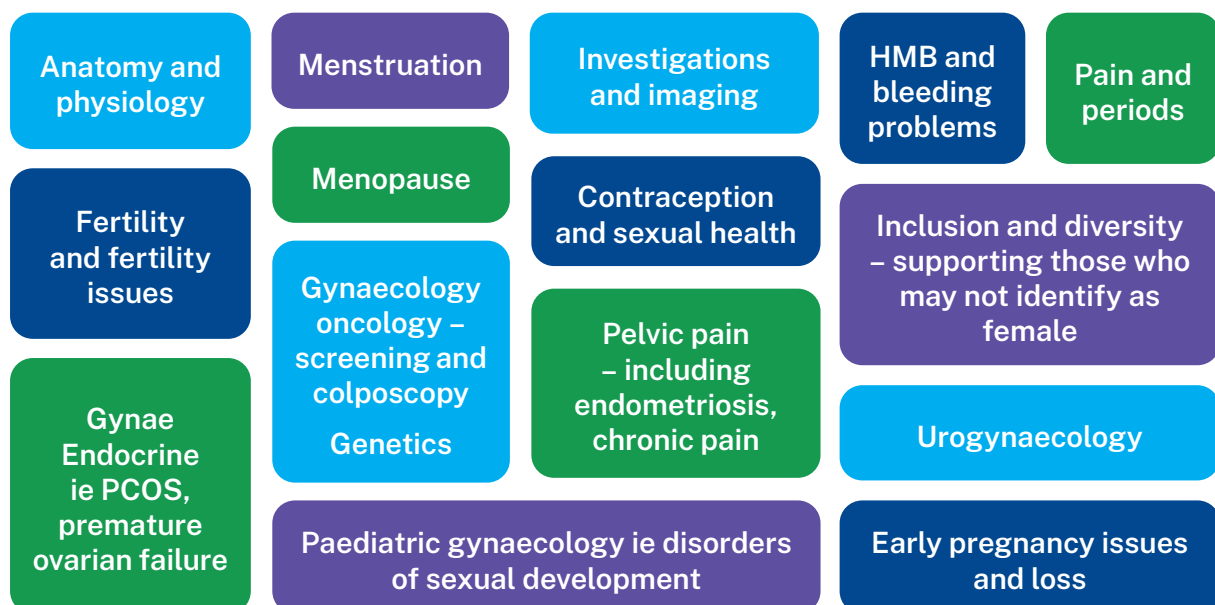


Table 5: Building blocks of knowledge and practice in women’s health

The foundation or building blocks of knowledge that can be acquired through courses or self directed learning. These give the foundation for any nurses within women’s health and can then be used to build on for advanced practice in any chosen area of practice.



Recommended education for gynaecology ANPs:

FSRH (2023) *Contraceptive Counselling Free Online Course*: [fsrh.org/education-and-training/fsrh-contraceptive-counselling-online-course](https://www.fsrh.org/education-and-training/fsrh-contraceptive-counselling-online-course)

FSRH (2023) *e-Learning for Sexual and Reproductive Healthcare (e-SRH)*: [fsrh.org/education-and-training/e-learning-for-sexual-and-reproductive-healthcare-esrh](https://www.fsrh.org/education-and-training/e-learning-for-sexual-and-reproductive-healthcare-esrh)

RCN (2023) *Sexual health education directory*: [rcn.org.uk/clinical-topics/public-health/sexual-health/sexual-health-education-directory#part2primarycare](https://www.rcn.org.uk/clinical-topics/public-health/sexual-health/sexual-health-education-directory#part2primarycare)

BASHH (2023) *Guidelines and education resources for health care professionals*: [bashh.org/guidelines](https://www.bashh.org/guidelines)

NHIVA (2023) *Advanced nursing practice in HIV care*: [nhivna.org/AdvancedPractice](https://www.nhivna.org/AdvancedPractice)

RCOG (2022) *Best practice in abortion care*: [rcog.org.uk/media/geify5bx/abortion-care-best-practice-paper-april-2022.pdf](https://www.rcog.org.uk/media/geify5bx/abortion-care-best-practice-paper-april-2022.pdf)

NHS England (2023) *Same day emergency care*: [england.nhs.uk/urgent-emergency-care/same-day-emergency-care](https://www.england.nhs.uk/urgent-emergency-care/same-day-emergency-care)

University of Gloucestershire (2023) *Advanced Clinical Practice MSc*: [glos.ac.uk/courses/course/acl-msc-advanced-clinical-practice/#course-modules](https://www.glos.ac.uk/courses/course/acl-msc-advanced-clinical-practice/#course-modules)

Kings College London (2023) *Gynaecology Nursing Level 6 6KNIN647*: [kcl.ac.uk/short-courses/gynaecology-nursing-level-6-6knin647-1](https://www.kcl.ac.uk/short-courses/gynaecology-nursing-level-6-6knin647-1)

University of Bradford (2023) *Practitioners with a Special Interest - Gynaecology MSc / PGDip*: [bradford.ac.uk/courses/pg/practitioners-with-special-interest-gynaecology](https://www.bradford.ac.uk/courses/pg/practitioners-with-special-interest-gynaecology)

Tech United Kingdom technological university (2023) *Gynecologic and Obstetric Surgery for Nurses (postgraduate certificate)*: [techtute.com/gb/nursing/postgraduate-certificate/gynecologic-obstetric-surgery-nurses](https://www.techtute.com/gb/nursing/postgraduate-certificate/gynecologic-obstetric-surgery-nurses)

Sub specialisms for gynaecology / women’s health

Advanced nursing practice gynaecology and women’s health	
<p>Early pregnancy care and termination of pregnancy endometriosis</p> <p>Hysteroscopy</p> <p>Menopause</p> <p>Sexual and reproductive health</p> <p>Ultrasound</p> <p>Urogynaecology</p>	<p>General gynaecology</p> <p>Menstrual dysfunction</p> <p>Colposcopy</p> <p>Contraception / LARC</p> <p>Fibroids</p> <p>Gynaecology endocrine</p> <p>Fertility</p>

Below are some examples of areas of practice and how to develop. For menstrual dysfunction, fibroids and endocrine, you would need to develop similar clinical skills to endometriosis (see below) using competency-based learning.

Advanced practice in early pregnancy care and termination of pregnancy (TOP)	
<p>An ANP working in early pregnancy and termination of pregnancy care can autonomously manage the patient journey from start to finish (taking into consideration current legislation on TOP), with a focus on advanced and/or complex areas of care.</p>	
Clinical skills	Education available
<ul style="list-style-type: none"> • Counselling and discussion of options • First and second trimester scanning • Performing and interpreting investigations and results • Perform speculum and bimanual examinations • Non-medical prescribing • Managing hyperemesis • Assessing and managing pain and bleeding in early pregnancy • Medical management of ectopic pregnancy • Diagnosis and management of molar pregnancy, referring onto specialist services as needed • Consenting for abortion or miscarriage treatment and administering treatment if needed • Inserting dilapan cervical preparation 	<ul style="list-style-type: none"> • Playing a key part in educating junior colleagues and the wider team • Becoming a FSRH faculty registered trainer to contribute towards educating others in contraception skills, both within the service and externally • Contributing to the training pathways of peers, junior colleagues and multi-professional colleagues • Clinical education module at MSc level • <i>Letter of Competence Subdermal Contraceptive Implants Techniques Insertion and Removal (LoC SDI-IR):</i> fsrh.org/education-and-training/letter-of-competence-subdermal-implants-loc-sdi • <i>Letter of Competence Intrauterine Techniques (LoC IUT):</i> fsrh.org/education-and-training/letter-of-competence-intrauterine-techniques-loc-iut

<ul style="list-style-type: none"> • Contraception counselling including implant and coil fitting • Miscarriage management • Performing surgical management of miscarriage under local anaesthetic (MVA) • Management of complications e.g., RPOC, infection • Enhanced safeguarding and caring for socially complex or vulnerable women • Bereavement support following pregnancy loss • Telephone triage. 	<ul style="list-style-type: none"> • FSRH Diploma (DFSRH): fsrh.org/education-and-training/diploma • <i>Become an FSRH Registered Trainer:</i> fsrh.org/education-and-training/become-a-fsrh-registered-trainer • USS qualification (see section below) • Enhanced safeguarding modules • Counselling • RCOG MVA course.
<p>Endometriosis</p> <p>Since 1 in 10 women have endometriosis, the nursing role is paramount to those receiving care. The advanced practice role allows practitioners to facilitate diagnosis and management of the condition. This will also help to achieve the All-Party Parliamentary Group (APPG) for Endometriosis's recommendation of reducing the diagnosis time to a year or less by 2030. RCN (2021) has published the <i>Clinical Nurse Specialist in Endometriosis</i> guide, which can be found at: rcn.org.uk/Professional-Development/publications/clinical-nurse-specialist-in-endometriosis-uk-pub-009-923</p>	
<p>Clinical skills</p>	<p>Education available</p>
<ul style="list-style-type: none"> • Develop advanced skills in ultrasound • Non-medical prescribing to allow ANPs to deliver a one-stop clinic, which offers both diagnosis and initiation of medical management • Be able to offer insertion of IUD/IUS or implant during the clinic • Discussion of other non-surgical options e.g., pelvic health physiotherapy • Develop skills in pelvic floor assessment to assist with this therapy or have referral pathway • Referral to - assist diagnosis endometriosis, imaging such as ultrasound and MRI • Referral pathways to other specialties - colorectal, urology • Both leadership and management skills are useful during multidisciplinary team meetings, where patients pathways are discussed • Key worker and advocate 	<p>There are no specific courses and this would need to be developed dependant on the service needed and/or, taking courses such as ultrasound, insertion of IUS, which will support developments for practice:</p> <ul style="list-style-type: none"> • fsrh.org/education-and-training/counselling • ipm.org.uk • IMS IMPART online learning for health care professionals - British Menopause Society • The Menopause Course for nurses - British Menopause Society • BMS Principles and Practice of Menopause Care - British Menopause Society <p>See also: rcn.org.uk/clinical-nurse-specialist-in-endometriosis-uk-pub-009-923</p>

<ul style="list-style-type: none"> Developing educational strategies for the general public (patients, families, employers, school age children) other health care professionals. These should include symptoms and management and supporting patients. 	
<p>Hysteroscopy This advanced skill can be incorporated into many different parts and subsections of gynaecology practice, e.g., gynaecology oncology, menstrual dysfunction.</p>	
<p>Clinical skills</p>	<p>Education available</p>
<ul style="list-style-type: none"> Nurses need a good initial education in the underlying principles of women’s health, as outlined above Undertake a nurse hysteroscopy course. 	<p>Nurse hysteroscopy course – University of Bradford, <i>Diagnostic Hysteroscopy and Therapeutic Management</i> (postgraduate certificate): bradford.ac.uk/courses/pg/diagnostic-hysteroscopy-and-therapeutic-management</p> <ul style="list-style-type: none"> This course at masters level requires practical completion of a log book and academic study, as well as building on prior learning Nurses will also need to be registered with the British Society for Gynaecological Endoscopy (BSGE), and ensure they follow the guidelines post qualification. For more information on resources for nurse hysteroscopists, visit: bsge.org.uk/resources-for-nurse-hysteroscopists
<p>Menopause The menopause happens to all women, and those who may not identify as women. The degree of impact on quality of life and the symptoms experienced are very individual. All nurses should have some understanding of the impact of menopause on health and wellbeing. The ANP role provides an opportunity for nurses to enhance skills and knowledge to become a menopause specialist.</p>	
<p>Clinical skills</p>	<p>Education available</p>
<ul style="list-style-type: none"> The RCN’s <i>Nurse Specialist in Menopause</i> publication provides guidance on what this role is built upon: rcn.org.uk/Professional-Development/publications/nurse-specialist-in-menopause-uk-pub-010-335 The document outlines the pillars needed for this to develop into an ANP 	<ul style="list-style-type: none"> British Menopause Society, <i>BMS Principles and Practice of Menopause Care</i>: thebms.org.uk/education/principles-practice-of-menopause-care British Menopause Society, <i>RCOG/BMS Menopause Advanced Training Skills Module</i>: thebms.org.uk/education/rcog-bms-menopause-advanced-training-skills-module

<ul style="list-style-type: none"> • See and diagnose menopause in women including those with complex medical history and hormone dependant cancers • Manage women with menopause – lifestyle, alternatives and HRT • Be aware of contraindications • Manage and diagnosis of primary ovarian insufficiency (POI) • Lead a menopause service. 	<ul style="list-style-type: none"> • British Menopause Society, <i>IMS IMPART online learning for health care professionals</i>: thebms.org.uk/education/impart-online-learning-for-health-care-professionals • FSRH, <i>Essentials of Menopause Care</i>: fsrh.org/education-and-training/essentials-of-menopause-care/#entry-requirements • FSRH, <i>Menopause Care Professional Certificate (MCPC)</i>: fsrh.org/education-and-training/menopause-care-professional-certificate-mcpc
<p>Sexual reproductive health</p> <ul style="list-style-type: none"> • Sexual and reproductive health care is a core aspect of each gynaecology consultation and therefore, a gynaecology ANP must have an up to date, evidence informed knowledge base regardless of the specialist area they may work. There are well established pathways to further education and training for ANPs who wish to specialise in this area. • If fitting LARC (IUCD / SDI), the ANP must have completed an appropriate knowledge base and practical training programme. They must have knowledge of specific follow up requirements and potential complications of each referral pathways in case of complications. 	
<p>Clinical skills</p>	<p>Education available</p>
<ul style="list-style-type: none"> • Anatomy and physiology, including menstrual cycle individualised contraception counselling • All current methods of contraception, including common side effects • Methods of emergency contraception (EC) and local referral pathways for access to EC • Hormonal contraceptives are used / licenced to treat menstrual disorders / provide progesterone arm of HRT • FGM and referral pathways • Termination of pregnancy pathways. 	<ul style="list-style-type: none"> • FSRH - <i>Letters of competence in IUD and SDI fitting and removal</i>. This involves a fee - an online theory assessment and securing a faculty registered trainer for practical training and assessment: fsrh.org/education-and-training/menopause-care-professional-certificate-mcpc • If considering the hysteroscopy course in Bradford, IUD insertion is part of this programme, however SDIs are not addressed and need a separate qualification (see below) • FSRH offers specialist skills modules for ANPs who specialise in sexual and reproductive health (abortion care/ menopause) • All ANPs who prescribe hormonal contraception should be familiar with the UKMEC. Eligibility criteria: srh.org/standards-and-guidance/uk-medical-eligibility-criteria-for-contraceptive-use-ukmec

Ultrasound

Ultrasound scanning can be a very useful diagnostic tool for many gynaecological conditions. It is often readily available (and therefore generally cost effective) and has an excellent safety record. In gynaecological settings, both transabdominal and transvaginal routes are used frequently. Occasionally transrectal may be of use.

Ultrasound can be utilised in emergency gynaecology departments for conditions such as ectopic pregnancy or ovarian torsion, which are time critical. In these settings, nurse practitioners are well placed to perform scans, as they understand the patient pathway and can immediately inform and counsel a patient regarding next steps.

Clinical skills	Education available
<ul style="list-style-type: none"> • Early pregnancy (diagnosis and management of intrauterine, or ectopic, pregnancy, miscarriage, ectopic and molar pregnancy) • Termination of pregnancy services (for the above reasons and for dating a pregnancy) • Menstrual dysfunction (diagnosis of fibroids, polyps, adenomyosis etc) • Endometriosis (diagnosis and surgical planning) • Gynaecology-oncology (diagnosis of causes of postmenopausal bleeding / ovarian cyst characterisation) • Fertility (follicle tracking etc) • Paediatric gynaecology (diagnosis of differences in sex development i.e., Mayer-Rokitansky-Küster-Hauser (MRKH syndrome)) • Sexual health - locating “lost” IUDs/SDIs • Pelvic pain • Emergency gynaecology. 	<p>The authors recommend a postgraduate certificate in ultrasound in terms of clinical expertise, which should be accredited by the Consortium for the Accreditation of Sonographic Education (CASE). However, often more specialist diagnostic skills (such as diagnosing endometriosis) are not taught specifically, and practitioners may need to seek opportunities to shadow other specialists to learn such skills.</p>

Urogynaecology

Pelvic floor dysfunction is a common condition experienced by many women, with some suffering with pelvic organ prolapse. Correct assessment and management of these patients is essential in improving quality of life for those suffering. Straightforward treatments can improve symptoms significantly. Close MDT links are often forged between urogynaecologists, urologists, colorectal surgeons, and pelvic health physiotherapists to discuss and manage more complex conditions affecting the pelvic floor.

Pelvic floor dysfunction is a common condition experienced by many women, with 6% in their 20s experiencing symptoms, increasing to 40% of women in their 60s (Okeahialam, NA et al., (2022)). Correct assessment and management of these patients is essential in improving quality of life for those suffering, and effective treatments can significantly improve symptoms.

There is no set pathway for those wanting to develop their understanding of urogynaecology, however, there are increasing numbers of courses available as the topic is discussed more widely, and more become aware of the significant impact that pelvic floor dysfunction has on quality of life. Urogynaecology patients can be treated and managed by an advanced nurse practitioner.

Clinical skills	Education available
<ul style="list-style-type: none"> • Non-medical prescribing • Assessing - pelvic organ prolapse, continence issues, pelvic floor dysfunction • Pelvic floor assessment and exercises • Assessing and managing pelvic organ prolapse • Assessing and managing urinary incontinence - stress incontinence, overactive bladder • Intermittent self-catheterisation teaching • Bladder scanning • MDT work - urogynaecology and pelvic floor • Flexible cystoscopies, botox, bulking injections • Pessary fitting and management • General continence advice - bladder retraining, fluid advice, bowel management • Management of third-degree tears • Collaboration with pelvic health physiotherapists and the wider pelvic floor team 	<ul style="list-style-type: none"> • North Bristol NSH Trust, <i>Basic Urodynamic Course</i>: nbt.nhs.uk/bristol-urological-institute/bui-education/urodynamic-courses/basic-urodynamics-course • UKCS/POGP, <i>UK clinical guideline for best practice in the use of vaginal pessaries for pelvic organ prolapse</i> (pdf): ukcs.uk.net/resources/Documents/Pessary • The British Association of Urological Surgeons, <i>Flexible Cystoscopy Guidelines & Assessment</i>: baus.org.uk/professionals/baus_business/publications • The Pelvic Floor Society, <i>Education and Training Portfolio</i>: thepelvicfloorsociety.co.uk/training-education/training-education

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|--|--|
| <ul style="list-style-type: none">• Performing urodynamics - video urodynamics and simple cystometry• Performing flow rates and residuals• Liaising with the maternity teams to help manage bladder dysfunction post delivery. | |
|--|--|

Conclusion

Developing practice as an ANP in gynaecology can be complex. Unlike some other specialties, there is no direct pathway, therefore, having a plan and looking at the role is an important first step, to ensuring that education is at masters level, and then adding on the skills that will be needed for the role. For example, ultrasound scanning may be needed in different roles such as early pregnancy, heavy menstrual bleeding (HMB) or endometriosis services.

All nurses within women's health will need the basic requirements as outlined in this publication and then, once a sub speciality is chosen, the right courses can be accessed (some examples are outlined previously in this guide) for the different roles.

It is hoped in the future this may become less complex, and for education courses that do not have masters level accreditation, a skills-based competency module at an accredited academic provider could be considered to ensure competency and skills are assessed.

Further reading and resources

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RCN quality assurance

Publication

This is an RCN competence knowledge and skills framework to support personal development and career progression.

Description

Gynaecology and women's health care has many sub-specialties, including hysteroscopy, general gynaecology, early pregnancy, emergency gynaecology, colposcopy, urogynaecology, menopause, endometriosis and gynaecology oncology. This publication has set out pathways for advanced nursing practice and advanced clinical practice roles, which will enhance clinical care, the patient experience and enable progression career development for nurses.

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