

Outpatient Attendances

Period: Jul18 - Jun19

Clinic Code	Appointment Type	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19
Gyn/EJA	New	6	<5	9	<5	<5	5	18	13	<5	<5	<5	6
	Follow-Up	30	19	20	17	17	30	25	36	24	32	16	28
GYN/EJASBH	New	<5	5	<5	11	7	20	10	6	9	7	19	12
	Follow-Up	11	12	14	26	19	18	17	18	17	16	27	26
GYNAE/NSC	New	7	23	19	20	18	9	15	9	5	6	14	<5
	Follow-Up	25	46	34	24	46	26	42	22	32	29	38	32

Where the figures are less than 5, this has been denoted by "<5". Where numbers are low we have considered that there is the potential for the individuals to be identified from the information provided. In our view disclosure of these low figures would breach one of the Data

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Years	Specialty	Total
2018	Gynaecology	11
2019	Gynaecological Oncology	<5
	Gynaecology	6
	Stroke and General Medicine	<5

Competency

COMPETENCY FRAMEWORK FOR THE INSERTION OF PESSARIES WITHIN THE NURSE LED PESSARY CLINIC.

Aim:

- The aim of this framework is to assess the registered nurses ability to safely remove, examine the patient and replace vaginal pessaries within the nurse led pessary clinic.
- The practitioner will be able to demonstrate the ability to competently assess the patient wearing a vaginal pessary including condition of the vagina, appropriate size of pessary and assessment of associated problems including: bleeding, soreness and discomfort.
- The practitioner will be able to demonstrate advanced communication skills which enable them to gain informed consent, reduce anxiety and good compliance throughout the procedure.

Entry Criteria:

- A short Gynaecology Course e.g. M & K Update 2 day Gynaecology Examination Course
- Works within the gynaecology outpatient setting
- This competency document is only for the use of the registered nurse working in the pessary clinic.
- Band 5 Registered Nurse or above

Standard:

By the end of the assessment the registered nurse should demonstrate knowledge, understanding and performance at level 4.

The registered nurse will be able to perform pessary insertion accurately and safely working within the boundaries of the nurse led pessary clinic.

Exclusions:

date 13/08/18

Review date 13/08/2020

Training Requirements: To work alongside competent senior nurse or Drs.

Assessment:

The mentor must be experienced and competent in the insertion of pessaries. The mentor will assess the registered nurses' skill at inserting five ring pessaries and five shelf pessaries using the framework set out in this document.

Reference:

Adams E et al (2004) Mechanical devices for pelvic organ prolapse in women. Cochrane database of systemic reviews 2004. (ISSN 1464-780X article no CD004010).

Bash K.L. (2000) Review of vaginal pessaries. Obstetrical and Gynaecological survey. 55 (7), 455-460.

Doshani A et al (2007) Uterine prolapse. BMJ. 355, 819-823.

Hagen S. et al (2006) Conservartive management of pelvic organ prolapse in women. Cochrane database of systemic reviews 2006. (ISSN 1464-780X article no CD003882).

McIntosh L. (2005) The role of the nurse in the use of vaginal pessaries to treat pelvic organ prolapse and/or urinary incontinence. Urology Nurse. 25 (1), 41-48.

Poma P.A. (2000) Nonsurgical management of genital prolapse: A review and recommendations for clinical practice. Journal of reproductive medicine. 45 (10), 789-797.

Shultz J.A (2001) Assessing and treating pelvic organ prolapse. Ostomy wound management. 4 (5), 54-56.

Thakar R. and Stanton S. (2002) Management of genital prolapse. BMJ. 324, 1258-1262.

Viera A.J. (2000) Practical use of the pessary. American Family Physician. 61 (9), 2719-2726.

Title

1.1 Title related to this criteria

Knowledge and Understanding Criteria

By the end of the assessment the Assistant Practitioner should demonstrate knowledge and understanding and be able to apply the following:

1.1 Title	Level of achievement	Evidence to support practice	Mentor
The Practitioner will demonstrate a working knowledge of :			
1. The clinical need /reason for a pessary.			
2. Types of pessaries available and appropriate use of each.			
3. Advantages and disadvantages of each type of pessary			
4. Methods used to assess patient for pessary sizing			
5. Female pelvic anatomy			
6. Pathology caused by pessary use			
7. When and why a pessary needs changing and appropriate follow up			
8. Advice and aftercare for patients post insertion			

date 13/08/18

Review date 13/08/2020

1.1 Title	Level of achievement	Evidence to support practice	Mentor
9. The rationale for not replacing a pessary and appropriate subsequent management			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			

date 13/08/18

Review date 13/08/2020

Performance Criteria

1.1 Title related to this criteria

By the end of the assessment the Assistant Practitioner should demonstrate performance and be able to undertake the following:

1.1 Title	Level of achievement	Evidence to support practice	Mentor
The Practitioner will demonstrate the following:			
1.			
Undertakes and documents a complete and thorough patient history			
Obtains informed consent prior to start of procedure			
Positions patient comfortably and maintains privacy and dignity at all times, offering a chaperone in keeping with the Chaperone Policy			
Uses universal precautions when carrying out direct patient care			
Competently inserts a vaginal speculum and safely removes existing pessary			
Undertakes a thorough vaginal examination taking in to account: <ul style="list-style-type: none"> • Condition of vagina • Size and condition of prolapse • Vaginal Discharge • Vaginal Bleeding 			
Competently re-inserts a new pessary where indicated with Gynest cream (unless contraindicated) choosing the correct size.			
Safely disposes of used equipment.			
Accurately records consultation in patient notes.			
Provides patient information leaflet and arranges follow up prior to patient leaving clinic			

12.			
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Direct Observation of Practice Record

Core Competency/ skill observed:

Date	Practitioner name	Mentor name
Standards description.		
Comments – in depth knowledge and understanding displayed and ability to perform role.		
Further learning objectives identified.		

Level	Description
1	Knows nothing about the skill.
2	Doubts knowledge and ability to perform the skill safely, without supervision.
3	Could perform the skill safely with supervision.
4	Confident of knowledge and ability to perform the skill safely.
5	Could teach knowledge and skills to others and can demonstrate initiative and adaptability to special problem situations.

Rating (please circle as appropriate)

1 2 3 4 5

date 13/08/2020

date 13/08/18

Review

COMPETENCY TEMPLATE Ver2 Jul 2015 Review Jul 2020

Signatures:

Practitioner		Mentor	
Please print		Please print	

(Photocopy as required.)