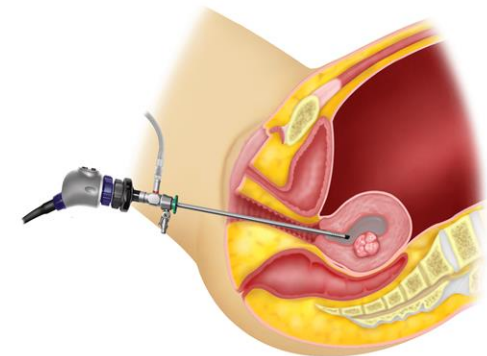
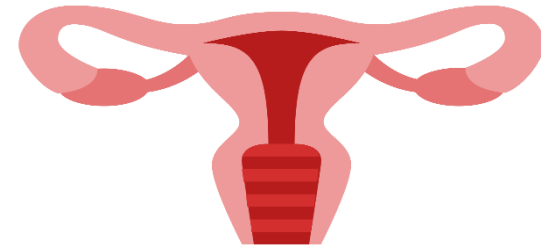


Establishing the first Nurse Hysteroscopist role in Northern Ireland

Vicky Burns
Clinical Lead Nurse-
Hysteroscopy & Colposcopy
NHSCT

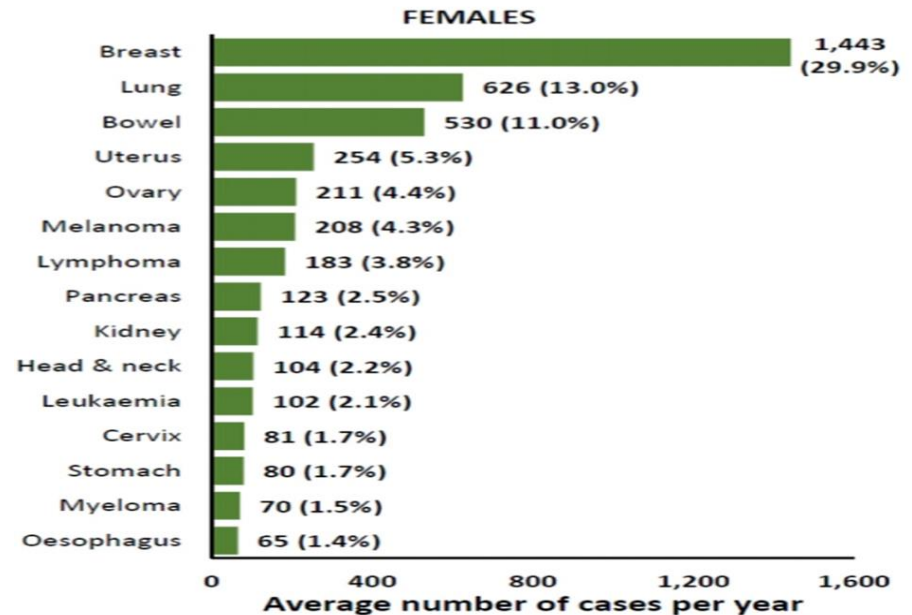
Endometrial (uterine) cancer

- The number of cancer cases diagnosed in Northern Ireland has increased by **54%** over the past 25 years and is projected to double again by 2040 Department of Health. A Cancer Strategy for Northern Ireland 2021-2031
- In females in the UK, uterine cancer is the **5th** most common cancer- around 9,700 new cases every year (2016-2018)
- The number of cases of uterine cancer in NI increased by **9.1%** from 2011-2015 to 2016-2020. (Northern Ireland Cancer Registry- Uterine Cancer)
- When diagnosed at its earliest stage, more than 9 in 10 (**92%**) people with uterine cancer will survive their disease for five years or more, compared with 3 in 20 (**15%**) people when the disease is diagnosed at the latest stage Cancer Research UK



What is the evidence?

Cancer survival is a key measure of the effectiveness of cancer services reflecting preventive initiatives such as vaccinations (HPV), screening, early detection, access to timely diagnostics and rapid and effective treatment by specialists. [\(A Cancer Strategy for Northern Ireland 2021-2031, Department of Health\)](#)



Source: Northern Ireland Cancer Registry



What is a hysteroscopy?

- Outpatient hysteroscopy is an diagnostic test
- Involves the use of miniaturised endoscopic equipment to directly visualise and examine the uterine cavity, without the need for formal theatre facilities or general or regional anaesthesia.
- Primarily in the assessment of women with abnormal uterine bleeding, but is also employed in the diagnostic work-up of reproductive problems
- Vaginoscopy or the ‘no touch’ approach to hysteroscopy refers to a technique where the hysteroscope is introduced into the vagina, through the cervical canal and into the uterine cavity without the need for a vaginal speculum or cervical instrumentation



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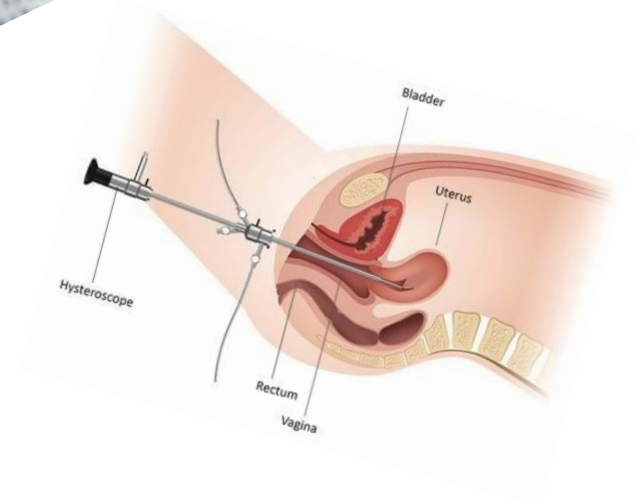
Openness & Honesty



Compassion



Hysteroscopy in action



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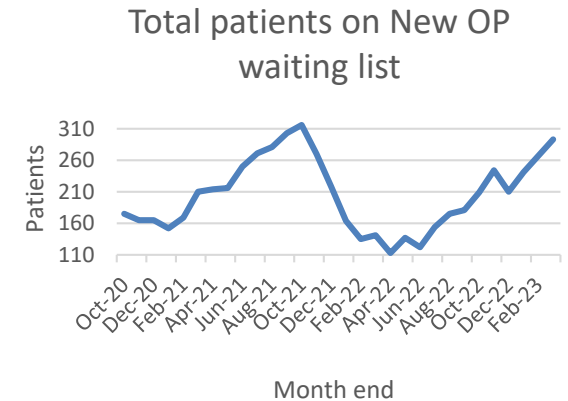
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Previous service provision

- Large number of referrals to outpatient hysteroscopy in NHSCT- demand exceeds capacity
- 3 consultants & 5 staff grades providing 9 hysteroscopy sessions per week across 2 sites
- **Large cohort of Nurse Hysteroscopist in England & Scotland. A role like this would be the 1st of its kind in Northern Ireland.**



My Motivation

My motivation is **twofold**;

- To be a visionary for nurse led services and advanced nursing practice in Northern Ireland
- To advocate for women's health and support them during vulnerable and intimate gynae procedures

Advanced nursing roles

- Evolving nurse roles to meet the increasing demands on services with ever changing diagnostics for cancer and improvement in survival- women and their families need specialist nurses to work within the MDT to guide and support them on their cancer journey ([Buckley et al, 2018](#))
- Several countries have introduced nurse endoscopists to ease the burden of demand for endoscopic procedures. A shortage of medical staff, combined with increasing demand for endoscopy has led to the implementation of this, ([Duffield et al, 2017](#))
- No sustained improvement in cancer or diagnostic waiting times, despite efforts by Trusts and others to increase capacity and access to tests. – hence the introduction of a nurse-led service in NHSCT
- A new approach needed to improve diagnostic pathways in NI. If change is not made, waiting times will continue to deteriorate, people diagnosed late, impacting the effectiveness of treatment and even survival
[Department of Health. A Cancer Strategy for Northern Ireland 2021-2031](#)



What is the evidence for Advanced nursing roles

- Advanced Nurse training is critical for the future: provides **cost-effective care** and are **highly regarded** by patients/clients. They are a constant and permanent feature of future health care provision. ([Duffield et al, 2009](#))
- Research shows that advanced specialist nurses provide care associated with **positive patient outcomes** and that these nurses add critical value across various health care settings ([Poghosyan and Maier, 2022](#))
- Nurse Hysteroscopists are proud to be part of such a pioneering project and **diversifying the traditional role of the nurse.**
- Enhancing professional nursing practice- brings a **high level of professionalism to nursing practice**; through professionalism and having a vision for nursing practice ([Lamb et al, 2018](#))
- Their work contributes to a **modern NHS**, combining advanced practice techniques with nursing by not losing the **nurse/patient relationship**. As a permanent team member I am available to the women by telephone before and after their procedure and are their named nurse throughout their episode of care

My journey within Gynaecology services

- Qualified Ultrasound Scanner- QUB 2012
- Counselling module- QUB 2011
- 2019 enrolled with University of Ulster- PG cert Non-Medical Prescribing (**Distinction awarded 2020**)
- PG cert Diagnostic hysteroscopy and Therapeutic Management (**Merit awarded 2021**)- Northern Irelands 1st & only Nurse Hysteroscopist
- Currently registered and enrolled with BSCCP and undertaking training in Colposcopy to become a fully accredited Nurse Colposcopist.

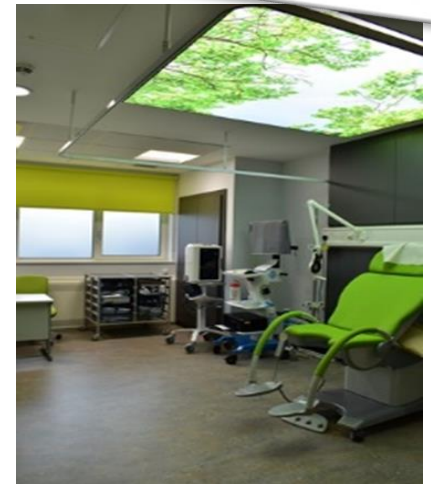


Negotiations & challenges

- Secure recurrent funding for Lead Nurse Hysteroscopist
- Funding for Support staff
- Training of support staff in an already depleted clinical area
- Prescribing challenges- Dual prescribing & administration of medicines.
- Environmental Space for additional clinics- working across 2 sites at present (new refurb opened August 2023 Antrim site)
- Additional Equipment required for Nurse-Led clinics within financial & budgetary constraints
- Support from medical team to facilitate training & accreditation in hysteroscopy & colposcopy

Tenacious

(adjective) persistence in a point of view or action – not giving up.



Development of Nurse-Led Hysteroscopy Service

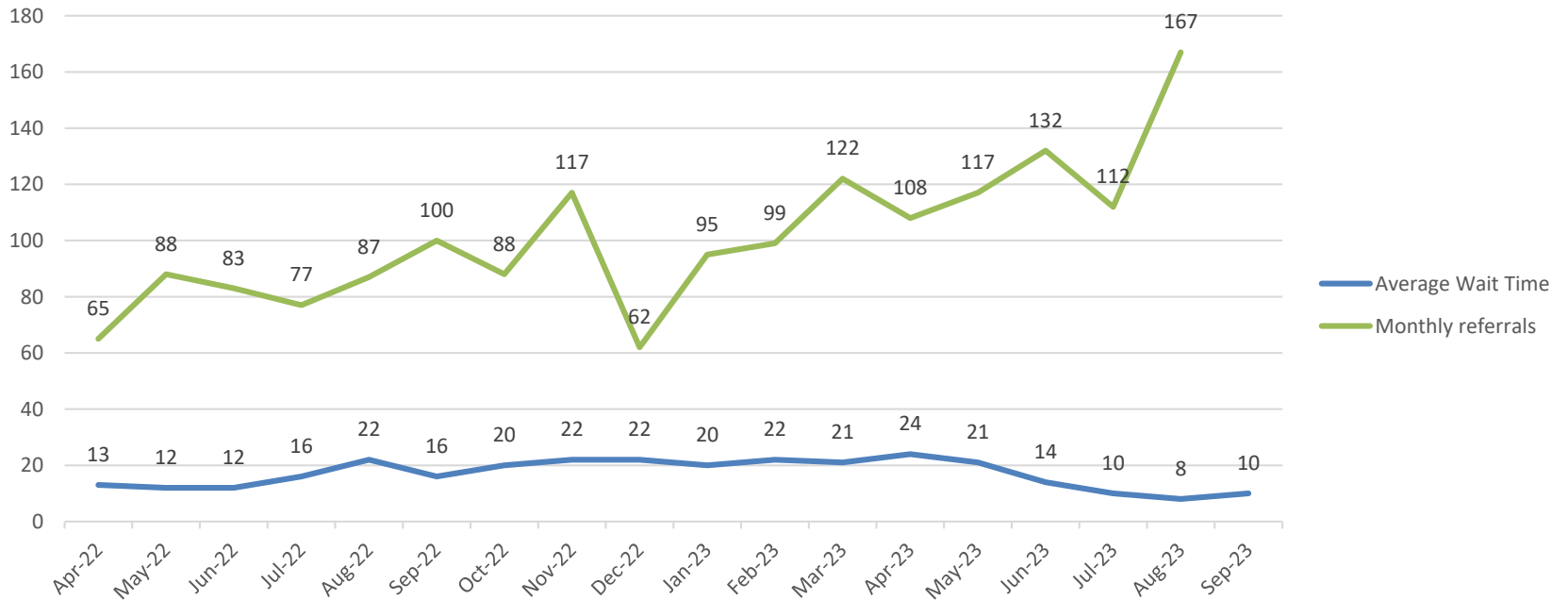
- NHSCT policy for Nurse-Led service
- New patient information leaflet- with QR codes attached.
- Local Trust Safety Checklist devised ([GPP, No.16 Pain Relief and Informed Decision Making for Outpatient Hysteroscopy](#))
- NMP Trust registration
- Risk Assessment submitted for Dual Administration and Prescription of medicines as an NMP)
- Additional 5 sessions per week for Nurse-Led service-
- support staff training & matrix devised



What has been the impact of my nurse-led service?

- Reduced waiting times with the introduction of additional nurse-led clinics
- The provision of an all-female team is highly valued during intimate exams, SA victims, ethnic minorities
- Continuity of care- women appreciate receiving their pre- and post-test counselling from the person who performs the procedure, thus combining the nurses' previous role with their new one
- Patients find it easier to talk to nurses- patient's comments have shown that nurses are more approachable
- Ability to combine a historical doctor's role with the skills of the nurse; talking to patients, offering reassurance and giving them information to allow them to make decisions.
- Having a permanent nurse in post- provides continuity & ownership of services

Average Wait Time (Days)



- 60-80 referrals per month May 2022 through to Aug 2022
- **March 2023-August 2023 122-167 referrals per month**
- Two-fold increase from May 22-August 23



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Evaluation of service

- Patient satisfaction feedback surveys- displays positive user feedback and acceptability of service, positive user feedback
- Continual audit of success/failure rates of Nurse-led hysteroscopy service
- Currently 89% in line with national figures and Trust audit of 88% (NHSCT, 2020)
- Formal audit registered for January 2024
- Pain scores evaluated for every patient- mean 5/10 (average 5/10 RCOG, OPH leaflet)

Next steps

- Development of truly one-stop clinic-morcellation training for all clinicians
- Focus on ablations & operative treatments in the outpatient setting
- Succession planning & additional opportunities for more nurse specialists to expand Nurse-Led service
- Development of Menopause Training and explore options for Nurse-Led Menopause Service
- Completion of colposcopy training (OSCEs and registration with BSCCP)- establishment of Nurse-led Colposcopy service 2024



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Final Thought

- Population of Northern Ireland on census day, 21 March 2021, was 1,903,100 people. The population comprised 967,000 females and 936,200 males, which means that for every 100 women there were 97 men (Census 2021 Population and household estimates for Northern Ireland: Statistical bulletin)
- **1,947 patients per 100,000** on the waiting list in Northern Ireland for gynaecology this is the highest compared to the rest of the UK (Left for too long: Understanding the scale and impact of gynaecology waiting lists 2022)
- by December 2021, there were more than 36,900 women on the waiting list for gynaecology in Northern Ireland, a 42% increase since the start of the pandemic.
- New data shows gynaecology waiting lists have faced the biggest increase of all medical specialities



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Available Msc & Advanced clinical practice opportunities for Nursing in NI

MSc (Critical and Acute Care)

MSc (Cancer Nursing: Supportive and
Palliative Care)

MSc (Leadership and Management)

MSc (Mental Health Care)

MSc (Care of Older People)

MSc (Midwifery Care)

MSc (Care of Children & Young People)

MSc (Intellectual Disabilities)

MSc (Practice Education)

MSc (Maternal and Family Health)

MSc Primary Care

Msc Adult Medicine & Older People

Msc Emergency Nursing

Msc Nursing

- Despite all of this, at present there are no Advanced Nursing Practice in NI Education for Gynaecology & Women's Health.
- Gynaecology services need opportunities from Education & practice development services; in line with other specialities to bridge the gap and enable Advanced Clinical Nursing Practice in Gynaecology
- This will allow both professional recognition & career progression; but for patients & waiting lists to feel the benefit of wider Nurse-Led gynaecology services similar to the Hysteroscopy Service & model that the NHSCT have adopted.



Thank you
for
listening!



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