

Reference Number: Version Number: 2	Date of Next Review: 26 <sup>th</sup> July 2022 Previous Trust/LHB Reference Number:
<b>Guideline for Nurse Practitioners Undertaking Written Consent</b>	
This guideline enables Nurse Practitioners to undertake written consent on the completion of competencies within their practice.	
<b>Objectives</b> <ul style="list-style-type: none"> <li>• To ensure patients are given all the relevant information to make informed choices</li> <li>• To enable patients to make valid decisions regarding their treatment and provide written consent for the same</li> <li>• To ensure Nurse Practitioners undertaking consent have the appropriate knowledge and skills</li> </ul>	
<b>Scope</b> This policy applies to all Gynaecology Nurse Practitioners undertaking consent	
<b>Equality Health Impact Assessment</b>	<i>An Equality Health Impact Assessment (EHIA) has not been completed.</i>
<b>Documents to read alongside this Procedure</b>	<i>Cardiff and Vale UHB Consent to Examination or Treatment Policy</i>
<b>Approved by</b>	<i>Gynaecology Professional Forum &amp; Q&amp;S</i>

<b>Accountable Executive or Clinical Board Director</b>	<i>Ruth Walker, Executive Nurse Director</i>
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<p><b><u>Disclaimer</u></b>  If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or the <a href="#">Governance Directorate</a>.</p>	

<b>Summary of reviews/amendments</b>
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<b>Version Number</b>	<b>Date of Review Approved</b>	<b>Date Published</b>	<b>Summary of Amendments</b>
2		09/04/2019	

Consent is defined as “permission for something to happen or agreement to do something” (Oxford English Dictionary). In relation to health care, it is a general legal and ethical principle that valid consent must be obtained before commencing an examination, starting treatment or physical investigation, or providing care. This principle reflects the rights of a person to determine what happens to their own bodies or what shapes the care and support they receive. It is fundamental to good practice. The Nursing and Midwifery Council (NMC) professional practice document for nurses and midwives, The Code (NMC, 2015a) states that registered nurses must:

(4.1) “balance the need to act in the best interests of all people at all times with the requirement to respect a person’s right to accept or refuse treatment”, and

(4.2) “make sure that you get properly informed consent and document it before carrying out any action”.

Registered nurses who do not respect this principle may be liable to both legal action by the person in their care and action by the NMC. The requirement to gain consent has two purposes, one legal and the other clinical (Richardson V, 2013). The legal purpose is to provide those delivering treatment with a

defence to a criminal charge of assault or battery or a civil claim for damages for trespass to the person. The clinical purpose comes from the fact

that in most cases the co-operation of the person and the person’s confidence in the treatment is a major factor in their consenting to the examination, treatment or physical investigation, or the provision of care.

## **Valid Consent**

For consent to be valid, it must be given voluntarily and freely, without pressure or undue influence, by an appropriately informed person who has the capacity to consent to the intervention in question. Some people may feel pressurised, by relatives or carers for example, to accept a particular investigation or treatment. Registered nurses should be aware of this, and of other situations in which people might be vulnerable, for example, those resident in a care home, or in prison. In these situations it is essential to ensure that the person has considered the available options and has voluntarily reached their own fully informed

## **Informed Consent**

Several recent and less recent judicial reviews and rulings by the Supreme Court have confirmed that the need for “informed consent” is a legal requirement (Montgomery v Lanarkshire Health Board [2015]). Many interventions are not a simple “yes/no” situation; it is not enough to provide adequate information to ensure consent for the examination, treatment and/or care. Sufficient evidence-based information must be provided to the person to enable them to make a balanced and informed decision about their care and treatment. As well as a general explanation of the procedure there is also a duty to explain the risks inherent in the procedure and the risks inherent in refusing the procedure. Information must also be provided regarding alternatives to the proposed intervention. This will assist the person to make the decision to consent to, or refuse consent for a particular intervention, whilst respecting their right to autonomously decide what happens to them. Failing to meet this legal duty can give rise to an action in negligence if the person is subsequently harmed.

## **Capacity to Consent**

The ability to make decisions independently is often referred to as “having capacity”. Principles underpinning UK mental health legislation and mental capacity legislation support “assumption of capacity”; that is, adults are presumed to have the ability to independently make decisions about and decide whether to agree to or refuse any aspect of their care, treatment and/or support. A person who has capacity is able to provide or withhold consent for examination, treatment and/or care. If an adult makes a voluntary and appropriately informed decision to refuse care, treatment and/or support, then registered nurses must respect this decision.

All practitioners obtaining consent must have completed the online training package every three years. This is accessed via the LED page on CAV web. This policy should be read in conjunction with the UHB Consent to Examination and Treatment policy

<http://www.cardiffandvaleuhb.wales.nhs.uk/sitesplus/documents/1143/Consent%20Policy%20draft%20Jan%202016.pdf>

# Directorate of Obstetrics & Gynaecology

## Nurse Practitioner Competencies

### 1. Hysteroscopy

Definition: Taking consent from patients for procedures the Nurse Hysteroscopist can undertake without supervision.

#### STATEMENT OF NEED

Informed consent is an important ethical concept and a legal requirement for good health care. As Nurses roles have expanded to meet patient's needs the need for Specialist nurses to obtain informed consent from individuals in their care has arisen.

For consent to be valid, the patient must:

- be competent to take the particular decision;
- have received sufficient information to take it; and
- not be acting under duress.

The role of the Nurse Hysteroscopist involves performing hysteroscopy, Mirena IUS insertion and removal, & cervical polypectomy in the outpatient and theatre setting.

As the health professional carrying out a procedure is ultimately responsible for ensuring that the patient is genuinely consenting to what is being done and it is they who will be held responsible in law if this is challenged later, the Nurse Hysteroscopist is required to obtain consent for the above procedures.

#### INDICATIONS

The patient is entitled to receive sufficient information, in a way they can understand about the proposed examination and/or treatment and any substantial risks and/or complications.

The Nurse Hysteroscopist has the responsibility to provide adequate, relevant information in an appropriate way, at an appropriate time to the patient to enable them to make an informed, balanced judgement regarding consent to examination and/or treatment.

#### CONTRAINDICATIONS

The competent adult has the legal right to give or withhold consent to examination or treatment. The Nurse Hysteroscopist should only obtain consent for procedures they are undertaking themselves.

## LIMITATIONS TO PRACTICE

In accordance with the NMC Code (2018) the Nurse Hysteroscopist will:

- Acknowledge any limitations in her knowledge and competence and decline any duties and responsibilities unless able to perform them in a safe and skilled manner.
- Abide by the NMC Code for records and record keeping
- The Nurse Hysteroscopist will abide by the Cardiff and Vale University Health Board Policy for Consent for examination and treatment (2018), and following the Guidance in the Directorate Guidelines for Gynaecology nurses and midwives taking consent

## CRITERIA FOR COMPETENCE

Registered Nurse maintained by the NMC

Registered Nurse Hysteroscopist with the British Society of Gynaecological Endoscopists (BSGE)

BSGE accredited advanced Nurse Hysteroscopy training.

Clinical supervisor assessment of competency

Completion of the Trust Pro forma for Delegation of Consent by the Consultant in charge to another Healthcare Professional.

## PROTOCOL AND SKILLS AUDIT

Competency regularly assessed by designated Consultant.

## CLINICAL INCIDENT REPORTING & MANAGEMENT

Any clinical incidents will be reported as per hospital policy and discussed at the gynaecology risk management meeting where any appropriate action will be agreed, implemented and evaluated.

## CRITERIA FOR COMPETENCE:

End Competence: To be confident and competent to undertake the responsibility of obtaining informed consent for procedures performed by the Nurse Hysteroscopist

Name of Practitioner: .....

Name of Supervisor: .....

Designation of Supervisor: .....

<b>Element of Competence to be Achieved</b>	<b>Date Achieved</b>	<b>Practitioner signature</b>	<b>Supervisor signature</b>
Demonstrate extensive knowledge of hysteroscopy, Mirena IUS insertion and removal, & cervical polypectomy			
Demonstrate ability to communicate with patients as an advanced practitioner			
Be able to discuss the procedure, complications and risks to patients			
Demonstrate knowledge and understanding of the Trust policy for consent			
Demonstrate ability to competently complete the trust consent form			
Demonstrate understanding of the importance of accurate record keeping as a foundation of care			
Demonstrate knowledge and understanding of the risk management process			
Demonstrate knowledge and understanding of the audit process			
Be able to demonstrate the method in place to audit the			

Nurse Hysteroscopist's ability to undertake the responsibility of obtaining informed consent			
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## DECLARATION OF APPROVAL FOR EXTENDED PRACTICE

I declare that I have expanded my knowledge and skills and undertake to practice with accountability for my decisions and actions.

I have read and understood the Guidance: The Directorate of Obstetrics and Gynaecology, Guidelines for Gynaecology Nurses and Midwives Undertaking Patient Consent and I am aware of further reference to the Cardiff and Vale University Health Board for Consent for Examination and treatment policy (2018)

Signature of Nurse: .....

Date: .....

I declare that I have supervised.....

Designation.....and found her/him to be competent as  
judged by the criteria for.....

Signature of Clinical Supervisor/Assessor.....

Designation of Clinical Supervisor .....

Date: .....



## EVIDENCE OF SUPERVISED PRACTICE

It is the responsibility of the Nurse Practitioner to undertake supervised practice in order to confidently and competently undertake the responsibility of obtaining informed consent for hysteroscopy and procedures related to this.

Date	Details of Procedure	Comments	Observed By	Signature

**A copy of this record should be placed in the Nurse's Midwives Personal file and a copy retained by the individual for their professional portfolio.**

# Directorate of Obstetrics & Gynaecology

## Nurse Practitioner Competencies

### 2 Termination of Pregnancy

Definition: Taking consent from patients for the procedure of Termination of Pregnancy, the Nurse Practitioner can undertake without supervision.

#### STATEMENT OF NEED

Informed consent is an important ethical concept and a legal requirement for good health care. As nurses' roles have expanded to meet patient's needs the need for specialist nurses to obtain informed consent from individuals in their care has arisen.

For the consent to be valid, the patient must:

- be competent to take the particular decision;
- have received sufficient information to take it; and
- not be acting under duress.

As the health professional carrying out a procedure is ultimately responsible for ensuring that the patient is genuinely consenting to what is being done and it is they who will be held responsible in law if this is challenged later, the Nurse Practitioner is required to obtain consent for termination of pregnancy.

#### INDICATIONS

The patient is entitled to receive sufficient information, in a way they can understand about the proposed examination and/or treatment and any substantial risks and/or complications.

The Nurse Practitioner has the responsibility to provide adequate, relevant information in an appropriate way, at an appropriate time to the patient to enable them to make an informed, balanced judgement regarding consent to examination and/or treatment.

#### CONTRAINDICATIONS

The competent adult has the legal right to give or withhold consent to examination or treatment.

#### LIMITATIONS TO PRACTICE

In accordance with the NMC Code (2018), the Nurse Practitioner will:

Acknowledge any limitations in her knowledge and competence and decline any duties and responsibilities unless able to perform them in a safe and skilled manner. Refer to the relevant consultant when situations occur that are complex relating to the pregnancy.

Abide by the NMC Code guidance for records and record keeping

The Nurse Practitioner will abide by the Cardiff and Vale University Health Board Policy for Consent for examination and treatment (2018) and following the Guidance in the Directorate Guidelines for Gynaecology nurses and midwives taking consent

**CRITERIA FOR COMPETENCE**

Registered Nurse maintained by the NMC  
Clinical supervisor assessment of competency  
Completion of the Trust Pro forma for Delegation of Consent by the Consultant in charge to another Healthcare Professional.

**PROTOCOL AND SKILLS AUDIT**

Competency regularly assessed by designated Consultant.

**CLINICAL INCIDENT REPORTING & MANAGEMENT**

Any clinical incidents will be reported as per hospital policy and discussed at the risk management meeting where any appropriate action will be agreed, implemented and evaluated.

**CRITERIA FOR COMPETENCE:**

End Competence: To be confident and competent to undertake the responsibility of obtaining informed consent for the termination of pregnancy.

Name of Practitioner: .....

Name of Supervisor: .....

Designation of Supervisor: .....

<b>Element of Competence to be Achieved</b>	<b>Date Achieved</b>	<b>Practitioner signature</b>	<b>Supervisor signature</b>
Demonstrate extensive knowledge of the management of unwanted pregnancies including, medical abortion, early medical abortion, surgical abortions including vacuum aspiration under local anaesthetic			
Demonstrate ability to communicate with patients as an advanced Practitioner in the sensitive manner required for this procedure			
Be able to discuss the procedure, complications and risks to patients			
Demonstrate knowledge and understanding of the Trust policy for consent			
Demonstrate ability to competently complete the trust consent form			
Demonstrate understanding of the importance of accurate record keeping as a foundation of care			
Demonstrate knowledge and understanding of the risk management process			
Demonstrate knowledge and understanding of the audit process			
Be able to demonstrate the method in place to audit the Nurse Practitioner's ability to undertake the responsibility of obtaining informed consent			

## DECLARATION OF APPROVAL FOR EXTENDED PRACTICE

I declare that I have expanded my knowledge and skills and undertake to practice with accountability for my decisions and actions.

I have read and understood the Guidance: The Directorate of Obstetrics and Gynaecology, Guidelines for Gynaecology Nurses and Midwives Undertaking Patient Consent and I am aware of further reference to the Cardiff and Vale University Health Board for Consent for Examination and treatment policy (2018)

Signature of Nurse: .....

Date: .....

I declare that I have supervised.....

Designation.....and found her/him to be competent as judged by the criteria for.....

Signature of Clinical Supervisor/Assessor.....

Designation of Clinical Supervisor .....

Date: .....

## EVIDENCE OF SUPERVISED PRACTICE

It is the responsibility of the Nurse Practitioner to undertake supervised practice in order to confidently and competently undertake the responsibility of obtaining informed consent for hysteroscopy and procedures related to this.

Date	Details of Procedure	Comments	Observed By	Signature


**Directorate of Obstetrics & Gynaecology  
Nurse Practitioner Competencies**

**3 Gynaecological Surgery**

Definition: Taking consent from patients listed for gynaecological procedures under general anaesthetic and local anaesthetic within Cardiff and Vale University Health Board.

To include:

- Laparoscopic see and treat
- Laparoscopic adhesiolysis
- Laparoscopic excision of endometriosis
- Laparoscopic excision of recto-vaginal endometriosis
- Laparoscopic bilateral salpingo-oophorectomy
- Laparoscopic bilateral oophorectomy
- Laparoscopic myomectomy
- Laparoscopic salpingectomy
- Laparoscopy and dye
- Laparoscopically assisted vaginal hysterectomy
- Vaginal hysterectomy
- Pelvic floor repair
- Cystoscopy
- Hysteroscopy and biopsy
- Hysteroscopy and polypectomy
- Transcervical resection of polyp/ endometrium/ fibroid
- Insertion of Mirena
- Thermal balloon ablation

## **STATEMENT OF NEED**

Informed consent is an important ethical concept and a legal requirement for good health care. As Nurses roles have expanded to meet patient's needs the need for specialist nurses to obtain informed consent from individuals in their care has arisen.

For the consent to be valid, the patient must:

- be competent to take the particular decision;
- have received sufficient information to take it; and
- not be acting under duress.

A significant part of the First Assistant/ Surgical Assistant role is within the Team of Mr Penketh, Mr Griffiths & Mr Shamsuddin. To support this role the Nurse Practitioner must have extensive knowledge and experience of the benefits and potential complications of the procedures listed above.

## **INDICATIONS**

The patient is entitled to receive sufficient information, in a way they can understand about the proposed examination and/or treatment and any substantial risks and/or complications. The surgical team has the responsibility to provide adequate, relevant information in an appropriate way, at an appropriate time to the patient to enable them to make an informed, balanced judgement regarding consent to examination and/or treatment.

## **CONTRAINDICATIONS**

The competent adult has the legal right to give or withhold consent to examination or treatment.

The Nurse Practitioner/ First Assistant should only take consent for the procedures listed above and under the auspice of the team with which they are permanently placed.

## **LIMITATIONS TO PRACTICE**

In accordance with the NMC Code (2018) the Nurse Practitioner/ First Assistant will:

Acknowledge any limitations in her knowledge and competence and decline any duties and responsibilities unless able to perform them in a safe and skilled manner.

Abide by the NMC Code guidance for records and record keeping

The Nurse Practitioner/ First Assistant will abide by the Cardiff and Vale University Health Board Policy for Consent for examination and treatment, (2018) and follow the Guidance in the Directorate Guidelines for Gynaecology nurses and midwives taking consent

## **CRITERIA FOR COMPETENCE**

Registered Nurse maintained by the NMC

Actively performing as First Assistant

Clinical supervisor assessment of competency

Registered with NAASP  
 Completion of the Trust Pro forma for Delegation of Consent by the  
 Consultant in charge to another Healthcare Professional.

**PROTOCOL AND SKILLS AUDIT**

Competency regularly assessed by designated Consultant.

**CLINICAL INCIDENT REPORTING & MANAGEMENT**

Any clinical incidents will be reported as per hospital policy and discussed at the gynaecology risk management meeting where any appropriate action will be agreed, implemented and evaluated.

**CRITERIA FOR COMPETENCE:**

End Competence: To be confident and competent to undertake the responsibility of obtaining informed consent for procedures to be performed within the perioperative environment

Name of Practitioner: .....

Name of Supervisor: .....

Designation of Supervisor: .....

<b>Element of Competence to be Achieved</b>	<b>Date Achieved</b>	<b>Practitioner signature</b>	<b>Supervisor signature</b>
Demonstrate extensive knowledge of laparoscopic and vaginal procedures			
Demonstrate ability to communicate with patients as an advanced Practitioner in the sensitive manner required for this procedure			



Be able to discuss the procedure, complications and risks to patients			
Be able to accurately discuss potential risk of visceral injury, infection, thrombosis and haemorrhage.			
Demonstrate knowledge and understanding of the Trust policy for consent			
Demonstrate ability to competently complete the trust consent form			
Demonstrate understanding of the importance of accurate record keeping as a foundation of care			
Demonstrate knowledge and understanding of the risk management process			
Demonstrate knowledge and understanding of the audit process			
Be able to demonstrate the method in place to audit the Nurse Practitioner's ability undertake the responsibility of obtaining informed consent			

## DECLARATION OF APPROVAL FOR EXTENDED PRACTICE

I declare that I have expanded my knowledge and skills and undertake to practice with accountability for my decisions and actions.

I have read and understood the Guidance: The Directorate of Obstetrics and Gynaecology, Guidelines for Gynaecology Nurses and Midwives Undertaking Patient Consent and I am aware of further reference to the Cardiff and Vale University Health Board for Consent for Examination and treatment policy (2018)

Signature of Nurse: .....

Date: .....

I declare that I have supervised.....

Designation.....and found her/him to be competent as judged by the criteria for.....

Signature of Clinical Supervisor/Assessor.....

Designation of Clinical Supervisor .....

Date: .....

## EVIDENCE OF SUPERVISED PRACTICE

It is the responsibility of the Nurse Practitioner to undertake supervised practice in order to confidently and competently undertake the responsibility of obtaining informed consent for laparoscopic and gynaecological surgery and procedures related to this.

Date	Details of Procedure	Comments	Observed By	Signature


**A copy of this record should be placed in the Nurse’s Midwives Personal file and a copy retained by the individual for their professional portfolio.**

**Directorate of Obstetrics & Gynaecology  
Nurse Practitioner Competencies**

**Management of Miscarriage**

Definition: Taking written consent from patients for management of miscarriage

**STATEMENT OF NEED**

Informed consent is an important ethical concept and a legal requirement for good health care. As Nurses roles have expanded to meet patient’s needs the need for specialist nurses to obtain informed consent from individuals in their care has arisen.

For the consent to be valid, the patient must:

- be competent to take the particular decision;
- have received sufficient information to take it; and
- not be acting under duress.

**INDICATIONS**

The patient is entitled to receive sufficient information, in a way they can understand about the proposed examination and/or treatment and any substantial risks and/or complications.

The Nurse Practitioner has the responsibility to provide adequate, relevant information in an appropriate way, at an appropriate time to the patient to enable them to make an informed, balanced judgement regarding consent to examination and/or treatment.

### **CONTRAINDICATIONS**

The competent adult has the legal right to give or withhold consent to examination or treatment.

### **LIMITATIONS TO PRACTICE**

In accordance with the NMC Code (2018) the Nurse Practitioner will:

Acknowledge any limitations in her knowledge and competence and refer to the relevant consultant when situations occur that are complex relating to the pregnancy.

Abide by the NMC Code for records and record keeping

The Nurse Practitioner will abide by the Cardiff and Vale University Health

Board Policy for Consent for examination and treatment (2018), and following the Guidance in the Directorate Guidelines for Gynaecology nurses and midwives taking consent

### **CRITERIA FOR COMPETENCE**

Registered Nurse maintained by the NMC

Clinical supervisor assessment of competency

Completion of the Trust Pro forma for Delegation of Consent by the Consultant in charge to another Healthcare Professional.

### **PROTOCOL AND SKILLS AUDIT**

Competency regularly assessed by designated Consultant.

### **CLINICAL INCIDENT REPORTING & MANAGEMENT**

Any clinical incidents will be reported as per hospital policy and discussed at the gynaecology risk management meeting, where any appropriate action will be agreed, implemented and evaluated.

### **CRITERIA FOR COMPETENCE:**

End Competence: To be confident and competent to undertake the responsibility of obtaining informed consent for procedures to be performed within the perioperative environment

Name of Practitioner: .....

Name of Supervisor: .....

Designation of Supervisor: .....

<b>Element of Competence to be Achieved</b>	<b>Date Achieved</b>	<b>Practitioner signature</b>	<b>Supervisor signature</b>
Demonstrate extensive knowledge of the management of miscarriage including, medical management (at home and in hospital), surgical evacuation of retained products and vacuum aspiration of retained products (local anaesthetic)			
Demonstrate the ability to communicate with patients as an advanced practitioner in the sensitive manner required for this procedure			
Be able to discuss the procedure, complications and risks to patients			
Demonstrate knowledge and understanding of the Trust policy for consent			
Demonstrate ability to competently complete the trust consent form			
Demonstrate understanding of the importance of accurate record keeping as a foundation of care			
Demonstrate knowledge and understanding of the risk			

management process			
Demonstrate knowledge and understanding of the audit process			
Be able to demonstrate the method in place to audit the Nurse Practitioners ability undertake the responsibility of obtaining informed consent			

**DECLARATION OF APPROVAL FOR EXTENDED PRACTICE**

I declare that I have expanded my knowledge and skills and undertake to practice with accountability for my decisions and actions.

I have read and understood the Guidance: The Directorate of Obstetrics and Gynaecology, Guidelines for Gynaecology Nurses and Midwives Undertaking Patient Consent and I am aware of further reference to the Cardiff and Vale University Health Board for Consent for Examination and treatment policy (2018)

Signature of Nurse: .....

Date: .....

I declare that I have supervised.....

Designation.....and found her/him to be competent as judged by the criteria for.....

Signature of Clinical Supervisor/Assessor.....

Designation of Clinical Supervisor .....

Date: .....

## EVIDENCE OF SUPERVISED PRACTICE

It is the responsibility of the Nurse Practitioner to undertake supervised practice in order to confidently and competently undertake the responsibility of obtaining informed consent for miscarriage and procedures related to this.

Date	Details of Procedure	Comments	Observed By	Signature

**A copy of this record should be placed in the Nurse's Midwives Personal file and a copy retained by the individual for their professional portfolio.**