



The role of the Nurse and abortion

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Abortion and nurses

- Currently nurses do not perform abortion in England, Wales or Scotland
- Some colleagues have argued that this is a misunderstanding of the 1967 Abortion Act
- We at the RCN consider 'registered medical practitioner' to be a doctor
- Legal advice sought which confirmed this opinion
- Since 1967 nurses have extended their role in so many spheres of nursing
- Prescribing medications, inserting sub dermal implants, IUDs/IUS, colposcopy's, hysteroscopy's to name a few procedures.

Nurses and Abortion

What are we asking for?

- Allow nurses to prescribe the medication needed for early medical abortion (nurses in abortion care)
- Allow nurses to be able to perform early surgical abortions (first trimester)
- Respect those nurses who have an objection to abortion
- Remove need to have two doctors signatures, does not fit in with the autonomous patient/client and often delays the process
- Fair access in a timely manner for all women
- Access to all methods of contraception including NICE LARCs regardless of where service is provided.

Abortion and nurses

Current position

- Counsel women/information sharing
- Discuss ongoing contraception
- Perform ultra sound scans to confirm gestation
- Discuss SAI's
- Take bloods if needed.
- Arrange admission for procedure
- Gain consent in many areas
- Nurses provide pre op and post op care for surgical cases and assist in theatre
- However the numbers of nurses will be few as not all nurses will want to take on abortion in the same way as not nurses want to prescribe.
- To be trained to a high standard
- To be part of the whole team with the support of a skilled doctor.
- Nurses are ideally suited for this role.
- Many have the additional skills around contraception, SAI's and counselling

Abortion and nurses – other countries ?

- Advanced practice clinicians provide medial and early abortions in some 14 states in the USA (Joffe & Yanow 2004)
- Nurses and midwives run the services in South Africa with excellent safety outcomes (Warriner et al 2004)
- The safety and welfare of the woman must be the driver

Abortion and Nurses

- Would need to be a change in the law to allow this advancement
- Training available with supervision
- All this is in place as the Faculty of Sexual and Reproductive Health and others, including the RCN have published a training module
- It will only be the small number of nurses who currently feel frustrated with the limitations and restrictions which allow them to practice within the legal framework.
- This will take time when one considers the first mention of nurse prescribing was 1986 and it took almost 20 years for change to happen.

Abortion and nurses

- Await the outcome of the Science and Technology Committee
- A lot of support for the advancement of the role of the nurse
- Needs to be driven by nurses desire to improve services and not simply because others do not want to do a procedure.
- Finally we must continue to work within the law of the land.

Abortion and nurses

/references

- Joffe. C & Yanow. S (2004) Advanced practice clinicians as abortion providers: current developments in the United States. *Reprod. Health Matters* (12) p 198-206
- Warriner, IK et al. (2006) Rates of complications in 1st trimester manual vacuum aspiration done by doctors and mid-level providers in South Africa and Vietnam. *The Lancet* 368 p 1965-72

Abortion and nurses

- Finally thank you for your attention
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