Competency Framework for Fertility Nursing

Canadian Fertility and Andrology Society and American Society for Reproductive Medicine



Canadian Fertility and Andrology Society Société canadienne de fertilité et d'andrologie



ASRM Practice Committee Approval 1/10/2020 CFAS Board of Directors Approval 03/2020

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INTRODUCTION

In a joint initiative, the Canadian Fertility and Andrology Society (CFAS) and the American Society for Reproductive Medicine (ASRM) collaborated to develop a fertility nursing competency framework along with other supporting resources. The intention of these resources is to provide a guideline to support consistent practice for nurses working in assisted reproduction. It is our hope that fertility centers and nurses will use these tools within their own practices and in combination with their own clinic-specific policies and procedures.

The CFAS is a multidisciplinary national non-profit society that serves as the voice of reproductive specialists, scientists, and allied health professionals working in the field of Assisted Reproduction in Canada. Established in 1954, the mission of the CFAS is to responsibly advance reproductive science and medicine in Canada through leadership, research and guidance.

The ASRM is a multidisciplinary organization dedicated to the advancement of the science and practice of reproductive medicine. The Society accomplishes its mission through the pursuit of excellence in education and research and through advocacy on behalf of patients, physicians, and affiliated health care providers. The Society is committed to facilitating and sponsoring educational activities for the lay public and continuing medical education activities for professionals who are engaged in the practice of and research in reproductive medicine.

PURPOSE OF THE PROGRAM:

The Competency Framework for Fertility Nursing is the first step towards development of a program that also includes Service Standards for Individuals Participating in Assisted Reproductive Care, Rights and Responsibilities of Fertility Patients, and a Learning Pathway and Orientation Guideline for nurses in fertility care.

We have submitted only the **Competency Framework for Fertility Nursing** at this time. It outlines expectations and core competencies essential for safe and effective practice as a specialized fertility nurse. Each category has a set of desired outcomes as well as subcategories and descriptors. The competencies are not tasks but behavioral actions describing *how* services are to be delivered. They are meant to be used in conjunction with an orientation program and clinic-specific practice guidelines. It is also important to note that competencies required of a generalist nurse, which prepare them for work in any setting, are an expectation for practice in addition to these specialized competencies. Generalist competencies are not included in this competency framework.



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ABBREVIATIONS:

AH = assisted hatching

FET = frozen embryo transfer

ICSI = intracytoplasmic sperm injection

IUI = intrauterine insemination

IVF = in vitro fertilization

LGBTQI2S = lesbian, gay, bisexual, transgender, queer or questioning, intersex, and two-spirit

OHSS = ovarian hyperstimulation syndrome

PGT = preimplantation genetic testing

PCOS = polycystic ovary syndrome

POI = premature ovarianinsufficiency

THE COMPETENCY FRAMEWORK FOR FERTILITY NURSING

I. COMMUNICATION

Desired <u>outcomes</u> of competent nursing communication in the fertility care environment:

- A. Care plan reflects collaboration with patient care team
- B. Professional boundaries within the therapeutic Nurse-Patient relationship have been established and maintained
- C. Patient care directives/medical orders have been communicated to the patient and patient care team
- D. Patient receives accurate and timely information
- E. Patient verbalizes an understanding of what has been communicated and is able to repeat back salient points
- F. Confidentiality and patient privacy have been maintained
- G. Patient indicates they feel supported



Communication



SUB-CATEGORIES

1. Therapeutic Relationships

Utilizes effective and appropriate communications within therapeutic relationship as well as with those within therapeutic circle of care (partners, donors, gestational carriers, intended parents, and families)

- 1.1 Creates conditions for developing trust, mutual respect, and privacy to preserve patient dignity throughout all stages of treatment process
- 1.2 Maintains empathy and compassion while preserving objectivity and professionalism
- 1.3 Obtains patient consent prior to communicating patient information outside of the therapeutic circle of care
- 1.4 Utilizes skill and judgment in handling difficult or delicate situations
- 1.5 Avoids assumptions, bias, and judgment when communicating with patients and is respectful of diverse views, traditions, sexual orientation, gender identities and expressions, and abilities
- 1.6 Empowers patients to make informed decisions and exercise autonomy
- 1.7 Collaborates with patient by listening to, understanding, and respecting patient's values, opinions, needs, and ethnocultural beliefs
- 1.8 Identifies when therapeutic relationship has been compromised and seeks to improve it
- 1.9 Adapts communication to patient's abilities, understanding, limitations and needs
- 2.0 Identifies and seeks to resolve barriers to effective communication



SUB-CATEGORIES

DESCRIPTORS

Communication

2. Interviewing

2.1 Utilizes effective interviewing skills to obtain accurate and relevant history



Elicits and synthesizes accurate and relevant information from patients (and those within therapeutic circle of care) to ensure delivery of quality patient - centered care

- 2.2 Incorporates patient's reproductive history and experiences
- 2.3 Utilizes effective interviewing skills to validate patient's level of understanding
- 2.4 Recognizes verbal and nonverbal cues

CORE COMPETENCY

SUB-CATEGORIES

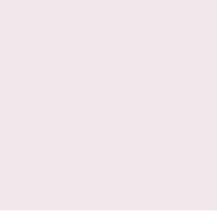
DESCRIPTORS

Communication

3. Teaching

Conveys information to patients that is timely, accurate, relevant, and within fertility nursing scope of practice

- 3.1 Sets expectations for care from the outset including introduction of the care team, mode(s) of communication, clinic-specific practices and policies related to fertility treatment, patient rights and responsibilities
- 3.2 Explains assessment (e.g., preconception counseling including carrier testing, calculating the fertile window and investigations such as assessment of ovulation, ovarian reserve testing, uterine cavity, tubal patency, genetic testing, sperm testing, retrograde protocol, pregnancy monitoring)
- 3.3 Explains diagnosis (e.g., ovulatory dysfunction such as PCOS, advanced reproductive age, POI, tubal and pelvic factor, male factor, unexplained infertility)
- 3.4 Explains treatment (e.g., cycle monitoring, IUI, IVF, ICSI, AH, PGT, FET, male factor treatment such as varicocele repair and sperm retrieval procedures)
- 3.5 Supports verbal communication with clear written material as appropriate





SUB-CATEGORIES

DESCRIPTORS

Communication

4. Documentation

4.1 Documents patient encounters in an accurate, complete, timely, and accessible manner ensuring if multiple parties are involved (i.e., donor, gestational carrier) documentation is made in the correct chart



- Documents information about patient encounter using appropriate tools to optimize clinical decision- making, patient safety, confidentiality, and privacy
- 4.2 Complies with relevant institutional, legislative, professional, and regulatory requirements
- 4.3 Utilizes documentation systems (electronic, digital, paper) to obtain and record relevant information
- 4.4 Ensures proper collection, use, and disclosure of protected health information

CORE COMPETENCY

SUB-CATEGORIES

DESCRIPTORS

Communication

5. Continuity

- Facilitates continuity of care through interprofessional collaboration
- 5.1 Contributes to a collaborative and supportive work environment
- 5.2 Maintains respectful communication with colleagues
- 5.3 Receives and provides constructive feedback with colleagues
- 5.4 Liaises with other professionals for consultation and referral
- 5.5 Prioritizes and communicates pertinent information to other members of the patient care team in a timely and accurate manner



II. SAFE AND EFFECTIVE NURSING CARE

Desired <u>outcomes</u> of safe and effective nursing care in the fertility care environment:

- A. Care delivered according to established standards, procedures, protocols, and regulatory guidelines
- B. Patients correctly identified and personal health information protected
- C. Adverse patient safety events, medication errors, and health care-associated infection prevented
- D. Risks to patient and patient care team are minimized
- E. Personal safety maintained
- F. A culture of safety is supported and maintained



SUB-CATEGORIES

DESCRIPTORS

Safe and Effective Nursing Care



1. Standards

Practices within established standards, professional specialty guidelines, and specific scope of nursing practice

- 1.1 Maintains licensure, credentialing, and certification
- 1.2 Practices within relevant statutes, rules, regulations, and legislation including nursing scope of practice, by geographic location
- 1.3 Demonstrates knowledge of professional standards of care within field of reproductive endocrinology and infertility including safe medication administration
- 1.4 Complies with established clinic practice standards, procedures, and treatment protocols
- 1.5 Adheres to Nursing Code of Ethics and involves team members as necessary on moral or ethical dilemmas
- 1.6 Adheres to privacy standards (i.e., Canada: PHIPA [Personal Health Information Protection Act]; United States: HIPAA [Health Insurance Portability and Accountability Act]



SUB-CATEGORIES

Safe and Effective Nursing Care



2. Knowledge

Reduces risk through application of clinical knowledge

- 2.1 Demonstrates understanding of normal reproductive function including anatomy, the hypothalamic-pituitary-gonadal axis, the menstrual cycle, embryo and fetal development, and pathophysiology of reproductive endocrinology and infertility
- 2.2 Demonstrates understanding of clinical and technological investigations and interventions
- 2.3 Demonstrates appropriate understanding and use of medical devices and clinical equipment
- 2.4 Demonstrates knowledge of pharmacotherapy for assisted reproduction (including cycle medications, sedation medications, antibiotics, adjunct medications), drug classes, mechanisms of action, indications, contraindications, dosage, administration, and expected patient response
- 2.5 Demonstrates appropriate understanding of assisted reproductive treatment cycle options, protocols, risks
- 2.6 Demonstrates comprehension of specialized care including pre- implantation genetic testing, third-party reproduction, LGBTQI2S care, fertility preservation, management of early pregnancy including beta hCG result interpretation, ectopic pregnancy, bereavement and loss, etc.
- 2.7 Acknowledges own limitations of knowledge and seeks clarification



Safe and Effective Nursing Care



SUB-CATEGORIES

3. Best Practice

Reduces risk through application of best practices

DESCRIPTORS

- 3.1 Recognizes and responds appropriately to rapidly changing, emergent, and untoward events (e.g., adverse medication reaction, syncope, respiratory depression, OHSS)
- 3.2 Identifies and reports errors, protocol deviations, adverse and near-miss events, and breaches of privacy
- 3.3 Delegates or assigns components of patient care to other staff where appropriate and consistent with training while maintaining supervision and continuity of care
- 3.4 Participates in process improvement initiatives
- 3.5 Pursues ongoing relevant professional development and education
- 3.6 Participates in approved research, scholarly inquiry, and development of nursing standards and policy where possible

CORE COMPETENCY

Safe and Effective Nursing Care



SUB-CATEGORIES

4. Safety

Applies health and safety practices

- 4.1 Articulates own role in delivering safe patient care
- 4.2 Educates patients of their role in safety
- 4.3 Utilizes at least two identification methods for patient, procedure, and specimen matching
- 4.4 Identifies workplace hazardous materials using national standards (i.e., Canada: WHMIS [Workplace Hazardous Materials Information System]; United States: OSHA [Occupational Safety and Health Administration])
- 4.5 Demonstrates proper waste management including biohazard and sharps disposal
- 4.6 Articulates knowledge of emergency preparedness
- 4.7 Applies infection prevention and control precautions, including situational risk assessment, hand hygiene practices, and use of personal protective equipment
- 4.8 Applies self-care strategies to avoid compassion fatigue/burnout
- 4.9 Reports unsafe practice in self or colleagues



III. TEACHING AND EDUCATION

Desired outcomes of competent nursing teaching and education in the fertility care environment:

- A. Patient has access to resources and information about their care
- B. Patient is knowledgeable about their diagnosis
- C. Patient is aware and understands treatment options, alternatives, and potential outcomes
- D. Patient understands treatment risks
- E. Patient provides informed decision-making and consent
- F. Patient adheres to treatment and medication administration instructions
- G. Patient feels prepared throughout care



Teaching and Education





SUB-CATEGORIES

1. Strategies

Prepares individualized teaching strategies

DESCRIPTORS

- 1.1 Assesses patient's/partner's readiness to learn
- 1.2 Assesses patient comprehension of their condition and treatment plan
- 1.3 Assesses patient's/partner's learning style
- 1.4 Develops teaching plan based on patient's/partner's needs, preferences, and expectations
- 1.5 Addresses barriers to learning including language barriers
- 1.6 Facilitates patient participation and autonomy

CORE COMPETENCY

Teaching and Education





SUB-CATEGORIES

2. Instruction

Provides relevant information and education at appropriate times through continuum of care

- 2.1 Utilizes clear, accurate, timely, and thorough instruction
- 2.2 Conveys plan for the teaching session to ensure patient goals are met
- 2.3 Assesses and documents patient's understanding of instructions (via teach-back method) and modifies instruction as necessary
- 2.4 Provides educational material, as appropriate, consistent with patient learning style, ability, culture, and language
- 2.5 Provides patient opportunity to demonstrate understanding
- 2.6 Ensures patient has sufficient information to facilitate informed decision-making and consent
- 2.7 Shares relevant health promotion and illness prevention information (e.g., impact of smoking and/or alcohol in pregnancy)
- 2.8 Provides education at care transition points (anticipatory guidance)



SUB-CATEGORIES

DESCRIPTORS

Teaching and Education





3. Pharmacotherapy

Educates patient about uses, sideeffects and self- administration of medications used in fertility treatment

- 3.1 Assesses patient's level of knowledge and understanding of their prescribed medications (including oral, vaginal, transdermal, and parenteral agents) and their use
- 3.2 Assesses patient capability and comfort level with self-administration of medications and delivery systems
- 3.3 Instructs patients on timing of treatment medication administration
- 3.4 Teaches and evaluates patient awareness of reportable medication side effects and adverse reactions
- 3.5 Coaches others to support and/or safely administer medications



Desired outcomes of competent patient care management in the fertility care environment:

- A. Patient receives appropriate care through assessment, planning, implementation, and evaluation of nursing care to achieve optimal outcomes
- B. Care reflects interprofessional collaboration
- C. Patient participates in planning and implementation of their care
- D. Care is continuous and comprehensive
- E. Nurse-patient relationship is the rapeutic
- F. Patient feels they have received holistic support



Patient Care Management



SUB-CATEGORIES

1. Assessment

Applies patient safety as well as occupational health and safety practices

DESCRIPTORS

- 1.1. Utilizes a systematic approach in patient assessment
- 1.2. Utilizes patient-centered interviewing skills to effectively gather relevant clinical and psychosocial information
- 1.3. Conducts assessments appropriate to patient's physical, emotional, intellectual, sexual, spiritual, and cultural background
- 1.4. Modifies assessment based on situational content and emerging information
- 1.5. Assesses patient strengths and needs for health promotion, wellness, and illness prevention

CORE COMPETENCY

Patient Care Management



SUB-CATEGORIES

2. Plan

Plan of care reflects integration and application of relevant clinical and situational knowledge

- 2.1 Utilizes clinical reasoning to interpret assessment information and plan care
- 2.2 Identifies possible systemic conditions and comorbidities
- 2.3 Collaborates with patient and patient care team to facilitate integrated and holistic care
- 2.4 Defines and communicates expected patient outcomes (e.g., patient-specific pregnancy rates)
- 2.5 Assists patients in making informed decisions
- 2.6 Adapts plan of care by incorporating new information about the patient and/or circumstances (i.e., if patient cannot come in on a certain day or is unable to tolerate a route of medication)



Patient Care Management



SUB-CATEGORIES

3. Implementation

Implementation of care plan to assist patient to meet desired goals and outcomes while managing organizational resources in a safe and fiscally responsible manner

DESCRIPTORS

- 3.1 Initiates and carries out established plan of care
- 3.2 Coordinates professional and community resources
- 3.3 Optimizes environment for physical and emotional comfort of patients and their therapeutic circle throughout care
- 3.4 Protects patient's interests through advocacy and understanding of patient's desired outcomes

CORE COMPETENCY

Patient Care Management



SUB-CATEGORIES

4. Evaluation

Evaluates progress and measures degree to which goals and desired outcomes have been achieved

- 4.1 Adapts treatment plan according to patient clinical condition, circumstances, and response to treatment
- 4.2 Provides input to team on when to continue, change, or terminate an intervention
- 4.3 Evaluates achievement of outcomes
- 4.4 Obtains and incorporates patient feedback and shares feedback with patient care team
- 4.5 Facilitates next steps of care including supporting patient through treatment discontinuation or move to donor gametes
- 4.6 Advocates for patients to ensure follow-up is appropriate, particularly in at-risk populations (e.g., egg donors)



PROCESS GUIDANCE

To guide our process, we engaged an expert in the field of competency development and referred to a variety of existing competency documents.

Competency Documents:

Canadian Association of Nurses in Oncology (2006). CANO Practice Standards and Competencies for the Specialized Oncology Nurse. Vancouver: CANO.

Canadian Pediatric Nursing Standards. (2017). Standardizing High Quality Nursing Care for Canada's Children. Accessed online at

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