Minor Surgery – The Nurse Role

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History

• Lewin Report (1970)
  – Operating Department Assistant

• Cumberlege Report (1986)
  – Nurse Practitioners

• Bevan Report (1989)
  – Multi-Skilled Theatre Practitioners
Nursing History

- The NMC Scope of Practice (1994)
- RCS Assistants in Surgical Practice (1999)
- The NHS Plan (2000)
- RCS Delivering High Quality Surgical Services for the Future (2006)
Scope of Professional Practice

- Launched in 1992
- Detailed how nurses could ‘advance roles’
- Didn’t say how!
- Opportunities!!!!!!
Professional Code of Conduct

- Purpose is to inform the professions of the standards of professional conduct required of them in the exercise of their professional accountability and practice
- 8 standards
Professional Code of Conduct

• Standard Four (7 subsections)

• As a registered nurse, midwife or specialist community public health nurse, you must co-operate with others in the team.
Professional Code of Conduct

• Standard Six (5 subsections).

• As a registered nurse, midwife or specialist community public health nurse, you must maintain your professional knowledge and competence.
What Does This Mean?

• Differing institutions interpreted the way forward differently.

• Differing levels of ‘advanced roles.’

• Advanced roles still not concretely described by the UK nursing governing body.

• No transferability.
An Approach to Setting Up A Service

- Search Governing Body Guidelines
- Trust Agreement
- Legal (Trust) Advice
- Protocols
- Supervising Consultant Ophthalmologist
- Personal Indemnity Insurance
In the Beginning

- Direct Consultant Ophthalmologist Supervision
- December 2002

- Chalazions
- Ziess
- Molls
- Papilloma
Recently

• No direct supervision

• Direct referral from GP’s & other practitioners

• Biopsies
• Electrolysis
• Cryotherapy
• Everting Sutures
• 1,2 & 3 Snips
• Punctal Cautery / Plugs
• Sebaceous Cysts
• Corneal Suture Removal
• Xanthelasma
• And Under Supervision…

• Upper Lid Blepharoplasties
• Lateral Wedge Resections
Service Impact

• Minor OP waiting list less than 4 weeks
• Theatre time / lists freed
• Consultants can consult
• Increased capacity
Benefits

• Patients seen appropriately

• Minor OP waiting list less than 4 weeks

• Seamless patient care

• Theatre time / lists freed
Benefits

- Consultants free to ‘consult’
- One point of contact & information
- Reflexive change in management & trends
- Increased capacity
Financial Impact

• First appointment costs on average £156. (AU$ 249)

• NHS Tarrif (2010) Minor Op £586. (AU$ 938)

• Follow up appointments average at £76. (AU$ 122)

• £156 + 586 + 76 = £818 (AU$ 1309)
“The challenge is how to free you from old professional turf wars, how to liberate you from the remnants of the old ways of thinking. The answer I think is to encourage a new generation of entrepreneurial nurses. Nurse prescribing sends a powerful message to the public and others that nursing is not subservient to medicine but an equal part of the healthcare team…. …let's have more nurses employing more doctors.”

John Reid (then Health Secretary) at Chief Nursing Officer’s Conference Nov 2003
The Old Days
Minor Ops Now

- Formation of Private Company
- Contracts with BUPA & Nuffield
- NHS ‘Choose & Book’ Account
- PCT Contracts
- Surgery carried out in PCT inspected and registered clinics / optometrists
- Effective Alternative to Hospital Treatment
Guidelines

- RCS ‘Delivering a high-quality surgical services for the future’ (2006)
- NMC advice sheet on Accountability
- NMC advice sheet on Advertising and sponsorship
- NMC advice sheet on Gifts and gratuities
- Department of Health (England) www.dh.gov.uk
- Community and District Nurses Association www.cdna-online.org.uk
- Community Practitioners and Health Visitors Association www.amicus-cphva.org
- Royal College of Nursing www.rcn.org.uk
- Commission for Social Care Inspection www.csci.org.uk
- Medical Defence Union
Further Information

• Royal College of Nursing (2003)

“Information for would be nurse entrepreneurs: Turning initiative into independence”
Contact

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