

# Sexual and Reproductive Health (SRH)

## Advanced Training Pathway Overview

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### Curriculum Objective

To provide a framework on which to build expert training in the knowledge, clinical skills and professional attitudes required to provide comprehensive, high level sexual and reproductive health services.

### Pathway structure

Trainees undertaking the Sexual and Reproductive Health Advanced Training Pathway must complete four mandatory and a minimum of two elective modules as detailed below.

#### Mandatory modules:

- Contraception
- Medical and Surgical Abortion
- Sexual Health (online component only)
- Essential Obstetrics and Gynaecology Skills Advanced Training Module

#### Elective modules (minimum two):

- Menopause
- Care of Vulvovaginal Conditions
- Acute Gynaecology and Early Pregnancy
- Colposcopy
- Paediatric and Adolescent Gynaecology
- Sexual Health

### Estimated length of time for completion of this pathway:

Trainees are expected to complete the training and assessment requirements for the Sexual and Reproductive Health Advanced Training Pathway over 92 weeks (FTE) of satisfactorily completed prospectively approved Advanced Training. Specific logbook and other assessment requirements detailed in the individual modules may be completed in a minimum of 46 weeks and should involve a minimum of:

#### Contraception:

- 1 consulting session per week

#### Medical and Surgical Abortion:

- 1 half-day theatre session per week or equivalent surgical encounters
- 1 consulting session per week

#### Sexual Health (mandatory online component):

- completion of the online sexual health module.

#### Elective modules (minimum two):

- 1 consulting session per week

## Appropriate training sites suitable to undertake this pathway:

Potential sites include (but are not limited to):

- Public hospitals and specialised services and facilities

Trainees undertaking this pathway should have access to the relevant services or facilities necessary to complete each module e.g.:

- For contraception: specialised contraception services including family planning clinics
- For medical and surgical abortion: specialised abortion facilities

Training sites electing to offer training for Sexual and Reproductive Health Advanced Training Pathway should be able to provide trainees with the necessary resources and clinical material to complete relevant training and assessment requirements, including:

- An appointed Training Supervisor.
- Direct supervision by consultant obstetricians and gynaecologists and/or specialist practitioners in the field with high level experience in contraception/abortion/sexual health service delivery.
- The resources available to undertake the assessments as outlined for the mandatory modules:

### **For contraception:**

- The equivalent of at least 1 supervised contraception clinic per week over 12 months

### **For medical and surgical abortion:**

- Access to at least one (1) supervised operative session per week or equivalent surgical encounters
- Access to listed procedures below:
  - Pre-abortion assessment
  - Ultrasound assessment of gestation
  - 100 surgical abortions under 14 weeks
  - Post-surgical abortion assessment and management of complications (including use of ultrasound)
  - Provision and follow up of medical abortion
  - Access to medical and/or surgical procedures after first Trimester (where access to procedures is not available, trainees should attend other services to observe)
  - Access to experience surgical abortion after 14 weeks, if necessary, at an alternative site
  - Complex surgical abortions e.g., retroverted uterus
  - Recognition of urogenital tract abnormalities and appropriate management in abortion care.
  - Participation in feticide counselling and consent, prescription of medications and ultrasound guided procedures

Training site requirements for other modules are detailed in the relevant modular content. Training in certain services or facilities is subject to the support of lead clinicians at these sites and prospective approval of the individual training program.

Where training is principally undertaken in a centre led by non-FRANZCOG clinicians, arrangements must be made for some procedural supervision to be undertaken by a suitably experienced clinician with FRANZCOG.

There is scope to individualise the program content and in particular the minimum caseload requirements depending on the supervised and recorded experience of the trainee earlier in their training.

## Terminology

RANZCOG acknowledges Aboriginal and Torres Strait Islander peoples' continuing connection to land, place, waters, and community. RANZCOG recognises the unique role of Māori as Tangata Whenua and embraces Te Tiriti o Waitangi recognising Maori as tino rangitiratanga of Aotearoa/New Zealand while embracing the three guiding principles of the Treat—Partnership, Participation and Protection. RANZCOG recognises the need to always provide culturally safe health care. RANZCOG supports and upholds the rights of women and LGBTQIA populations to have equitable access to sexual and reproductive health services. The terminology used throughout the Sexual and Reproductive Health Advanced Training Pathway documentation is “women and people”.

The pathway documentation also makes reference to “underserved” groups. In addition to LGBTQIA populations, these groups include (but are not limited to):

- Culturally and linguistically diverse (CALD) women and people
- Migrant and refugee populations
- Women and people with disabilities
- Women and people with substance use disorders
- Incarcerated women and people
- non-binary people and trans-men

## Learning competencies

The following learning competencies are common to all modules. Learning outcomes specific to individual modules are detailed in the modular content.

Professional Skills	RANZCOG Roles	TLS	Assessment
<ul style="list-style-type: none"> <li>• Demonstrate high level communication skills, including ability to adapt communication to patient’s health literacy levels and/or identify need for interpreter</li> </ul>	CM	ST	3MA 6MA
<ul style="list-style-type: none"> <li>• Work effectively within a multidisciplinary team and support the roles of colleagues from other disciplines</li> </ul>	CL	ST	3MA 6MA
<ul style="list-style-type: none"> <li>• Demonstrate a capacity to supervise and teach junior colleagues and trainees in relevant disciplines</li> </ul>	LD SC	ST	3MA 6MA
<ul style="list-style-type: none"> <li>• Willingness to assist colleagues and problem solve with difficult cases</li> </ul>	CM CL	ST	3MA 6MA
<ul style="list-style-type: none"> <li>• Recognise own competence and limitations through self-reflection and audit of practice during training, with report to be presented for assessment</li> </ul>	PF	ST	3MA 6MA
<ul style="list-style-type: none"> <li>• Demonstrate ability to recognise high risk clinical situations and manage appropriately</li> </ul>	PF	ST	3MA 6MA
<ul style="list-style-type: none"> <li>• Demonstrate understanding of patient-centred care and the steps required to ensure shared decision-making</li> </ul>	PF CL	ST	3MA 6MA
<ul style="list-style-type: none"> <li>• Demonstrate a non-judgmental approach including respect for privacy, confidentiality and social and cultural diversity.</li> </ul>	PF	ST	3MA 6MA
<ul style="list-style-type: none"> <li>• Demonstrate cultural safety in consultations with Aboriginal and Torres Strait Islander and Māori wahine and other people, and those from migrant and refugee populations</li> </ul>	PF	ST	3MA 6MA

## Assessment overview

### Online logbook

Trainees are expected to maintain their online logbook in an accurate and timely manner. The logbook reflects the academic knowledge and the clinical and procedural experience of the trainee and will be reviewed by the training supervisor at three-monthly intervals.

### Workplace-based assessments

These assessments involve direct observation of skills outlined in each competency and should be reviewed by the training supervisor at three-monthly intervals.

### Multi-source feedback

Multidisciplinary feedback involving consultants, advanced trainees, senior nursing and midwifery and clerical staff should be sought. This feedback will contribute to the assessment of all learning domains and competencies including academic knowledge, clinical skills, and professionalism. This feedback will be reviewed by the Training Supervisor during the three-month formative and six-month summative appraisals to provide constructive feedback to the trainee regarding their performance across domains.

### Teaching requirement

The teaching of knowledge and skills to junior trainees is a fundamental part of consultant practice. Actively participating in teaching and supervision is required to meet a sufficient level of competence across professionalism domains. It is expected that Advanced Trainees in this pathway will participate in at least 20 hours of teaching activities per year of pathway training. This may take various forms including presentations at unit meetings, medical student or multidisciplinary tutorials, trainee teaching sessions and presentation at Grand Rounds.

### Research requirement

Research is an essential component to the development of an evidence-based practice and provides a foundation for continued learning throughout the trainee's careers as an obstetrician and gynaecologist. Trainees in this Advanced Training Pathway are expected to complete a research project, which must be accepted as satisfactory by the College by the end of the advanced training pathway. This requirement may take one of various forms, including but not limited to:

- A literature review: comprehensive summary of previous research on a topic in sexual and reproductive health that surveys scholarly articles and enumerates, describes, summarizes, objectively evaluates, and clarifies previous research in the chosen topic.
- Clinical audit: an evaluation of a current service or system in sexual and reproductive health care
- Research proposal: an extensive plan for research that could form the basis of a grant proposal or research ethics submission, including the aims, literature overview, study design and implications of the study.

### Three-monthly formative appraisal

The Formative Appraisal Report must be completed at the three-monthly stage of every six-month period. The online form is to be used for all trainees. The appraisal document is an important record of the trainee's performance and progress. All Three-monthly Formative Appraisals are conducted online through the online portfolio My. RANZCOG.

### Six-monthly summative appraisal

The Summative Appraisal Report must be completed at the six-monthly stage of each training period. The online form is to be used for all trainees. The appraisal document is an important record of the trainee's performance and progress. All Six-monthly Summative Appraisals are conducted online through the online portfolio My. RANZCOG.

## Glossary of terms

RANZCOG Roles	
ME	Medical Expert
CM	Communicator
CL	Collaborator
LD	Leader
HA	Health Advocate
SC	Scholar
PF	Professional

Teaching and Learning Strategies	
TLS	Teaching and Learning Support
eLM	eLearning module
ST	Supervised Training
HEP	Hospital Education Program (include here any hospital meetings, case reviews etc. that would be relevant)
RP	Research Project

Assessments	
LB	Logbook
3MA (Formative)	3 monthly assessment All ATMs are required to include a regular in-training appraisal, conducted 3 monthly, to be undertaken by the Training Supervisor. This should provide an opportunity to discuss aspects of the training and assessment that have been undertaken within the 12-week period of training
6MA (Summative)	6 monthly assessment All ATMs are required to include a regular in-training assessment, conducted 6 monthly, to be undertaken by the Training Supervisor. This should provide an opportunity to discuss aspects of the training and assessment that have been undertaken within the 6-month period of training
TSR	Training Supervisor Reports
DOPS	Directly Observed Procedural Skills
MSF	Multi Source Feedback
CBD	Case-based discussion
MSF	Multi Source Feedback
APSS	Assessment of Procedural Surgical Skills

## Version Register

Version	Date of Version	Pages revised / Brief Explanation of Revision
1	Nov 2022	Creation