

# Advanced Training Pathway: SRH

Mandatory Module 1: Contraception

### 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 contraception services.

### **Learning Outcomes**

At completion of the Contraception module the trainee should have demonstrable academic, clinical, and professional skills relevant to comprehensive contraceptive consultation and service delivery, to evidence-based standards, in the context of broader sexual and reproductive healthcare.

The trainee is expected to be able to:

- Conduct contraceptive consultations taking account of the broader social and medical needs of each
  patient, to jointly make and implement an appropriate contraceptive management plan, acceptable to the
  patient.
- Demonstrate skills in prescribing and administering the full range of reversible contraceptives including
  insertion and removal of contraceptive implants and intrauterine contraceptive devices (IUDs) at a level
  which supports supervision and training of others as well as problem solving for difficult cases including
  referral where necessary.

Learning and assessment requirements and learning competencies are achieved through attachment to an established provider of contraceptive services.

### Learning & Assessment Requirements

Levels of Supervision

A Performs with direct supervision (in room/assisting with procedure)

A1 Can perform in simulation but unlikely to be able to demonstrate in practice during training

B Able to perform with onsite supervision immediately available

C Able to perform with offsite supervision / assistance in complicated cases

D Able to perform independently and supervise others performing uncomplicated cases

Assessment	Detail	Requirement	Expected level of supervision at end training
Logbook	Contraception consultations for women and people with medical comorbidities or medical risk factors including but not limited to congenital cardiac conditions, immunosuppression, epilepsy, malignancy, post-transplant complications, obesity and diabetes	15	D
Logbook	Contraception consultations for adolescents < 16 years, including those presenting for abortion care	20	D
Logbook	Consultations for peri-menopausal contraception	20	D
Logbook	Consultations for post-pregnancy contraception (including, post-natal, post-abortion and post-miscarriage)	20	D
Logbook	Contraceptive consultations for marginalised women and people	30	D
Logbook	Insertion of intrauterine contraceptive devices – copper/hormonal IUD	40	D



Assessment	Detail	Requirement	Expected level of supervision at end training
Logbook	Insertion of intrauterine contraceptive devices in nulliparous women and people	10	D
Logbook	Management of complicated IUD removal (e.g., removal of unusual devices, device in abdominopelvic cavity, those without (visible) threads)	10	D
Logbook	Point of care ultrasound services to guide contraceptive care	20	D
Logbook	Insertion of contraceptive implants	20	D
Logbook	Removal of contraceptive implants	10	D
Logbook	Observation of removal of impalpable contraceptive implants	1	D
Logbook	Laparoscopic tubal sterilisation	10	D

### Learning Competencies

Area of Learning	RANZCOG Roles	Teaching and Learning Support	Assessment
Clinical Knowledge and Reasoning  By the completion of this module, the trainee will be able to demons following:	trate knowledge and	understanding c	f the
Conduct contraceptive consultations			
<ul> <li>Anatomy, physiology and endocrinology of conception and the male and female genital tracts</li> </ul>	ME	ST	Logbook 3MA
<ul> <li>The full range of available reversible and permanent contraceptive and post-coital methods, including mechanisms of action, pharmacology, efficacy, advantages and disadvantages, risks and benefits</li> </ul>	ME		
The medical, personal, relationship and social factors which influence choice and efficacy of contraception including special and complex contraceptive needs such as:  medical conditions social factors affecting contraceptive choices such as access, affordability, and adherence underserved groups Postpartum, postabortion and perimenopause	ME		
Relevant local and international evidence-based guidelines, including UK Medical Eligibility Criteria	SC		
<ul> <li>The relationship between fertility, contraception and specific risks and benefits associated with coincident medical conditions</li> </ul>	ME		
The impact of culture on sexual and reproductive health and provision of culturally safe services	НА		
<ul> <li>The risks of reproductive coercion and intimate partner violence and the strong interplay with sexual and reproductive health care</li> </ul>	ME		
Prescribe and administer contraceptives  Demonstrate knowledge and understanding of:  techniques and relevant evidence-based guidelines	CM PF ME LD	Minimum number procedures	LB 3MA



Area of Learning	RANZCOG Roles	Teaching and Learning Support	Assessment
Clinical Skills			
Clinical Skills  Conduct contraceptive consultations  Be able to:  Conduct comprehensive consultations for women of all reproductive ages including:  history (including sexual history) and examination  medical risk assessment  information provision regarding relevant methods  provision of contraceptive counselling  management and follow up planning with the patient  Jointly make and implement an appropriate contraceptive management plan.  Recognise and respond to special and complex contraceptive needs including:  medical conditions  socioeconomic factors affecting contraceptive choices  marginalised groups  postpartum, including post-placental IUD insertion  perimenopause  people experiencing intimate partner violence and/or reproductive coercion  Cultural safety considerations  Conduct consultations addressing the specific needs of young people including medicolegal issues such as confidentiality, capacity to consent and child protection issues (with reference to the particular jurisdiction of practice).  Assess for risk and investigate for sexually transmitted infections and provide relevant counselling within consultation framework.	CM HA LD SC ME	ST	LB 3MA
Negotiate referral pathways for any contraceptive procedures not to be undertaken personally by the trainee.      Prescribe and administer contraceptives	CL	ST	LB
Be able to:	ME	31	3MA
<ul> <li>Safely and competently perform the following procedures,</li> <li>Prescribe and administer injectable contraception</li> <li>Insertion of contraceptive implants (Sign off)</li> <li>Removal of contraceptive implants (Sign off)</li> <li>Manage deep or impalpable implants</li> <li>Insertion of intrauterine contraceptive devices</li> <li>Insert intrauterine contraceptive devices when cervical dilatation is needed (in outpatient setting)</li> <li>Remove intrauterine devices including those with lost threads, in the outpatient setting, including ultrasound</li> <li>Manage vasovagal episodes and anaphylaxis associated with contraceptive device provision/ removal</li> <li>Demonstrate ultrasound localisation of IUD, impalpable contraceptive implants</li> </ul>	LD		



Area of Learning	RANZCOG Roles	Teaching and Learning Support	Assessment
<ul> <li>Demonstrate clinical competence in the review and follow up of individual cases and undertake regular audits of cases and outcomes.</li> <li>Manage symptoms and complications associated with contraceptive use such as side-effects including abnormal vaginal bleeding, contraceptive failure, g, expulsion and malpositioning of implants and IUDs.</li> </ul> Professional Skills			
	CM		6MA
Conduct contraceptive consultations	LD		MSF
Be able to:	MF		10131
Demonstrate a non-judgmental approach including respect	SC		
for privacy, confidentiality and social and cultural diversity	CM		
Prescribe and administer contraceptives	SC		6MA
Be able to demonstrate:	ME		MSF
Capacity to supervise and problem solve for trainees and	CM		Research /
colleagues in areas such as contraception for complex	LD		audit
medical presentations and difficult IUD insertions.	НА		Teaching
<ul> <li>An understanding of contraceptive service-related issues in relation to the development of standards and enhanced provision of high-quality services through a quality-based project.</li> </ul>			requirement
The ability to integrate contraceptive counselling and service provision within a range of clinical encounters (e.g. childbirth, miscarriage, ectopic pregnancy, other gynaecological conditions), with a view to increasing access to contraception.			

# Glossary of terms

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

Teaching and Le	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	3 monthly assessments
(Formative)	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	6 monthly assessments
(Summative)	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