



Syllabus and Logbook for the Certificate and Advanced Certificate in Menopause Care of the Faculty of Sexual and Reproductive Healthcare of the Royal College of Obstetricians and Gynaecologists prepared in partnership with the British Menopause Society.

www.fsrh.org

www.the-bms.org

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In this logbook, Faculty refers to the Faculty of Sexual and Reproductive Healthcare

CERTIFICATE AND ADVANCED CERTIFICATE IN MENOPAUSE CARE

INTRODUCTION

The British Menopause Society (BMS) and Faculty of Sexual and Reproductive Healthcare (FSRH) set up a Working Party to develop training in the field of the Menopause.

A change in demographics, with increased aging of the population and the decreased mortality in the elderly, has resulted in increased life expectancy. Thus, women can now expect nearly 50% of their adult life span to be after the menopause and post-menopausal women account for over 20% of the UK population. It is important that life quality and individual health after the menopause remains optimal, to guarantee an independent and active lifestyle in old age. To this end, doctors should be adequately trained and educated about the menopause and its management¹.

This is a syllabus and course outline for a combined Theory and Practical Training module aimed at doctors who work regularly in the field of women's health. Attendance at the theoretical course will result in a certificate of attendance, which if followed by the completion of competence based practical training and assessment will earn a '**Certificate in Menopause Care**'. An '**Advanced Certificate**' may be awarded to those who have satisfied the criteria for '**the Basic Certificate**' who have then gone on to undertake further competence based practical training (with completion of a course project and satisfactory assessment). This would indicate that the doctor with the '**Certificate in Menopause Care**' has the necessary skills to work within a dedicated Menopause clinic and those holding '**Advanced Certificates**' would be suitable to lead Specialist Menopause services.

These qualifications are not re-certifiable. Evidence of updating would be covered in appraisal/revalidation.

Training Objectives

- The training will provide an overview of the medical, psychological and social aspects of the menopause and its management.
- The trainee gaining the 'Certificate' will develop the skills needed to work within a Menopause service in a community setting and those obtaining the 'Advanced Certificate' to lead a specialist service.
- The trainee will have an understanding of their role in the specialty, and where necessary, the appropriate points to refer to other specialists.
- The trainee will understand the wider aspects of care for the older woman and be able to be part of the development of services in the local area.

This training will equip individuals with competence based knowledge and skills required for the management of the menopause, including:

1. Physiology of the menopause transition
2. Acute menopause symptoms
3. Specific medical conditions in the menopausal woman

4. Long term consequences of the menopause
5. Investigations of the menopausal woman
6. Management of the menopausal woman: assessment and follow up
7. Hormone replacement preparations
8. Potential benefits and risks of hormone replacement therapy
9. Non-oestrogen based treatments for the menopausal/postmenopausal woman
10. Complimentary and alternative therapies
11. The future – delivering a service and governance

Entry Criteria

Those wishing to undertake the **Certificate** and **Advanced Certificate in Menopausal Care** will need to hold DFFP, MFFP, DRCOG, MRCOG, MRCGP or equivalent qualification in other specialties. Membership of the British Menopause Society is encouraged.

Training Programme Components

The following are essential components of the training programme, and all of them have to be completed: -

1. Trainees to obtain a logbook. This is available by downloading the from the Faculty's website www.fsrh.org.
2. Attendance at an appropriate theoretical course as described in **Appendix 2**. The Theoretical Course should provide the essential knowledge component of training in this module, as stipulated in the BMS Handbook. It is expected that trainees will also supplement their knowledge by reading standard textbooks and other literature with the BMS Handbook (latest edition) acting as their pre-course textbook.
3. Practical training must be undertaken with supervision by an identified Principal Trainer. S/he will supervise the entire training process in this module. On occasions, the trainee may undertake sessions under the supervision of professionals other than the Principal Trainer, (for example, bone studies, breast clinics, or psychosexual therapy clinics). In these circumstances, it is the Principal Trainer's duty to ensure that the professional to whom the duty of training is delegated is sufficiently competent, willing and able to teach the trainee.
4. Clinical experience can be drawn from everyday practice, but the competence based practical component will include attendance at Menopause or related services. Attendance must be documented in the appropriate section of the logbook.
5. Assessment of training should comprise:

Assessment of the **domains of competence**² relating to the menopause to include a proper understanding of the evidence base of best practice required for the management of the menopause:

- a) Factual knowledge
- b) Evolving knowledge: uncertainty, 'hot topics', qualitative research
- c) The evidence base of practice: knowledge of literature, quantitative research
- d) Critical appraisal skill: interpretation of literature, principles of statistics
- e) Application of knowledge: justification, prioritising, audit
- f) Problem-solving: general applications
- g) Problem-solving: case specific, clinical management
- h) Personal care: matching principles to individual patients
- i) Written communication
- j) Verbal communication
- k) The context of team issues, team management and skills
- l) Regulatory framework of practice
- m) The wider context: medico-political, legal and societal issues
- n) Ethnic and trans-cultural issues
- o) Values and attitudes: ethics, integrity, consistency, caritas³
- p) Self-awareness: insight, reflective learning, 'the doctor as a person'
- q) Commitment to maintaining standards: personal care and professional growth, continuing medical education

Those working to obtain the '**Advanced Certificate**' must produce;

- a clinical audit/ research/literature review project covering 3000 words, to be assessed by the Principal Trainer
- **and must complete the additional competencies as laid out in page 13.**

The Logbook

The Logbook defines the skills required in the management of the menopause. Maintenance and regular review of the Logbook will also allow the Principal Trainer and Trainee to monitor progress and identify deficiencies over the course of training. The trainer signing the appropriate sections of the logbook will document competence. It is envisaged that the Trainee will need to attend 8-10 half day sessions to fulfill the competency based practical component for the Certificate in Menopause Care and approximately 30 half days for the Advanced Certificate in Menopause Care. It is imperative that all participants appreciate that the Trainee's progress has to meet standards that satisfy the Trainers. At the end of the training programme, the Principal Trainer has to certify the skills attained by the Trainee are to his or her satisfaction.

Revalidation

Doctors holding the Certificate or Advanced Certificate in Menopause Care should keep their knowledge up to date. It is advised that those actively practicing in this clinical field should attend a 3 hour refresher course e.g. BMS Annual Meeting every 3 years.

Principal Trainer Qualifications

Criteria for becoming a Principal Trainer includes:

Holding the Letter of Competence of the Faculty Instructing Doctor, or attendance at a Training of Trainers course, three years experience leading a local menopause service/clinic and being a member of a recognised menopause society e.g. BMS

Principal Trainers must see a minimum of 100 new Menopause patients per year. In the first 5 years, those applying to the Faculty to be Principal Trainers will be automatically awarded the Advanced Certificate in Menopause Care. In the first 5 years of this programme (i.e. until 2008) Principal Trainers need to have trainer qualifications as above. Beyond this, Principal trainers will be expected to hold the ***Advanced Certificate in Menopause Care or equivalent***, and be working actively in the field of the menopause. Those who wish to be Principal Trainers should register with the Faculty and renew their registration every 5 years (see the registration form on page 25). There is no fee for this. All other trainers will be persons deemed suitable by the Principal Trainer. They need not be medical staff.

Completion of Training

Training will be deemed complete when all components have been covered to the satisfaction of the Principal Trainer. The Report on the Trainee for the Certificate/Advanced Certificate of Menopause Care (page 26) should be signed by the Principal Trainer and with the other required documentation sent to the Faculty. Practical training should be commenced within 3 years of completing a theoretical course.

Those who wish to obtain the 'Advanced Certificate in Menopause Care' after holding the 'Certificate' agree will need to complete the further competence based practical training and project (requirements listed on page 13) within 4 years of completing a theoretical course.

References

1. BMS Handbook 2002
2. Natural Guidelines for Strategies to Prevent and Treat Osteoporosis [1998, & 2001] *W. Barlow D H, Royal College of Physicians*
3. Royal College of General Practitioners, Examination for Membership (MRCGP) Regulation for 2001.

NOTES FOR TRAINERS

Principal Trainer

The Principal Trainer must hold the Letter of Competence of the Faculty Instructing Doctor or have attended a Training of Trainers course (mandatory for consultants and GP Trainers), and lead a menopause service/clinic and be a member of the BMS. Their role is to supervise a Trainee throughout their Practical Training, either directly or indirectly.

Once a trainee has identified his/her Principal Trainer and having completed the theory course, the Principal Trainer should arrange to undertake an initial assessment.

Training Plan

At this initial assessment, a training plan should be agreed between the Principal Trainer and the Trainee, using the competency list to set the learning objectives. The initial learning objectives and the activity plan to meet these should be tailored to the individual learning needs of the Trainee. Subsequent learning objectives should be set at interim assessments until the trainee has attained all the competencies on the competency list.

It is the Trainee's responsibility to undertake this planned learning. The Principal Trainer should guide this, but need not have undertaken all the training themselves.

Experience may be accumulated in a variety of ways such as:

- Case reviews
- Observed consultations in non-Instructing sessions
- Tutorials based on relevant experience gained in Trainee's main clinical practice e.g. Primary Care, Community Clinics, or Obstetrics and Gynaecology
- Tutorials to discuss book and journal articles
- Role-play

Competence List

An experienced practitioner who is acceptable to the Principal Trainer should sign and date the appropriate line on the Competency document on attainment of an item of competence (this need not be a doctor). S/he should also sign the list of trainers document (page 22). It is the responsibility of the Principal Trainer to certify final competence after the Summative Assessment.

Assessment

The Principal Trainer must perform at least one interim assessment to check the Trainee's progress AND the summative (final) assessment of competence. One of these assessments MUST include observation of clinical practice.

Other Trainers

There must be **at least** one other interim assessment by another Trainer.

Trainees can record all their experience of consultations relating to their learning objectives wherever they occur e.g. in General Practice surgery, community clinics, or outpatient clinics.

Assessment of competence may therefore fall to several experienced clinicians working in different spheres, but the overall responsibility for the practical training rests with the Principal Trainer. It should be helpful for the various Trainers to talk to each other about the Trainee's experience/progress.

Team Observation

Assessment of the Trainee's attitudes and behaviour should be assessed also by team observation. Form Meno.TOF1 (page 28) should be completed by at least 6 team members who should be chosen from a range of co-workers, not just medical staff. The TOF 1s should be summarised by the Principal Trainer onto Meno.TOF2 (page 31) and this summary discussed with the Trainee.

Certification

Once the Trainee has attained competence in all the required areas, they should arrange a summative assessment with the Principal Trainer.

Where the Principal Trainer is unable to continue training for any reason, the Faculty should be informed as soon as possible and a new Principal Trainer found.

If the summative assessment is satisfactory in that the Trainee has attained all the required competencies the Principal Trainer should complete the Report form on page 26 to certify that the Certificate is awarded.

The Principal Trainer can ask for further evidence of competence if necessary before signing the report on page 26.

NOTES FOR TRAINEES

This logbook is intended for you to record experience of menopause care wherever you see patients – in surgery, clinic, outpatient departments and on the wards.

It also:

- Provides a summary of the syllabus in the form of a list of necessary competencies
- Records the learning objectives agreed between you and your Trainers
- Records relevant clinical cases seen, procedures undertaken and tutorials
- Provides a record of your achievements as you attain competence in the required areas
- Records the certified assessment of your competence when applying for the Certificate / Advanced Certificate
- Provides a permanent record of interesting cases to act as a reference for future practice

After your theory course, you should approach your chosen Principal Trainer to arrange the practical training and assessment. The Faculty Higher Training Secretary will hold a list of principal trainers who can be approached.

Email: ht@fshr.org Tel: 020 7724 5629.

Training Plan

At your first contact with your Principal Trainer, s/he will agree a training plan with you. This will be individually tailored and depend on your assessed needs, measured against the competency lists on pages 11-13 and the resources available in the service where you are training. It takes the form of learning objectives and planned activity.

Please read the competency lists on pages 11-13 before your first assessment session

- You will be expected to contribute to the training plan
- It is YOUR responsibility to ensure that you achieve the learning objectives
- Your Principal Trainer is a resource to support you in this
- At each subsequent assessment your Trainer will discuss your progress
- If you move to another area during the practical training, contact the Faculty office for a list of Principal Trainers who could be approached
- Once you have achieved the competencies, arrange for a summative assessment with your Principal Trainer
- Your Principal Trainer will also be responsible for certifying the completion of your training (see page 26)
- You may then complete the application on page 27 and send the logbook and requisite forms to the Faculty for award of the Certificate/Advanced Certificate

Consultation Skills

Throughout your training, your supervisors will assess your consulting skills. There is a checklist of good practice in clinical consultation (see appendix 3). This and other skills will also be assessed by your colleagues via the Team Observation form on page 28

Competence

The training programme is competency based. These are listed in the tables on pages 11-13.

Before completion of training, you must have achieved all competencies (sufficient for you to practice safely without supervision) for the Certificate you are applying for.

When an experienced clinician acceptable to your Principal Trainer assesses that you have achieved a competency, they should sign and date this in the appropriate line of the table, and also sign the List of Trainers document (page 22).

At your final summative assessment, your Principal Trainer may wish to check any or all of these competencies before completing the Report form on page 26.

Evaluation of Training

To monitor this Training Programme, the Faculty and the British Menopause society would be grateful if the Evaluation form (page 31) could be filled in and returned once training has been completed. The reports will be anonymous and presented as an audit to the Higher Training Committee of the Faculty and the joint Faculty/BMS working party.

COMPETENCY LISTS

COMMUNICATION SKILLS FOR THE CERTIFICATE AND ADVANCED CERTIFICATE IN MENOPAUSE CARE

SKILL	Principal Trainer to sign and date when competence achieved
Demonstrate good general communication skills	
Demonstrate an understanding of concordance and compliance	
Demonstrate ability to take a relevant sexual history, including detailed history, of e.g. dyspareunia, vaginismus, phobias, psychosexual dynamics, and libido	
Demonstrate an ability to dispense health and lifestyle advice	
Demonstrate ability to discuss breast cancer risks	
Demonstrate an ability to discuss VTE risks	
Demonstrate an ability to discuss risk of HRT with previous breast cancer	
Demonstrate an ability to discuss endometrial risks of HRT	
Demonstrate an ability to discuss treatment options for osteoporosis	
Demonstrate an ability to discuss cardiovascular effects of HRT	
Demonstrate an ability to discuss colo-rectal cancer benefits of HRT	
Demonstrate an ability to discuss other potential effects of HRT	
Demonstrate an ability to discuss alternative treatments	
Demonstrate a knowledge of recent advances/controversies in management of the menopause	
Demonstrate an ability to create an individual risk/benefit ratio	

CLINICAL ASSESSMENT & INVESTIGATIONS FOR THE BASIC CERTIFICATE OF MENOPAUSE CARE

SKILL	Principal Trainer to sign and date when competence achieved
History and lifestyle assessment relating to menopause, including visual analogues scores, quality of life questionnaires	
Undertake urogynaecological examination	
Undertake clinical osteoporosis assessment	
Identification and referral of those with abnormal bleeding	
Interpretation of bone density measurements including DEXA and ultrasound	
Identification and referral of women with breast problems/cancer risks	
Identification and referral of high risk patients with co-existing medical disease, e.g. diabetes, cardiovascular disease	
Identification and referral of women with premature menopause	
Identification and referral of those with psychosexual problems	
Identification of those with increased thrombotic risk	
Demonstrate the ability to manage the uncomplicated menopausal woman	
Demonstrate leadership skills in clinical organisation and as a team leader, encouraging multi-disciplinary work	

**CLINICAL ASSESSMENT & INVESTIGATIONS FOR THE ADVANCED
CERTIFICATE OF MENOPAUSE CARE**

SKILL	Principal trainer to sign and date when competence achieved
Achieved all competencies for the Certificate in Menopause Care	
Undertake cognitive assessment	
Understanding and use of investigations, including endocrine, bone, lipids, cognitive function	
Interpretation of breast risks and screening results	
Assessment of abnormal bleeding, including interpretation of ultrasound and endometrial assessment reports	
Management of patients with a genetic risk	
Management of high risk patients due to co-existent medical disease	
Management of women with premature menopause, including appropriate investigations	
Management of women presenting with psychosexual problems related to the menopause	
Management of patients carrying a thrombophilia or at risk of VTE	

LEARNING OBJECTIVES DOCUMENTATION

LEARNING PLAN for Name..... 	TRAINING CENTRE 	PRINCIPAL TRAINER Dr.....
INITIAL ASSESSMENT Competent in: Some Experience of: New to:		Principal Trainee's FFPRHC LoC Fin Doc No. (if has one) FI/DI..... Telephone/contact details Trainer Signature Trainee Signature Date..... Next Assessment date

PLANNED LEARNING –

Initial learning objectives should be agreed between the Principal Trainer and Trainee at the initial assessment. At subsequent interim assessments the learning objectives should be signed off as achieved. Further learning objectives can be added at interim assessments.

LEARNING OBJECTIVES: <i>Sample</i> Counselling for first time attendee for problems related to the menopause with identification of further investigations and provision of appropriate general information	PLANNED ACTIVITY: <i>Sample</i> <ul style="list-style-type: none"> • Tutorial to discuss relevant cases from general practice on 26/3/03 • Observed clinical assessment on 30/3/03 • Review and role play as appropriate on 13/4/03 	ACHIEVED: TRAINER NAME: <i>Sample</i> SIG. DATE.....
LEARNING OBJECTIVE: <i>Sample</i> Identify and refer woman with breast cancer risks or problems	PLANNED ACTIVITY: <i>Sample</i> <ul style="list-style-type: none"> • Tutorial to discuss relevant cases 30 April 2003 • Observed clinical assessment 1 May 2003 	ACHIEVED: TRAINER NAME: <i>Sample</i> SIG. DATE.....

LEARNING OBJECTIVE	PLANNED ACTIVITY	ACHIEVED
LEARNING OBJECTIVE	PLANNED ACTIVITY	ACHIEVED
LEARNING OBJECTIVE	PLANNED ACTIVITY	ACHIEVED
LEARNING OBJECTIVE	PLANNED ACTIVITY	ACHIEVED
LEARNING OBJECTIVE	PLANNED ACTIVITY	ACHIEVED
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LEARNING OBJECTIVE	PLANNED ACTIVITY	ACHIEVED
LEARNING OBJECTIVE	PLANNED ACTIVITY	ACHIEVED
LEARNING OBJECTIVE	PLANNED ACTIVITY	ACHIEVED
LEARNING OBJECTIVE	PLANNED ACTIVITY	ACHIEVED

This page can be repeated as often as necessary

LOG OF CONSULTATIONS Record consultations in any setting that are related to your Learning Objectives	LEARNING OBJECTIVES
<p style="text-align: center;"><i>Sample</i></p> <ul style="list-style-type: none"> • Patient complaining of irregular bleeding while taking cyclical HRT • Compliance, interacting drugs, examine, investigations 	<p style="text-align: center;"><i>Sample</i></p> <ul style="list-style-type: none"> • HRT implications • Investigation of abnormal bleeding • Appropriate history taking

This page can be repeated as often as necessary

LOG OF PRACTICAL PROCEDURES	TRAINER'S COMMENTS	DATE, NAME & SIGNATURE OF TRAINER-
		Date..... Print Name Signed.....
		Date..... Print Name Signed.....
		Date..... Print Name Signed.....
		Date..... Print Name Signed.....
		Date..... Print Name Signed.....
		Date..... Print Name Signed.....

This page can be repeated as often as necessary

LOG OF TUTORIALS

DATE	CONTENT	DATE, NAME & SIGNATURE OF TRAINER
		Date..... Print Name Signed.....
		Date..... Print Name Signed.....
		Date..... Print Name Signed.....
		Date..... Print Name Signed.....
		Date..... Print Name Signed.....
		Date..... Print Name Signed.....

This page can be repeated as often as necessary

ASSESSMENT DOCUMENTATION

Throughout the Training Programme, the Principal Trainer will assess the progress made towards achieving the Learning Objectives. A Trainee should have a least TWO interim assessments, one from the Principal Trainer and one from another. Once all the competencies from the list on pages 11-13 have been achieved, the Principal Trainer should complete a summative assessment and certify competence on the Report form (page 26) (LoC FIN Doc No. is for FFPRHC Trainers only.)

<p>INTERIM ASSESSMENT – <i>PROGRESS MADE</i></p>	<p>Trainee Name (& LoC FIN Doc No.)</p> <p>.....</p> <p>.....</p> <p>Date.....</p> <p>Next assessment date</p> <p>.....</p>
<p>INTERIM ASSESSMENT – <i>PROGRESS MADE</i></p>	<p>Training Doctor Name (& LoC FIN Doc No.)</p> <p>.....</p> <p>.....</p> <p>Date.....</p> <p>Next assessment date</p> <p>.....</p>
<p>INTERIM ASSESSMENT – <i>PROGRESS MADE</i></p>	<p>Training Doctor Name (& LoC FIN Doc No.)</p> <p>.....</p> <p>.....</p> <p>Date.....</p> <p>Next assessment date</p> <p>.....</p>

This page can be repeated as often as necessary

SUMMATIVE ASSESSMENT

**Principal Trainer Name
(& LoC FIN Doc No.)**

.....

.....

Sign.....

Date.....

LIST OF TRAINERS WHO SIGNED OFF COMPETENCIES

Name, Qualifications and Work Address	Signature

THEORY COURSE ATTENDED

A theory course must be attended within the first year of practical training.

Practical training must be completed within 3 years of the date of attendance of a recognised menopause theory course.

I undertook a course in theoretical instruction at:

Dates and Faculty reference number:

FORM FOR REGISTRATION FOR THE CERTIFICATE/ADVANCED CERTIFICATE (DELETE AS NECESSARY) OF MENOPAUSE CARE

To be completed and sent to the Chairman of the Higher Training Committee at the Faculty of Sexual and Reproductive Healthcare 27 Sussex Place, London NW1 4RG prior to commencement of training, in order to Register the Principal Trainer and Trainee.

Trainee Details (Please complete in BLOCK LETTERS)

Name.....

Address.....

.....Postcode.....

Telephone.....Email.....

Qualifications.....GMC No.....

Signature.....Date.....

Date of Commencement of Training.....

Date of Completion of Training.....

Special skills training number Meno.....

(To be allocated on receipt of this form)

Faculty recognised Principal Trainer (please complete in BLOCK LETTERS)

Name.....

Signed (Principal Trainer).....Date.....

Training Centre Name.....

Address.....

.....Postcode.....

Telephone.....Email.....

I confirm that I am a recognised Principal Trainer for the Certificate and Advanced Certificate and I am able to provide training as contained in this module.

(NB if any of the above details change please inform the Higher Training Committee ASAP)

Application Form to become a Menopause Principal Trainer (please complete in BLOCK capitals)

To be completed and sent to the Chairman of the Higher Training Committee at the Faculty of Sexual and Reproductive Healthcare, 27 Sussex Place , London NW1 4RG in order to register the Principal Trainer

Name.....

Training Centre Name.....

Address.....

.....Postcode.....

Telephone.....Email.....

How many **new** patients are seen in this menopause clinic/service each year?.....

Number of years experience leading a menopause service (minimum of 3 years)

Qualifications: (Medical).....

Teaching qualifications (FIN DOC or Training the Trainers)
.....

GMC No.....

Which menopause society do you belong to?/ Please provide your membership number
.....

If you hold the Advanced Certificate of Menopause Care give the certificate number.....

I confirm that I meet the Faculty minimum standards for Principal Trainers and I am able to provide training as contained in this module.

Signed
(Principal Trainer).....Date.....

Post Held at Present.....

(NB if any of the above details change please inform the Higher Training Committee ASAP)

**REPORT ON TRAINEE FOR THE CERTIFICATE/ADVANCED (DELETE AS NECESSARY)
CERTIFICATE OF MENOPAUSE CARE**

I certify that all the identified learning objectives and competencies from the Logbook have been achieved and that

(PLEASE PRINT TRAINEE’S NAME AND MODULE REGISTRATION NUMBER)

.....
has attained competence in the practice of Menopause Care and I recommend that she/he be granted the Certificate/Advanced Certificate of Menopause Care

Signed.....(Principal Trainer)

Print NameDate.....

It is essential that the Doctor who puts the final signature on this page is the Principal Trainer and has checked that the rest of the logbook is correctly and fully completed. This may include checking personally with any other trainers involved that they are happy with their own part of the Trainee’s training. **The Trainee must have achieved competency in all sections of the appropriate competency lists and have been signed off to reflect this.**

All Trainees must have a minimum of FOUR assessments, 3 with the Principal trainer (induction, interim and summative).

**FORM FOR APPLICATION FOR THE CERTIFICATE/ADVANCED CERTIFICATE (DELETE AS NECESSARY) OF MENOPAUSE CARE
(COMPLETE IN BLOCK CAPITALS)**

To be completed and sent to the Chairman of the Higher Training Committee at the Faculty of Sexual and Reproductive Healthcare, 27 Sussex Place, London NW1 4RG. I ENCLOSE MY CHEQUE FOR £28 made payable to the 'Faculty of Family Planning'

SURNAME.....

OTHER NAMES.....

QUALIFICATIONS.....

DATE OF BIRTH..... **GMC NUMBER**

ADDRESS.....

.....**POSTCODE**.....

Tel (work)..... **Tel (home)**.....

Tel (mobile)..... **Email**.....

Special skills training number MENO.....

This part should be completed after the Principal Trainer has signed off the logbook.

I hereby apply for the Certificate/Advanced Certificate in Menopause Care of the Faculty having completed the required training syllabus.

NB Please ensure you send you send this to the Faculty of Sexual and Reproductive Healthcare with:

- 1) The Report on Trainee for the Certificate/Advanced Certificate of Menopause Care (Meno.REP).
- 2) The Team Observation Form (Meno.TOF2).
- 3) A **photocopy** of the logbook.
- 4) A £28 cheque made payable to the 'Faculty of Sexual and Reproductive Healthcare'.
- 5) We strongly encourage you to send in the Evaluation of training by Trainee form (Meno.EVA).

SIGNED.....**DATED**.....

N.B.

1. Please ensure that you have used the correct postage to cover the cost of mailing this and all associated documentation; the entire Logbook, the forms Meno.REP, Meno.TOF 2, Meno.EVA and a £28 cheque made payable to the 'Faculty of Sexual and Reproductive Healthcare'.

2. To ensure against loss in transit and to retain a record for your PDP, it is recommended that you photocopy all documents before dispatch to the Faculty.

TEAM OBSERVATION FORM 1 – INSTRUCTION SHEET

You have been asked to complete this form for the following member of the team in which you work.

Trainee’s Name.....

Please return this form in a sealed envelope to.....

Return by (date).....

INSTRUCTIONS FOR COMPLETING THIS FORM.

Please tick the appropriate column for activities you have observed the team member undertaking.

If you have not observed the activity or feel that you cannot comment tick the ‘unable to comment’ column.

A summary of all observation forms will be shown to the team member and if there is any cause for concern they may ask to see individual forms.

OBSERVER

Your name.....

Your position.....

Signature.....

Date form completed.....

Thank you for participating in this important aspect of service review.

Trainer..... Date.....

TEAM OBSERVATION FORM 1 – TO BE GIVEN TO A SELECTION OF THE TRAINEE’S WORK COLLEAGUES
--

Relationship with Clients	Unable to comment	Never	Some of the time	Usually	Always
Treats clients politely and considerately					
Respects clients privacy and dignity					
Respects client confidentiality					
Involves clients in decisions about care					

Comments

Relationship with Colleagues	Unable to comment	Never	Some of the time	Usually	Always
Liaises with colleagues about care of clients					
Seeks advice appropriately					
Works affectively as a member of a team					
Delegates work appropriately					
Accepts criticism and responds constructively					
Gives adequate notice of leave of absence					

Comments

Information gathering / note keeping	Unable to comment	Never	Some of the time	Usually	Always
Keeps records of acceptable quality					

Comments

Time management / diligence	Unable to comment	Never	Some of the time	Usually	Always
Manages time effectively					
Keeps up to date with administrative tasks					

Comments

TEAM OBSERVATION FORM 2

Trainee's Name: _____ Date _____

The Principal Trainer should collate the information from all Meno.TOF 1 forms received, summarise it on this form and discuss it with the trainee. The number in the columns indicate the number of forms received containing a tick in that column.

Total number of Meno.TOF 1 forms received _____

Relationship with Clients	Unable to comment	Never	Some of the time	Usually	Always
Treats clients politely and considerately					
Respects clients privacy and dignity					
Respects client confidentiality					
Involves clients in decisions about care					

Comments

Relationship with Colleagues	Unable to comment	Never	Some of the time	Usually	Always
Liaises with colleagues about care of clients					
Seeks advice appropriately					
Works affectively as a member of a team					
Delegates work appropriately					
Accepts criticism and responds constructively					
Gives adequate notice of leave of absence					

Comments

Information gathering / note keeping	Unable to comment	Never	Some of the time	Usually	Always
Keeps records of acceptable quality					

Comments

Time management / diligence	Unable to comment	Never	Some of the time	Usually	Always
Manages time effectively					
Keeps up to date with administrative tasks					

Comments

TRAINEE SIGNATURE
PRINCIPAL TRAINER SIGNATURE

DATE
DATE

EVALUATION OF TRAINING BY TRAINEE
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(To be completed by the Trainee on completion of the training programme IN CONFIDENCE and sent to the Chairman of the Higher Training Committee at the Faculty of Sexual and Reproductive Healthcare 27 Sussex Place, London NW1 4RG. If the Principal Trainer is the Chairman, please send to the Vice Chairman.)

Training Centre Name.....

1. Did the Theory Course you attend provide the basic knowledge you required prior to commencing the clinical part of your training?

Yes	No	Comments

2. Has the training programme given you the skills and confidence to consult independently?

Yes	No	Comments

3. How confident are you at managing women requiring routine menopause care and referring on for specialist menopause care (advanced certificate only)?

Confident	Fairly Confident	Not Confident	Comments

4. How confident are you at managing women who need specialist menopause care?

Confident	Fairly Confident	Not Confident	Comments

5. Overall Comments About The Adequacy of Training (including trainers and centre)

	Poor	Could improve	Good	Excellent
Organisation of teaching				
Content of teaching				
Quality of teaching				
Support from trainers				

Comments:

SYLLABUS FOR FACULTY OF FAMILY PLANNING AND REPRODUCTIVE HEALTH CARE MENOPAUSE MODULE
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1. **Physiology of the menopause transition**
 - Population changes and evolution of the menopause
 - Definitions
 - Ovarian function
 - Premature menopause
 - Primary premature ovarian failure
 - Secondary premature ovarian failure
 - Surgical/iatrogenic menopause

2. **Acute menopausal symptoms**
 - Vasomotor symptoms
 - Sexual dysfunction
 - Psychological symptoms
 - Differential diagnoses

3. **Long-term consequences of the menopause**
 - Osteoporosis
 - Pattern of bone loss
 - Risk factors
 - Clinical consequences
 - Cardiovascular disease
 - Coronary heart disease
 - Cerebrovascular disease
 - Venous thromboembolism
 - Long-term effects of the menopause on risk factors for CVD
 - Urogenital atrophy
 - Connective tissue atrophy

4. **Hormone Replacement Therapy preparations**
 - Components of HRT
 - oestrogens, progestogens, tibolone, androgens, SERMS
 - Women who have undergone a hysterectomy
 - Women with an intact uterus
 - Perimenopausal women
 - Postmenopausal women
 - Treatment of local symptoms
 - Delivery systems
 - Choice of therapy
 - Drug interactions
 - Oestrogen receptors, genomic and non-genomic mechanisms

5. **Potential Benefits and Risks of HRT**
 - Acute benefits
 - Vasomotor symptoms
 - Psychological symptoms
 - Proven/potential long-term benefits
 - Osteoporosis

- Cardiovascular disease
 - Primary prevention
 - Secondary prevention
 - Stroke
- Alzheimer's disease/cognitive benefits
- Urogenital benefits
- Other benefits
- Risks of oestrogen therapy
 - Breast cancer
 - Endometrial cancer
 - Venous thromboembolus
 - Ovarian cancer

6. Specific medical conditions and the menopausal woman

- Contra-indications to HRT
- Pelvic disorders
 - Fibroids, endometriosis, cervical dysplasia & carcinoma
 - Prolapse, urinary incontinence
- Breast disorders
 - Benign disease, cysts, breast cancer
 - Inherited breast disease
- Cardiovascular disease
 - Hypertension, valvular heart disease, hyperlipidaemia, varicose veins
- Endocrine disorders
 - Diabetes, thyroid disease
- Neurological disease
 - Migraine, epilepsy, Parkinson's disease, Multiple sclerosis
- Gastrointestinal disease
 - Gall bladder disease, liver disease, inflammatory bowel disease,
 - Coeliac disease, lactose intolerance
- Autoimmune disease
 - Rheumatoid arthritis, SLE
- Surgery
- Travel
- Other
 - Asthma, otosclerosis, melanoma, post-transplant, renal failure, alopecia, depression, chronic fatigue

7. Non-oestrogen-based treatments for the menopausal woman

- Pharmacological interventions for the prevention & treatment of osteoporosis
 - Bisphosphonates, calcium & vitamin D, calcitriol, calcitonin, SERMs
 - Parathyroid hormone, statins,
- Non-pharmacological interventions for the prevention of osteoporosis and reducing fracture risk
 - Hip protectors, exercise, prevention & treatment of falls
- Vasomotor symptom control
 - Progestogens, SSRIs, propranolol, clonidine

- Vaginal atrophy
 - Vaginal lubricants

8. Complimentary and alternative therapies

- Phyto oestrogen's
- Herbalism
- DHEA
- Progesterone transdermal creams
- Other complementary therapies
- Herb/drug interactions
- Diet and lifestyle modification
- Counselling

9. Management of the menopausal woman: assessment and follow-up

- Assessment
- Examination
- When to start
- Follow up
- Breast examination
- Effects on coronary artery disease
- Concordance/continuance issues
- Duration of therapy
- Management of side effects
 - Oestrogen related and progesterone related side effects
- Weight
- Bleeding
- Resistant vasomotor symptoms
- Premature/early menopause
- How to stop
- Contraception
- Social issues
- Sex/libido issues
- Patient support groups/help lines/websites etc

10. Investigations

- Endocrine
- Risk factors for arterial disease
- Mammography and genetic testing
- Endometrial assessment
- Bone density estimation

11. The future – delivering a service and governance

- Menopause/osteoporosis clinics in Primary Care Organisations and secondary care
- Formularies
- Research, teaching
- Audit
- Medico-legal
- Clinical governance
- NICE

SAMPLE COURSE PROGRAMME

The course needs to include a minimum of 11 hours of training time for the Certificate which is suitable for both the Basic and Advanced Certificate. The Advanced Certificate Course should include more detailed instruction covering postmenopausal health. These could take the form of a two or three day course, and learning time could be increased if this were to be residential. Equally, it could be divided into a set of shorter sessions with attendance at all sessions necessary for completion. There should be at least two small group sessions.

Sample Course 1 for the Certificate or Advanced Certificate in Menopause Care

DAY 1	DAY 2
8.30 Coffee and Registration	8.30 Coffee and Registration
9.00 Welcome. Introductory Quiz	9.00 Lecture Cardiovascular disease, Menopause & HRT
9.15 Lecture Physiology of menopause transition	9.45 Lecture Neurological function after the Menopause and the place of HRT
10.0 Workshop History and investigations, assessing menopausal symptoms	10.15 – 10.45 Coffee
10.45 – 11.15 Coffee	10.45 Lecture Contraception in the Perimenopause
11.15 Lecture Osteoporosis – pathology, screening, treatment	11.15 Workshop Sexual & relationship issues
12.15 Lecture Osteoporosis - risk assessment, prevention	12.45 – 1.30 Lunch
1.00 – 1.45 Lunch	1.30 Lecture Gynaecological and urological problems In the Menopause
1.45 Lecture Breast disease and HRT	2.15 Lecture & Workshop HRT – is it worth the risk? Latest Studies
2.30 Workshop HRT regimes, treatment options, side effects and development of formulary	3.45 – 4.00 Tea
3.30 – 3.45 Tea	4.00 Panel discussion Quiz answers
3.45 Lecture Non –oestrogen based treatments	4.30 Plenary Menopause – the future
4.30 Workshop Management of the menopause	5.15 Evaluation & Close
5.15 Close	

Sample Course 2 for the Basic or Advanced Certificate in Menopause Care

Day One

- 9.15am Registration and Coffee**
Physiology & Demography
- 10.00am** Welcome and introduction to special skills module on the Menopause and introduction to RCOG interactive problem solving.
- 10.20am** Nature and nurture: Findings from birth cohort studies
- 10.50am** Cultural issues and the menopause
- 11.30am Coffee**
Early and peri menopause
- 11.50am** Aetiology of ovarian failure
- 12.20pm** Premature ovarian failure-the therapeutic options
- 1.00pm** Perimenopausal contraception
- 1.40pm Lunch**
Pathophysiology
- 2.40pm** Symptoms, immediate and delayed
- 3.10pm** Mood disorders
- 3.50pm Tea**
Pathophysiology-continued
- 4.10pm** Urogenital disorders
- 4.40pm** Sexual issues during the menopause and onwards
- 5.10pm** Drinks reception
- 5.50pm Close**

Day Two

- 8.30am Coffee**
Bone
- 9.00am** Osteoporosis: The nature of the problem
- 9.30am** Techniques for osteoporosis detection
- 10.00am** Advances in the management of osteoporosis
- 10.30am Coffee**
Cardiovascular
- 11.00am** HRT and surrogates for heart disease: Game over?
- 11.30am** Arterio-venous disease – prevention and treatment in menopausal women
- 12.00pm** HERS/ WHI /WHISP etc – interpreting the studies
- 12.40pm Lunch**
Cognitive Function
- 1.40pm** Assessment of cognitive function
- 2.20pm** Memory and cognition
- 2.50pm** Dementia – could there be a role for HRT in prevention or treatment?
- 3.20pm Tea**
Pharmacokinetics, HRT and Alternatives
- 3.50pm** HRT: Modernising traditional regimens
- 4.20pm** Progestagens – The necessary evil?
- 4.50pm** Tissue specific/ selective agents: Raxoxifene, Tibolone, etc
- 5.20pm** Phto-estrogens and complementary therapies - what is the evidence?
- 5.50pm Close**

Day three

- 9.00am Coffee**
Specific Diseases
Breast debate- The Million Women study data were clinically flawed and should not have been allowed to change clinical practice
- 9.30am** For the motion
- 9.50am** Against the motion
- 10.10am** Summing up (5 mins each) and vote
- 10.25am** HRT and alternatives after benign and malignant breast disease
- 10.55am Coffee**
Specific diseases – continued
- 11.30am** Diabetes and other systemic diseases
- 12.00pm** Endometrium and bleeding problems
- 12.40pm** Colon cancer: Why does HRT reduce the risk?
- 1.10pm Lunch**
- 2.10pm** Multi disciplinary team work
- 3.10pm** Care plans and diagnostic strategies – NSF's / PCT's
- 3.40pm** Risk and medico – legal issues
- 4.10pm Close**

SUGGESTED CHECKLIST FOR TRAINEE SKILLS

Interview/history taking skills:

- Introduces self to client
- Identifies client reason for consultation
- Allows client to elaborate, presenting problem fully
- Listens
- Puts client at ease
- Recognises client's verbal and non-verbal cues
- Uses silences appropriately
- Phrases questions simply and clearly
- Uses open questions, appropriate closed questions and focused questions (avoids double or misleading questions)
- Exhibits well organised approach to information gathering
- Seeks clarification of words used by client as appropriate
- Elicits specific and relevant information from client and/or their records to clarify management
- If reads, writes notes, or uses computer does so in a manner that does not interfere with dialogue or rapport
- Deals sensitively with embarrassing and /or disturbing topics
- Structures interview in logical sequence

Clinical management:

- Formulates management plan appropriate to findings in collaboration with the client
- Gives explanations at appropriate times
- Checks clients' level of knowledge and understanding
- Encourages client to discuss any additional points
- Is prepared to use time appropriately

Clinical skills checklist:

- Is sensitive to client physical and emotional discomfort
- Can arrange and carry out reviews
- Is capable of recognising limits of personal competence
- Refers appropriately

Problem solving:

- Correctly interprets and applies information obtained from client
- Records history, physical examination and investigations
- Identifies problems or makes working diagnosis

Behaviour/relationship with client/other staff checklist:

- Maintains friendly but professional relationship with client
- Demonstrates awareness that the client's attitude to the doctor (and vice versa) affects management and levels of co-operation.
- Team worker

Electronic copies are available on the Faculty website www.fsrh.org

We suggest you download a copy and put it in a ring binder so once completed the appropriate bits can be photocopied and sent to the Faculty when the module certificate is applied for. **These will not be returned to you so please keep a photocopy for reference.** The completed file can then go in your Personal Development File.