

# Guidelines for Trainees for The Diploma of the FSRH attending a Course of 5 Assessed Workshop Day

**Introduction:** These guidelines provide information on what to expect when attending a Course of 5 (C5), along with a checklist of what should be completed prior to attendance.

**Training standards:** The training provided should meet the standards contained in the FSRH CEU guidance, FSRH service standards and BASHH clinical guidelines.

**Terminology & abbreviations:** see General Training Terminology

## Contents:

1. Before attending the Course of 5
2. Organisation of a C5
3. Aim of the C5
4. Assessments on the C5
5. Pre-course preparation
6. Checklist for C5 delegates
7. Intellectual Property Rights

## 1. Before attending the C5

Trainees will be required to present the following evidence prior to, or at the start of, the C5.

- **eKA pass within the last 2 years**
- **Resuscitation/Anaphylaxis:** Up to date with basic life support and anaphylaxis training in accordance with employer's local policy. Certificates of training should be retained for the trainer to review. Where employers do not provide anaphylaxis training a certificate of completion of an appropriate e-learning module will be accepted.
- **Consultation skills:** Appropriate consultation skills for sexual health consultations are an entry requirement for the Diploma of the FSRH and LoC pathways. During the clinical components of these training programmes trainees must be able to demonstrate that they can:
  - Take an appropriate sexual history
  - Adapt their consultation style to suit the patient
  - Address patients' ideas, concerns and expectations and answer their questions
  - Assess whether a patient is competent to consent to treatment and ensure consent is well-informed
  - Protect confidentiality
  - Make an appropriate offer of a chaperone
  - Demonstrate clear record-keeping
  - Use time effectively in consultations

If a trainee is unable to fulfil any of these requirements the trainer may defer the clinical training until this has been satisfactorily addressed.

- **Gynaecological skills**
  - i) **DFSRH (doctors)**

The trainee should be able to demonstrate that they can perform a genital examination, to include speculum examination and bimanual pelvic examination.

The trainee must be competent in the following gynaecological skills:

- Assessment of size, position and mobility of the uterus.
- Assessment, investigation and initial management of potential IUD/IUS users with:
  - Abnormal findings at pelvic examination
  - Heavy and/or painful periods
  - Infrequent and/or absent periods
  - Vaginal discharge and sexually transmitted infection
  - Acute and chronic pelvic pain.

Trainers may postpone or defer the clinical training and require the trainee to seek further gynaecological experience if this is assessed to be necessary.

- ii) **DFSRH (nurses)**

Appropriate gynaecological skills for sexual health consultations are an entry requirement for nurses on the DFSRH training programme. The candidate should be able to demonstrate that they can perform a speculum examination. Trainers may postpone training and require the trainee to seek further gynaecological experience if this is assessed to be necessary before or during the DFSRH training.

- **Registration for an FSRH e-portfolio**
- **Optional exemption from sessions 1 and 2 of the C5**

Candidates holding

- STIF 1 competency or
- STIF intermediate competencies or
- Who have passed the Diploma of GU Medicine are not required to complete sessions 1 or 2 of the 'Course of 5'.

Most candidates will find these sessions a useful refresher and choose to attend them as part of their 'Course of 5'. However:

- It is the Course of 5 convenor's decision whether to offer a reduction in the course fee to those who choose not to attend these sessions.
- Candidates wishing to use one of these exemptions for the 'Course of 5' sessions 1 & 2 will need to inform the C5 Convenor before the day of the C5.
- They must upload the relevant STIF Competency or Dip GUM certificate on to their e-Portfolio.
- The STIF Level 1 Competency and the STIF intermediate competency are different from the 'STIF Day One' or 'STIF Plus' courses. Candidates who have attended either the 'STIF Day One' or 'STIF Plus' courses **will** still be required to complete all 5 sessions and pass the assessments of the 'Course of 5'.

- **Recommended preparation**

It is recommended that trainees complete module 17 of the eSRH which focuses on Subdermal Implant provision and will prepare trainees to fit and remove placebo implants in a model arm in session 3 of the C5.

C5 convenors may request this evidence prior to acceptance on a C5. Failure to provide this evidence when attending a course will invalidate C5 attendance for the Diploma of the FSRH. Course organisers may not refund course fees in these circumstances.

## **Latex Allergy**

Delegates may potentially come into contact with latex at a number of stations during a C5 e.g. on models, some diaphragms and handling condoms. It is recommended that delegates who may have a problem with this contact the course convenor before they register for the course to discuss the best way to manage this.

## **2. Organisation of a C5**

The 5 one hour sessions can be taken in any order.

The C5 can be held as a full day course, or sessions may be run individually or in groups over a period of time.

The content is fixed.

The course is delivered singly or in small groups of 4 or fewer trainees to one facilitator.

Where there are regional variations, for example in abortion law, the course should refer to the situation pertaining locally whilst ensuring that trainees are aware that there are differences.

Course fees are set by local arrangement.

Guidance is available from the FSRH website for [FSRH trainees whose personal beliefs conflict with the provision of abortion or any method of contraception.](#)

### 3. Aims of the C5

The C5 provides an opportunity to:

- Practise and demonstrate practical skills required for the provision of contraception and testing of STIs
- Develop increased awareness of the way that personal attitudes, gender, sexual preference and cultural differences impact on SRH consultations in a safe environment
- Identify areas where further learning is required before proceeding to clinical assessments

### 4. Assessments on the C5

The C5 comprises 9 assessments. Trainees must demonstrate that they:

1. Have actively and appropriately participated in a workshop discussion on HIV testing and screening.
2. Are able to demonstrate how to perform common investigations for sexually transmitted infections on male and female models.
3. Are able to demonstrate how to teach the use of male condoms.
4. Are able to have an informed discussion on the assessment and management of women choosing barrier methods of contraception and the principles of fitting these methods.
5. Are able to demonstrate the insertion and removal techniques for a currently marketed implant on a model arm.
6. Are able to demonstrate that they can apply the principles of confidentiality, Fraser Guidelines, consent and safeguarding children in clinical scenarios.
7. Have actively and appropriately participated in a discussion on responding to someone presenting with a psycho sexual problem.
8. Have actively and appropriately participated in a discussion on responding to a woman presenting with an unwanted pregnancy.
9. Have actively and appropriately participated in a discussion of the management of men and women who request sterilisation.

Trainees are expected to demonstrate an appropriate professional, non-judgemental attitude in order to progress through the Diploma of the FSRH. **This is an explicit component of the C5 assessments** which prepare trainees for clinical practice. Trainees who act inappropriately or demonstrate inappropriate attitudes should not expect to proceed to the clinical experience in sexual and reproductive health without first addressing these issues.

Further guidance in this area can be sought from the General Medical Council publication 'Good Medical Practice' which can be accessed at [www.gmc-uk.org](http://www.gmc-uk.org) and the Nursing & Midwifery Council publication 'The Code' which can be accessed at <http://www.nmc-uk.org/Publications/Standards/>

It is anticipated that trainees should have little difficulty completing the assessments for the C5 provided they have:

- Passed the eKA
- Fulfilled the pre course requirements (consultation skills, gynaecology examination etc)
- Done the recommended pre course preparation (as set out in this guide)

Pre course preparation will be assumed and inadequate knowledge or failure to show appropriate professional attitudes may lead to failure of some 5 assessments. A maximum of 2 outstanding assessments from the C5 may be reassessed during the clinical experience by arrangement with the primary trainer. This will be in addition to the 7 topic assessments for the Diploma of the FSRH.

Facilitators may have little time during or at the end of a session to give feedback, but it would be appropriate to remind trainees who are not contributing to workshop discussions that if they fail to do so they will not pass the assessment.

If trainees successfully complete fewer than 7 assessments they should be informed on the same day by the course convenor or someone appropriate delegated by them, such as a facilitator (This would not be done by a non-clinical administrator). Trainees may be recommended to review preparation for the course and will be required to retake the entire C5 and pass at least 7 assessments at one attempt before moving on to clinical assessments.

If the C5 sessions are held on different days trainees should be informed if they have passed the assessments at the end of each session. The course convenor is responsible for ensuring that brief feedback is given to trainees who have not passed an assessment to ensure they are able to prepare differently for future sessions.

## **5. Pre Course Preparation**

If this is done there is no reason why trainees should not pass all assessments. The assessments in each session are explicit. There are no trick questions.

The requirement for active participation is explicit. Trainees who are unable or unwilling to participate actively in the discussions will not complete the assessments. If more than 2 assessments are not completed by the end of the C5, then the entire C5 will need to be re-taken at a later date.

Each session is intended to build on the trainee's theoretical knowledge and there will be opportunities to ask questions that have arisen from theory preparation.

### ***Session 1 - Taking a Sexual History and HIV pre-test discussion and testing***

#### Learning Outcome

- Be able to apply knowledge of risk assessment, sexual history taking and HIV testing to clinical scenarios in a supportive learning environment in preparation for clinical work.

#### Assessment

***'Has actively and appropriately participated in a workshop discussion on HIV testing and screening.'***

### Pre course information

The following areas of knowledge will be particularly relevant to this session:

- Risk assessment and sexual behaviour
- Testing for HIV and blood borne viruses
- Partner notification
- Understanding the client's perspective.

Trainees will be expected to be familiar with the components of sexual history taking, and be ready to describe what is required for a pre-HIV test discussion.

### **Session 2 - STI Screening and Testing and Teaching the use of Condoms**

#### Learning Outcomes

- This is an opportunity to review how to assess and test appropriately for asymptomatic STI screening and investigate common presentations of STI and non-STI genital symptoms.
- Trainees will be able to apply knowledge of testing for STIs and demonstrate their ability to take the appropriate samples on male and female models. This will be assessed during the session.
- A summary of any local variations in sample taking practice will be provided.
- There will be an opportunity to review and demonstrate some of the advantages and limitations of condoms as contraceptives and STI barriers.
- Ability to teach the use of male condoms will be assessed, and trainees will be expected to know how female condoms are used.

#### Assessments

***'Is able to demonstrate how to perform common investigations for sexually transmitted infections on male and female models.'***

***'Is able to demonstrate how to teach the use of male condoms.'***

#### Pre course information to delegates

The following areas of knowledge will be particularly relevant to this session:

- Testing for sexually transmitted and genital infections
- Problem based approach to STI testing
- Starting and using barrier contraceptives.

Trainees will be expected to demonstrate how and when to perform common investigations for sexually transmitted infections on male and female models. This will be assessed.

Trainees will be expected to demonstrate how to teach the use of male condoms using a model. This will be assessed. Trainees should be able to demonstrate the use of a female condom.

### **Session 3 - Practical Aspects of Contraception**

#### Learning Outcomes

- To review and assess practical aspects of diaphragm use.
- To demonstrate and assess the ability to fit and remove a sub dermal implant in a model arm.
- To be able to see and handle commonly used contraceptive methods.

#### Assessments

***'Is able to have an informed discussion on the assessment and management of women choosing barrier methods of contraception and the principles of fitting these methods.'***

***'Is able to demonstrate the insertion and removal techniques for a currently marketed implant on a model arm.'***

#### Pre course information to delegates

Trainees should be prepared to describe how to explain to a woman how to insert a diaphragm and give advice regarding its ongoing use.

Trainees should also be knowledgeable on the theory of how to insert caps and diaphragms and be:

- Aware of different types and sizes of diaphragms and caps
- Aware of pelvic assessment regarding size, musculature and anatomy
- Able to demonstrate how to insert the device and then check placement in a model
- Able to describe how to assess the fit of a diaphragm
- Able to remove the device
- Able to give clear instructions to a women regarding device use and spermicide application.

Trainees should ideally have reviewed the e-SRH additional training in sub-dermal contraceptive implants (SDI) module 17 on implant removal and insertion, as they will have an opportunity to do this on a model arm.

### **Session 4 - Young people; Consent, Confidentiality, Fraser Guidelines and Safeguarding children**

#### Learning Outcome

- This session will help trainees to prepare for working with young people who require sexual health advice and treatment, including under 16s. Topics to be covered include consent, confidentiality, Fraser guidelines and safeguarding children.

#### Assessment

***'Is able to demonstrate that they can apply the principles of confidentiality, Fraser Guidelines, consent and safeguarding children in clinical scenarios.'***

#### Pre course information to delegates

The purpose of this session is to prepare trainees for working with young people who require sexual health advice and treatment, including under-16s. To gain the maximum benefit from this session, trainees will be expected to have done some pre-course preparation (see below for each station) and to have considered the issues listed.

The following areas of knowledge will be particularly relevant to this session:

- Working with Young People
- Choosing and using a method – Young People
- The law relating to sexual activity
- Confidentiality, Consent and Chaperones

*5 Stations of 12 minutes each.*

#### Station 1: Confidentiality

Ensure that trainees understand what is meant by confidentiality for clerical and medical/nursing staff working with young people.

Think about how to answer a 14 year olds question 'Is everything I say confidential?'

#### Station 2: Fraser Guidelines

Trainees should understand what the Fraser Guidelines are and be able to list the 5 criteria if asked.

#### Station 3: Consent

Trainees should understand the principles involved in obtaining valid consent to examination / treatment from under 16s.

Where could further advice be sought?

#### Station 4: Safeguarding children

Find out what the steps for referral of a Safeguarding Children case to social services or the police would be in the trainee's current place of work in the event of a disclosure by a young person.

Know the law in relation to sexually active under 16s and under 13s.

#### Station 5

In Station 5 the trainee will be observing a consultation with a young person. The trainees will then be asked to make Fraser competency and safeguarding children assessments.

Assessment will be based on contributions to discussions at stations 1 – 4 and the trainee's performance at the final assessment station 5.

#### *Useful resources:*

FSRH Guidance: Contraceptive Choices for Young People, March 2010

[www.fsrh.org/pdfs/ceuGuidanceYoungPeople2010.pdf](http://www.fsrh.org/pdfs/ceuGuidanceYoungPeople2010.pdf)

General Medical Council publication: 0-18 years: guidance for all doctors.

[http://www.gmc-uk.org/guidance/ethical\\_guidance/children\\_guidance\\_index.asp](http://www.gmc-uk.org/guidance/ethical_guidance/children_guidance_index.asp)

Adolescence: boundaries and connections: An RCN guide for working with young people

[http://www.rcn.org.uk/\\_data/assets/pdf\\_file/0006/178971/003256.pdf](http://www.rcn.org.uk/_data/assets/pdf_file/0006/178971/003256.pdf)

## Session 5 - Managing Sensitive Scenarios

### Learning Outcomes

- Learning for the eKA provides the theoretical knowledge necessary to be able to manage sensitive sexual health scenarios, but sometimes it is difficult to know exactly how to phrase questions to elicit the information needed and to provide the information required. This session will provide an opportunity to consider how such a scenario might be approached.
- This is also an opportunity to consider how a non-judgemental attitude might be conveyed.
- The scenarios will also be an opportunity to explore personal reactions to issues that some find ethically or morally difficult, before confronting them in clinical practice.

### Assessments

***'Has actively and appropriately participated in a discussion on responding to someone presenting with a psychosexual problem.'***

***'Has actively and appropriately participated in a discussion on responding to to a woman presenting with an unwanted pregnancy.'***

***'Has actively and appropriately participated in a discussion of the management of men and women who request sterilisation.'***

### Pre course information to delegates

The following attitudes and areas of knowledge will be particularly relevant to this session:

- Motivation to understand the client's perspective
- Confidentiality, consent and chaperones
- Early pregnancy assessment and referral
- Psychosexual medicine
- Assessment & referral for sterilisation.

Trainees will be expected to take an active part in the case discussions and be able to discuss the following:

- Male and female sterilisation techniques, safety, failure rates.
- Medical and surgical abortion methods available locally and their availability in relation to gestation. (Trainees should be aware that laws on abortion differ across the UK. Each course will refer specifically to the legal requirements pertaining locally, but those in NI will be expected to be familiar with what is available in mainland UK.)

Guidance is available from the FSRH website for [FSRH trainees whose personal beliefs conflict with the provision of abortion or any method of contraception.](#)

## 6. Checklist for C5 Delegates

Time frame	Action:	(✓)
<b>Before C5</b>	Have read the FSRH Diploma Training Requirement	
	Have registered with FSRH for the e-portfolio (cost currently £50) -	
	Achieve an eKA pass in the last 2 years	
	Competency in consultation skills – trainees may need to be signed off for these. Competency in gynaecological skills - trainees may need to be signed off for these. Up to date with basic life support and anaphylaxis training in accordance with employer’s local policy.	
	Invite course convenor to be a primary trainer on e-portfolio	
	Do pre-course preparation as set out in these guidelines <b>**This is essential to help trainees prepare for the assessments in the C5**</b>	
<b>Prior to or at start of C5</b>	Provide the C5 convenor with evidence of having achieved an eKA pass in the last 2 years and having competency in consultation skills and competency in gynaecological skills appropriate to the trainee’s professional status as described above. Also provide evidence of last update in basic life support.	
<b>During C5</b>	Actively and appropriately take part in small group discussions	
	Successfully complete at least 7 / 9 assessments	
<b>After the C5</b>	Provide evaluation of the C5 experience to the FSRH. Follow this link <a href="#">C5 Evaluation</a> to the online evaluation form. The Faculty’s General Training Committee takes evaluations seriously and is committed to following up appropriately on any suggestions or comments. For this reason, the FSRH Diploma will not be awarded until the Course of 5 evaluation form has been completed. The local trainer or training programme may also request a separate written feedback form relating to more local training issues.	

## 7. Intellectual Property Rights

All intellectual property rights for any FSRH qualification including documents, materials and content belonging to and produced by the FSRH should not be used for purposes other than FSRH training. Should you wish to use any of the IPR for purposes other than FSRH training you must seek the FSRH's approval in writing with your request via our [copyright request form](#). We aim to respond to submissions of this nature within one working week.