

Update to Faculty of Sexual and Reproductive Healthcare (FSRH) Training Programme

Changes to the FSRH Diplomate Assessment / Letters of Competence Frequently Asked Questions

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Introduction

The Faculty of Sexual and Reproductive Healthcare (FSRH) is changing the way the FSRH Diplomate Assessment (FSRH Diploma) and Letters of Competence (LoCs) are awarded from February 2014.

The three key changes are:

- Nurses can apply for the FSRH Diploma (NDFSRH) and Letters of Competence (LoCs).
- An online knowledge assessment (eKA) must be achieved before the start of any FSRH Diploma / LoC training.
- Doctors and nurses can attain a LoC without first attaining the FSRH Diploma.

The Faculty regularly reviews its qualifications to support high quality sexual and reproductive healthcare in the UK. These changes are being introduced in response to an independent evaluation of the programme, as well as taking into account the changing needs of those working in sexual and reproductive healthcare. The changes also reflect the fact that nurses are increasingly providers of sexual and reproductive healthcare.

One of the outcomes of the Quality Training project is to offer the opportunity to gain the Letters of Competence in intrauterine techniques (LoC IUT) and subdermal implants (LoC SDI) without first holding the FSRH Diploma.

However, the FSRH strongly recommends that LARC methods are offered within the framework of a comprehensive choice for women and men seeking contraceptive advice. The FSRH Diploma training programme is designed to support those who provide sexual health consultations in primary care, community and integrated sexual health clinics.

In order to ensure that those seeking to provide LARC methods also have a broad theoretical knowledge of sexual and reproductive healthcare, the eKA has been designed as an entry point. The content of the eKA is the same for everyone, whether travelling down the FSRH Diploma or LoC route, and will assess application of knowledge on all aspects of sexual and reproductive health, including all methods of contraception - not just LARC methods - so that patients are enabled to make an informed choice of contraceptive method.

Having done the necessary preparation for this it is likely that clinicians who have achieved a Letter of Competence will then choose to attend a 'Course of 5' and take their clinical assessments in order to also achieve the full FSRH Diploma.

The FSRH has received a number of questions regarding these changes and these are answered below:

2. Entry Requirements

2.1. Do I need to hold a medical or nursing qualification to apply for a FSRH Diploma or LoC?

Yes.

The FSRH qualifications are attainable by healthcare professionals with a medical or nursing qualification who are registered with the GMC or NMC (excluding Level 2¹).

2.2. Have the eligibility criteria for the FSRH Diploma and LoCs changed?

Yes.

- Healthcare professionals with a nursing qualification are now eligible to apply.
- A “Pass” must be attained in the eKA (an online Knowledge Assessment – see below)
- A confirmed completion from the eSRH is no longer required (although completing it is one option for gaining the knowledge to pass the eKA).

2.3. What is the difference between a DFSRH and a NDFS RH?

The only difference is the eligibility requirement for doctors and nurses applying for the FSRH Diploma. The content of the FSRH Diploma is otherwise identical for both groups. Doctors must demonstrate that they are competent in bimanual examination of the pelvis before applying for the DFSRH. Many nurses undertake training to become competent in bimanual examination of the pelvis but the FSRH does not consider this competence to be mandatory for nurses attaining the NDFS RH. However, nurses working towards the NDFS RH are required to have the related competency of speculum examination.

2.4. What are the requirements for demonstrating competence in bimanual examination of the pelvis for doctors?

Bimanual examination of the pelvis for doctors:

- This remains an eligibility requirement for the DFSRH and LoC IUT.
- This can be demonstrated by:
 - Self-certifying if a Consultant or qualified GP
 - Competency signed by a Consultant (doctor), qualified GP, FSRH registered trainer, SAS doctor for those in training.

2.5. What are the requirements for demonstrating competence in bimanual examination of the pelvis in order for nurses to train for the LoC IUT?

Bimanual examination of the pelvis for nurses:

- This is an eligibility requirement for the LoC IUT.
- This competence can be demonstrated by:
 - Completion of the RCN ‘Genital Examination in Women’ competencies
 - Competency signed by Consultant (doctor), qualified GP, FSRH registered trainer, SAS doctor in gynaecology.

¹ NMC Level 2 registration refers to the former “Enrolled Nurse” qualification for which training is no longer available.

2.6. Do I need to be an FSRH member to hold a FSRH Diploma?

Yes.

There is a requirement to be a Diplomate member of the FSRH to be awarded a FSRH Diploma (DFSRH or NDFSRH) for both doctors and nurses.

2.7. I already hold the FSRH Diploma: Do I still need to take the eKA before starting LoC training?

No.

If you hold a current FSRH Diploma (i.e. one that has been gained in the last 5 years, or which has been recertified within the last 5 years), then you are exempt from taking the eKA and may proceed directly on to the LoC training pathway. You will still need to satisfy the other entry requirements for the LoC.

2.8. I hold a STIF level 1 competency or the STIF intermediate competencies: Do I still have to do the STI sessions on the 'Course of 5'?

If you have passed either of these competency assessments, then you are not required to complete sessions 1 or 2 of the 'Course of 5'. Most candidates however will find these sessions a useful refresher and choose to attend them as part of their 'Course of 5'. It may not be possible to offer a reduction in the course fee to those who choose not to attend these sessions.

Candidates wishing to use this exemption for the 'Course of 5' sessions will need to upload the relevant STIF Competency certificates on to their e-Portfolio.

The STIF Level 1 Competency and the STIF intermediate competency are different to the 'STIF Day One' or 'STIF Plus' courses. Candidates who have attended either the 'STIF Day One' or 'STIF Plus' courses will be required to complete all 5 sessions and pass the assessments of the 'Course of 5'.

2.9. Do I need to be observed taking a cervical cytology sample as an Entry requirement for the FSRH Diploma?

The requirement to be observed taking a cervical cytology sample was discontinued for the FSRH Diploma on 31st January 2014

3. Recording Training Progress

3.1. How should I complete the FSRH Diploma entry requirements?

Until the updated entry requirements are available in the Diploma e-portfolio, the following is recommended:

Entry requirement 1 (Sexual history consultation)

Complete the existing entry requirement form 1, which is in the e-portfolio.

Entry requirement 2 (Gynaecological skills)

Complete the paper-based entry requirement form 2, which is in the e-portfolio.

Entry requirement 3 (Basic Life Support and anaphylaxis training)

Provide the Course of 5 Convenor with evidence up to date with resuscitation and anaphylaxis training.

3.2. How do I record my training progress for the FSRH Diploma?

All FSRH Diploma trainees (doctors or nurses) must register for an NES FSRH Diploma e-portfolio once they have passed the eKA and before attending a Course of 5. This online facility allows the trainee and trainer to record progress through the training programme. It is the main source of evidence that the trainee has met all the requirements for the award of the FSRH Diploma.

3.3. How do I record my training progress for a FSRH LoC?

All trainees must maintain a paper log, supplied by the FSRH through its website, of progress through the training programme for each LoC. The paper log is the main source of evidence for the award of a LoC.

4. Qualification & Training Costs

4.1. Do I need to pay for a FSRH Diploma / LoC and eKA?

Yes.

There is a fee for all FSRH qualifications including the eKA. FSRH members can claim a discount for certain FSRH qualifications / recertification. More details on all fees can be found below and on the FSRH website www.fsrh.org.

4.2. Does the FSRH eKA fee include any training or learning costs?

No.

The eKA fee of £75 is solely for the FSRH assessment of a trainee's sexual and reproductive healthcare knowledge in clinical scenarios. The fee does not cover any training or learning costs associated with the preparation for the eKA assessment.

4.3. What is the total cost of a FSRH Diploma / LoC?

The FSRH aims to keep its charges as low as possible for awarding qualifications. The main costs incurred to attain a qualification are related to the training. Local training programmes must be registered by the FSRH but agree their own prices. A full list of courses is available on the FSRH website and trainees can select the most appropriate course for their circumstances.

FSRH Diploma (DFSRH and NDFSRH)		
Course Item	Cost	To Whom Payable
e-SRH (optional) learning material	Free to NHS employees	
e-Knowledge Assessment (eKA)	£75.00	FSRH
e-Portfolio	£50.00 For a 2 year period	FSRH (This fee is passed directly to NHS Education Scotland)
Course of 5	Variable approx. £300.00	Local General Training Programme*
Clinical Assessment	Variable approx. £600.00	Local General Training Programme*
Award of Certificate	£80.00	FSRH
Award of Certificate – If already Associate Member	£53.00	FSRH
FSRH Diplomate Membership 2015 (Annual)	£97.00	FSRH
Recertification Fee	Included with membership	N/A

Letter of Competence (IUT or SDI)		
Course Item	Cost	To Whom Payable
e-Knowledge Assessment (eKA) (non-Diploma holders)	£75.00	FSRH
Clinical Assessment	Variable	Local General Training Programme*
Award of Certificate	£265.00 (£53.00 for Associates, Diplomates, Members or Fellows)	FSRH
Optional FSRH Associate Membership 2015 (Annual)	£75.00	FSRH
Recertification Fee (every 5 years)	£265.00 or Included with memberships as above.	FSRH

* Details of the local General Training Programme Directors who will advise regarding these programmes are on www.fsrh.org.

5. FSRH Membership

5.1. What is the difference between a FSRH Diplomate member and a FSRH Associate member?

Both Associate and Diplomate members receive the benefits of:

- 5 yearly recertification with a reminder letter 6 months before due date
- Reduced price on early bird registration for FSRH conferences
- Reduced price on Special Skills Modules Theoretical Courses
- Quarterly issues of the Journal of the Faculty Family Planning and Reproductive Healthcare
- Regular Newsletters
- Dedicated membership administrator
- Opportunity to participate in committee work
- Access to members only clinical enquiries
- Opportunities to participate in research projects
- Opportunities to network and exchange experiences relating to changes in SRH service provision
- Access to member's only section of the FSRH website.

Diplomate membership is linked to being awarded the FSRH Diploma and is therefore a qualification based membership of the FSRH. In addition to the standard membership benefits they are eligible to:

- Receive confirmation from the FSRH of a nationally recognised SRH qualification
- Use the post nominal (DFSRH, NDFSRH)
- Vote at the FSRH AGM and elect Council members
- Become an officer of the FSRH.

5.2. Do I need to be a FSRH member to hold a LoC?

No.

There is no requirement to be a member of the FSRH to be awarded a LoC. However, all doctors and nurses awarded a LoC are encouraged to become Associate members of the FSRH in order to access continuous professional development together with the member benefits listed in point 14 above.

5.3. Are there any fees for being an associate member?

Yes.

There is currently an annual fee of £75 (2016) to be an Associate member. Associate membership is available to doctors and nurses holding a current FSRH Letter of Competence.

6. Recertification

6.1. Do I need to recertify for the FSRH Diploma / LoCs?

Yes.

The Diploma / LoCs remain valid for 5 years from the date of award. Doctors and nurses can apply for re-certification by submitting the required evidence as set out on the FSRH web-site.

6.2. I am a nurse and I am due to complete the re-accreditation of my RCN LARC qualification. What do I need to do?

Nurses with an up to date RCN LARC qualification may choose to transfer them to the equivalent FSRH LoC. They have be written to by the RCN explaining their choices. On completion of this the standard FSRH LoC recertification process will be followed.

If a nurse has not actively chosen to transfer their RCN LARC qualification then it will remain active until it becomes due for recertification. At this point, the qualification will no longer be valid and should a qualification be required the FSRH LoC training programme must be completed before a FSRH LoC is awarded.

6.3. How is the FSRH LoC recertification different to the RCN LARC re-accreditation?

It is no longer possible to seek re-accreditation for a RCN LARC Accreditation. All holders of a RCN LARC Accreditation were invited to apply for a conversion to the equivalent FSRH LoC in early 2014.

The recertification of a FSRH LoC is similar to the RCN re-accreditation and the details are on the FSRH website - [LoC Recertification](#).

6.4. I am a nurse and my previous RCN LARC accreditation (SDI or IUT) was converted to an FSRH LoC. How do I recertify this?

You should follow the criteria on the recertification page of the website. If you hold current FSRH membership (diplomate or associate) then there is no cost when you apply for this. If you are not a current member then the cost will be £265 (2016).

6.5. I am a nurse and my previous RCN LARC accreditation (SDI or IUT) was not converted to an FSRH LoC. How do I recertify?

You will remain accredited until the date your RCN accreditation expires. If you wish to recertify using the FSRH route, since you chose not to accept the FSRH LoC at the time of transfer you would first need to apply for this. You can do this by following the pathway outlined for the LoCs on the training page and you may be able to do this using the criteria for an experienced practitioner.

6.6. I am a nurse and have a 'local' LARC accreditation for SDI/IUT. How can I 'recertify' and assure this is up to date?

If you wish to recertify using the FSRH route you will first need to apply for an FSRH LoC and you may be able to do this using the criteria for an experienced practitioner. You can then recertify according to FSRH criteria. For further information see the training and recertification pages. If this is not the case then you can discuss how you can demonstrate maintaining your competence with your local team.

6.7. I am a doctor with the FSRH Diploma and a LoC. Do I still need to recertify my FSRH Diploma in order to keep my LoC, or can I choose just to recertify my LoC?

The FSRH would recommend that any clinician performing LoC procedures should be optimally placed to give patients the full contraceptive choice - demonstrated by recertifying their FSRH Diploma. For a clinician who is providing contraception this should be straight forward. If a clinician chooses to let the FSRH Diploma lapse then their entry on the FSRH records would be amended to show 'not recertified'. If, at a later date, the clinician decides they wish to reactivate the FSRH Diploma then they could be required to retake the FSRH Diploma from scratch, depending on the FSRH guidelines current at that time.

7. FSRH Registered Trainers

7.1. What happens to the Faculty Nurse Registered Trainer (SDI)s?

Current Faculty Nurse Registered Trainer (SDI)s can continue to act as a primary trainer for nurses and doctors for the LoC SDI only. They are encouraged to consider completing the other elements required to become a Faculty Registered Trainer (FRT). Nurses who wish to be primary trainers for the diploma or LoC IUT must follow the recognised route to becoming a FRT, which is by gaining the PGA Med Ed (SRH) or through the equivalency route. The FSRH will provide recertification for current holders until 31 December 2015. For recertification after this date the PGA Med Ed (SRH) will be required.

7.2. I am an RCN recognised trainer, how do I apply to become an FSRH Registered Trainer?

Clinicians who wish to become a FSRH Registered Trainer must have a PGA Med Ed (SRH) or equivalent qualification and must hold the qualification for which they are providing training. Full details and an application form are available on the FSRH website here - [Trainers](#).

8. Online knowledge Assessment in SRH (eKA)

8.1. What is the eKA in SRH Assessment (eKA)?

The eKA in SRH is an online assessment of sexual and reproductive healthcare knowledge in clinical scenarios. A 'Pass' within the past two years is required before a trainee is eligible to enrol on a Course of 5 for the FSRH Diploma or any training relating to LoCs.

An eKA pass must be obtained within:

- 3 years of the final award of the FSRH Diploma
- 2 years of the final award of a LoC.

Details and access to the eKA are available on the FSRH website: www.fsrh.org.

Detailed Information about the eKA in SRH: [Main page](#) and [Information Sheet](#).

Quick access to taking the eKA: [eKA Application](#)

8.2. How many times can I take the eKA?

Currently there is no limit to the number of times the eKA can be taken. However, the eKA can only be attempted once a day and each assessment incurs a fee (see above).

8.3. I hold the FSRH Diploma: Can I take the eKA for my CPD?

The eKA will be open to anyone with a GMC or NMC number. However, it is not designed for CPD and may not be helpful for that purpose. The only feedback a trainee receives is a 'Pass or Fail' and it is not possible to demonstrate which areas were correctly answered.

8.4. I hold the FSRH Diploma: What happens if I fail the eKA?

The eKA is an entry requirement to the FSRH Diploma and LoC qualifications and the FSRH will only record a pass for trainee wishing to apply for the Diploma or LoCs. Should a holder of the FSRH Diploma or LoC attempt and fail the eKA this would be known to the individual and not added to their FSRH record.

8.5. Will a FSRH registered trainer need to see my eKA Pass certificate?

Yes.

The eligibility criteria for the 'Course of 5' or LoC training includes the attainment of an eKA pass. This can be evidenced by producing an eKA certificate within 2 years of the course date. The FSRH will check that an eKA Pass has been achieved before awarding a training qualification. An eKA certificate can be uploaded to the e-portfolio used for FSRH Diploma.

8.6. Does the eKA keep up-to-date with new clinical guidance published by the FSRH?

Yes.

The eKA questions are based on FSRH Clinical Effectiveness Unit (CEU) guidelines and UK MEC. Should any of the guidance be revised this will be reflected in the relevant eKA questions.

9. Special Transition Arrangements

9.1. I am a doctor and have started using the e-SRH programme. Is it still possible to use this when applying for the FSRH Diploma?

A doctor working towards the FSRH Diploma may choose to either complete their e-SRH training or attain a 'Pass' in the eKA until 31st March 2014. From 1st April 2014, all trainees must have achieved a pass in the eKA for SRH before progressing (e.g. 'Course of 5' or 'Model Training') with the FSRH Diploma or LoC training. Trainees who have progressed to the 'Course of 5' or the clinical assessments by 1st April 2014 do not need to take the eKA.

It is important that trainees who have completed the e-SRH have made a booking for a 'Course of 5' before 1st April 2014, which may then take place later in the year. Completion of the eSRH includes having completed the assessment module 15 before 1 April 2014.

Doctors who make a Course of 5 (C5) booking *on or before 31 March 2014* need to provide evidence prior to attending the C5 of:

Option 1

- Completion of entry requirements
- eKA pass

OR

Option 2*

- Completion of entry requirements
- Completion of e-SRH

*The C5 needs to have been booked on or before 31 March but can take place later in 2014.

Doctors who make a C5 *booking on or after 1 April 2014* need to provide evidence prior to attending the C5 of:

- Completion of entry requirements
- eKA pass

Nurses completing NDFSRH

This is a new programme so all applicants need to provide evidence prior to attending the C5 of:

- Completion of entry requirements
- eKA pass

9.2. When does my RCN LARC Accreditation become an FSRH LoC?

The FSRH would have converted your LARC Accreditation to an FSRH LoC immediately on receipt of a completed "Nurses Choice" form and sent a LoC certificate with the same dates as for your LARC accreditation.

9.3. I am a nurse who is an experienced SDI/IUT fitter but don't hold a current RCN LARC accreditation, do I need to complete the full LoC process?

You need to obtain a pass at eKA but can then complete under the experienced practitioner route with the agreement of the primary trainer. The current information is provided on the website - [LoC IUT](#) / [LoC SDI](#).

9.4. I am a nurse and have completed the 'Course of 5' and Clinical Assessments but previously could not apply for the FSRH Diploma. Can I now apply for the FSRH Diploma?

Possibly.

It will be necessary to first achieve a pass for the eKA. Until 1st June 2014, the FSRH will recognise a successful completion of a 'Course of 5' and clinical assessments within the past two years on condition that:

- The 'Course of 5' was recognised by the FSRH and has a course number
- The minimum number of clinical assessments were undertaken by an FRT and the FSRH paperwork was used.

10. Other helpful information for the FSRH Diploma & Letters of Competence:

Nurses who are taking the NDFSRH who are not competent to perform bimanual pelvic examination: How does this affect the clinical assessments for NDFSRH?

In order to complete an assessment a clinician should manage the patient within the limits of their professional ability. If a nurse is able to recognise that a bimanual pelvic examination is indicated, but is not competent to perform this and makes an appropriate, timely referral, this should not preclude the nurse from successfully completing the assessment if all other aspects are passed. This would be similar to the position of a clinician who might deem an ultrasound or other further examination necessary but refers the patient on to another professional for this.

Doctors would be expected to perform a bimanual examination as part of the management of the patient if this was indicated.

- 1) [An Introduction to FSRH Diploma](#)
- 2) [eKA information page](#)
- 3) If you have question that is not covered in these FAQ, please contact the FSRH by using this email: examsofficer@fsrh.org