Training Requirements for those wishing to complete a Letter of Competence in Subdermal Contraceptive Implant Techniques Insertion only (LoC SDI-IO)

IMPORTANT INFORMATION:
Please be advised that the Letter of Competence in Subdermal Contraceptive Implant Techniques Insertion only (LoC SDI-IO) is only open to those healthcare professionals working in abortion or maternity services. Currently this includes doctors, nurses and midwives working in the UK or S Ireland and are registered and licenced to practice (as necessary) with either the GMC, NMC, IMC, or NMBI. The FSRH retains the right to amend this list.

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1. Introduction

This document provides guidance for health professionals wishing to complete the training programmes leading to an award of a LoC SDI-IO. The LoC SDI-IO provides a training programme that will equip the learner with the evidence-based knowledge, attitude and skills required to consult with a woman requesting contraception, and to appropriately provide a SDI, manage complications and side effects. The LoC SDI-IO is awarded to those who have successfully achieved this training.

This award does not include the learning outcome to remove a SDI but there is an expectation that the holder will know the theory of how to remove an implant.

2. Reference to abbreviations used within this document:

Letter of Competence - LoC
Subdermal implant - SDI
3. **Learning Outcomes:** see learning outcomes below for the individual LoC SDIs.

LoC SDI holders will be able to:

- Advise women requesting contraception and enable them to make informed choices about managing their fertility.
- Demonstrate an effective contraceptive choices consultation.
- Appropriately consult with and assess women who wish to use SDIs
- Describe the composition and pharmacokinetics of implants and potential drug interactions
- Explain the indications and contraindications, medical eligibility criteria, advantages and disadvantages, side effects and complications of SDI use
- Describe the mode of action and contraceptive efficacy of implants
- Demonstrate competence in insertion of SDIs in conscious women, to include the use of local anaesthesia
- Manage medical emergencies associated with insertion
- Know the theory of how a SDI is removed and be able to describe this procedure to a patient
- Be able to describe and advise on the management of problematic bleeding associated with SDIs
- Describe the management of an impalpable implant.
- Describe the local referral pathway for removal of SDIs

The training provided should meet the standards contained in the FSRH CEU guidance, FSRH service standards and BASHH clinical guidelines where applicable.

4. **Personal beliefs guidance:** please see https://www.fsrh.org/careers-and-training/letter-of-competence-subdermal-implants-loc-sdi/ section of the FSRH website to read the guidance - "Guidance for those undertaking or recertifying FSRH qualifications whose personal beliefs conflict with the provision of abortion or any method of contraception".

You should read this before undertaking training. You will be asked on application to the FSRH to confirm you have read the guidance and will abide by the principles of it in your practice. This is part of the Faculty’s conditions for undertaking or recertifying a FSRH qualification.

5. **Entry requirements**

1. This Letter of Competence in Subdermal Contraceptive Implant Techniques Insertion only (LoC SDI-IO) is currently only open to those healthcare professionals working in abortion or maternity services. This includes doctors, nurses and midwives working in the UK or S Ireland and are registered and licenced to practice (as necessary) with either the GMC, NMC, IMC, NMBI.
2. Must have completed the FSRH Contraception Counselling online learning: Register and access the course here: FSRH Contraception Counselling Free Online Course (the certificate of completion must be reviewed by the Primary Trainer). Evidence will be required.
3. Must have completed the e-SRH Modules 3 (Contraceptive Choices) & 14 (Additional Training in Sub-dermal Contraceptive Implants) online learning: register and access the online learning here: e-Learning for Healthcare (certificates of completion must be reviewed by the Primary Trainer). Evidence will be required.
4. Must be competent in consultation skills (trainee to self-certify competence on application form)
5. Up to date with resuscitation and anaphylaxis – in accordance with local policy (up to date certificates must be reviewed by Primary Trainer)
6. Competent to give intramuscular injections (trainee to self-certify competence on application form)
7. To have read the current FSRH CEU guidance on SDIs and be conversant with its content and abide by them.
Useful learning: Essential Contraception for Midwives and Essential Contraception for Abortion Care Providers are evidence based courses, designed by FSRH to provide baseline contraceptive knowledge. Attendance at one of these courses is not an entry requirement for the LOC SDI-IO but is strongly recommended.

6. Prescribing and Patient Group Directions (PGDs)/Patient Specific Directives (PSDs)

Healthcare Professionals, who are not non-medical prescribers, will need to consider what mechanisms are in place for the legal supply and/or administration of implants and local anaesthetic in their area of practice. These may include patient group directions (PGDs) or patient specific directives (PSDs). It is the midwife/nurse’s responsibility to ensure these are in place – completion of this Letter of Competence does not confer that authority. PGDs should be devised and authorised in accordance with NICE Medicines Practice Guidelines (Patient Group Directions MPG2) 2013.

7. Maximum timeframes

There are maximum timeframes allowed between completing stated entry requirements and completing assessments within the LoC.

- Completion of online learning (e-SRH Modules and the FSRH Contraception Counselling) and start of model arm training/clinical assessments - 6 months.
- Completion of online learning (e-SRH Modules and the FSRH Contraception Counselling) and LoC application/submission – 18 months.

There may be a requirement to repeat the e-SRH Modules and model arm training if they are not within these timeframes.

Where an application does not meet these requirements, further training will be required prior to certification.

8. Primary Trainer

The Primary Trainer is responsible for the initial assessment and planning of an appropriate training programme with the trainee and must oversee the training, which is undertaken within a General Training Programme. The Primary Trainer must be a Faculty Registered Trainer (FRT) and must hold the LoC SDI-IR.

A Primary Trainer may delegate some training and assessment to a clinician who they deem suitable to carry out this role. This clinician must hold the LoC SDI-IR but does not need to be an FRT.

The Primary Trainer must supervise a MINIMUM of one COMPETENT insertion.

The responsibility for the entire training and certification of competence lies with the Primary Trainer. The Primary Trainer cannot delegate the confirmation of entry requirements or the confirmation of competence to another trainer.

9. Premises for training

Training should be undertaken in premises deemed suitable by the Primary Trainer.
10. Practical training

10.1 Model arm training

The trainees should become familiar with instruments and techniques required for insertion of SDIs (model arm training). The Primary Trainer will demonstrate the insertion procedure of a currently available SDI on a model arm. The trainee will then practice these techniques on a model arm until the primary trainer is satisfied that the trainee is competent.

10.2 Clinical training

All procedures must be performed on conscious women who have agreed to take part in the training process.

During the clinical training trainees must demonstrate the ability to conduct an appropriate contraceptive choices consultation and a pre-insertion counselling consultation and the trainer must complete a mini-CEX for each to evidence this (see Appendices for Mini-CEX A Contraceptive choices consultation and Mini-CEX B Pre-insertion counselling consultation).

The trainer will demonstrate the insertion procedure of a currently marketed SDI. The trainee will then undertake supervised insertions until the trainer is satisfied that the trainee is competent. There is no specified limit to the number of insertions required for training purposes.

Practical training must continue until the Primary Trainer is satisfied with the level of competence achieved by the trainee. ALL training experience (both theoretical and practical) must be recorded on the LoC SDI-IO Record of Training Form.

For the Primary Trainer to recommend the award of the LoC SDI-IO the trainee must be observed performing at least three competent insertions. At least one of these must be observed by the Primary Trainer.

The candidate is expected to observe a removal of an implant from a live patient during the course of their training.

Amendment for duration of Covid Pandemic only - under current circumstances very few removals are being done as they impose a higher infection risk so it may not be possible for the trainee to observe one. If that is the case, then the trainer needs to have a discussion with the trainee about the technique of implant removal and the difficulties that can arise. The trainer may direct the trainee to watch the removal videos on e-LfH or MSD.

The checklist, available in the Appendices to this document, should be considered for all insertions and are suggested tools for assessment of competency. These checklists do not need to be submitted with the record of training.

11. Application for LoC SDI-IO

- On satisfactory completion of training the trainee should send the completed relevant LoC SDI-IO application form and the appropriate fee to the LoC SDI administrator of the FSRH for the issue of the Letter of Competence.

- Application fee: For members the rate per LoC is £80 or for non-members the rate per LoC is £200. Please note an introductory fee for 2021 is £200 as compared to usual non-member fee of £400. This has been agreed to support implementation of post-natal contraception. To find out more about the LoC fee please visit this web page
*If you are not already a FSRH member, you may wish to become an Associate member and benefit from a reduced fee for your LoC application. As an up to date Associate member your membership includes recertification costs, so there are no additional administration costs every 5 years. Associate members also benefit from access to our Journal, clinical guidance, webinars and conference discounts. These benefits are designed to support ongoing learning and development. To find out more about our membership benefit click here.

The current cost of joining as an Associate member is £94 if the application is made between 1 January 2021 and 30 June 2021. The joining fee is £47 if the application is made between 1 July 2021 and 31 December 2021. The subsequent annual Associate membership fee is due on 1 January 2021 and then the following years.

- Trainees must also complete the evaluation of their training experience. You will be able to complete this evaluation as part of your online application form on FSRH website. The FSRH’s General Training Committee takes evaluations seriously and is committed to following up appropriately on any suggestions or comments. For this reason, the LoC SDI will not be awarded until the training evaluation form has been completed.

  The local trainers or training programme may also request a separate written feedback form relating to more local training issues.

- The FSRH’s General Training Committee reserves the right to request clarification of the contents of the report on the trainee before final approval of the certificate.

- It should be noted that these LoCs relate to current SDIs. It is the trainee’s responsibility to undertake the necessary training relating to any new devices introduced in the future.

12. Recertification

The LoC SDIs require recertification every five years. This will evidence continued professional development and ensures maintenance of the knowledge, skills and attitude and behaviour needed to provide safe and effective sexual and reproductive health care (SRH). Details of the requirements can be found on the FSRH website. FSRH website.

Forms for the online application for recertification of the LoC SDI-IO are available online at the FSRH website.

13. 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.
14. Appendices

**Mini-CEX Form A**
**Contraceptive choices consultation (part of LoC SDI-IO)**

Discussion of the completed forms between the trainer and the trainee are encouraged. Such feedback will support the trainees’ formative learning and plans for development.

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<tr>
<th>Date of assessment</th>
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**Brief Description of scenario**

**Areas to consider**

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<tr>
<th>Areas to consider</th>
<th>Working towards competence</th>
<th>Competent</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>History taking</strong> (including contraindications to contraception, pregnancy and STI risk)</td>
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<td></td>
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<tr>
<td><strong>Clinical Judgement</strong> (application of knowledge about suitable contraceptive methods)</td>
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<td><strong>Physical examination</strong> if appropriate</td>
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<tr>
<td><strong>Communication skills</strong> (use of appropriate terminology/models/leaflets/clear instructions)</td>
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<tr>
<td><strong>Professionalism</strong> (non-judgemental, respectful and courteous)</td>
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<tr>
<td><strong>Planning ahead</strong> (bridging contraception, starting regimes and practical considerations)</td>
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<tr>
<td>Areas performed well</td>
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<th>Areas requiring development</th>
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<tr>
<th>Learning plan</th>
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</table>

<table>
<thead>
<tr>
<th>Competent in all areas</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trainer name</td>
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<td></td>
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<tr>
<td>Trainer signature</td>
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<tr>
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<tr>
<td>Date</td>
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</table>
Mini-CEX Form B  
Pre-insertion counselling consultation (part of LoC SDI-IO)

Discussion of the completed forms between the trainer and the trainee are encouraged. Such feedback will support the trainees’ formative learning and plans for development.

<table>
<thead>
<tr>
<th>Date of assessment</th>
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<table>
<thead>
<tr>
<th>Brief Description of scenario</th>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Areas to consider</th>
<th>Working towards competence</th>
<th>Competent</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>History taking:</td>
<td></td>
<td></td>
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<tr>
<td>• Take an appropriate medical history without use of proformas</td>
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<td>• Conduct a sexual health risk assessment</td>
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<tr>
<td>Clinical Judgement (use of knowledge about implants, when fitting can be performed safely, drug interactions and consideration of STI screening)</td>
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<tr>
<td>Planning for fit (contraception prior to fit e.g. bridging contraception and what to expect at fit)</td>
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<tr>
<td>Professionalism (non-judgemental, respectful, and courteous)</td>
<td></td>
<td></td>
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<tr>
<td>Communication skills (use of lay terminology/models/written information)</td>
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</table>
### Areas performed well


### Areas requiring development


### Learning plan


<table>
<thead>
<tr>
<th>Competent in all areas</th>
<th>Yes</th>
<th>No</th>
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<tr>
<td>Trainer name</td>
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<td>Trainer number</td>
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<td>Date</td>
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</table>
Insertion checklist

Discussion of the completed forms between the trainer and the trainee are encouraged. Such feedback will support the trainees' formative learning and plans for development.

Name of trainee________________________   Date of assessment_______________

Instructions for trainers: Complete a separate form for each implant insertion procedure you observe. (In order for the insertion to be deemed competent overall, each of the 8 steps listed below must receive a tick in the satisfactory column)

Please indicate IMPLANT used:

<table>
<thead>
<tr>
<th>Not observed</th>
<th>Needs improvement or requires supervision</th>
<th>Satisfactory; independent practice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step not performed by trainee during evaluation by trainer</td>
<td>Unable to perform step independently or according to standard procedure OR trainee required prompting</td>
<td>Step or task performed independently according to the standard</td>
</tr>
</tbody>
</table>

1. **Pre-insertion preparation:**
   - Provides overview of procedure.
   - Offers to answer any questions.
   - Considers risk of pregnancy, or shows evidence of quick starting
   - Displays assessment of relevant medical history in particular interacting drugs, allergies and medical contraindications
   - Discusses options for analgesia.
   - Obtains valid consent.

2. **Identifies correct insertion site:**
   - Positions individual correctly
   - Inserts implant superficially at the appropriate site over triceps, avoiding groove between biceps and triceps

3. **Local anaesthetic**
   - Administers LA safely

4. **Inserting the implant:**
   - Punctures the skin at angle < 30.
   - Retracts needle until edge of the bevel seen.
   - Lowers applicator to horizontal position.
   - Tents the skin
   - Slides the needle to its full length.
   - Correct deployment of implant from applicator.
   - Palpates implant after insertion and identifies pop-out sign

5. **Infection control**
   - Uses aseptic “no touch technique”.
   - Correct handwashing technique.
   - Applies appropriate dressing to insertion site.
   - Advice to keep insertion site clean and dry for 24-48 hours

6. **Post-insertion management:**
   - Provides post-insertion instructions:
     - Any requirement for additional contraceptive precautions and follow-up pregnancy testing
     - Instructions for dressing removal, wound care and removal of paper sutures
     - Likelihood of initial discomfort and bruising
     - Signs of local infection and how to access review if infection is suspected
     - How to feel for the implant after removal of dressing
     - How to access review of adverse effects and implant removal services
     - When to attend for replacement

7. **Documentation**
   - Completes record of consultation and procedure including:
     - Arm and location in arm, type and amount of local anaesthetic:
       - batch number, expiry date
     - whether palpated by clinician +/- patient
   - Demonstrates understanding of auditing personal fits

**Overall assessment of managing a patient requesting an insertion of a SDI:**
- **Requires supervision** – one or more step not performed correctly according to standard OR was omitted OR requires supervision

- **Competent** - implant insertion performed correctly in proper sequence and each step performed according to the standard procedure or guidelines – no supervision required

(In order for the insertion to be judged competent overall, each of the 8 steps listed above must be deemed satisfactory)

Especially good points:

Suggestions for development:

Agreed Action:

Name of assessor_________________ FRT number______

Signed by assessor_______________ Signed by trainee____________ Date________