Sexual health competencies:
an integrated career and competency framework for sexual and reproductive health nursing
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✦ Genito Urinary Nurses Association (GUNA)
✦ London Standing Conference Sexual Health Working Group (LSFSHWG)
✦ Royal College of Nursing (RCN)
✦ National Association of Nurses for Contraception and Sexual Health (NANCSH)
✦ Faculty of Family Planning and Reproductive Health Care (FFPRHC)
✦ fpa.

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Eirlys Warrington, Chair RCN Council
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# Sexual health competencies:

*an integrated career and competency framework for sexual and reproductive health nursing*

Approved by the RCN Accreditation Unit until July 2005

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Preface

Developing partnerships

This competency framework spans sexual and reproductive health nursing practice across the UK. It is the result of a widespread consultation process involving all the stakeholders, and a thorough review of existing national and international competency frameworks to identify the competencies relevant to sexual and reproductive health.

The process began in 2001 when the London Standing Conference Sexual Health Working Group approached the Medical Society for the Study of Venereal Diseases (MSSVD) to ask for support to address the development needs of nurses. MSSVD Council agreed to set up a Nurse Education Group, with representation from the Genito Urinary Nurses Association (GUNA) and the RCN. This group met on several occasions over 18 months and produced an initial competency framework for nurses working with sexually transmitted infections.

This core group developed into the Sexual Health Competency Group, which included the Faculty of Family Planning and Reproductive Health Care, fpa and the National Association of Nurses for Contraception and Sexual Health (NANCSH) and GUNA. This larger group provided representation across all countries, and ensured an integrated approach to the development of this competency framework.

Kathy French
RCN Sexual Health Adviser

Kevin Miles
Nurse Consultant
Camden PCT, London

Foreword

Currently, there is no clear pathway for nurses working in sexual and reproductive health, in terms of competencies or skills needed to deliver optimum care to clients.

Nurses are undertaking increased roles within sexual health care and these competencies, which were the result of partnership working, will help nurses to progress from one level to another in a co-ordinated way.

This framework will initially be used to help with training and development activities for all nursing staff within the specialist area of sexual and reproductive health care services. The framework will also be relevant to nurses providing sexual health care in non-specialist services, such as general practice.

Providing signposting to courses and websites, Sexual health competencies can help nurses access further information on sexual and reproductive health, which should improve the outcomes for their client group.

Whilst this publication was not specifically written alongside what is happening with Agenda for Change (AfC), it will assist nurses, their managers, clinical mentors and the individual nurse to review their strengths and identify any gaps and training needs for further developments.

I am delighted with the publication of these competencies for nurses and I am sure that nurses and curriculum leaders will utilise them for the benefit of nurses in sexual health and in turn, for the benefit of clients who use the services.

Cathy Hamlyn
Head of Sexual Health, Substance Misuse & Health Inequalities
Department of Health
Introduction

Competence can be defined as: “The state of having the knowledge, judgement, skills, energy, experience and motivation required to respond adequately to the demands of one’s professional responsibilities” (Roach, 1992).

We are faced with rapid increases in acute sexually transmitted infections (STIs), increases in new HIV diagnoses and the highest rate of teenage pregnancies in Western Europe. The sexual health of people in the UK today is a serious concern. This is the background against which we see an increasing need for competencies for sexual and reproductive health nurses.

We believe the integrated career and competency framework is an important step forward for sexual and reproductive health nursing. It addresses a number of political and professional issues, and initiatives including:

✦ Agenda for Change (DH, 1999)
✦ need for leadership in specialist nursing
✦ need for the development of standards
✦ need to deliver on the sexual health strategies
✦ NHS Plan (DH, 2000) and its equivalent in Scotland, Wales and Northern Ireland
✦ increased focus on work-based and lifelong learning plus supervision
✦ changing focus towards professional rather than academic accreditation
✦ the Department of Health’s Choosing health. Making healthy choices easier.

The framework focuses on nursing care that is specific to sexual and reproductive health, but it can be used together with other frameworks that highlight core nursing skills and competencies.

Creating new opportunities

Developing new roles for sexual and reproductive health nurses is not only creating opportunities to expand the range of services available to clients, but is also providing new career development prospects. However, if nurses are to advance their clinical roles, education and training agendas need to reflect these changes. Nurses new to the specialty also need a clear framework to enable them to develop their skills and knowledge.

This document outlines a framework of competencies for sexual and reproductive health nurses from primary, secondary and community care settings across the UK. They are intended to stimulate further discussion at local level, and are neither exhaustive nor highly specific. They are designed to help nurses to provide safe, effective and accountable care to clients. The framework is not prescriptive, but acts as a template that can be modified to suit local and individual need.

For example, specific competencies related to performing a cervical smear or testicular examination might require further detailed guidance if identified as a local staff training requirement. In addition, not all competencies will be relevant to every nurse. The type and level of service being provided will define specific competency requirements.

The framework for sexual and reproductive health nursing can be used to:

✦ help managers (or clinical mentors, including doctors) and individual nurses to review their strengths and identify gaps in their competence and specific training and development needs
✦ provide a basis for the assessment of competence
✦ inform the commissioning, development and delivery of education and training for sexual and reproductive health nurses
✦ support professionals locally in recruitment and selection procedures.

Agenda for Change

The framework has primarily been developed to support nurses delivering services in the community, not to support the NHS Knowledge and Skills Framework (NHS KSF). Therefore, you should not use this document as means for determining your career and pay progression under the Agenda for Change pay modernisation process. However, it should be used to complement the NHS KSF by providing specific competencies related to sexual and reproductive health.

Summary

Negotiations on a set of new terms and conditions began in 1999 when the health departments of England, Northern Ireland, Scotland and Wales published a document called Agenda for Change (AfC). Agenda for Change will reform the current pay, career structure and
terms and conditions of work for all NHS nurses and health care assistants. Talks came to an end in November 2002, and the Government published a set of proposals in January 2003. In 2003 the RCN voted in favour for AfC, and most other unions that balloted members also voted in favour.

AfC will be implemented from December 2004 (with pay, terms and conditions backdated to October 2004) and will apply to all NHS organisations and therefore sets a UK framework for pay, terms and conditions of employment.

AfC will mean that all staff will have clear and consistent development objectives; can develop in such a way that they can apply the knowledge and skills appropriate to their level of responsibility; and are helped to identify and develop knowledge and skills that will support their career progression.

Under the proposed system, jobs will be evaluated using a Job Evaluation scheme. This will give each job a weighting, which will then determine where each job slots into the new pay bands. To aid transition to the new system common ‘job profiles’ are being finalised across the countries. Where a job fits a profile it would be possible to place it straight onto an appropriate new pay band. For those jobs which don’t automatically fit a profile, trained job evaluators drawn from management and staff side will carry out the evaluation. Each pay band will have a number of points. Staff below the maximum point can expect to progress to the next point each year.

There will, however, be two points on each pay band called gateways, at which staff’s knowledge and skills will be assessed using the Knowledge and Skills Framework (KSF). Pay progression at these gateways will be linked to the demonstration of applied knowledge and skills to support continuing professional development.

For more comprehensive information on Agenda for Change please refer to www.rcn.org.uk/agendaforchange/
How to use the competency framework

What is a competency framework?

A nurse is competent when they have the skills and abilities required for lawful, safe and effective professional practice without direct supervision. There are broadly three models of competence:
- what people need to achieve – outcomes (standards) models
- what people need to possess – educational models
- what people are like – personal competence models.

This framework uses an outcomes competence model. Taking this approach focuses on the expectations of the person who is undertaking a particular area of work or work role. The document describes what knowledge and skills individuals need in order to achieve the specific outcomes or standards of sexual and reproductive health care.

How can you use this competency framework?

The competency framework will initially be used to help with training and development activities for all nursing staff working in specialist sexual and reproductive health care services. However, elements of the framework are also relevant to nurses in non-specialist services, such as general practice. The framework describes the competencies nurses providing sexual and reproductive care need to achieve and maintain in order for their care to be lawful, safe, effective and accountable.

For training and development the framework could be used as a tool in the following ways to:
- facilitate continuing professional development on an individual level
- help managers (or clinical mentors) and individual nurses identify gaps in their competence, and to identify specific training and development needs
- help identify training and development needs that may be common to nurses in a service at organisational unit level
- inform the commissioning, development and delivery of education and training for nurses.

The framework could also be used to aid performance appraisal and, in the long-term, to aid recruitment and retention to the specialty. Although the value of the framework will be maximised at local practice level, it will also assist universities to plan and deliver programmes that meet the needs of services better.

The structure of the framework

The framework is centred on the client experience of the multidisciplinary team working in sexual and reproductive health care settings, and is set in the context of professional nursing practice. It provides competencies that are additional to those outlined in the NHS knowledge and skills framework (KSF), although some may be complementary.

The framework consists of five key competencies that are seen as specific to sexual and reproductive health nursing practice. They are ordered in a way that follows the patient pathway through sexual and reproductive health care services. It is anticipated that individual nurses would need to apply their knowledge and skills across the competencies in order to achieve the expectations outlined in their job description. It is likely that most job descriptions will cover an element of each competency.

Key competencies

1. clinical assessment
2. clinical examination and specimen collection
3. interpretation and provision of findings
4. provision of treatments and therapies
5. health promotion.

Each of the competencies is described across three levels of clinical practice, with each level building upon the preceding level(s).

Levels of clinical practice

- registered practitioner
- senior registered practitioner
- consultant practitioner.

Attached to each competency are:
- specific areas of competency, each with an overarching statement that gives an overall flavour of what the competency is about
- a number of statements, referred to as indicators that represent the knowledge, skills and attitudes required for safe, effective, accountable and acceptable client care.

As individuals progress through the levels of practice, they will achieve the respective level of competence.
Assessing competence

It is generally accepted that there is a need for a common approach to the assessment of competence in sexual and reproductive health care settings. By doing this, services can be reassured that there is transferability in the skills that are required for patient care within and across services. To this end, it is hoped that additional work will follow this document to develop a common approach to assessment with the aid of a specific assessment toolkit. In the meantime, a list of assessment approaches has been suggested.

Assessment approaches

Various approaches should be combined rather than selecting one approach used in isolation. Bear in mind that these suggestions are not exhaustive and alternative assessments may be appropriate in different settings:

✦ observation and critical analysis of every day practice
✦ audit and notes review
✦ case presentations
✦ observed structured clinical examinations (OSCEs)
✦ excerpts from a reflective diary, with self-assessment of competence, identified development needs and an action plan
✦ testimony of the individual’s contribution to nursing practice, for example, the co-ordination of care management for one or a group of patients
✦ active contribution to policy groups, developing or revising guidelines, standards, audits.
✦ evidence of change or project management
✦ certificate of attendance and an evaluation of the outcomes of study days or courses
✦ demonstration of evidence-based practice, with supportive literature, protocols etc
✦ planning, delivering and evaluating teaching sessions
✦ individual performance review
✦ 360° feedback process
✦ personal and professional development portfolio
✦ active involvement in clinical supervision, mentorship and multidisciplinary meetings
✦ demonstrable ability to liaise with the multidisciplinary team and external agencies
✦ a relevant contribution to a verbal discussion about patient care that is appropriate for the individual’s level
✦ contribution to local or national documents, or journals about service delivery, education etc
✦ leading or contributing to a journal club or other in-house teaching and learning sessions
✦ written documentation about patient care that is appropriate for the individual’s level.

The strength of the competency framework lends itself to assessment of nursing practice at local level in partnership with medical and allied health colleagues. However, assessment may also take place through university courses and formal examinations. The practitioners who carry out the assessments should have adequate expertise and training in the assessment and mentoring process, in addition to a higher level knowledge of sexual and reproductive health care. For example, it may be the unit charge nurse who provides mentorship and assessment for a nurse who is new to the specialty of sexual and reproductive health. While a medical consultant may provide mentorship and assessment of a nurse working at senior practitioner level. A consultant practitioner may receive strategic development mentorship from their director of nursing.

However, some nurses may be in a position where there is no suitably qualified person onsite to provide competency assessment. For example, a practice nurse wanting to develop competence in contraceptive counselling or STI risk assessment may need to seek out a local specialist service to gain training and assessment.

Finding further information

You can find useful contacts and continuing professional development resources in Section 6 at the end of the document.
Defining the levels of nursing practice

In 1999, a new career structure was proposed to replace clinical grades for nurses, midwives and health visitors. This structure incorporated the new nurse, midwife and health visitor consultant posts that are significantly extending the career opportunities for nurses who wish to climb the career ladder, but remain in clinical practice (see figure below).

To begin with, the role of the registered practitioner in the sexual and reproductive health setting is generally limited to that of supporting doctors and senior nursing colleagues providing individual episodes of client care. The nurse develops their expertise, skills and tasks relevant to the local setting. The nurse learns how to deliver health promotion and education, and to supply and administer specific medications.

The interpersonal skills of all sexual and reproductive health nurses develop so that they can initiate discussions about the use of contraception, risk behaviours for pregnancy, STIs and HIV. They learn when and how to refer clients directly to other health care professionals such as health advisers and clinical psychologists, and how to document client care. Experienced nurses are also able to provide the ongoing management of specific sexual and reproductive health care, such as contraceptive care and the treatment of genital warts.

Competencies from this level of practice may also be suitable for nurses working in non-specialist primary and community care settings. The National Strategy for Sexual Health and HIV outlines a new model of working that includes level one services, such as general practice, where a number of elements of sexual health care will be required. This includes, for example: sexual history and risk assessment; HIV testing; STI testing for women; pregnancy testing and referral; contraceptive information and services; assessment and referral of men with STI symptoms; cervical cytology screening and referral; and hepatitis B immunisation. Many of these elements are covered in the competency framework for this level of nursing practice, and can be adapted to local level.

Qualification needed
✦ registered nurse
✦ working towards sexual health and/or contraception foundation course/higher education diploma or first degree appropriate to setting.

Experience needed
✦ to be determined locally.

Level 3: senior registered practitioner
Senior registered practitioner level is often regarded as specialist or advanced practice, but it is the extension and expansion of the registered practitioner role. Experienced senior registered practitioners typically reflect nurses in a threshold that is in line with the general competencies required for registered nurses to enter the register of the Nursing and Midwifery Council.

The following structure to define the levels of sexual and reproductive health nursing practice across the UK was based on, and adapted from, the nursing career structure for England and Wales.

The competency levels

Level 1: health care assistant
This document does not explicitly discuss competencies for the level of practice of health care assistants. However, relevant competencies may be drawn from other levels of practice according to local agreement. For example, core competencies from communication and diversity are applicable to all levels of sexual and reproductive health care practice.

Level 2: registered practitioner
This level defines the entry point for registered nurses to the specialty of sexual and reproductive health. Competencies at this level should have a minimum

Qualification needed
✦ registered nurse
✦ working towards sexual health and/or contraception foundation course/higher education diploma or first degree appropriate to setting.

Experience needed
✦ to be determined locally.

Level 3: senior registered practitioner
Senior registered practitioner level is often regarded as specialist or advanced practice, but it is the extension and expansion of the registered practitioner role. Experienced senior registered practitioners typically reflect nurses in a threshold that is in line with the general competencies required for registered nurses to enter the register of the Nursing and Midwifery Council.

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A diverse range of posts including sisters/charge nurses, community nurses, midwives, health visitors, nurse practitioners and clinical nurse specialists.

Sexual and reproductive health nurses practising at this level of clinical practice are able to work according to local protocols and to co-ordinate the comprehensive care of clients, who could equally be cared for by doctors. The nurses can work autonomously without necessarily asking the advice of a doctor. Any nurse working at this level is required to work within the boundaries of their own knowledge and competence, and refer to, or seek advice/opinions from medical colleagues for cases beyond their clinical expertise. Nurses providing contraception services are able to assess individual contraceptive needs, supply specified contraception medications, either as nurse prescribers or through the use of patient group directions (PGDs), and insert intrauterine devices and implants. For the management of STIs, senior registered practitioners are able to draw up a sexual history, perform a genital examination, collect specimens, identify a diagnosis and provide results and health promotion. Selected treatments can be provided either through nurse prescribing or PGDs.

The expected workload of senior registered practitioners can differ between settings depending on local need, resource and infrastructure. For example, some nurses will only see clients who are asymptomatic, others only men or only women, or only those who have previously been seen by medical colleagues. Some nurses will see clients who could be cared for by doctors. Despite the different types or levels of client care that sexual and reproductive health nurses provide, it is felt that there are core competencies that are central to all levels of senior registered sexual and reproductive health nursing practice.

**Qualification needed**
- registered nurse
- working towards first or masters degree related to sexual and/or reproductive health
- specialist-specific professional training/qualifications for advanced practice roles such as nurse prescribing, insertion of intrauterine devices and implants.

**Experience needed**
- two years working in the sexual and/or reproductive health care setting.

**Level 4: consultant practitioner**
Although this level of practice typically reflects experienced and expert practitioners holding nurse, midwife or health visitor consultant posts, some senior nurses may have specific elements of this level of practice incorporated into their job descriptions. For example, some senior nurses may have a consultancy function, or lead on policy development for their unit or trust.

The consultant practitioner will generally provide clinical and public health leadership and consultancy to senior registered practitioners and others. They will also initiate and lead significant practice, education, research and service development initiatives. Nurse, midwife or health visitor consultant posts are generally designed to satisfy the needs of the service in which they are established. However, all posts need to conform to a common core of expectations outlined by the former NHS Executive. These are:
- expert practice
- professional leadership and consultancy
- education, training and development
- practice and service development, research and evaluation.

As with the other levels of nursing practice, the consultant practitioner will work in a multidisciplinary team environment.

**Qualification needed**
- registered nurse
- masters or doctorate related to sexual and/or reproductive health
- specialist-specific professional qualifications commensurate with standards proposed for recognition of a higher level of practice in the sexual and/or reproductive health care setting.

**Experience needed**
- five years working in the sexual and/or reproductive health care setting
- recent or ongoing research work in the sexual and/or reproductive health care setting
- evidence of education and training initiatives in the sexual and/or reproductive health care setting
- evidence of developing projects and implementing policies and procedures in the sexual and/or reproductive health care setting.
# The competency framework for sexual and reproductive health nursing

## Client assessment

<table>
<thead>
<tr>
<th>Clinical</th>
<th>Risk</th>
<th>Psychosocial</th>
<th>Knowledge and information</th>
<th>Consent</th>
</tr>
</thead>
<tbody>
<tr>
<td>✦ Recognises own role in assessing the client's clinical condition and presenting issues in accordance with national and locally agreed assessment guidelines.</td>
<td>✦ Identifies client risk factors in respect of STIs, blood-borne infections, pregnancy and use of contraception methods.</td>
<td>✦ Demonstrates an understanding of, and is able to assess psychosocial/psychosexual issues.</td>
<td>✦ Provides relevant information to enable the client to make informed choices on their care and condition.</td>
<td>✦ Seeks client consent to enhance and protect individual care.</td>
</tr>
</tbody>
</table>

### Level 2: registered practitioner

<p>| ✦ Demonstrates an understanding of what constitutes sexual risk-taking behaviour. | ✦ Demonstrates a general understanding of the various contraceptive methods as well as their risks and benefits. | ✦ Obtains and records new information regarding the clients sexual and reproductive health history. | ✦ Communicates new information regarding the client's sexual and reproductive health history to colleagues in a timely manner. | ✦ Demonstrates an awareness of the range of psychological attributes of sexual dysfunction. | ✦ Liaises with colleagues in assessing and referring clients for psychological and psychosexual assessment and support. | ✦ Provides accurate information to the team on the support that individuals will need and the impact on their own work. | ✦ Demonstrates an awareness of relevant information resources available e.g. client leaflets, internet sites. | ✦ Seeks client consent at each level of care, particularly prior to any clinical procedure. | ✦ Demonstrates a clear understanding of the law and guidelines with regard to working with younger clients. | ✦ Seeks client consent at each level of care, particularly prior to any clinical procedure. | ✦ Advocates on behalf of the client to ensure that consent to clinical procedures is well informed. | ✦ Explicitly considers the guidance such as the Fraser Guidelines in the assessment of any young person’s capacity to provide valid consent. | ✦ Accurately records the factors taken into account in making the assessment of any young person’s capacity to give valid consent. | ✦ Liaises with senior colleagues when a young person’s capacity for consent is insufficient or questionable. |</p>
<table>
<thead>
<tr>
<th>Clinical</th>
<th>Risk</th>
<th>Psychosocial</th>
<th>Knowledge and information</th>
<th>Consent</th>
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<tr>
<td><strong>Level 2: registered practitioner</strong> (continued)</td>
<td>✦ Obtains relevant information about risk factors relating to other blood-borne infections. ✦ Obtains relevant vaccination history as required. ✦ Refers clients to appropriate colleagues for further risk assessment as required.</td>
<td></td>
<td></td>
<td>✦ Liaises with senior colleagues and adheres to local guidelines/policy when neglect, physical or sexual abuse, sexual assault is suspected in any client.</td>
</tr>
<tr>
<td><strong>Level 3: senior registered practitioner</strong></td>
<td>✦ Works autonomously to obtain a clear, concise and accurate clinical picture of the client’s presenting problem(s) e.g. signs, symptoms, duration. ✦ Able to obtain other health information relevant to the consultation and clinical presentation. ✦ Able to recognise signs and symptoms of complex and unstable health problems requiring urgent review by senior colleagues e.g. PID, HIV seroconversion, ectopic pregnancy. ✦ Is able to obtain an appropriate history from individuals presenting with sexual dysfunction and refer accordingly.</td>
<td>✦ Works autonomously to obtain a clear, concise and comprehensive sexual history in order to identify sexual behaviour and related risk factors. ✦ Able to obtain pertinent information associated with sexual risk behaviour e.g. recreational drug use, barriers to condom use. ✦ Facilitates HIV pre-test discussion. ✦ Able to identify high risk behaviour and refer on to health adviser or other appropriate colleague accordingly. Able to obtain relevant risk to blood-borne infection such as hepatitis A/B/C, and take vaccination history.</td>
<td>✦ Works autonomously to assess the emotional, psychological and psychosexual wellbeing of individuals. ✦ Able to assess the level of emotional, psychological and psychosexual support required by individuals, and refer as required.</td>
<td>✦ Independently assesses client consent when working autonomously, in accordance with legal frameworks. ✦ Liaises with senior colleagues when a young person’s capacity for consent is insufficient or questionable. ✦ Liaises with senior colleagues/child protection team and adheres to local guidelines/policy when neglect, physical or sexual abuse, sexual assault is suspected in any client.</td>
</tr>
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</table>
Level 4: Consultant Practitioner

- Discusses and agrees with colleagues:
  - Current capabilities and competence in client assessment practice across the team
  - How current client assessment practice compares with relevant benchmarks
  - Trends and developments in sexual and reproductive health needs and issues, and the potential impact of these on practice
  - Trends and developments in client assessment and the effect of these on team practice
  - How client assessment practice can be improved in the team
- Provides advice and support on assessment approaches proactively and on request
- Demonstrates to students/colleagues the use of different methods for assessing clients’ sexual and reproductive health and wellbeing needs
- Discusses assessment outcomes with students/colleagues enabling them to think through effective management processes and the need for referral to others
- Works with education providers to meet education needs for client assessment in the sexual and reproductive health care setting
- Initiates and contributes to research partnerships to develop the client assessment evidence base in sexual and reproductive health.
## Clinical examination and specimen collection

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<th>Clinical examination/ procedures</th>
<th>Specimen collection</th>
<th>Specimen processing</th>
</tr>
</thead>
<tbody>
<tr>
<td>✦ Enables the client to feel prepared for the examination procedure.</td>
<td>✦ Ensures safe and effective clinical examination of the client</td>
<td>✦ Ensures the safe and effective collection of specimens and samples.</td>
<td>✦ Ensures the safe and effective processing and storage of the specimens and samples.</td>
</tr>
</tbody>
</table>

### Level 2: registered practitioner

- ✦ Demonstrates an understanding of client examination procedures.
- ✦ Prepares the examination room to receive the client.
- ✦ Accurately interprets sexual and reproductive health history to identify priorities and process of examination.
- ✦ Takes all measures to maintain the client’s privacy, dignity and wishes.
- ✦ Seeks client consent for examination process.
- ✦ Explains all procedures to the client and address any queries.
- ✦ Identifies any examination issues for clients with physical disabilities such as access to couches and specific positioning requirements.
- ✦ Assists the client into the correct position and ensures they are comfortable prior to the examination process.
- ✦ Is able to detect anxieties in the client prior to and during the examination process and respond accordingly.
- ✦ Demonstrates an understanding of the principals and practice of chaperoning.
- ✦ Works as a chaperone in accordance with local policy and guidelines.
- ✦ Assists colleagues in clinical examination and procedures, as required.
- ✦ Ensures the privacy and dignity of the client is maintained throughout any examination or procedure.
- ✦ Promotes and advocates the rights of individuals during clinical examination.
- ✦ Identifies signs of client discomfort during examination and responds accordingly.
- ✦ Demonstrates an understanding of the appearance of normal genital anatomy and general pathological processes affecting the genitalia.
- ✦ Demonstrates an awareness of the physical manifestations of common genital tract infections.
- ✦ Undertakes a clinical examination of the client in accordance with local guidelines.
- ✦ Asks client relevant questions during the examination to obtain underlying pathology or sexual dysfunction.
- ✦ Recognises the common signs and symptoms of genital tract infection observed during examination.
- ✦ Documents and communicates examination findings clearly and concisely to colleagues in a timely manner.
- ✦ Demonstrates general awareness of physical manifestations of less common genital tract conditions.
- ✦ Identifies problems needing specialist evaluation and advice.
- ✦ Contributes to the identification and diagnosis of more complex clinical conditions in accordance with experience.
- ✦ Demonstrates a knowledge of health and safety, and infection control issues related to specimen collection.
- ✦ Demonstrates an awareness of the clinical requirement for particular specimens.
- ✦ Promotes and advocates the rights of individuals during specimen collection.
- ✦ Prepares the appropriate equipment for specimen collection.
- ✦ Assists in the collection of the specimens and samples, where required.
- ✦ Explains to clients the clinical requirement for specimens and samples.
- ✦ Performs specific techniques that facilitate specimen/sample taking e.g. passing a speculum or proctoscope.
- ✦ Obtains the appropriate male and female specimens and samples e.g. cervical cytology, STI and blood samples.
- ✦ Keeps the client informed throughout specimen collection and takes steps to minimise any discomfort.
- ✦ Demonstrates an understanding of specific medical/legal requirements for specimen collection from clients who have been sexually assaulted.
- ✦ Prepares specimens for processing e.g. gram staining slides.
- ✦ Processes specimens and samples to achieve an investigation outcome and/or diagnosis e.g. pregnancy testing, gram stain, wetprep and dark ground microscopy.
- ✦ Documents and communicates investigation outcomes to colleagues and/or clients in a timely manner.
<table>
<thead>
<tr>
<th>Preparation of client</th>
<th>Clinical examination/procedures</th>
<th>Specimen collection</th>
<th>Specimen processing</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Level 3: senior registered practitioner</strong></td>
<td>✦ Independently undertakes most examination procedures. ✦ Differentiates between normal, variations of normal and abnormal genitalia. ✦ Recognises own limitations in own professional practice and refers appropriately. ✦ Undertakes more specialised examination skills such as bimanual examination according to experience, training and local protocol.</td>
<td>✦ Demonstrates awareness of current research or evidence to support new methods of specimen collection.</td>
<td>✦ Demonstrates awareness of current research or evidence to support new methods of specimen processing.</td>
</tr>
</tbody>
</table>

**Level 4: consultant practitioner**

✦ discusses and agrees with colleagues:
  – current roles, capabilities and competence in undertaking clinical examination and specimen collection across the team
  – how current practice compares with relevant benchmarks
  – trends and developments in clinical examination and specimen collection and the potential impact of these on practice
  – trends and developments in clinical examination and specimen collection and the effect of these on team practice
  – how clinical examination and specimen collection practice can be improved in the team
✦ provides advice and support on clinical examination and specimen collection
✦ demonstrates to students/colleagues the use of different methods for clinical examination and specimen collection
✦ discusses examination outcomes with students/colleagues enabling them to think through effective management processes and the need for referral to others
✦ works with education providers to meet education needs in the sexual and reproductive health care setting for clinical examination and specimen collection
✦ initiates and contributes to research partnerships to develop the clinical examination and specimen collection evidence base in sexual and reproductive health.
## Interpretation and provision of findings

<table>
<thead>
<tr>
<th>Interpretation of findings</th>
<th>Providing results</th>
<th>Planning care and treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>✦ Interprets findings to identify the client’s needs.</td>
<td>✦ Provides clear and accurate results to the client.</td>
<td>✦ Plans care appropriate to the individual client.</td>
</tr>
</tbody>
</table>

**Level 2: registered practitioner**

<table>
<thead>
<tr>
<th>Interpretation of findings</th>
<th>Providing results</th>
<th>Planning care and treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>✦ Demonstrates a general knowledge of the clinical findings and how they can be interpreted.</td>
<td>✦ Demonstrates an understanding of local policies and procedures for the provision of results.</td>
<td>✦ Demonstrates an awareness of the appropriate care required/available.</td>
</tr>
<tr>
<td>✦ Demonstrates knowledge of sources of results and local procedures for obtaining such results.</td>
<td>✦ Demonstrates an understanding of the issues related to confidentiality and the provision of results:</td>
<td>✦ Establishes and communicates individual client requirements for care planning.</td>
</tr>
<tr>
<td>✦ Accurately documents/transcribes client results where required.</td>
<td>✦ in the clinic setting</td>
<td>✦ Advocates in the planning of care and treatment, where requested or required, for clients with specific needs e.g. learning disabilities.</td>
</tr>
<tr>
<td>✦ Engages in a multidisciplinary approach to the interpretation of findings. Encourages client involvement in interpreting the results as appropriate.</td>
<td>✦ in outreach/off-site settings</td>
<td>✦ Encourages clients to contribute to the planning of their care and treatment.</td>
</tr>
<tr>
<td>✦ Advocates where necessary to ensure all findings are considered.</td>
<td>✦ over the telephone</td>
<td>✦ Amends care according to new information, in partnership with client and colleagues.</td>
</tr>
<tr>
<td>✦ Seeks clarification in understanding the findings where needed e.g. liaises with laboratory staff.</td>
<td>✦ via letter, email or other mechanism.</td>
<td>✦ Contributes in any referral process where required.</td>
</tr>
<tr>
<td>✦ Interprets the findings in the scope of own knowledge, experience and role.</td>
<td>✦ Correctly identifies client details before providing results.</td>
<td>✦ Considers non-drug treatment options where appropriate.</td>
</tr>
<tr>
<td>Consults and refers as appropriate.</td>
<td>✦ Provides clear and accurate interpretations of key results:</td>
<td>✦ Documents own contribution to the plan of care.</td>
</tr>
</tbody>
</table>

**Level 3: senior registered practitioner**

<table>
<thead>
<tr>
<th>Interpretation of findings</th>
<th>Providing results</th>
<th>Planning care and treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>✦ Formulates a preliminary needs assessment.</td>
<td>✦ Provides all results to the client.</td>
<td>✦ Formulates a care plan and or treatment with the client.</td>
</tr>
<tr>
<td>✦ Analyses and interprets physical signs and presenting symptoms in relation to laboratory/investigative findings in order to develop appropriate differential diagnoses.</td>
<td>✦ Discusses the implications of results and further care with the client.</td>
<td>✦ Plans further investigations and/or referrals as warranted in collaboration with colleagues and the client.</td>
</tr>
<tr>
<td>✦ Recognises emergency situations and seeks relevant support.</td>
<td>✦ Answers client questions or refers accordingly.</td>
<td>✦ Prioritises health needs and plans care accordingly.</td>
</tr>
<tr>
<td>✦ Seeks support from colleagues where the consultation extends beyond the scope of practice.</td>
<td>✦ Identifies new support and information needs arising from suspected or unsuspected results.</td>
<td></td>
</tr>
</tbody>
</table>
Level 4: consultant practitioner

- Discusses and agrees with colleagues:
  - current roles, capabilities and competence in undertaking the role of interpretation and provision of findings across the team
  - how current practice compares with relevant benchmarks
  - trends and developments in interpretation and provision of findings and the potential impact of these on practice
  - trends and developments in interpretation and provision of findings and the effect of these on team practice
  - how interpretation and provision of findings practice can be improved in the team
- Provides advice and support on interpretation and provision of findings approaches
- Demonstrates to students/colleagues the use of different approaches for interpretation and provision of findings
- Discusses client outcomes with students/colleagues enabling them to think through effective management processes and the need for referral to others
- Works with education providers to meet education needs for the interpretation and provision of findings in the sexual and reproductive health care setting
- Initiates and contributes to research partnerships to develop the interpretation and provision of findings evidence base in sexual and reproductive health.
## Provision of treatments and therapies

### Clinical and pharmaceutical knowledge
- Has up-to-date information about the common treatments and vaccinations for STIs and methods of contraception used in sexual and reproductive health care settings.

### Administration, supply and prescribing
- Safely supplies and administers medications within professional and organisational standards and own practice limitations.

### Planning care and treatment
- Provides relevant information about medications for individuals receiving treatments.

### Client support
- Provides essential psychosocial and practical support and advice.

### Level 2: registered practitioner
- Demonstrates an awareness of the various sources of pharmaceutical information.
- Demonstrates an understanding of the primary treatments and vaccinations for common STIs and the main methods of contraception available.
- Demonstrates an awareness of how medicines are licensed, monitored and supplied.
- Demonstrates a basic knowledge of the key medications used in sexual and reproductive health in relation to the common modes of action and how these are affected by other medications.
- Demonstrates a knowledge of common adverse effects resulting from the key medications used in sexual and reproductive health care.
- Understands and discusses the different treatment options with colleagues and clients.
- Recognises and discusses treatment options that are not in line with individual client needs and evidence-based standards of care.
- Able to identify physical and behavioural factors that may impact on treatment options and treatment concordance.

- Discusses methods of contraception with client.
- Discusses treatments and vaccinations for common STIs with clients.
- Provides appropriate written information to client, where available.
- Clarifies clients’ understanding of, and commitment, to their treatment and vaccination schedule.
- Documents any treatment and/or vaccination information provided to client.
- Identifies potential barriers to effective use and adherence to treatments, vaccinations and method of contraception.
- Works with client to find solutions to the identified barriers.
- Refers clients to other members of multidisciplinary team according to need and local procedures.

- Demonstrates an ability to give sensitive care and support to:
  - individuals who have been given positive STI, hepatitis, HIV results.
  - individuals who have been given abnormal cervical cytology results.
  - individuals who have been presented with an ectopic pregnancy or threatened miscarriage.
  - individuals who have received a positive pregnancy test when pregnancy is unintended or a negative test when a pregnancy is wanted.
  - individuals who have been given abnormal cervical cytology results.

- Demonstrates an ability to give sensitive care and support to:
  - individuals presenting with an ectopic pregnancy or threatened miscarriage.
  - individuals who have suffered rape or indecent assault.
  - individuals who have suffered domestic violence.
  - individuals requesting termination of pregnancy.
  - individuals with sexual dysfunction.
<table>
<thead>
<tr>
<th>Clinical and pharmaceutical knowledge</th>
<th>Administration, supply and prescribing</th>
<th>Planning care and treatment</th>
<th>Client support</th>
</tr>
</thead>
<tbody>
<tr>
<td>✦ Demonstrates a thorough understanding of the purpose, contraindications, specific considerations and possible side-effects of the various treatments and vaccinations being prescribed, supplied and/or administered.</td>
<td>✦ Works within the confines of independent and supplementary prescribing in order to prescribe and administer any treatments and/or vaccinations. ✦ Contributes to local partnerships to develop patient group directions (PGDs) and mechanisms for the safe supply and administration of medications and medical devices.</td>
<td>✦ Delivers specific one-to-one and/or group education for specific groups of clients e.g. drug users, and sex workers.</td>
<td>✦ Delivers, in accordance with defined role and service need, specific support to particular groups of clients e.g. hepatitis C clients, and pregnant teenagers.</td>
</tr>
</tbody>
</table>

### Level 3: Senior Registered Practitioner

- Discusses and agrees with colleagues:
  - current roles, capabilities and competence in undertaking the role of provision of treatment and therapies across the team
  - how current practice compares with relevant benchmarks
  - trends and developments in the provision of treatment and therapies and the potential impact of these on practice
  - trends and developments in the provision of treatment and therapies and the effect of these on team practice
  - how the provision of treatment and therapies practice can be improved in the team
- Provides advice and support on the provision of treatment and therapies
- Demonstrates to students/colleagues the use of different approaches for the provision of treatment and therapies
- Discusses client outcomes with students/colleagues enabling them to think through effective management processes and the need for referral to others
- Works with education providers to meet education needs in the sexual and reproductive health care setting for the provision of treatment and therapies
- Initiates and contributes to research partnerships to develop the sexual and reproductive provision of treatment and therapies evidence base.
# Health promotion

<table>
<thead>
<tr>
<th>Information and education</th>
<th>Prevention and risk reduction support</th>
<th>Skills building</th>
<th>Partner notification</th>
</tr>
</thead>
<tbody>
<tr>
<td>✦ Provides holistic information about aspects of sexual and reproductive health care.</td>
<td>✦ Provides support for individuals to reduce risk and maintain sexual and reproductive health.</td>
<td>✦ Integrates skills building interventions into routine sexual and reproductive health care.</td>
<td>✦Contributes to the identification of sexual partners requiring diagnostic and treatment services.</td>
</tr>
</tbody>
</table>

### Level 2: registered practitioner

| ✦ Demonstrates an understanding of the transmission dynamics of STIs and blood-borne infections. | ✦ Demonstrates an awareness of STI/HIV transmission risk, prevention messages, available resources such as free condom supplies, local service availability, leaflets, STI/HIV testing policy and processes. | ✦ Demonstrates an understanding of the communication, sexual negotiation, condom and sexual assertiveness skills required for individuals to engage in safer sex. | ✦ Understands the importance of interventions to identify asymptomatic and symptomatic-infected people unlikely to seek diagnostic and treatment services. |
| ✦ Accesses up-to-date information and clinical guidelines for the management of STIs and blood-borne infections. | ✦ Utilises relevant communication skills for the effective delivery of prevention messages. | ✦ Demonstrates an awareness of local referral pathways for individuals who need skills building support. | ✦ Demonstrates an understanding of the various roles that all staff have in the partner notification process. |
| ✦ Demonstrates knowledge of local referral pathways to specialist sexual and reproductive health services e.g. pregnancy termination services, GUM, contraception and fertility clinics. | ✦ Distributes condoms and lubricant according to individual need in line with the constraints of local resources. | ✦ Demonstrates an awareness of, and refers to, external organisations providing skills building courses/workshops. | ✦ Actively encourages health adviser referral for individuals diagnosed with an STI or HIV. |
| ✦ Delivers information in a holistic manner (verbal and written) to clients. | ✦ Demonstrates an awareness of the barriers to using contraception. | ✦ Provides condom demonstrations to individuals, where requested. | ✦ Engages individuals in partner notification process, such as providing contact slips, where health adviser unavailable or declined by client. |
| ✦ Seeks appropriate referral when reaches limitations of own knowledge. | ✦ Performs and advises on pregnancy testing and local referral sources. | ✦ Engages client in one-to-one skills building support e.g. sexual negotiation skills. | ✦ Contributes to the assessment, treatment and support of sexual partners of people who are infected with an STI or HIV. |
| ✦ Demonstrates awareness of national and local immunisation policies and performs appropriate risk assessment. | ✦ Demonstrates awareness of national and local immunisation policies and performs appropriate risk assessment. | ✦ Participates in the delivery of skills building support to groups of individuals such as community groups, and schools. | ✦ Refers individuals, and/or contributes to partner notification follow-up on completion of treatment. |
| ✦ Provides clear and correct advice pre-conception. | ✦ Refers individuals to appropriate health care worker, such as health adviser, for sexual and reproductive health promotion, and risk modification discussions. | ✦ Discusses individual attitudes, beliefs, perceptions, motivations and intentions towards condom use, safer sex, contraceptive use and HIV/hepatitis sero-status/disclosure. | ✦ Integrates individual behavioural, physical, social and environmental risk-modifying factors into health promotion discussions. |
| ✦ Refers individuals to appropriate health care worker, such as health adviser, for sexual and reproductive health promotion, and risk modification discussions. | ✦ Advises on alternative methods of contraception if current method contraindicated or unsustainable. | ✦ Integrates individual behavioural, physical, social and environmental risk-modifying factors into health promotion discussions. | ✦ Advises on alternative methods of contraception if current method contraindicated or unsustainable. |
**Level 3: senior registered practitioner**

- provides information and education, prevention and risk reduction support, skills building and partner notification to individuals and/or groups according to local need and defined role.

**Level 4: consultant practitioner**

- discusses and agrees with colleagues:
  - current roles, capabilities and competence in undertaking health promotion across the team
  - how current practice compares with relevant benchmarks
  - trends and developments in health promotion and the potential impact of these on practice
  - trends and developments in health promotion and the effect of these on team practice
  - how health promotion practice can be improved in the team
- provides advice and support on health promotion approaches
- demonstrates to students/colleagues the use of different approaches sexual and reproductive health promotion
- discusses client outcomes with students/colleagues enabling them to think through effective management processes and the need for referral to others
- works with education providers to meet education needs for health promotion in the sexual and reproductive health care setting
- initiates and contributes to research partnerships to develop the sexual and reproductive health promotion evidence base.
Comparing the NHS KSF with the Integrated career and competency framework for sexual and reproductive health nursing

Overview of the NHS KSF and competency framework

The core and specific competencies in the NHS Knowledge and Skills Framework are:

Core competencies
1. communication
2. personal and people development
3. health, safety and security
4. service development
5. quality
6. equality, diversity and rights.

Specific competencies
7. assessment of health and wellbeing needs
8. addressing individuals’ health and wellbeing needs
9. improvement of health and wellbeing
10. protection of health and wellbeing
11. logistics
12. data processing and management
13. production and communication of information and knowledge
14. facilities maintenance and management
15. design and production of equipment, devices and visual records
16. biomedical investigation and reporting
17. measuring, monitoring and treating physiological conditions through the application of specific technologies
18. partnership
19. leadership
20. management of people
21. management of physical and/or financial resources
22. research and development.

The specific competencies in the framework for nurses working in the specialty of sexual and reproductive health are:
1. client assessment
2. clinical examination and specimen collection
3. interpretation and provision of findings
4. provision of treatment and therapies
5. health promotion.
Comparing the NHS KSF and the competency framework

<table>
<thead>
<tr>
<th>Sexual and reproductive health framework competencies</th>
<th>NHS KSF competencies</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Client assessment</td>
<td>7 Assessing health and wellbeing needs</td>
</tr>
<tr>
<td>2 Clinical examination and specimen collection</td>
<td>7 Assessing health and wellbeing needs</td>
</tr>
<tr>
<td></td>
<td>16 Biomedical investigation and reporting</td>
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<tr>
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<tr>
<td></td>
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<tr>
<td>4 Provision of treatment and therapies</td>
<td>8 Addressing health and wellbeing needs</td>
</tr>
<tr>
<td>5 Health promotion</td>
<td>8 Addressing health and wellbeing needs</td>
</tr>
<tr>
<td></td>
<td>9 Improvement of health and wellbeing</td>
</tr>
<tr>
<td></td>
<td>10 Protection of health and wellbeing</td>
</tr>
</tbody>
</table>
Figure 1: core and specific competencies
References


Department of Health (2003) *The NHS knowledge and skills framework and development review guidance* (working draft), London: DH.


Public Health Laboratory Service, Department of Health, Social Services & Public Safety (NI) and the Scottish ISD(D)5 Collaborative Group (2001) *Sexually transmitted infections in the UK: new episodes seen at genitourinary medicine clinics 1995 to 2000*, London: PHLS.


Useful websites, contacts and CPD resources

Internal
✦ Your line manager.
✦ Those responsible for education and development in your organisation such as the practice development team or clinical education lead.

External
✦ Department of Health website for all DH publications including *The NHS knowledge and skills framework and development review guidance and consent: a guide for children and young people* [www.dh.gov.uk](http://www.dh.gov.uk)
✦ RCN Institute Practice Development website [www.rcn.org.uk/resources/practicedevelopment/home.php](http://www.rcn.org.uk/resources/practicedevelopment/home.php)
✦ Detailed competencies for nurse prescribers can be found on [www.npc.co.uk/nurse_pres.htm](http://www.npc.co.uk/nurse_pres.htm)
✦ Genito Urinary Nurses Association [www.guna.org.uk](http://www.guna.org.uk)
✦ fpa [www.fpa.org.uk](http://www.fpa.org.uk)
✦ National Association of Nurses for Contraception and Sexual Health [www.nancsh.org.uk](http://www.nancsh.org.uk)
✦ Faculty of Family Planning and Reproductive Health Care [www.fffprhc.org.uk](http://www.fffprhc.org.uk)
✦ British Association for Sexual Health and HIV (formerly MSSVD) [www.bashh.org](http://www.bashh.org)
Appendix 1

Examples of competence-based learning programmes

Considerable work has already been invested in the development of competence-based learning programmes for sexual health nursing practice at St George’s Healthcare NHS Trust, Nottingham City Hospital NHS Trust, and Chelsea and Westminster Healthcare NHS Trust. Each of these programmes has been represented within the competency development group, and contains the competencies outlined in the framework. The delivery of the programmes differs in the range of workbooks, mentoring systems and assessment procedures used.

Box 1– Example of competency based learning programme

A competency based learning model has been established at the Courtyard Clinic at St George’s Hospital in Tooting, London. Locally adapted competencies provide a framework to support the development of knowledge, skills and behaviours. A practice educator is in place to facilitate education and practice development and to support the process of mentorship. Assessor guidelines have been developed to improve objectivity during the competency assessment process. In addition, the practice educator can provide individual support and clinical supervision to both mentor and mentee. This model has replaced ad hoc training, and benefits include increased quality and more rapid progress through the specialty.

It could be argued that one approach should be adopted as a standard. However, each learning programme offers a different perspective according to the local work environment and infrastructure for support, mentoring and assessment. In addition, some trusts will have established competency learning programmes in place already. Therefore, specific competencies for sexual and reproductive health could be adapted from this framework and incorporated into local learning packages. The strength of any competence-based learning programme is flexibility and local adaptation and integration to meet the needs of those providing services. It is envisioned that education institutions will work in partnership with services to develop courses that will help practitioners meet the specific levels of competence outlined in this framework.

Contact information

St George’s Healthcare NHS Trust
Michelle.Arnold@stgeorges.nhs.uk

Nottingham City Hospital NHS Trust
vanessagriffiths33@hotmail.com

Chelsea and Westminster Healthcare NHS Trust
jane.bruton@chelwest.nhs.uk

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