

Process for Certification For Intrauterine Contraception

Entry level midwives in Nunavut provide primary care on their own responsibility to women throughout the perinatal period, including the provision of contraceptive services. The Government of Nunavut, Department of Health, Core Competencies for Midwives state that entry level midwives must have the knowledge of family planning; methods of contraception and their risks and benefits; the ability to counsel clients in decision making and use of contraceptive methods; and the ability to prescribe, order and administer appropriate pharmacological agents as necessary for well-women in accordance with territorial regulation and standards.

Under Schedule C, Part 2, a) of the *Midwifery Profession Practice Regulations to the Nunavut Midwifery Profession Act*, specifically authorized midwives may insert intrauterine contraceptive devices. Under Standards of Competency #7 this advanced competency requires proof of specialized training in the insertion of intrauterine contraception (IUC) before this service is offered by the practitioner.

Certification

The certification process must be carried out by a recognized midwifery, medical, registered nurse or nurse practitioner education program approved by the Nunavut Midwifery Registration Committee (NMRC). The clinical experience portion must take place under the supervision of an experienced health care practitioner with contraceptive prescribing authority and skill in IUC insertion. Upon successful completion of the certification process, proof of completion must be submitted to the Registrar before certification is granted. Please note that this process does not include certification for post placental insertion of IUC.

Specialized Practice Certification must include:

Demonstration of theoretical and practical knowledge of prescribing contraceptives including:

- 1) knowledge necessary for the safe assessment, insertion and management of IUDs as set out in Schedule C, Part 2 of the Regulation to the *Nunavut Midwifery Profession Act*.
- 2) knowledge of indications and contraindications, the mechanisms of action and potential side effects of IUC;
- 3) the ability to carry out a comprehensive sexual health assessment that includes cultural considerations, including a focus on the socio-economic determinants of health;
- 4) the ability to determine and prescribe the appropriate IUC for an individual client;
- 5) the ability to provide the client with the proper information and instruction for use and the appropriate cautions regarding benefits, risks, side effects and when to see a health care provider for follow-up;

- 6) the ability to recognize symptoms and signs of endometritis, expulsion and normal adjustment reaction to a new IUC; and signs and symptoms requiring consultation with or referral to a medical practitioner

Demonstration of appropriate skills in inserting IUC

A midwife's knowledge and skill will be verified by completion of study materials and at least one session in clinical placement where she will place at least three IUCs under supervision or until competency is achieved. Documentation of fulfillment of the learning requirements will be completed on the form provided by the Registrar, signed by the mentoring practitioner, and submitted to the Registrar.

Continuing Competence and Recertification

Evidence-based continuing education programs are necessary component for updating practitioners knowledge (Taylor, D. Levi, A. Simmonds, K. 2010) Certified prescribers are expected to keep up to date with the latest evidence relevant to IUC and to demonstrate to the Registrar continuing competence in the skills needed for insertion and removal. If a midwife has not been actively inserting IUC over the preceding 24 months, completion of an approved continuing education module may be required for recertification.

References

Canadian Medical Association (2003, September 16). Preventing pregnancy: a fresh look at the IUD. CMAJ, 169(6), 585.

Jordan, B., Espey, E. & Godfrey, E.M. (2010, July) Improving patient care and reducing unintended pregnancy: Translating new guidelines into effective practice. ARHP

Taylor D., Levi A., & Simmonds K. (2010) Reframing unintended pregnancy prevention: A public health model. Contraception. 82, 363-366

Appendix 1

Required reading:

- SOGC Clinical Practice Guideline, No. 329 Canadian Contraception Consensus (Part 1 of 4)
- SOGC Clinical Practice Guideline, No. 329 Canadian Contraception Consensus (Part 3 of 4): Chapter 7 – Intrauterine Contraception
- SOGC Committee Opinion, No. 305 Best Practices to Minimize Risk of Infection with IUD Insertion

Required Materials for trainees:

- IUC Module Learning Objectives
- Competency-Based Skills Checklist for IUC Counseling and Clinical Skills
- IUC Post Test

Additional learning materials can be found at the following websites:

IUD Guidelines for Family Planning Service Programs: a problem solving reference manual, 3rd ed.

Editors: Julia Bluestone, Rebecca Chase Enriquito R. Lu. Found at:

<http://www.intrahealth.org/files/media/iud-guidelines-for-family-planning-service-programs/jhpiegorefmanual.pdf>

The Training Resource Package for Family Planning

Johns Hopkins University 2015 accessed at

<https://www.fptraining.org/content/presentation-slides-iuds>

Manufacturer's instructions for particular IUC product insertion.

For example Mirena insertion accessed at:

<http://hcp.mirena-us.com/placement-and-removal/precise-placement-step-1.php>

Slides and information on IUD insertion at http://www.willowclinic.ca/?page_id=169