# The Faculty of Sexual & Reproductive Healthcare: 20th anniversary

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#### **BACKGROUND**

In 2013, the Faculty of Sexual & Reproductive Healthcare (FSRH) celebrates its 20th anniversary. The FSRH was established by its parent college, the Royal College of Obstetricians and Gynaecologists (RCOG), in March 1993; but this is not where the story begins. We need to go back to 1974, when approximately 1000 family planning clinics run by the charity the Family Planning Association (FPA, now fpa) were handed over to the National Health Service (NHS) to be managed by the Local Area Health Authority Public Health departments. Prior to this the FPA had established a solid foundation for medical training in family planning, which in many ways was ahead of its time. Assessment of clinical competence along with an appropriate nonjudgemental attitude were key components; these are now cornerstones in UK medical training. In preparation for the move of clinics to Area Health Authorities the FPA's medical training activities were run down with a view to discontinuation, leaving no medical body to represent doctors working in this field who could facilitate sharing of good practice and the further development of standards, guidelines and training.

A new organisation was therefore required to ensure that the legacy established by the FPA was not lost. The RCOG established the Joint Committee on Contraception (JCC) in 1972, in partnership with the Royal College of General Practitioners (RCGP), which took over the training role. The National Association of Family Planning Doctors (NAFPD) was formed in 1974 to represent doctors working in the field and disseminate good practice. The first president of NAFPD was Professor Sir Stanley Clayton who was also President of the RCOG, which probably cemented the still important link between the Faculty and the RCOG. NAFPD published the first issue of what is now the Journal of Family Planning and Reproductive Health Care the following year in 1975. A solid foundation

was now in place on which all subsequent work of the FSRH could be built.

In 1975, general practitioners started to be paid for prescribing contraception, with the UK becoming the first country in the world to provide contraceptives free of charge.

# **OBJECTIVES**

On 26 March 1993 the Faculty was born from the JCC with the following objectives:

- 1 To give the discipline of sexual and reproductive health care (SRH) academic status and recognise the expertise within it.
- 2 To maintain and develop standards of care and training and ensure that a high quality of practice is maintained by all providers of SRH.
- 3 To promote the effective interaction of SRH with related disciplines.
- 4 To gather, collate and provide information in support of basic and continuing education in the discipline.
- 5 To advance medical knowledge in the discipline and encourage audit and research.
- 6 To support and represent those working in the discipline at regional, national and international levels.

# PRESIDENTS PAST AND PRESENT

Dr David Bromham (Figure 1) was elected as the Faculty's first Chair. David had been central to the development of the Faculty and was an energetic and inspirational man, but sadly during his second term of office he became ill and in 1996 died, his loss being tragic not only for the Faculty but also for the family planning movement in the UK and worldwide. The subsequent Presidents (the title was changed from Chair to President in 1999) all contributed enormously to the development of the Faculty, ensuring it met its objectives and strengthened its key role as a cross-specialty organisation with highquality patient care at its heart (Table 1).

But of course it was clear that the work of the Faculty was much broader than family planning, and whilst founded on



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**Figure 1** Dr David Bromham, inaugural Chair of the Faculty of Family Planning and Reproductive Health Care.

the needs of women it also encompassed some aspects of men's health care. Internationally the concept of SRH was well established and after consultation, in 2007, during the tenure of Dr Meera Kishen (Figure 2), the name of the Faculty was changed to the Faculty of Sexual & Reproductive Healthcare (FSRH) as it is known today.

## **TRAINING**

Training is at the heart of the FSRH and comprises two main programmes: one aimed at specialists and the other primarily at generalists. Each year more than 2500 doctors complete the Faculty's Diploma (DFSRH) and associated Letters of Competence, which are widely recognised as being the 'gold standard' core SRH training. In 2010, the e-learning component of the Diploma, known as e-SRH (http://www.e-lfh.org.uk/e-srh), was the winner of the Learning & Skills section of the e-Government awards. A recent independent review of the Diploma programme has made recommendations for further development, including the establishment of an SRH qualification for nurses, and this work is now underway.

Prior to 2009, specialty training required trainees to complete a minimum of 3 years as an obstetrics & gynaecology registrar before entering the subspecialty of SRH. Both the RCOG and the FSRH recognised that this programme required training in aspects of

**Table 1** Faculty of Sexual & Reproductive Healthcare (FSRH) Presidents

FSRH President	Term of office
Dr David Bromham*	1993–1996
Dr Sam Rowlands*	1996-1997
Professor John Newton	1997-2001
Dr Alison Bigrigg	2001–2005
Dr Meera Kishen†	2005–2008
Dr Christine Robinson	2008-2011
Dr Christopher Wilkinson‡	2011–

<sup>\*</sup>Chair.



**Figure 2** Dr Meera Kishen, during whose Presidency the Faculty's name change occurred.

care that were not required once trainees became SRH consultants. The FSRH and RCOG, with support from the Department of Health, jointly bid for the recognition of a new specialty in SRH. An Act of Parliament granted community Sexual and Reproductive Health (cSRH) independent specialty status in 2010, and the first trainees entered the training programme that year.

#### **CLINICAL STANDARDS AND GUIDELINES**

To support frontline clinical staff and public health commissioners the FSRH has a full range of standards (http://fsrh.org/pdfs/ServiceStandardsintroduction.pdf), and through its Clinical Effectiveness Unit, based in Glasgow, UK, has a rolling programme of producing National Institute for Health and Clinical Excellence (NICE)-accredited clinical guidelines. These resources are utilised both within and outside the UK, and 2012 saw the establishment of an international work stream to explore the role of the Faculty globally.

## THE FUTURE

In 2013, the FSRH has a membership in excess of 16 000 doctors and 200 Associate Members (the majority of whom are nurses) working in general practice, SRH, genitourinary medicine and obstetrics & gynaecology, with good and proactive representation from all these specialties on FSRH Council. A strategic review is underway and is focusing on organisational governance including ensuring that the Faculty is able to respond to the needs of the four UK nations, development of cSRH as a specialty, and the emerging international work. As the FSRH moves forward it is clear that it has come a long way, but has kept the initial objectives at the centre of its work. It is also an organisation that can and will change to ensure it continues to meet these objectives, not least recognising the multidisciplinary teams that now deliver SRH.

# Competing interests None.

Provenance and peer review Not commissioned; internally peer reviewed.

<sup>†</sup>President in office when the Faculty name change took place.

<sup>‡</sup>Current President.