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Statements on funding and competing interests

Funding None identified.
Competing interests The author is a member of Abortion Rights, and by her own admission is old enough to have seen women on gynaecological wards before the Abortion Act 1967.

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A BETTER WAY OF WORKING

Development of UPCASH (Update in Contraception and Sexual Health) Flexible Continuing Medical Education

Fran Reader

Why was change needed?
Continuing Medical Education (CME) is an essential part of clinical governance. As lead clinicians we were involved in updating staff, working in reproductive and sexual health, in our own services and primary care. We wanted a flexible CME tool that could be used for the variety of settings in which we offer updates and refreshers and which could also be used for self-directed learning.

How did you go about implementing change?
The flexible CME package was initially developed in Suffolk, UK in 1997. It was a flexible package of five modules that offered a refresher and updating of knowledge in the fields of both reproductive and sexual health.1

Since the initial work the multiple-choice questions (MCQs) have been used in a variety of ways as a CME tool. A typical approach was for an MCQ to be sent in advance to CME participants followed 1 week later by a CME discussion group, facilitated by an experienced practitioner. At the group meeting the short answers were given and a discussion followed. At the end of the meeting the long answers were circulated.

In 2005/2006 the UPCASH Development Team updated the reproductive health part of the package and developed the UPCASH website (www.upcash.co.uk). The current flexible package contains four reproductive health modules as follows:
1 Hormonal contraception
2 Non-hormonal contraception
3 Uterine contraception
4 Emergency contraception.

This package will be updated in January each year or as appropriate if essential information changes. In 2007 it is hoped to expand the package to include modules in termination of pregnancy and the menopause.

Sections can be downloaded from the website and used by trainers to pick and mix from the modules. The modules can also be used to support self-directed learning at home.

The website contains the complete CME package; the MCQs for each of the four modules, together with the short and long answers where the true and false answers are expanded and points for discussion explained. Relevant references are also provided.

What advice would you give to others considering a similar course of action?
The UPCASH site is not copyright protected and so the modules can be downloaded and adapted for local training programmes. We would, however, expect both the website and the original authors to be acknowledged.

How did you show that change had occurred?
This was demonstrated by positive evaluation of training events.

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Reference