

INTERVIEW SCHEDULE: Contraceptive Champion (6 month follow up)

This interview is part of the evaluation of the pilot project to improve access to postnatal contraception. We wish to interview you due to your role as contraceptive champion. The interview/ will take approximately 40 minutes and will focus on your thoughts around the role of contraception champion. Your views will inform the potential roll-out of the contraceptive champion role and the postnatal contraception project across Lothian.

Are you happy for the interview to be recorded? The transcripts will be anonymised and any potentially identifiable information in quotes used will be removed so they can't be attributed to you. If you would prefer, I can take notes.

Give information sheet and consent form: Do you have any questions?

1. As you well know, the aim of the contraceptive champion is to help improve access to postnatal contraception. Have your thoughts about this aim changed (or not) over the past 6 months, and if so, how?
 - *What is the effect of antenatal counselling?*
2. Can you describe your role as contraceptive champion?
 - *Is it what you expected?*
 - *What does it involve?*
 - *advice/counselling – is this indepth or are women coming in already informed because they have had antenatal counselling?*
 - *insertion of LARC*
 - *training – have they been involved in training/recruitment of other c.c.s on their wards (hospital midwives only). Is the exam affecting recruitment?*
3. Talk me through the process of giving an implant at home/in hospital for a client:
 - *Identification of women who want nexplanon – TRAK/diary/records?*
 - *Where is the nexplanon stored?*
 - *Prescription of nexplanon?*
 - *Procedure and use of ethyl chloride/lidocaine?*
 - *Time*
 - *Problems?*
4. How have clients who require Nexplanon responded to you being able to give them this?
 - *Are they happy with this as a midwife's role?*
 - *convenience for them*
 - *Have any women not been happy with this?*
5. How well prepared were you for your role?
 - *knowledge about contraceptive options, contradictions & in relation to breastfeeding*
 - *confidence in inserting LARC*
 - *anything you would like training on that wasn't covered?*

- *do you think the role of contraceptive champion has justified the time and effort you put into training for it?*
6. How many clients have you had? How many do you think you will get per month/year? Do you think these numbers are likely to increase?
- *Can you manage this number alongside midwife role?*
 - *Do you feel this number is increasing with/affected by antenatal counselling in the community?*
 - *How many are your women and how many from your team/ward?*
 - *How many fitted for another team/ward?*
 - *Are you getting enough women to maintain your skills (needs 12/yr)?*
7. Have there been any barriers to you carrying out your role as contraceptive champion? If so, how do you think they can be overcome?
- *time and impact on the rest of your work responsibilities*
 - *attitudes of women – do you think more antenatal counselling is needed? (i.e. if it is not fully rolled out yet)*
 - *high turnover of women/short stay*
 - *attitudes of other staff*
 - *supplies, resources, space*
 - *ethical issues involved? Informed decision*
8. What has helped and supported you with this role?
- *relationship with clients*
 - *attitudes of clients*
 - *attitudes of other staff*
 - *are there other c.c.s on the wards?*
 - *supplies, resources, space*
9. How do you feel about the possibility of using a PGD to prescribe the POP and to inject DEPO in the future? [Has this happened yet?]
- *Is/was more training necessary e.g. day at Chalmers getting practice*
10. In thinking about the sustainability of the role of the contraceptive champion in providing postnatal contraception, we need to think about training and updating training. Are there any gaps in the current training provision for contraceptive champions? What do you think are the key areas for refresher training?
11. Tell me about your wider role as champion?
- *Supporting colleagues through training?*
 - *Giving advice to colleagues?*
 - *Referral of patients to other services*
 - *Reminder to staff to complete TRAK*
 - *Encouraging team to undertake intervention at 22 and 32 weeks*
 - *Contributing to audit of the intervention*