

Standards Logbook

The following pages are designed to provide you with a personal logbook to evidence your learning and competency as a pessary clinician. Please use this as a tool to enhance your learning, engaging with your supervisors to complete each level of the standards required.

Supervision and Assessment

A supervisor is a healthcare practitioner who performs pessary care regularly as part of their normal job role requirements. This may be a practitioner who runs a pessary clinic, or a Consultant Gynaecologist or Registrar with a special interest in urogynaecology or prolapse management. This supervisor will be assessing the pessary care given by the trainee practitioner.

For Level 1 – the supervisor is usually the person who is carrying out the pessary care, with the trainee practitioner observing how to complete the task.

For Levels 2 and 3, the trainee practitioner is the person who is carrying out the pessary care with the supervisor observing their practice. For Level 3, the supervisor is acting as an assessor only and should not have to provide any further input for that particular element of care. We recommend that throughout this logbook, the sign-off sections (Level 1, 2 and 3) are completed by a minimum of two supervisors to ensure each standard is assessed by more than one qualified practitioner.

Supervisor details

Supervisors who are signing this document should complete their details in the table below

<i>Name</i>	<i>Position</i>	<i>Signature</i>	<i>Date</i>

Standard 1: Removal and insertion of pessaries for routine changes	LEVEL OF COMPETENCE ACHIEVED					
	Level 1		Level 2		Level 3	
	<i>Signature</i>	<i>Date</i>	<i>Signature</i>	<i>Date</i>	<i>Signature</i>	<i>Date</i>
Learning outcomes						
1. Communicate effectively throughout the procedure including demonstration of a pessary to a woman, explaining the benefits and risks and allow the patient to handle the appropriate pessary						
2. Prepare the environment						
3. Remove the current pessary						
4. Examine the vagina and cervix using a speculum and check for the health of the tissues						
5. Insert a pessary						

6. Test for correct fit of the pessary						
7. Assess for a new size if the current pessary does not provide a comfortable fit or if the prolapse is not supported						
8. Ensure clear documentation of size and type of pessary that has been fitted						
9. Know how to refer onwards if clinically indicated						

Standard Achieved with Other Methodologies (please list below)

<i>Signature</i>	<i>Date</i>
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Standard 2: Knowledge of the indication and management involved in pessary care	LEVEL OF COMPETENCE ACHIEVED					
	Level 1		Level 2		Level 3	
	<i>Signature</i>	<i>Date</i>	<i>Signature</i>	<i>Date</i>	<i>Signature</i>	<i>Date</i>
Learning outcomes						
1. Introduce a pessary to a woman and explain the benefits and risks						
2. Describe different types of pessary on offer and rationale for using selected pessary						
3. Offer a woman pessary management in the short-term, such as when considering/waiting for surgery or during pregnancy						
4. Reassure a woman that pessaries may be used successfully to manage prolapse in the long term						
5. Describe to a woman the aftercare and follow-up that is required for the pessary used						
6. Offer a woman the option of self-management of her pessary						

7. Educate a woman on when to seek medical advice or help when managing her own pessary						
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Standard Achieved with Other Methodologies (please list below)

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<i>Signature</i>	<i>Date</i>
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Standard 3: Knowledge on how to manage complications of pessaries	LEVEL OF COMPETENCE ACHIEVED					
	Level 1		Level 2		Level 3	
	Signature	Date	Signature	Date	Signature	Date
Learning outcomes						
1. Minimise risk associated with fitting and trial of vaginal pessary device for pelvic organ prolapse						
2. Be competent to perform speculum examination						
3. Be competent to undertake vaginal swabs						
4. Be able to manage/advise about the use of vaginal oestrogen						

<p>5. Be competent in recognising complications and be able to set out a management plan for:-</p> <ul style="list-style-type: none"> • abnormal vaginal discharge • vaginal Infection • abnormal vaginal and vulval health e.g. atrophy/vaginitis/lichen sclerosus • vaginal or vulval abrasion/ulceration • unexplained vaginal bleeding • pain/discomfort • urinary symptoms including voiding difficulty, retention, incontinence • bowel symptoms including difficulty opening bowels, constipation or incontinence • difficult removal of pessary 						
<p>Standard Achieved with Other Methodologies (please list below)</p>						

<i>Signature</i>	<i>Date</i>

Standard 4: Prolapse assessment	LEVEL OF COMPETENCE ACHIEVED					
	Level 1		Level 2		Level 3	
	<i>Signature</i>	<i>Date</i>	<i>Signature</i>	<i>Date</i>	<i>Signature</i>	<i>Date</i>
Learning outcomes						
1. Examine for presence of prolapse, compartments involved and stage of prolapse						
2. Record the clinical findings using POP-Q system or other prolapse methods						
3. Explain the clinical findings to the woman						
4. Relate the clinical findings to the symptoms (and if this is not possible, to consider alternative investigations or onward referral)						
5. Use the clinical findings to plan ongoing care or referral						

6. Seek clinical support where necessary						
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Standard Achieved with Other Methodologies (please list below)

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<i>Signature</i>	<i>Date</i>		

Standard 5: Assessment for fitting the first pessary	LEVEL OF COMPETENCE ACHIEVED					
	Level 1		Level 2		Level 3	
	<i>Signature</i>	<i>Date</i>	<i>Signature</i>	<i>Date</i>	<i>Signature</i>	<i>Date</i>
Learning outcomes						
1. Explain clearly to the woman the process of assessment for the first pessary and how it differs from an examination for prolapse						
2. Explain that there will be an initial trial period for the pessary, and more than one fitting may be necessary to find the most suitable pessary						
3. Assess for vaginal atrophy and organise treatment accordingly						
4. Perform an assessment of vaginal dimensions and select a pessary type and size to suit the clinical findings						

5. Insert the pessary						
6. Test for successful fit of the pessary						
7. Allow time to ambulate and pass urine after fitting						
8. Re-evaluate and reassess if the first pessary is not suitable or not retained						
9. Discuss pessary management advice e.g. sexual intercourse, support perineum when defecating, managing pessary dislodgement						
10. Ensure clear documentation of size and type of pessary that has been fitted						
11. Formulate a management plan for ongoing care and plan for safe change of the pessary in an appropriate environment e.g. self-management (if suitable), GP, or specialist clinic						
12. Seek clinical support where necessary						

Standard Achieved with Other Methodologies (please list below)

<i>Signature</i>	<i>Date</i>

Standard 6: Knowledge on alternatives to pessaries	LEVEL OF COMPETENCE ACHIEVED					
	Level 1		Level 2		Level 3	
	<i>Signature</i>	<i>Date</i>	<i>Signature</i>	<i>Date</i>	<i>Signature</i>	<i>Date</i>
Learning outcomes						
1. Explore what is important to a woman with regards to her treatment goals						
2. Discuss the option of “doing nothing” and the risks where relevant						
3. To offer a woman follow-up when she chooses to do nothing initially, and allow her to express any change in the management option chosen						
4. Discuss the option of pelvic floor muscle exercises and refer on if indicated						
5. Discuss the option of surgery to manage prolapse						

6. Explain to a woman there are different types of surgery which may be offered to manage a prolapse, and this is dependent on the type of prolapse						
7. Explain to a woman that surgery carries risks, a failure rate and a risk of recurrence						

Standard Achieved with Other Methodologies (please list below)

<i>Signature</i>	<i>Date</i>
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Standard 7: Pessary Self-Management	LEVEL OF COMPETENCE ACHIEVED					
	Level 1		Level 2		Level 3	
	<i>Signature</i>	<i>Date</i>	<i>Signature</i>	<i>Date</i>	<i>Signature</i>	<i>Date</i>
Learning outcomes						
1. Demonstrate indications and contraindications of pessary self-management						
2. Communicate effectively the benefits of pessary self-management to a woman and how self-management can be used to suit the woman's lifestyle						
3. Discuss the relevant anatomy, purpose of the pessary and location of the pessary once in situ						
4. Teach a woman how to insert and remove a pessary, including being able to demonstrate folding and handling the pessary and discussing different positions						

5. Discuss pessary care (removal frequency, cleaning procedures, lubrication and storage)						
6. Advise on sexual intercourse						
7. Communicate effectively to a woman warning signs and when to contact her pessary clinician.						
8. Supply patient information to a woman to supplement pessary self-management care						

Standard Achieved with Other Methodologies (please list below)

<i>Signature</i>	<i>Date</i>
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Standard 8:

Reflective Practice

Record number and dates of each reflective practice here and seek supervisor sign-off accordingly.

<i>Signature</i>	<i>Date</i>
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SELF-ASSESSMENT TABLE <i>Practitioners are invited to keep this self-assessment table updated for when they feel they have achieved each level of competence</i>	LEVEL OF COMPETENCE ACHIEVED					
	Level 1		Level 2		Level 3	
	<i>Signature</i>	<i>Date</i>	<i>Signature</i>	<i>Date</i>	<i>Signature</i>	<i>Date</i>
Learning outcomes						
Standard 1: Removal and insertion of pessaries for routine changes						
Standard 2: Knowledge of the indications and management involved in pessary care						
Standard 3: Knowledge of how to manage complications of pessaries						
Standard 4: Prolapse assessment						
Standard 5: Assessment for fitting the first pessary						

Standard 6: Knowledge of alternatives to pessaries						
Standard 7: Pessary self-management						
Standard 8: Reflective Practice						

ACTION PLANS FOR ONGOING PROGRESS

- Supervisors and practitioners may use this space to highlight areas which can be worked on in order to progress through the levels
- Each entry should have the date, the current level, the suggested action plan and a further date to review whether this has been achieved

Standard 1: Removal and insertion of pessaries for routine changes	
Standard 2: Knowledge of the indications and management involved in pessary care	
Standard 3: Knowledge of how to manage complications of pessaries	
Standard 4: Prolapse assessment	
Standard 5: Assessment for fitting the first pessary	
Standard 6: Knowledge of alternatives to pessaries	
Standard 7: Pessary self-management	
Standard 8: Reflective Practice	