

# 'Task sharing' contraceptive implant insertions and removals with nurses: a training evaluation

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## Background

- The contraceptive implant is a long-acting, effective method of contraception
- Uptake is relatively low in Australia, with just 5% of women using this method<sup>1</sup>
- Low uptake may be partially due to lack of access to clinicians trained in implant procedures.
- Nurse-led insertion is accepted practice in many countries, however it is relatively new in Australia.
- In 2016, Family Planning NSW implemented and evaluated an Implanon NXT insertion and removal training program for registered nurses.
- Training involved online theory, face to face workshop with simulated practice, and supervised clinical practice

## Methods

- Five nurses who enrolled in the training participated in the evaluation.
  - Completed a pre- and post-training survey relating to knowledge, confidence and expectations.
  - Approximately six months after achieving competency, participated in an interview to discuss experiences, challenges and enablers in practice
  - File audit undertaken to review all insertions/removals post-competency
- Five supervising clinicians (four doctors and one nurse) interviewed to explore their views of the training and of nurse-led insertions/ removals.

## Results

- All nurses undertook the Implanon training due to a desire for new knowledge and skill, and half due to patient demand.
  - By the end of the training, all felt very confident in inserting implants without supervision, however were less confident in removals.
  - Nurses identified few barriers to undertaking insertions/ removals in their practice, although time constraints and concerns about losing skills were raised.
  - The need for ongoing procedural opportunities for nurses to maintain competency and confidence was emphasised
- "It's usually the removals because they can be really tricky and they can move and I think I had lots of difficult ones when I was training... I'm just starting to feel a bit more confident [now]." – N5*
- "I like that there was a clinical training component, I definitely felt more confident having the clinical training than when I just did the couple of hour(s) lecture and the arm [simulated practice] ... I wouldn't have felt confident to go in and start doing insertions and removals or felt the same type of confidence that I did with the training." – N1*
- Nurses and clinicians supervising them felt nurses could play an important role in the provision of contraceptive implant procedures
    - Felt this would have a positive impact on service delivery in different health settings and increase access
    - However, funding constraints acknowledged as a considerable barrier

*"...I think just being able to open up those appointments to nurses being able to do those things, so you can free up the doctor's appointments for more complex gynaecological or contraceptive issues... I think that's beneficial" – S2*

*"I think the largest limiting factor there, is your funding streams... because the nurses, unless they're a nurse practitioner, can't attract a Medicare rebate for those activities..." – S1*

## Conclusion

- The training program appeared to be sufficient for nurses to achieve competency and confidence in implant insertions/removals in the family planning setting.
- Additional time and practice may be required to achieve and maintain confidence in implant removals.
- 'Task sharing' implant procedures among nurses and doctors will likely have a positive impact on clinical service delivery and increase access to the contraceptive implant.
- Findings may inform models of care that support nurses in undertaking these procedures and promote opportunities for ongoing practice to maintain skills and confidence – however funding models will need to be considered.

## References

1. Richters, J., Fitzadam, S., Yeung, A., Caruana, T., Rissel, C., Simpson, J. M., & de Visser, R. O. (2016). Contraceptive practices among women: The Second Australian Study of Health and Relationships. *Contraception*.

*"Well it certainly has allowed more access for patients to get Implanon inserted or removed, because there's a lot more clinicians who are able to do the procedure" – S3*