

PUBLIC HEALTH COMMUNITY BASED SERVICES SERVICE SPECIFICATIONS

Service Specification No:	CBS18-19(05)
Service:	Provision of Emergency Hormonal Contraception (EHC) to women under 25 years of age
Authority Lead:	Janet Hutchins
Period:	1st April 2018 to 31st March 2019
Commissioner:	<p>The commissioner detailed as “The County Councils” in this service specification and refers to Leicestershire County Council and Rutland County Council</p> <p>Leicestershire County Council, County Hall, Glenfield, Leicester, LE3 8RA</p> <p>Rutland County Council, Catmose, Oakham, Rutland, LE15 6HP</p>

1. Purpose

This document represents the agreement between the provider and Leicestershire County Council and Rutland County Council for the following community based service and is an appendix to the Contract for the Provision of Public Health Services.

2. Contract Price and Payment Method

- 2.1 The Community provider will be funded for this service, based on the service aims and criteria, on a cost per case.
- 2.2 The value of each case will be as follows:
 - 2.2.1 Consultation with patient presenting for EHC £12.50
 - 2.2.2 Provision of EHC £6 (reimburse for drug cost at drug tariff rate).
 - 2.2.3 Additional payment of £6 (Consultation fee not included) will be made where a replacement dose (vomiting) or a 3000microgam dose has been provided. The reason for provision of double dose is to be reported on the claims system.
 - 2.2.4 Payment for the supply of a double dose (enzyme-inducing drugs) is £12 drug + consultation fee.

Payment for this service will be based on the submission of activity each quarter submitted through the online Community Based Services Claim System of which all providers are registered.

- 2.5 Payment **will not** be made to the community provider if an unaccredited practitioner delivers the service.
- 2.6 This SLA will be reviewed by the Local Authority on an annual basis.
- 2.7 The provider will be responsible for financing operational aspects of the service from

within the agreed payment value. This will include all telephone costs, postage costs, stationery costs and any other miscellaneous costs associated with delivery of the service.

3. Service Delivery – Aims and Objectives

- 3.1 This document represents the Agreement between the Local Authority and the Provider for the provision of free Emergency Hormonal Contraception from community based settings situated within the Local Authority boundaries.
- 3.2 This service must be delivered by appropriately accredited clinical practitioners (e.g. Royal Pharmaceutical Society of Great Britain registered) working at the designated community provider and their name and registration number must be given as requested by the Local Authority.
- 3.3 The aim of this service is to reduce unintended pregnancy and improve sexual health for young people by:
 - Provision of free Emergency Hormonal Contraception (Levonelle) to women under 25 years in Leicestershire and Rutland from accessible community based settings that provide a timely, open access service in line with the criteria as detailed in this specification.
 - Active promotion of the online Chlamydia Screening Programme, general awareness of chlamydia and other sexual health issues to promote good sexual health and signposting to other sexual health services as necessary.
 - Provision of clear signposting and advice in relation to sexual health services
 - Strengthening of local network of contraceptive and sexual health services to help ensure easy and swift access to advice and services.
 - Provision of advice on the use of condoms to prevent infection and of public health information on safer sex practices to increase the knowledge of risks associated with STIs. Providers will be expected to engage with and support the local C-Card condom distribution delivery model.
 - Provision of information packs and signage as detailed below.

EHC

- Levonelle (in accordance with PGD criteria)
- Patient information sheet (appendix in PGD)
- Condoms and information pack as provided by the LLR Integrated Sexual Health Service (ISHS)
- Information about pregnancy testing sites and local sexual health services.
- Display of signage to promote service availability.

4. The Service Criteria

General

- 4.1 It is a condition that the provider delivers the service using professionally accredited registered pharmacists/practitioners who will offer a user-friendly, non-judgmental, client-centered and confidential service. The service offered will be in line with the 'You're Welcome' criteria which can be found at:
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/216350/dh_127632.pdf
- 4.3 Pharmacists/practitioners providing this service must have an enhanced level DBS Check.
- 4.4 The provider will provide support and advice to clients accessing the service, including advice on the avoidance of pregnancy and sexually transmitted infections (STIs) through safer sex and condom use, advice on the use of regular contraceptive methods, including long acting reversible contraceptive methods: Intrauterine Devices, Contraceptive Implants and injectables, and provide onward signposting to services that provide long-term contraceptive methods and diagnosis and management of STIs.
- 4.5 Clients not eligible for these services will be referred as soon as possible to another local service that can assist them.
- 4.6 The community provider providing the service must seek to ensure that the service is available during the opening hours of each delivery site. If that is not possible the community provider must demonstrate that they have undertaken an exercise in demand mapping and ensure that the Service is available at the times of highest demand and that this is clearly communicated to patients. If the pharmacist/practitioner accredited to provide the service is not available, then:
- the contractor must alert the Local Authority and inform them of the duration of the suspension of the service
 - the Local Authority will provide (if required) a list of local alternate providers of the EHC service

- the provider staff on duty must be able to signpost patients to an alternate NHS or Local Authority funded source of Services. Information on services is available on www.leicestersexualhealth.nhs.uk

4.7 Provision of EHC

4.7.1 Community provider contractors (providers) will supply Levonorgestrel Emergency Hormonal Contraception (EHC) when appropriate to clients in line with the requirements of the locally agreed Patient Group Direction (PGD). The supply will be made free of charge to the client.

4.7.2 The community provider providing the service shall annually deliver a minimum of 10 EHC supplies from the individual delivery site. However, a lower activity level will be accepted where the provider has identified a need in a locality which serves a community that cannot readily access an alternative equivalent service. **This will require approval from the commissioner.**

Where the aforementioned service level has not occurred in year, the provider must provide explanation as to why at least 10 supplies have not been delivered and demonstrate sufficient likely demand for the service in the following year. This will be assessed by the Public Health team and determination made as to whether the service provision from that contractor should continue.

4.7.3 Clients excluded from the service due to PGD criteria will be referred to another local service for prompt assistance e.g. GP, local Sexual Health Services and will be informed of the opportunity to purchase the Provider medicine.

4.7.4 The accredited pharmacist/practitioner must work to the Local Authority Patient Group Direction and use Fraser competencies to ascertain whether to supply Levonorgestrel. If a client is deemed non-Fraser competent the pharmacist will signpost/refer the client to named contacts provided by the Local Authority. Completion of a client record sheet (Appendix 2 of the PGD document) is required for every client. The PGD (Appendix A) will be provided, reviewed and maintained by the Local Authority. The provider will be responsible for adopting the PGD and ensuring that all relevant processes are in place to ensure that use of the PGD is clinically safe and follows relevant best practice guidance.

4.7.5 All interaction with the presenting patient MUST take place in a private and confidential area. It is not appropriate, for this service that advice is given over the counter.

4.7.6 Non identifiable client information must be provided for each client contact and submitted in addition to the claim for payment. Information required is as detailed in Appendix B below.

4.7.7 Criteria for the supply of Levonelle

- Supply must be made by the Local Authority accredited pharmacist/practitioner.
- The provider service provider must provide Levonelle and information as detailed in Section 3.
- Women who present and are outside the criteria for Levonelle, must be advised of their options and signposted to appropriate services.

5. Accreditation

- 5.1 The Community Provider must satisfy the Local Authority that Pharmacists/practitioners are appropriately trained to provide the community based service detailed in the SLA. **Please refer to appendix C**
- 5.2 Health care professionals delivering this service must hold membership of an approved professional body and be approved and eligible to practice in a setting that is appropriate to deliver this service. Each individual pharmacist/practitioner offering this community based service, (for and on behalf of a provider contractor), must be fully trained with accreditation recognised by the Local Authority.
- 5.3 In addition to the above training, individual accredited pharmacists must every three years attend a refresh session organised by the Local Authority and keep up to date with changes in clinical practice including the medications and regulations that may impact upon this service to ensure that they are able to provide the most up to date and effective service.
- 5.4 The Community Pharmacist/practitioner(s) delivering the service must have completed appropriate training to enable them to provide medication using a Patient Group Direction.
- 5.5 Up to date certificates of competency must be maintained and copies may be requested by the Local Authority.
- 5.6 **COMMUNITY PROVIDER SHALL INFORM THE LOCAL AUTHORITY IMMEDIATELY SHOULD THE ACCREDITED PHARMACIST/PRACTITIONER CEASE WORKING AT THE PROVIDER.**
- 5.7 The provider must have an accredited confidential and private consultation area in line with best practice.

Protocols

- 5.8 The Community Provider will ensure that all health care professionals are compliant with the protocols for the clinical management of all patients in receipt of services commissioned. These protocols must in line with best practice clinical guidelines and be reviewed on a regular basis. The Community Provider must ensure that all protocols reflect up to date national and local guidance and are amended in light of any changes.
- 5.9 The Community Provider will have their own Standard Operating Procedure to support this SLA.
- 5.10 The Provider will ensure attendance at appropriate training for staff to ensure safe and competent delivery of the services in this agreement.

6. Quality

- 6.1 The provider will comply with the requirements of the quality schedule as detailed in the contract schedule in relation to clinical effectiveness, patient safety and patient

experience.

- 6.2 In addition to terms set out in Section 1 contractors must at all times meet the most recent standards set out in NICE guidance for one to one interventions to reduce the transmission of STIs including HIV and reduce the rate of under 18 conceptions especially amongst the most vulnerable and at risk groups (PH 10003, Feb 2007) and NICE guidance on Contraceptive Services with a focus on young people up to the age of 25 (PH51, 2014)
- 6.3 The provider will offer a user-friendly, non-judgmental, client-centered and confidential service. The service offered will be in line with the 'You're Welcome' criteria which can be found at:
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/216350/dh_127632.pdf in accordance with you're welcome criteria and NCSP guidance.
- 6.4 The provider will allow 'mystery shop' assessment of this service by young people trained to participate in a mystery shop programme on behalf of the commissioners.
- 6.5 The provider will commit to receiving feedback from a mystery shop and agree actions with commissioners in response to feedback. Mystery shop will be a maximum of once per annum.

7. Monitoring Service Delivery

- 7.1 The Local Authority and the Community Provider will work collaboratively to monitor and evaluate the service as set out in this specification.
- 7.2 For purpose of monitoring performance and service delivery, the Community Provider will ensure the completed activity monitoring and claim for payment form is submitted quarterly to allow the service to be analysed and monitored by the Local Authority.
- 7.3 The provider acknowledges and understands that the Local Authority will be reporting on performance by provider (not anonymised).
- 7.4 The provider maintains completed Sexual Health Monitoring documentation and makes this available if requested by the Local Authority for monitoring and audit purposes.
- 7.5 The provider will also provide such information as may be required by the Department of Health, NHS England and the Local Authority relating to the service provided.
- 7.6 In addition, this monitoring information will also inform the commissioning decisions of the Local Authority and will be a component of the Annual Review process with the Community Provider.

Appendix 1 Patient Group Directive.



Leicestershire -
Rutland Levonelle PGI

Appendix B – Client Contact Information to be shared with Commissioner

The following Information will be required for each client contact. This information will need to be submitted alongside claims for payment.

1. Date
2. Client Unique Identifier
3. Client Age
4. Client postcode. (first 2 letters & first 3 numbers)
5. GP practice (if known)
6. Reason for request of EHC*
7. Ethnic Group***
8. Levonelle supply (Yes/No)
9. Double dose supply. Reason 1.weight >70kg; BMI>26 or 2. other
10. Condoms given (Yes/No)
11. Referred to Sexual Health Services (yes/No)
12. Referred from code **
13. Signposted to pregnancy testing sites (yes/No)

*Reason for Request of EHC	Split Condom = C	Misused Pill =	No Contraception = No	Client vomited Levonelle dose = V	Other = OR	
**Referrer Code	FP Clinic = FP	General Practice - GP	NHS Direct = NHS	Other = O	Self Referral = SR	
***Ethnic Category:	White = W	Mixed = M	Asian / Asian British = A	Black / Black British = B	Other - OE	Not Stated = NS

Appendix C- Training Matrix.

The purpose of this matrix is to identify which training must be undertaken to achieve accreditation. The LA will consider request from Pharmacists/practitioners who have been accredited in other LAs (previously CCGs) to provide this service. The Public Health Sexual Health lead will determine accreditation based on training undertaken.

Training Requirements		Evidence Required
<p>Centre for Pharmacy Postgraduate Education (CPPE) Modules (open learning)</p> <ol style="list-style-type: none"> 1. EHC 2. Safeguarding 3. Contraception <p>Equivalent training will be considered for practitioners other than Pharmacists who will be delivering the services detailed in this specification. These practitioners must be appropriately professionally qualified to legally enable safe and competent delivery of the services.</p>	<p>New providers to complete prior to attending local EHC workshop. Existing providers to evidence completion.</p>	<p>Certificate of completion of CPPE module.</p>
<p><u>Local Workshop</u></p> <p>which covers</p> <ul style="list-style-type: none"> • PGD • Working with young people • Local safeguarding • Local services and referral routes • Chlamydia screening 	<p>Sessions organised and delivered by LLR Integrated Sexual Health Service.</p>	<p>Certificate of attendance and refresh every 3 years</p>