**SCHEDULE A – Service Specification**

**PART 1- Pharmacy Sexual Health Services for Under 25s**

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| Authority Lead | **Kate Blakley, Sexual Health Commissioning Manager,**  **Public Health, North Somerset Council (NSC)**  [**Kate.blakley@n-somerset.gov.uk**](mailto:Kate.blakley@n-somerset.gov.uk) | |
| 1. Population Needs | |
| **1.1 National/local context and evidence base**  Good sexual health should provide for a state of physical, emotional, mental and social wellbeing in relation to sexuality; not merely the absence of disease.  Improving the sexual health of the population remains a public health priority at national, regional and local levels. Sexual health is one of five mandated services that local authorities fund.  Young people aged 24 and under experience the highest rates of sexually transmitted infections.  North Somerset Council local priorities for meeting the sexual health needs of young people include:   * building knowledge and resilience * providing good access to contraception * improving the coverage of sexually transmitted infection testing and treatment * developing specialist sexual health services such as young people’s sexual health and teenage pregnancy services.   Evidence base:  Investing in sexual health services can deliver cost savings for the NHS and local authority services such as social care and education eg through preventing unintended conceptions (and the costs associated with maternity and abortion services) and reducing the incidence of sexually transmitted infections including HIV.  Community pharmacies are required to provide opportunistic sexual health advice as part of their essential services. This includes supporting Public Health campaigns, signposting patients to other specialist contraception and sexual health services and support for self-care. The purpose of this service specification is to build on this essential service provision. | |
| 2. Scope | |
| **2.1 Aims and objectives of service**  The overall aim is to improve the sexual health of young people by providing confidential, non-judgemental and accessible contraception and sexual health services. All safeguarding protocols must be adhered to (e.g. Fraser Guidelines, Bichard Checklist).  **2.2 Service description/pathway**  The community pharmacy will provide information, advice and guidance about contraception, sexually transmitted infections, and related reproductive and sexual health topics, to support young people to make informed decisions and to safeguard their sexual health.  This includes:   * The supply of free Emergency Hormone Contraception (EHC) to patients aged 13-24 where there is a clinical need under the current Bristol North Somerset, South Gloucestershire (BNSSG) Patient Group Direction (PGD) inclusion criteria. * Treating patients and partners for free, following a positive screen result from Unity Chlamydia Screening Office, under the current BNSSG PGD inclusion criteria. * Ensure that all patients requesting emergency contraception are offered access to a Chlamydia screening kit, either from the pharmacy’s stock or by ordering a postal kit online via the Unity Sexual Health website. Patients should be strongly encouraged to complete and return the test as per the printed instructions. * Provide a free condom supply pack (bag of 6 condoms and a sachet of lubricant) to every patient requesting EHC and / or Chlamydia treatment * Provide signposting to other sexual health services or support for young people as appropriate (particularly those excluded from the PGD) and promote better sexual health through consultations * Provide these specified services as well as routine advice and support to patients which promotes positive sexual health and wellbeing. * Further promote sexual health campaigns to raise awareness, address risky behaviours, and offer onward referral and signposting to populations at risk, especially for those who do not access conventional health services.   Services should be young person focused; adhere to the You’re Welcome, Young People Friendly (YPF) standards which include having due regard to access to the service, promotion of the service, consent and confidentiality, the consultation environment, staff training and involving young people in the development and evaluation of the service. Pharmacists wanting to participate in the local YPF accredited scheme should contact the commissioner for more details.  The service will be provided in compliance with [Fraser Guidelines.](https://www.cqc.org.uk/guidance-providers/gps/nigels-surgery-8-gillick-competency-fraser-guidelines)  **2.3 Population covered**  This service will cover all young people aged 13 – 24 years in North Somerset and will include those living out of area.  **2.4 Any acceptance and exclusion criteria and thresholds**  **Exclusions**   * This service excludes HIV treatment and care. * Young people who are assessed as unsuitable for treatment under the conditions of the BNSSG PGD   **Acceptance**   * Consent must be obtained for any treatment offered * Partners will be treated for free, following a positive chlamydia screen result from Unity Screening Office, under BNSSG PGD inclusion criteria. * Pharmacists can use their professional judgment to include vulnerable young people over the age of 24 years where indicated eg young people with a learning difficulty   **2.5 Interdependencies with other services**  The Service is required to work with and refer to wider partners to address the needs of service users and increase the opportunity for service users to achieve optimum sexual health outcomes.  Partners will include:   * Unity Weston Integrated specialist Sexual Health Clinic (WISH) & Clevedon Clinic * General Practice * Weston College * School nurses   Where a young person requesting EHC cannot be seen, a supported referral to another pharmacy, WISH / Unity Sexual Health Clinic or GP where appropriate should be made so the young person is seen that day.  **2.6 Any activity planning assumptions**  The service should be available during the pharmacy opening hours when a pharmacist is legally allowed to prescribe.  North Somerset has an average of 30 young females presenting for EHC per month across the area, including out of area. | |
| 3. Applicable Service Standards & Clinical Governance Requirements | |
| 3.1 Clinical Effectiveness & Research-Applicable national & local standards e.g. NICE   * Sexually transmitted infections and under 18 conceptions: prevention (NICE PH3) <https://pathways.nice.org.uk/pathways/preventing-sexually-transmitted-infections-and-under-18-conceptions> * Contraceptive services for under 25s (PH51) * BASHH CEG guidance on tests for Sexually Transmitted Infections 2015 <https://www.bashhguidelines.org/media/1084/sti-testing-tables-2015-dec-update-4.pdf> * and any relevant updated guidance   3.2 Audit   * Providers will take part in the NHS England (NHSE) annual national audit programme * Providers will complete the NHSE annual Community Pharmacy Assessment Framework (CPAF) screening questionnaire   3.3 Risk Management   * Providers must comply with latest Infection Prevention Control Guidance * Any serious incidents need to be reported in accordance with the providers local incident reporting policy and NHSE reporting requirements. <https://improvement.nhs.uk/resources/learning-from-patient-safety-incidents/> as applicable and notified to the commissioner within one week. The provider should also provide assurance of actions taken and sharing the Lessons Learned. * Pharmacists should read, understand and sign the latest local sexual health PGD’s (available on the ALPC website). The signed PGDs should be retained and made available for reference in each pharmacy.   3.4 Education and Training   * Pharmacists participating in this service specification must enrol on the service via PharmOutcomes and complete the Declaration of Competence criteria listed. Relevant evidence must be provided using the system on Pharm Outcomes. * Pharmacists can initially enrol on the service via PharmOutcomes without having completed the Declaration of Competence criteria as listed on PharmOutcomes. From the day of enrolment, they will have 90 days to complete the outstanding requirements. If the outstanding requirements are not completed within 90 days, the pharmacist will be unable to provide the service, or the pharmacy be paid for it, until such a time as these outstanding requirements are met. * Pharmacists should review the self-declaration form at least every 3 years or, earlier if the Pharmacists feels his/her competence levels have declined due to undertaking too few consultations.   3.5 Patient and Public Involvement (PPI)   * Providers will complete the NHSE annual Community Pharmacy Patient Questionnaire (CPPQ) and review feedback to evaluate public health commissioned services where appropriate and use this information to support service improvement. * The pharmacy co-operates with any locally agreed North Somerset led assessment of service user experience. This includes being willing to participate in periodic ‘mystery shopping’ exercises to monitor quality.   Pharmacists are required to complete an annual Pharmacy Clinical Governance Assurance Statement via PharmOutcomes to provide assurance that public health commissioned services in North Somerset are safe, effective and meet the required quality standards. | |
| 4. Information provision | |
| **4.1 Record of activity**  A record of activity should be maintained and held by the service provider. The Provider will need to submit activity data to PharmOutcomes for payments. Service activity is monitored quarterly by the Public Health team.  Full details of the patient, their consultation and suitability for treatment under the PGDs must be recorded using the relevant service proforma on PharmOutcomes. This will then automatically populate a claim for the pharmacy for service delivery.    Activity data needs to be entered onto PharmOutcomes by the 5th of every month. Invoices will be calculated and submitted by PharmOutcomes on the 6th of each month, payment terms are ordinarily 30 days. Claims will be accepted up to 3 months after the end of the month being claimed for, payments will be based on the activity recorded on Pharm Outcomes)  Any late claims outside this period may not be paid. (see section 5 Charges, Payment and Recovery for full details).  Claims are automatically sent to the North Somerset Council Accounts Payable Team.  **4.2 Financial details**   |  |  | | --- | --- | | Professional consultation for Chlamydia screening | £14 per patient | | Chlamydia treatment | Drug tariff cost for Azithromycin / Doxycycline | | Professional consultation for EHC | £14 per patient | | EHC treatment | Drug tariff cost for levonorgestrel / Ulipristal |   **NB: *Failure to maintain and update the Declaration of Competence will mean the pharmacist will not be able to access the service on Pharm Outcomes and therefore unable to generate claims for payment.*** | |
| 5. Key Performance Indicators | |
| |  |  |  |  | | --- | --- | --- | --- | | **Key Performance Indicators** | **Method of measurement** | **Threshold** | **Consequence of breach** | | **Accessibility:** sexual health consultations with young people aged 13-24 are made available during pharmacy operating hours | Feedback from professionals referring to pharmacies  Mystery shopping | 100% | Meeting with the commissioner to discuss issues. Failure to improve may result in termination of the contract. | | **Quality:**  Females presenting for EHC to be consulted on Cu-IUD as the most effective option for preventing pregnancy after unprotected sex and as an ongoing method of contraception.  **Accessibility**  Females presenting for EHC are seen the same day. Where this is not possible all staff including locums can make a supported referral to an alternative pharmacy/specialist sexual health clinic or GP where appropriate | Number of referrals into Unity Sexual Health  Audit / Feedback from young people and professionals supporting young people/Mystery shopping | 100%  100% | Meeting with the commissioner to discuss issues. Failure to improve may result in termination of the contract.  Meeting with the commissioner to discuss issues. Failure to improve may result in termination of the contract. | | |
| 6. Details of Review Meetings | |
| Service activity is monitored quarterly by the Public Health team. Meetings with individual pharmacies will be set up where necessary. | |