AIM AND INTENDED SERVICE OUTCOMES

1.1 The pharmacist will be accredited to supply the progestogen-only emergency contraception (POEC) levonorgestrel, when indicated to clients in line with the requirements of a locally agreed Patient Group Direction (PGD). The supply will be made free of charge to female clients aged 12 and over at Somerset County Council (SCC) expense and aims to:

1.2 improve patient access to the provision of emergency hormonal contraception, particularly to women under 25 years, through community pharmacy

1.3 provide professional sexual health care advice; sympathetic understanding to the client; signposting to appropriate services, with a non-judgmental attitude; addressing patient choice and a non-clinical setting

1.4 reduce the number of unplanned pregnancies in Somerset particularly in under 18s

1.5 raise the awareness of sexually transmitted infections, reduce prevalence of Chlamydia, and signpost clients to appropriate services

1.6 refer clients, especially those from hard to reach groups, into mainstream contraceptive services

1.7 strengthen the local network of contraceptive and sexual health services to help ensure easy and swift access to advice

REGISTRATION AND CONTINUING PROFESSIONAL DEVELOPMENT

2.1 Provision of EHC to all patient groups identified under the PGD will be through accredited pharmacists who have:

- successfully completed Centre for Postgraduate Pharmacy Education (CPPE) training on Emergency Hormonal Contraception, and

- attended SCC/CCG level 2 Safeguarding Children training and approved EHC specific training (covering communicating with young people, sexual health advice provision, and EHC-specific safeguarding children issues), and
• if SCC/CCG approved level 2 Safeguarding Children training was attended greater than two years previously refresher training in Safeguarding Children to level 2 standard has been completed, and.
• completed the relevant authorisation process to be accredited by SCC for provision of EHC under the current PGD.

2.2 Pharmacists who have not completed the SCC/CCG-approved Level-of Safeguarding children training and approved EHC specific training cannot supply EHC under the PGD to patients under the age of 14 years, or if more than 72 hours has elapsed since sexual intercourse.

2.3 Accredited pharmacists (see 2.1 and 2.2 above) working in the pharmacy are expected to comply with all aspects as described above.

2.4 When the service cannot be made available (in case of sickness, holiday, or absence of an accredited pharmacist) the pharmacy staff will signpost client to the nearest free EHC service provider – to avoid ‘losing’ a vulnerable client, a phone call to the next provider may be necessary.

3 PATIENT CONFIDENTIALITY AND DATA PROTECTION

3.1 The service will be provided in compliance with Fraser guidelines and Department of Health guidance on confidential sexual health advice and treatment for young people aged under 16 years. In providing advice or treatment it is good practice to encourage the young person to talk to a parent or trusted adult.

3.2 Patients using this service can remain anonymous if they wish to do so. If patients are ‘anonymous’ on the PMR a member of staff must countersign the proforma (EHC1) to witness that a supply of EHC has occurred.

3.3 When a client is under 16 years pharmacists and their staff may have concerns that the young person has been the victim of sexual abuse, physical harm or has been exploited. If there is any such concern or suspicion of child abuse there is a statutory duty to safeguard and promote the welfare of children and young people (Children’s Act 2004), Advice should be sought from the Designated or Named Safeguarding Professional and/or a referral made to Children’s Social Care.

3.4 Additional caution is required for children under 13 years and advice MUST be sought from a healthcare professional who has extensive expertise in child protection issues prior to the provision of EHC.

3.5 In law children under 13 years are deemed to be unable to give informed consent to sexual activity. Any sexual offence involving a child under 13 is very serious and should be taken to indicate a risk of significant harm and in most cases this will lead to a referral to Children’s Social Care. Further advice and procedures can be found on the South West Child Protection Procedures Website. www.swcpp.org.uk
3.6 Pharmacists and their staff must ensure that the confidentiality of information acquired in the course of their professional activities is respected and protected, and is disclosed only with the consent of the individual, or the their parent, guardian or carer where appropriate, except where such disclosure is necessary to prevent serious injury or damage to the health of the patient, a third party or to public health.

3.7 All young persons should be advised that the service is confidential unless it is considered that the young person may be at risk of suffering or likely to suffer from harm through abuse or exploitation. It is good practice to acquire consent but in the event that this is refused or may place the young person in danger there remains a statutory duty to safeguard and protect the young person by discussing concerns with a Designated or Named Safeguarding professional and/or sharing the information with Children’s Social Care.

3.8 The pharmacist, the contractor and his / her staff must also comply with the requirements of the Data Protection Act 1998 and should ensure they are aware of their legal and professional responsibilities concerning data protection in the provision of this service.

4 ROLES AND RESPONSIBILITIES OF THE CONTRACTOR

4.1 The contractor must notify SCC with reasonable promptness where the contractor believes that they will not able to meet the requirements for EHC provision under this contract for the foreseeable future (e.g. long-term sickness, or pharmacists ethical / religious objection to the supply of EHC.)

4.2 The contractor must be willing for supply to all patient groups in the pharmacy allowed under the PGD if relevant PGD inclusion and exclusion criteria are met.

4.3 The contractor must ensure that EHC is only provided under the relevant PGD and under the terms of this contract by a suitably accredited pharmacist.

4.4 If a suitably accredited pharmacist is not available to provide the service staff at the pharmacy must make reasonable efforts to signpost any patients or other individuals attempting to access the service to the nearest community pharmacy that is providing the service.

4.5 The contractor should ensure that all pharmacists and staff participating in this service are aware of their responsibilities with respect to safeguarding children and child protection. All staff have a statutory duty to safeguard and promote the welfare of children and young people.

4.6 The contractor must ensure that a copy of this contract and the relevant EHC PGD, together with copies of relevant forms necessary for EHC supply under this service are available and readily identifiable in the pharmacy.
5 SERVICE DESCRIPTION

The Pharmacy will:

5.1 Have been approved to provide advanced services i.e. having suitable consultation area.

5.2 Provide a confidential, non-judgmental and sympathetic service sensitive to the needs of all clients including under 16s.

5.3 Take the relevant sexual and medical history of client as described on the service pro forma.

5.4 Assess and record under 16 competency using Fraser Guidelines.

5.5 Supply levonorgestrel 1500mcg tablet(s) (POM product only) free of charge to the client where indicated. (Supply of the Pharmacy-Only levonorgestrel 1500mcg tablet is not authorised under the PGD.)

5.6 Complete the relevant service pro-forma which must be signed by:

- The accredited pharmacist providing the service, and
- The patient, unless the patient wishes to remain anonymous, or
- Another member of pharmacy staff, if the patient wishes to remain anonymous

5.7 Discuss the Copper Intra Uterine Device as an alternative or additional method of emergency contraception for increased efficiency and signpost the patient accordingly.

5.8 Discuss and advise patients aged 15 to 24 years (up to 25 years) about chlamydia infection, screening, and treatment. Following the discussion the patient and their sexual partners should be offered a Chlamydia testing kit and the relevant number of kits should be supplied if the offer is accepted. The length and detail of any discussion with the patient will vary according to the patients existing knowledge and experience of chlamydia and the chlamydia screening programme.

5.9 Offer to supply leaflets to reinforce health advice given during the consultation e.g. STIs, contraception, as directed within PGD if relevant and in proportion to the patient’s need and level of knowledge.

5.10 Offer support and advice to the patient, including up to date details of other related services and/or referral to primary care or specialist centres where appropriate.
5.11 Order new stock of:

- Chlamydia Screening Kits when required (kits supplied by Chlamydia Screening Office)(if the contractor is providing kits as part of the chlamydia screening kit provision. There can be obtained from the CSO on Somersetcs@sompar.nhs.uk or 01749 836704
- Relevant leaflets for reinforcement of health advice from the Somerset Health Promotion and Resource Service from susan.parsons@sompar.nhs.uk or 01460 238240

5.12 Maintain appropriate confidential records on the utilisation of the service.

5.13 Share relevant information with other health care professionals and agencies, in line with local and national confidentiality and data protection arrangements, including the need for the permission of the person to share the information.

5.14 To share information without consent where there is reasonable cause to believe that a young person may be suffering or at risk of significant harm

5.15 Must use the August 2012 or later version of the patient questionnaire pro-forma to record supplies of EHC under this contract.

5.16 Complete separate claim form(s) (August 2012 or later version) for all EHC supplies made under this service in each separate month.

5.17 Claim forms must be completed with all the required information for SCC data collection and service monitoring and returned to the SCC office as identified on the claim form

5.18 Must NOT send completed service pro-formas to the SCC with the completed claim form(s)

5.19 Records (including a copy of the pro forma questionnaire completed at the time of EHC supply) must be kept securely at the pharmacy for at least eight years, or for children, until the child is 25 years old or for eight years after the child’s death. Records (including the pro forma) must be available for inspection by the PCT at the pharmacy upon request.

Somerset County Council will:

5.20 Provide up to date details of other services which pharmacy staff can use to refer on service users who require further assistance.

5.21 Coordinate, in conjunction with the Chlamydia Screening Office (CSO) the promotion of the service locally, including the development of publicity materials and the use of nationally produced materials, in order to ensure young people and other local health care providers are aware that the service is available from local pharmacies.
5.22 Provide details to contractors of how to order health resources (including relevant claim forms and patient questionnaires (service pro-forma's)) for fulfilment of the agreement on at least once annually.

5.23 Provide regular training to fulfil CPD requirements to deliver this service

5.24 Pass the claim forms for payment to SCC by the end of each quarter.

5.25 Incorrectly completed or incomplete claim forms will be returned to the pharmacy and cannot be processed for payment until completed correctly with all the required information.

6 QUALITY INDICATORS

6.1 The pharmacy has appropriate health promotion resources available for the user group and promotes its uptake.

6.2 The pharmacy reviews its standard operating procedures and the referral pathways for the service on an annual basis.

6.3 The pharmacy can demonstrate that pharmacists and staff involved in the provision of the service have undertaken CPD relevant to this service.

6.4 The pharmacy participates in an annual or periodic ‘snap shot’ SCC organised audit of service provision

6.5 The pharmacy co-operates with any locally agreed SCC led assessment of service user experience.

7 CLINICAL GOVERNANCE

7.1 Whilst discharging their duties, pharmacist/technicians/technicians may uncover practice that they consider to be of significant danger to patient safety. In these circumstances the pharmacist/technician will need to exercise their professional judgement. They may also wish to seek advice from:

<table>
<thead>
<tr>
<th>Name</th>
<th>Post</th>
<th>Telephone No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gill Munro</td>
<td>Designated Nurse for Safeguarding Children</td>
<td>01935 385226</td>
</tr>
</tbody>
</table>

8 PAYMENT

8.1 All claims for payment must be made on the SCC issued claim form.

8.2 The contractor will be reimbursed for the medicines supplied under the PGD. Reimbursement will be at the Drug Tariff price for the levonorgestrel 1500mg tablet (POM product) relevant at the time of the
supply. The contractor will not be reimbursed for the cost of any Pharmacy-only levonorgestrel 1500mcg tablets supplied.

8.4 The contractor will be paid according to the following principle:

\[
\text{Basic professional fee} + \text{Applicable additional professional fee(s) if any} + \text{Drug Tariff defined drug cost} = \text{Total payment per supply made}
\]

8.5 The professional fees will be paid according to the following schedule:

<table>
<thead>
<tr>
<th>Description</th>
<th>Fee per supply</th>
<th>Note(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supply of levonorgestrel 1500mcg to according to the relevant PGD</td>
<td>£11.00</td>
<td>Basic fee payable on all supplies</td>
</tr>
<tr>
<td>Patient over the age of 13 years and under the age of 16 years and Fraser competence has been assessed</td>
<td>£2.00</td>
<td>Additional fee only payable if conditions met</td>
</tr>
<tr>
<td>Patient over the age of 12 years and under the age of 13 years and Fraser competence has been assessed</td>
<td>£5.00</td>
<td>Additional fee only payable if conditions met</td>
</tr>
<tr>
<td>Supply to a patient in exceptional circumstances over 72 hours but under 150 hours after sexual intercourse</td>
<td>£2.00</td>
<td>Additional fee only payable if conditions met</td>
</tr>
<tr>
<td>Chlamydia advice provided to a patient between the age of 15 years and 24 (up to 25th birthday)</td>
<td>£1.00</td>
<td>Additional fee only payable if conditions met</td>
</tr>
</tbody>
</table>

8.6 The contractor will be reimbursed for cost of the POM medicine supplied to each patient at the price detailed in the Drug Tariff in effect during the month the medicine was supplied. The reimbursement of the medicine cost will be in addition to any professional fee paid.

8.7 The minimum professional fee paid for any single supply will be £11.00. The maximum professional fee payable for any single supply to a patient will be £18.00.

8.8 The contractor will only be reimbursed for the cost of the POM version of the levonorgestrel 1500mg table. The contractor will not be reimbursed for any supply of an OTC version of the levonorgestrel 1500mcg tablet.
8.9 All patients treated under the terms of this contract will receive treatment free of charge in line with normal NHS prescription levy and exemption rules.