**Pharmacy Sexual Health Service Specification**

This service specification outlines the specialised sexual health services to be provided in pharmacy in addition to the standard contract requirements.

**PLEASE NOTE:** The Bristol, North Somerset and South Gloucestershire (BNSSG) Integrated Sexual Health Service (ISHS) has been recommissioned and the new service will start from 1st April 2025. The ISHS model aims to improve sexual and reproductive health by providing non-judgmental and confidential open access services with face-to-face, remote, and online provision available, and is made up of:

1. A digital ‘front door’- an open access clinically supported digital sexual and reproductive health prevention and treatment service (accessed via a website).
2. An open access community-based specialist sexual and reproductive health treatment service which will include sexual health clinics across BNSSG. The service will offer face to face and telephone appointments (booked via the digital ‘front door’), as well as some walk in services
3. A prevention, health promotion and community engagement service which includes outreach into the most vulnerable or high need communities across BNSSG.

These will collectively be referred to as the ISHS throughout this specification. Further information about the new ISHS will be communicated to practices once details of the name of the service, website details and clinic locations are available to share.  The new service will be provided by a partnership of providers.

# Population needs

## Introduction

Community pharmacies are required to provide opportunistic sexual health advice and signposting as part of their essential services. This includes supporting Public Health campaigns, signposting service users to other contraception and sexual health services and support for self-care. The purpose of this service specification is to build on this essential service provision. For example, evidence from the [2022 Bristol, North Somerset and South Gloucestershire Sexual Health Needs Assessment](https://services.bristol.gov.uk/files/documents/7147-bnssg-sexual-health-needs-assessment-2022/file) shows that in Bristol the majority of emergency hormonal contraception is provided by pharmacists, who offer a vital community-based service for young people.

This service specification sets out the requirements for the provision of:

* Emergency Hormonal Contraception (EHC) and referral to the ISHS for an emergency copper intrauterine device (Cu-IUD) for young women aged 24 and under.
* Offering a self-sampling chlamydia and gonorrhoea test kit to young women aged 16 to 24 (previously chlamydia screening programme kits).

References to women throughout this document includes cisgender women, transgender men, non-binary and gender-diverse people (assigned female at birth) who have not had hysterectomy or bilateral oophorectomy

* 1. **National and local context**

The provision of sexual health services contributes to the following key local and national health priorities:

* Reducing the number of under 18 conceptions.
* Reducing the number of unplanned pregnancies.

Reducing the prevalence of sexually transmitted infections (STI) and improving sexual and reproductive health outcomes.

1. **Aims and service description**

**2.1 Aims**

The overall aims of this service are to:

* To increase the availability and accessibility of EHC and the emergency copper intrauterine device (Cu-IUD) for young women aged 24 and under.
* Increase access to asymptomatic screening of chlamydia and gonorrhoea in women aged under 25.
* To increase access to condoms, and knowledge of the important role that condoms play in reducing the risk of STI transmission and preventing pregnancy.
* Improving knowledge and understanding of the risks associated with unprotected sex through the provision of information, advice and guidance.
* Increasing the uptake of sexual health screening through awareness raising and referral / signposting to STI testing and treatment services.

**2.2 Service description summary**

The pharmacies offering this service will provide the following services to young people aged 24 and under:

* Give advice on contraception, sexual health and sexually transmitted infections.
* Provide free emergency hormonal contraception (EHC) via patient group direction (PGD)
* Offer referral tothe ISHS for an emergency copper intrauterine device (Cu-IUD).
* Offer a chlamydia and gonorrhoea self-sampling test kit (aged 16 to 24 only) and a free condom supply pack to individuals requesting emergency contraception, regardless of whether or not a supply of EHC is made.
* Provide the service in compliance with all safeguarding protocols (see section 2.4 and 3.1).

**2.3 Full service description / pathway**

### 2.3.1 Information provision

* Provide routine advice and support to service users which promotes positive sexual health and wellbeing, including:
	+ Prevention of sexually transmitted infections (STIs)
	+ Advice on the use of condoms
	+ Emergency contraception
	+ The full range of contraceptive methods including long-acting reversible contraceptive (LARC).
* Inform women being seen for EHC that routine contraception is available via a number of routes including some pharmacies, GPs and the ISHS.
* Advise women that as well as access through GPs, they can self-refer into the ISHS for routine LARC fitting (including a Cu-IUD) via the ISHS website, if this is their preference.
* Signpost to other sexual health services or support for young people as appropriate, especially for those excluded from the PGD (see section 2.4 and 2.8 for further information about safeguarding and signposting to other services).
* Pharmacists should emphasise that sexual health is everyone’s responsibility, not just that of women.

***2.3.2 Emergency Hormonal Contraception (EHC) consultations***

* Supply free emergency hormonal contraception to women aged 24 and under, regardless of local authority of residence, in line with local PGDs and [FSRH guidance](https://www.fsrh.org/Common/Uploaded%20files/documents/fsrh-guideline-emergency-contraception03dec2020-amendedjuly2023-11jul.pdf) (refer to decision making algorithms within guidance).
* Inform all individuals that insertion of a copper intrauterine device (Cu-IUD) within five days of UPSI or within five days from earliest estimated ovulation is the most effective method of emergency contraception. If a Cu-IUD is appropriate and acceptable, supply oral EHC and urgently refer to the ISHS via PharmOutcomes.
* Women aged 24 and under attending an EHC consultation should also be offered:
	+ A pack of free condoms.
	+ A chlamydia/gonorrhoea self-sampling test kit - aged 16 to 24 only
* Women can either be offered test kits provided to the pharmacy by the ISHS or encouraged to order their own test kit from the ISHS website once available.
* See section 2.3.5 for how to order test kits and condoms. Individuals aged 13 to 24 should also be advised that they can also access free condoms from the ISHS website once available.
* Record all transactions on PharmOutcomes as part of the EHC consultation record.
* Follow safeguarding procedures detailed in section 2.4.

***2.3.3 Chlamydia and gonorrhoea self-sampling test kit distribution***

* A chlamydia/gonorrhoea test kit provided by the ISHS should be offered to women aged 16 to 24 accessing the pharmacy for EHC. Those under 16 should be directed to ISHS clinics or their GP for testing.
* Women should be informed that the test kit can detect both chlamydia and gonorrhoea, is easy to do themselves, is confidential and that they do not need to be examined.

### 2.3.4 Service user pathway for activating the self-sampling test kit and getting results

* Women aged 16 to 24 inclusive:
	+ Each test kit will include a QR code and clear instructions for service users on how to activate/register online. Service users will provide basic demographic and contact details. For those without a smartphone, a URL will be provided for access via a computer.
	+ Once the test kit is activated, service users will manage their test results either online or via text message (a smart phone is not required to receive results via SMS). Partner notification will also be managed digitally (see section 2.5)
	+ Pharmacists should assist individuals that are digitally excluded or require assistance by activating the test kit on their behalf. Service users must provide a phone number for communicating results.
* Women aged 13 to 15 inclusive:
	+ Direct to ISHS clinics for STI testing (details to be provided). A digital pathway is under development. Further guidance will follow once available.

### 2.3.5 Ordering chlamydia and gonorrhoea self-sampling test kits and condoms

* Chlamydia/gonorrhoea test kits can be ordered from the ISHS via email: orders@sh24.org.uk
* Condoms (to be given during EHC consultation) can be ordered from the ISHS via email: orders@sh24.org.uk.

**2.4 Safeguarding protocols**

* Ensure service users aged 15 and under are assessed as Fraser competent against the [Fraser Guidelines](https://learning.nspcc.org.uk/child-protection-system/gillick-competence-fraser-guidelines), details of which are listed in the PharmOutcomes consultation template for this service. A service user deemed not to be competent should be referred to an appropriate ISHS clinic (details to follow) or GP practice.
* Ensure that service users under the age of 18 are assessed for the potential risk of abuse or child sexual exploitation using the [Bichard Checklist](https://bristolsafeguarding.org/media/1183/fraserbichard.pdf), details of which are listed in the PharmOutcomes consultation template for this service.
* Ensure that, regardless of service user age, any safeguarding concerns identified are recorded and discussed with the appropriate Safeguarding Lead, and that all actions taken are in line with the service’s internal safeguarding policies.
* Any request for provision involving service users aged 12 and under must be immediately reported to the [Bristol Safeguarding Team](https://www.bristol.gov.uk/residents/social-care-and-health/children-and-families/concerns-about-a-child/first-response-for-professionals-working-with-children/make-a-referral-to-first-response). Pharmacists are still permitted to supply emergency contraception to service users aged 12 and under, provided all mandatory safeguarding procedures are followed.
* Service users aged 12 and under requiring STI testing should be referred to the ISHS (details to follow) or their GP.
* For professional advice about patient management please call the ISHS (details to follow).

**2.5 Positive results and partner notification**

**Service users who screen positive for chlamydia and/or gonorrhoea (using test kits from the ISHS)**, will be contacted by the ISHS to give them their results, arrange how to access free treatment, initiate partner notification and be provided with any further follow up advice.

**2.6 Population covered**

* The EHC service will cover all women aged 24 and under in Bristol and out of area.
* Chlamydia and gonorrhoea self-sampling test kits should only be given to those resident in Bristol, North Somerset and South Gloucestershire.

**2.7 Any acceptance and exclusion criteria**

### 2.7.1 Exclusions

* Young people who are assessed as unsuitable for treatment under the conditions of the BNSSG PGD.

### 2.7.2 Acceptance

* Consent must be obtained for any treatment offered.
* Pharmacists can offer this service to particularly vulnerable women aged 25 and over if necessary using their professional judgement.

**2.8 Interdependences with other services**

* The pharmacy should 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.
* Where a pharmacy is unable to provide EHC, a supported referral to another pharmacy or GP where appropriate must be made so the young person is seen that day.
* EHC will also be available via the ISHS to women aged 24 and under that live in BNSSG either through a referral to clinic made by the pharmacy or by the service user ordering it online to be posted home or the prescription sent electronically to their local pharmacy for collection.
* For women over 25, advise that EHC is available for free from their GP or from the [Bristol Urgent Treatment Centre](https://sirona-cic.org.uk/nhsservices/services/bristol-urgent-treatment-centre/).
* For PrEP, individuals should be signposted to the ISHS website once available.

**2.9 Any activity planning assumptions**

The pharmacy will offer the service throughout their contracted core hours and, where possible, throughout their supplementary hours. When this is not available the pharmacy is required to signpost to an alternative pharmacy that provides this service.

For continuity of service, long term locums working in these pharmacies are expected to comply with all aspects of the service.

1. **Applicable service standards and clinical governance requirements**

**3.1 Clinical Effectiveness & Research-Applicable national & local standards e.g. NICE**

Pharmacies signed up to this service are expected to operate in line with most recent guidance and established clinical practice. Whilst this document includes guidance current at the time of publication, pharmacies must ensure that services reflect updates in guidance, best practice and recommendations as and when they are produced:

* The service will be provided in compliance with all safeguarding protocols, including: [Fraser Guidelines](https://learning.nspcc.org.uk/child-protection-system/gillick-competence-fraser-guidelines), [BNSSG safeguarding information](https://bnssg.icb.nhs.uk/health-and-care/health-advice-and-support/safeguarding-information/), [Bichard checklist](https://bristolsafeguarding.org/media/1183/fraserbichard.pdf) and the [You’re Welcome, Young People Friendly (YPF) standards](https://www.gov.uk/government/publications/establishing-youth-friendly-health-and-care-services).
* [FSRH guidance](https://www.fsrh.org/Common/Uploaded%20files/documents/fsrh-guideline-emergency-contraception03dec2020-amendedjuly2023-11jul.pdf) on Emergency Contraception.
* The BNSSG Local Patient Group Directives (PGDs) will be available on the Community Pharmacy Avon and Wiltshire website (previously known as Community Pharmacy Avon). The new website link will be communicated once available.
* [The NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2020](https://www.england.nhs.uk/wp-content/uploads/2020/12/B0274-guidance-on-the-nhs-charges-pharmaceutical-and-local-pharmaceutical-services-regulations-2020.pdf)
* National Institute for Health and Care Excellent (NICE) guidance: [Contraceptive services for under 25s](https://www.nice.org.uk/guidance/ph51/chapter/Recommendations) (PH51) and [Sexually transmitted infections](https://www.nice.org.uk/guidance/ng221): (NICE NG221)
* BASHH summary guidance on [testing for Sexually Transmitted Infections 2023](https://www.bashh.org/_userfiles/pages/files/resources/bashh_summary_guidance_on_stis_testing_2023.pdf#:~:text=All%20people%20attending%20sexual%20health%20services%20in%20line,if%20not%20known%20to%20be%20immune%20or%20vaccinated%29).
* National Chlamydia Screening Programme overview
[NCSP: programme overview - GOV.UK](https://www.gov.uk/government/publications/ncsp-programme-overview/ncsp-programme-overview)

**3.2 Pharmacy requirements**

* Pharmacies should have an appropriate consultation room that meets [NHS Regulations 2020](https://www.england.nhs.uk/wp-content/uploads/2020/12/B0274-guidance-on-the-nhs-charges-pharmaceutical-and-local-pharmaceutical-services-regulations-2020.pdf).
* Pharmacies delivering the services must ensure robust clinical governance arrangements are in place and demonstrate commitment to patient safety, quality improvement and clinical efficiency.
* Pharmacies delivering the service must ensure that all pharmacists and staff involved in the provision of the service are aware of and operate within appropriate pharmacy Standard Operating Procedures (SOPs) which must be in place.
* Pharmacists should read, understand and sign the latest local sexual health PGDs. The signed PGDs should be retained and made available for reference in each pharmacy.

**3.3 Pharmacy training requirements**

* Pharmacists participating in this service specification must enrol on the EHC service via PharmOutcomes and complete the Declaration of Competence criteria listed within 90 days. Relevant evidence must be provided using the system on PharmOutcomes.
* If the Declaration of Competence is not completed within 90 days, the pharmacist will be unable to provide the service and the pharmacy will not 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 need refreshing due to undertaking too few consultations.
* Bristol City Council also recommend the completion of the following self-learning packages as additional resources (although their completion is not compulsory):
	+ [CPPE: Sexual Health in Pharmacies - 6hrs](https://www.cppe.ac.uk/programmes/l/sexual-e-01/)
	+ [CPPE: Dealing with difficult discussions - 6hrs](https://www.cppe.ac.uk/programmes/l/diffdisc-e-01)
* The pharmacy contractor has a duty to ensure that all pharmacists and staff involved in the provision of the service have relevant knowledge and are appropriately trained in the operation of the service, including confidential, sensitive patient centred communication skills.
* Pharmacists staff will be invited to attend a series of ISHS led short webinars that will outline the new process for distributing the chlamydia/gonorrhoea self-sampling test kits.

**3.4 Wider reading / training**

* [Fast-Track Cities Bristol](https://fasttrackcitiesbristol.org/tackling-stigma/) is dedicated to tackling stigma and reshaping the public perception of HIV. A key focus is promoting the message that when HIV is virally suppressed there is no onward risk of transmission.
* Stigma and health inequalities remain significant barriers to accessing HIV testing,  prevention, and care, which are critical to supporting Bristol’s ambition of achieving zero new HIV infections by 2030. To support this ambition, we recommend staff undertake HIV awareness training, such as the following free module:
	+ [Tackling HIV Stigma and Discrimination - elearning for healthcare](https://www.e-lfh.org.uk/programmes/hiv-stigma-in-healthcare/)

**3.5 Audit**

* The pharmacy will enter all monitoring information onto PharmOutcomes, and this will be used to audit the service.
* The pharmacy should review its standard operating procedures and the referral pathways for the service on an annual basis.
* The pharmacy co-operates with any locally agreed Bristol City Council led assessment of service user experience. This includes being willing to participate in periodic ‘mystery shopping’ exercises to monitor quality.

**3.6 Risk management**

* The provider will report adverse incidents relating to public health services in line with both the incident reporting outlined in the clinical governance appendix, and the [BNSSG Integrated Care Board](https://nhs-icb.bisongrid.dev/for-clinicians/) reporting requirements.
* For professional advice about patient management please call the ISHS (details to follow).
1. **Reporting and finance**

**4.1 Reporting**

A record of activity should be maintained and held by the service provider. The provider will need to submit activity data on PharmOutcomes regarding EHC consultations and associated transactions (e.g. whether a free pack of condoms and a chlamydia/gonorrhoea test kit were offered).

**4.2 Payments**

EHC service activity uploaded onto PharmOutcomes will be monitored by the Public Health team and pharmacies will be paid monthly for EHC activity.

Activity data regarding chlamydia and gonorrhoea self-sampling test kits will be received by the Public Health team directly from the laboratory. Pharmacies will be paid annually for this activity. The council pays for chlamydia/gonorrhoea test kits for women aged 16 to 24 (unless acceptance criteria met in section 2.7.2) under the following conditions:

* The test kit used was a chlamydia/gonorrhoea test kit provided by the ISHS AND
* The test kit was received at the laboratory for processing.

**4.3 Tariff**

Payment for the services are as follows:

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| Each chlamydia and gonorrhoea self-sampling test kit (provided by the ISHS) received for processing for women in BNSSG aged 16 to 24. | £3.00 |
| Per Emergency Hormonal Contraception (EHC) consultation for provision of levonorgestrel and ulipristal acetate for women aged 24 and under plus condom pack (whether suitable for treatment under PGD or not, provided paperwork and signposting completed) | £15.00 |
| Per supply of levonorgestrel 1.5mg tablets | Tablets reimbursed at drug tariff cost |
| Per supply of ulipristal acetate 30mg Tablets | Tablets reimbursed at drug tariff cost |