

Locally Commissioned Service

Service Agreement

Emergency Hormonal Contraception

Camden and Islington

1st April 2015 – 31st March 2018

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Enhanced Services - Emergency Hormonal Contraception

Service specification

1.0 Service specification

1.1 Overview

The service can be provided to Female clients aged 13 to 24 (inclusive), requesting Emergency Hormonal Contraception (EHC) following an incident of Unprotected Sexual Intercourse (UPI) or failure of a contraceptive method, with the aim of preventing unplanned pregnancy. This service must be provided in line with the criteria specified by the London Patient Groups Direction for the provision of EHC.

1. The Pharmacy owner and accredited pharmacist(s) will participate in any new developments in either practice or service, instigated by Camden and Islington Public Health.

1.2 Eligibility to provide service and training

2. This service can only be provided by accredited pharmacists who have satisfactorily completed all training required by Camden and Islington Public Health Department. Provision must be in line with the current London Patient Groups Direction for the provision of EHC. See Section 5.0 for accreditation checklist and training requirements.
3. The pharmacy must be satisfactorily complying with its obligation under Schedule 1 to the Pharmaceutical Services Regulations to provide essential services and must meet all the governance requirements in the current Community Pharmacy Contractual Framework.
4. The Pharmacy owner must ensure that all pharmacy staff members who have contact with potential clients are trained accordingly. This will include areas such as confidentiality, knowledge of alternative services in the area and how to seek urgent advice.
5. At pharmacies within W and WC postcodes, only Camden and Islington residents are eligible for free EHC. Pharmacists in these locations are required to collect clients' full postcode data in order to be reimbursed. Non Camden and Islington residents can be signposted to a range of alternative local sexual health services from which to obtain free EHC. Commissioners can provide these contact details.

1.3 Service availability

6. Any requesting client will be seen as soon as possible. If they are unable to be seen immediately they must be given a time at which to return. This time must be within the next 30 minutes.
7. It is the responsibility of the pharmacy owner to have a full and current list of all accredited pharmacy and sexual and reproductive health services in the area, in order to signpost all potential clients if they are unable to provide the service within the timeframes specified in point 6. This information can be found on NHS Choices and Ur

Life (Camden pharmacies only). Commissioners will be able to provide these contact details.

8. The Pharmacy owner must provide Camden and Islington Public Health with information on service availability and must advise on any changes to this availability.

1.4 Premises

9. The pharmacy must comply with the standards checklist for registered pharmacy premises. The pharmacy premises must have a designated consultation area in which the client can be seen and privacy can be maintained. Should the issue of chaperoning need to be addressed, the pharmacist may offer a quiet area within the pharmacy where privacy is still maintained. The client must at all times feel comfortable and confident in her surroundings.

1.5 Data collection and storage

10. Every client contact must be recorded on the Webstar consultation form. In addition, pharmacists will need to obtain the signature of the customer requesting EHC. This will be done on a paper-based form, which will also need to be signed by the supplying pharmacist.
11. Both the online consultation forms and the paper signature forms are to be treated as confidential. Paper forms must be stored in a secure area, preferably under lock and key. They should be stored on the pharmacy premises. Access to the records is for approved staff only. All records must comply with The Data Protection Act 1998.
12. All client records must be kept for a minimum of 10 years. Destruction should be done in line within any guidance on destruction of medical records at the time.

1.6 Confidentiality

13. Client confidence in confidentiality is paramount. Pharmacy owners, pharmacists and pharmacy staff must all understand and respect the issue of confidentiality. No information may be given to a third party without prior consent of the Client. This issue of confidentiality applies equally to clients under the age of 16 years.
14. Pharmacists may need to share relevant information with other health care professionals and agencies, in line with locally determined confidentiality arrangements, including, where appropriate, the need for the permission of the client to share the information.
15. When holding a consultation with a client under 18 years of age, pharmacists should clearly explain confidentiality to the young person, explaining that “the information you give is confidential unless I consider that you or some other young person is at risk of suffering emotional or physical harm. In these exceptional circumstances I have a duty to share this information with other health professionals such as ‘the children and family team at social services’. Hopefully, this can be done with your agreement, but this is not always required.” (See section 3.0)

1.7 Health promotion

16. As well as supplying EHC, the Pharmacist also has a duty to provide the client with appropriate contraceptive information and advice, in both verbal and written forms, and associated health promotion advice/ literature. Pharmacists should signpost clients to other primary and secondary care providers as well as provide information on the use of regular contraceptive methods (including advice on the use of condoms and information on long-acting reversible contraception and where to access these services).
17. In addition, every client contact should be given verbal and written advice on the avoidance of sexually transmitted infections and signposted to appropriate services.
18. The pharmacist should stress that this supply of EHC takes care of this episode of unprotected sex only and make sure the client understands that they are not protected against pregnancy from any future incident of unprotected sexual intercourse.
19. The pharmacist will encourage the client to do a chlamydia screen and signpost where appropriate. Commissioners will be working with sexual health providers to develop a chlamydia screening and treatment pathway further in 2015-16.
20. Each client should be given an information pack containing details of local sexual health clinics and 3 condoms. It is the responsibility of the pharmacy to order these packs in line with local procedures. Information on how to obtain these will be available from commissioners.

1.8 Providing the drug

21. The pharmacist must personally speak with and counsel the person requesting EHC. Advice may be given over the telephone, but EHC can only be supplied, in person, to the intended user. If a person requests a supply on behalf of another, the pharmacist must ensure that they are given appropriate advice and information to pass on to the intended user but cannot issue a supply of EHC.
22. A verbal warning should be given that the tablet may be associated with nausea or vomiting. Pharmacist should explain to the client that, if **vomiting** or severe diarrhoea occurs within 2 hours of taking the tablet, the client should seek further advice from a pharmacist, GP or sexual health service.

1.9 Duty of care and follow up:

23. The pharmacy owners and accredited pharmacists have a duty of care towards their client group. If a client uses the service repeatedly it is the duty of the pharmacist to try and counsel the client and direct them to an appropriate provider, such as their general practitioner or a sexual and reproductive health service.
24. Clients excluded from the PGD criteria will be referred to another local service that will be able to assist them, as soon as possible, e.g. sexual health service, GP or will be invited to purchase the pharmacy medicine product if the exclusion from supply via the PGD is only due to an administrative matter, e.g. clients aged 25 years and over.

- Clients who have exceeded the time limit for Levonelle 1500® will be informed about the possibility of use of an IUD or ellaOne® and should be referred to a local service or GP as soon as possible.

1.10 Advertising and promotion of service

25. The pharmacy owner must designate specific window space or a suitable alternative, to advertise the availability of this service and how else to obtain this service locally.

1.11 Monitoring and Payment

Remuneration for any pharmacy services and/or reimbursement for medication supplied in relation to this enhanced service will be withheld if this SLA is not signed by both the contractor and the commissioner. A copy must be held by the contractor and the commissioner as evidence of a signed agreement between both parties.

26. The Public Health Department will monitor the performance of each individual pharmacy on a monthly basis. The Pharmacy owners must ensure that all consultations are entered onto the Webstar system no later than the 5th day of each month for Islington pharmacies. Camden pharmacies can submit until the 10th day of each month.
27. If a woman is eligible under the criteria specified in this SLA and the accompanying PGD, then the supply will be made free of charge to the client at the commissioner's expense.
28. Service providers will receive a fee per consultation of £18.00. The fee per consultation will be paid irrespective of whether Levonelle1500® is supplied as long as the client is eligible for the service and the consultation follows the SLA and the PGD guidelines.
29. Reimbursement for drug supply will be for the NHS Drug Tarrif price of Levonelle 1500®, plus VAT. **Please note:** Levonelle One Step ® is not covered by this LCS and should not be supplied as it will not be reimbursed.

2.0 Age of consent and The Fraser Ruling.

The legal age of consent for medical treatment is 16 years or over, as determined by Section 8 of the Family Law Reform Act, 1969 (However, it should be noted that a 'child' is defined by the Children Act 1989 as anyone who has yet to reach their 18th birthday). In such cases, there is no legal requirement to obtain consent from a parent or guardian. The question of the rights of children under 16 years of age to consent to treatment on their own behalf was reviewed by the House of Lords, in connection with contraception (Gillick v West Norfolk and Wisbech Area Health Authority [1985]). The House of Lords ruled that young people under the age of 16 years could give valid consent to medical treatment, as long as they had sufficient understanding and intelligence to appreciate fully what is proposed, and are capable of expressing their own wishes (now referred to as the Fraser ruling).

This ruling stated that health professionals should consider the following issues before giving contraceptive advice/treatment when seeing young people under 16 years of age:

- Whether the young person understands the potential risks and benefits of the treatment and any advice given.
- The value of parental support should be discussed, and health professionals must encourage the young person to discuss their consultation with their parents. **Although the health professional is legally obliged to discuss the value of parental support, he/she must respect confidentiality.**
- The health professional should take into account whether the young person is likely to begin or continue having sexual intercourse with or without contraception or treatment.
- The health professional should assess whether the young person's physical and/or mental health will suffer if they do not receive contraceptive advice or supplies or treatment.
- The health professional should consider whether it is in the young person's best interest to receive contraceptive advice and/or treatment without parental consent. The healthcare professional should consider the possibility of sexual abuse and sexual exploitation in all cases.

If the pharmacist has any concerns relating to a possible need to breach confidentiality for the above reasons, please contact clinical support or social services in the presence of the young person. Do not act in isolation.

When a young person is judged not to be competent in line with the Fraser ruling, she should be referred to the young people's sexual health services or their GP. If the non-competent young person attends with a parent and both agree to treatment, then Levonelle 1500® can be given and both sign the PGD record sheet.

If the non-competent young person attends with a parent but the young person does not agree to treatment they must be referred to a sexual health service or GP.

3.0 Confidentiality and Child Protection.

A number of issues have arisen concerning the provision of emergency hormonal contraception (EHC) to young people following the Laming report and changes in the law (Sexual Offences Act 2003). These have given rise to a revision of *Best Practice Guidance For Doctors And Other Health Professionals On The Provision Of Advice And Treatment To Young People Under 16 On Contraception, Sexual And Reproductive Health*.

Below is an outline of your duties regarding provision of EHC to young clients and your obligations regarding confidentiality following these changes.

Sexually active young people under the age of 13

You are not covered by the EHC patient group direction (PGD) to provide EHC to clients under the age of 13 under any circumstances through this scheme. However, you are under a positive duty to secure treatment for the client from a local GP or sexual health clinic. You must keep a record with details of the client and actions you have taken using the paper assessment form (which will be provided by Public Health for use alongside the Webstar system) and you must immediately inform the relevant Child Protection Team or Social Services (see below).

The law is very strict with respect to children under 13. A child under the age of 13 does not, under any circumstances, have the legal capacity to consent to any form of sexual activity and there is no legal defense for any person who has a sexual relationship with someone under 13 years. It is important to be aware that in all cases where the sexually active young person is under the age of 13, there must be a discussion with the local social service and/or police team. Further advice can also be sought from the Child Protection Advice and Support Teams (see Section 4.0). Confidentiality must be waived in the interest of the young person.

Sexually active young people between the ages of 13-16

These clients can only be treated if they are deemed to meet Fraser guidelines (see section 2) and fulfill all the other requirements set out in the PGD. If the client is not deemed to meet Fraser guidelines, parental consent is required before any treatment can be provided. Confidentiality can only be breached in circumstances where there are concerns regarding the health, safety or welfare of the young person (or others) who would otherwise be at grave risk. Staff should bear in mind that under English Law, someone aged under 16 years cannot give legal consent to sexual intercourse, but the Sexual Offences Act does accept there could be times of legal defense if a person reasonably believes that they were over the age of 16 years.

Sexually active young people under 18 and over 16

These clients should all receive treatment assuming they fulfill the requirements set out in the PGD. Although meeting Fraser guidelines is a legal requirement with clients under the age of 16 it should be noted that clients over 16 must also be competent to understand the treatment that they are to receive. Although sexual activity in itself is no longer an offence over the age of 16, young people under the age of 18 are still offered the protection of Child Protection procedures. Considerations for sharing information are the same as those stated above for 13-16 year olds, and should be done if it is the best interests of the child.

4.0 Useful contact details

Islington

Islington Children's Services Contact Team

Tel: 020 7527 7400 (Monday to Friday, 9am to 5pm)

Tel: 020 7226 0992 (Emergency Duty Team, all other times)

Islington Police Child Protection Team

020 8733 4286 (24 hour, or 020 8733 6495 for the Referral Sergeant)

Camden

Camden multi agency safeguarding hub (MASH) team

020 7974 3317

Camden emergency duty team (out of hours)

020 7974 4444

Other

NSPCC Child Protection Hotline

0808 800 5000 (24 hours)

5.0 Accreditation checklist

2015 Accreditation Checklist: Service Level Agreement for the supply of Levonelle—1500 emergency hormonal contraception by accredited community pharmacists under the terms of the accompanying patient group direction (expiry date 31st March 2018)

Only accredited pharmacists are able to provide EHC for free to eligible clients (aged 13 years to under 25 years) at an accredited pharmacy commissioned to provide this service. An approved pharmacy is required to sign an overarching Service Level Agreement (SLA) which applies to both premises and individuals working at said premises.

An accredited pharmacist must be able to satisfy the criteria below. Evidence of this must be submitted to the officers named below and confirmation that the evidence is sufficient and the pharmacist is accredited must be received prior to operating under the Camden and Islington EHC scheme.

Evidence of the following must be submitted for accreditation to the borough officer:

Type of evidence	Please tick if evidence enclosed
Pharmacist is a member of the General Pharmaceutical Council of Great Britain (GPhC)	<i>Number:</i>
A recent Criminal Records Bureau (CRB) or Disclosure and Barring Service (DBS) check has been completed for the Pharmacist (within the last 3 years)	
Signed EHC PGD	
Signed service specification (<i>this document</i>)	
For pharmacists who are signing a new PGD: Certificates confirming completion of the following Centre for Pharmacy Postgraduate Education (CPPE) distance learning packs/workshops. <i>The CPPE training materials can be found at www.cppe.ac.uk.</i>	
<ul style="list-style-type: none"> ○ Emergency Hormonal Contraception 	
<ul style="list-style-type: none"> ○ Safeguarding children and vulnerable adults (Islington pharmacies see note below)* 	
<ul style="list-style-type: none"> ○ Dealing with difficult discussions 	
<p>* Islington pharmacies: Islington CCG provides face-to-face training in safeguarding. Islington pharmacists are encouraged to attend this training (if they have not already done so). However, if completion of this training is not possible before the onset of service provision, proof of the online training modules above should be provided. Please contact whh-tr.safeguardingchildrentraining@nhs.net for the face-to-face training.</p>	
A suitable private area for consultation with clients is available (Please enclose PREM 1 form, available from: http://psnc.org.uk/services-commissioning/advanced-services/murs/mur-premises-requirements)	
Additional criteria. No additional evidence required. (please indicate yes or no)	Yes/No
Medicines counter staff are trained to refer each request for emergency contraception to accredited pharmacists and are updated on accreditation status of pharmacists	
There is window space to allow for this scheme to be advertised	
The prospective accredited pharmacist agrees to work in partnership with local services and departments involved in reducing unplanned conceptions, in line with sexual and reproductive health agendas. Client confidentiality must be maintained.	

I certify that I have satisfied the criteria above and the evidence submitted is valid

Signature Date.....

Name of Pharmacist(s) applying for accreditation.....

Name of Community Pharmacy.....

Address of Community Pharmacy.....
.....
.....

Please submit your evidence via email (scanned copies of this service spec form and evidence attached) along with the checklist to the borough officer where your pharmacy is located:

Camden

Jennifer.reiter@camden.gov.uk

Islington

Ian.Archer-wright@islingtonccg.nhs.uk

If you do not have access to a scanner, please post documents to:

Camden

Jennifer Reiter, Senior Commissioning Officer, Lead for young people's sexual health
London Borough of Camden
Strategy and Resources
Town Hall
Judd Street
London WC1H 9JE

Islington

Ian Archer-Wright, Joint Commissioning Project Manager, Last Years of Life & Sexual Health
Islington Clinical Commissioning Group
338-346 Goswell Rd
London EC1V 7LQ



Working in partnership