Appendix A1 – Service Specification

(Lot 1: Pharmacy Chlamydia Screening & Treatment)

Service	Locally Commissioned Public Health Service for Chlamydia Screening and Treatment for females aged 15 to 24 years livi in Nottingham City.	
Authority Contract Lead	hority Contract Lead Robert Fenton – Contracts Officer	
Authority Policy Lead	Act April 2000 Adet March 2004 (0.0.0 with a grand parism)	
Period		

1. Introduction / Background

1.1 National/local context and evidence base

Chlamydia is currently the commonest curable sexually transmitted disease in England. Since many infections are asymptomatic, a large proportion of cases remain undiagnosed, although infection can be diagnosed easily and effectively treated. Prompt treatment for Chlamydia is essential and reduces the risk of further infection and transmission (Department of Health 2013a).

Nationally, there has been a marked increase in sexually transmitted infections (STIs) in England. Prevalence of infection is highest in sexually active young men and women, especially those aged less than 25 years. The disease is frequently asymptomatic and goes unrecognised and untreated with long term health and social implications. Untreated infection can have serious long-term consequences. In men, this includes epididymo-orchitis, testicular infertility and prostatitis and in women; pelvic inflammatory disease, ectopic pregnancy and infertility in women. Chlamydia causes a common cause of neonatal blindness known as trachoma.

The number of diagnosed cases of Chlamydia in the UK has increased since 2012. In 2019, there were 229.213 chlamydia diagnoses. The disease is frequently asymptomatic and goes unrecognised and untreated with long term health and social implications. Undiagnosed and untreated, there is an increased risk of the acquisition transmission of other STIs.

Nottingham

In 2020 only 17% of 15-24 years olds in Nottingham were screened for Chlamydia, this has decreased significantly since 2012. The Chlamydia diagnostic rate in Nottingham in 2020 was 559 per 100,000 compared to the national rate of 286 per 100,000. This was the highest amongst all but one similar (CIPFA) cities.

National Chlamydia Screening Programme (NCSP)

The aim of the National Chlamydia Screening Programme (NCSP) is to reduce the harms from untreated chlamydia infection. In June 2021 the NCSP changed its focus to reducing the harms from untreated chlamydia infection. These occur predominantly in women and other people with a womb or ovaries, therefore opportunistic screening should focus on this group.

The opportunistic offer of asymptomatic chlamydia screening outside of sexual health services focuses on women and other people with a womb or ovaries, combined with reducing time to test results and treatment, strengthening partner notification and retesting.

In practice this means that chlamydia screening in community settings, such as GPs and pharmacies, will only be proactively offered to young women. Services provided by sexual health services remain unchanged.

Pharmacy - A Way Forward for Public Health, published in 2017¹ sets out opportunities for commissioner and provider led action at a local level to realise community pharmacy's key role in enabling a healthier nation. It encourages commissioning of sexual health services through pharmacy, including STI management and signposting to appropriate sources of advice and support, particularly in disadvantaged areas.

2. Aims / Service Outcomes

The service aims to provide a comprehensive sexual health service via an accessible local service which will contribute to the improvement of health, sexual health and wellbeing and reduce inequalities in sexual health.

Community pharmacies can offer a convenient and easily accessible location to provide the target group of 15-24 year old female Nottingham residents with advice and information regarding chlamydial infection and to offer them screening and treatment where appropriate. Chlamydia treatment within community pharmacies complements the provision of Emergency Hormonal Contraception (EHC), by offering a more holistic sexual health care service to this user group.

The key aims of the Chlamydia Screening and Treatment service are to:

- Increase the number of locations offering screening for chlamydia.
- Actively promote the National Chlamydia Screening Programme (NCSP), by raising general awareness of Chlamydia and other sexual health issues to promote good sexual health.
- Provide opportune individual advice wherever possible to people aged 15-24.
- Increase awareness of the risks of unprotected sex amongst the target local population through general promotion of the service.
- Promote the use of condoms for prevention of STIs and unplanned pregnancy.
- Improve primary care capacity and offer a choice to clients requiring a Chlamydia diagnosis.
- Reduce the numbers of undiagnosed chlamydial infections in young people to help reduce the incidence of its complications.

3. Service Description

The Provider (i.e. the pharmacist) will provide one to one advice and support to young people aged 15-24 years old on the management of their sexual health, including the provision of a chlamydia testing kit.

- The pharmacist Provider will help to increase choice and improve access to sexual health education, including 'hard to reach' groups such as young people.
- Appropriate advice and support will be given to patients following consultation, signposting to
 other services including free supply of condoms and advice about other sexually transmitted
 diseases (STI's).
- Providers will offer a user-friendly, non-judgmental, non-discriminating, client-centred and confidential service.
- Providers will provide appropriate advice and support to patients about STIs and to promote good sexual health and safer sex. This should be done opportunistically wherever possible.
- Providers will signpost or refer to other sexual health and social care services. They should also signpost to services so that young people have better access to free condoms in order reduce teenage pregnancy and STIs.
- This Locally Commissioned Public Health service reflects the aims of the National Chlamydia Screening Programme (NCSP).

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/643520/Pharmacy_a_way_forward_for_public_health.pdf

- Providers will offer on-site chlamydia screening where toilet facilities are available. Where the
 provider is unable to do this, the patient will be signposted to alternative chlamydia screening
 services e.g. online, GP and sexual health clinics.
- Explain the process that will then occur for both positive and negative Chlamydia results.
- Ensure patients are informed of positive test results, offered treatment and partner notification.
- The Provider will provide clear signposting and advice in relation to services and pathways patients will follow post screening.
- The pharmacist must ensure client privacy and check eligibility for testing. If the client is outside the target group specified (female aged 15-24 years, living in Nottingham) they must be referred to an appropriate sexual health clinic.
- The pharmacist must confirm that the client is asymptomatic, if not then they must be referred to the appropriate sexual health clinic.

Those excluded from the scheme should be referred to local open access sexual health services or to their GP practice as appropriate.

• The Provider will ensure this pharmacy service is provided in compliance with Fraser guidance² and Department of Health guidance on confidential sexual health advice and treatment for young people aged less than 16 years. Pharmacists participating in the scheme **MUST** adhere to this child protection guidance. Further information is provided below.

Safeguarding

Local guidance on protection of vulnerable adults is available at: https://www.nottinghamcity.gov.uk/ncaspb

National guidance on child protection 'DfE (2015) Working together to Safeguard Children. A guide to inter-agency working to safeguard and promote the welfare of children. HM Government'. Is available at: https://www.gov.uk/government/publications/working-together-to-safeguard-children--2

There is further national guidance from RCPCH (2014) Safeguarding Children and Young People: roles and competencies for health care staff (2014). Intercollegiate document. Royal College of Paediatricians and Child Health. Available at https://www.rcpch.ac.uk/sites/default/files/Safeguarding_Children_-____Roles_and_Competences_for_Healthcare_Staff._Third_Edition_March_2014.pdf

Local guidance on child protection is available at:

http://www.nottinghamcity.gov.uk/children-and-families/are-you-worried-about-a-childs-well-being/

Local safeguarding children procedures. Available at https://www.nottinghamcity.gov.uk/ncscp

Professionals with a child safeguarding concern - Nottingham City

Children and Families Direct is the single point of access for support and safeguarding services within Nottingham City.

²Fraser Guidelines – based on a House of Lords Ruling; A health professional can give advice or treatment to a person under 16 without parental consent providing they are satisfied that:

The young person will understand the advice;

[•] The young person cannot be persuaded to tell his or her parents or allow the doctor to tell them that they are seeking contraceptive advice;

[•] The young person is likely to begin or continue having unprotected sex with or without contraceptive treatment; and

[•] The young person's physical or mental health is likely to suffer unless he or she receives contraceptive advice or treatment.

Telephone: 0115 876 4800

Email: candf.direct@nottinghamcity.gcsx.gov.uk

Fax: 0115 876 2927

Children and Families Direct is operational Monday to Friday 8:30am to 5:00pm.

Outside of these hours the telephone number should be used for emergency safeguarding enquiries only.

To make a Child Safeguarding Referral:

A Multi-Agency Referral form is available for professionals wanting to make a referral to Nottingham City Council Children's Services. Please find a copy of the template on the website (http://nottinghamshirescb.proceduresonline.com/files/multi_agency_referral_form.docx)

Note: Where there are concerns regarding a young person, there is always a Safeguarding / Paediatric Consultant on call at Nottingham University Hospitals (NUH) who can offer advice with regard to safeguarding issues. During office hours of 9-5, telephone **0115 875 4595**. Outside of standard office hours, please telephone the main QMC switchboard on **0115 924 9924** and ask to speak with the on-call Safeguarding / Paediatric Consultant

Providers (i.e. 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 permission of the client to share the information.

4. Requirements for Pharmacy Participation

- Providers may access any relevant training on offer from Nottingham University Hospitals Integrated Sexual Health Service or other accredited providers.
- Providers shall undertake the 'Sexual Health in Pharmacy' module by the Centre for Pharmacy Postgraduate Education (CPPE).
- The service will be provided from pharmacy premises.
- The Provider must maintain appropriate records to ensure effective on-going service delivery and audit. Records will be confidential, and the Provider must ensure that the handling, storage and release of data conforms both to the requirements of the Data Protection Act, 2018 (GDPR) and any local provisions, protocols and policies. All information should be stored securely and for a length of time in line with local NHS record retention policies.
- The provider must have access to and use the Pharmoutcomes data management system to report activity and claim costs.
- The Provider must review its Standards Operating Procedures (SOP) and the referral pathways for the service on an annual basis.
- The Provider must demonstrate that pharmacists involved in the provision of the service have undertaken CPD relevant to this service.
- All pharmacists providing Chlamydia treatment must sign and adhere to the relevant PGD.
- Providers to attend training events when provided and review meetings if requested to do so.
- Regular locums should be encouraged to attend any available training events relevant to the service.
- The Provider may be required to participate in an annual audit of service provision and provide data
 if requested to do so.
- The Provider must ensure that the consultation area used for provision of the service offers a sufficient level of privacy and safety.
- Clients will normally be seen as soon as possible. If not seen immediately, the client will be given a
 time to return, normally within 30 minutes, or will be directed to the nearest alternative pharmacy
 providing the service.
- Each pharmacy Provider will ensure they are as young person friendly as possible. The Pharmacy will ensure that professionals comply with *You're Welcome'* standards which set out the principles to help both commissioners and service providers to improve the suitability of NHS and non-NHS

health services for young people. Details can be found at www.gov.uk/government/publications/quality-criteria-for-young-people-friendly-health-services.

Accreditation

Accreditation must be approved by Nottingham City Council before the Pharmacy can provide the service. All Providers are required to provide evidence of an Enhanced DBS (Disclosure and Barring Service) check for all pharmacists and ensure that any other staff engaged in the delivery of services are appropriately checked by the Disclosure and Barring Service (DBS).

Training or review meetings for Providers may be arranged as required for exceptional or high priority issues. Pharmacists may attend these events as part of their 'Continuing Professional Development'. Pharmacists should update, maintain and develop their capabilities according to their own identified learning needs.

Equality and Diversity

Nottingham City Council is committed to promoting equality, valuing diversity and addressing inequalities. It is the responsibility of the provider to ensure they undertake activity which values equality and diversity.

Monitoring Data (Demographics)

The Provider must record the patient's age, gender, ethnicity, country of birth, school attended and residence as requested in the Pharmoutcomes data management system. This information must be submitted to the City Council via the Pharmoutcomes data management system. This information will be used for evaluation purposes and to inform future commissioning.

Social Value

Nottingham City Council is focussed on reducing disadvantage and poverty by ensuring local residents are supported in accessing local employment and training opportunities and has created an Employer Hub in partnership with the DWP to help facilitate this.

The Providers who are part of Nottingham City Council's accreditation list to provide Locally Commissioned Public Health Services have access to all the Employer Hub recruitment and training services for <u>free</u> and they can be contacted on 0115 8762907. Further details of the Hub's services are outlined in Appendix 6.

5. Clinical Governance and Auditing

Serious Untoward Incidents (SUIs)

Providers are required to have a robust incident reporting and investigation procedure in place for all clinical and non-clinical incidents.

All SUIs must be recorded and reported to the commissioner as set out in Appendix E and also to NHS England in line with your GP contract.

Safety Alerts

Providers must ensure that they are aware of any safety alerts from the Medicines and Healthcare products Regulatory Agency (MHRA), Estates, and National Patient Safety Agency (NPSA) that apply to any equipment or patient safety concerns associated with this Locally Commissioned Public Health Service (LCPHS) and that these are acted upon. Details of action taken must be reported back to Nottingham City Council.

Service Audit

Nottingham City Council may request an audit of activity for this Locally Commissioned Public Health Service to substantiate the Provider's claims. This audit will assess whether information recorded on Neo 360 Online Data Management System (see Appendix G) can be appropriately validated. Providers should design their data collection to reflect these requirements as they may be asked to provide supporting evidence to Nottingham City Council's Contracts team.

In addition it is the responsibility of the Provider to:

- Continually improve the quality of service delivery, for example, in response to audit (undertaking and completing the audit cycle), user and staff feedback (complaints, compliments, suggestions) and incidents.
- Continually review and be aware of relevant new and emerging guidance and recommendations and take the appropriate steps to assess and improve services to achieve current best practice.
- Ensure that appropriate professional standards are maintained, updated and validated through clinical supervision and provision of relevant training to support reflective practice and CPD.
- During the term of this specification fully co-operate in reviewing and improving/re-designing services at the request of the Commissioner, to include improving quality and performance monitoring.

6. Location of Provider Premises

The service will be delivered from the Providers premises located within Nottingham City Council's geographic boundary.

7. Required Insurances

The required Insurances are set out in clause C3.1 of the contract.

8. Quality Monitoring and Information Reporting Requirements.

The Provider shall supply information on the performance and delivery of services to the Commissioner upon request. Information will include:

Indicator	Method of Measurement	Annual Target	Frequency of Reporting
Number of claims per year	Pharmoutcomes	n/a	Quarterly
Serious Untoward Incidents	Serious Incident Reporting Form (Appendix E – SI(1)) and Pharmoutcomes	n/a	Immediately to: contracting@nottinham city.gov.uk
Service User Experience	Service User Surveys / Focus Groups / Patient Panels / Feedback Forms	85% rates their satisfaction with the service as 'Good' or 'Better'	Annually
Information Reporting Requirements			

Client age, gender, ethnicity, country of birth, school, postcode nd GP details as requested by in the Pharmoutcomes data management system.	Pharmoutcomes	n/a	Quarterly	

The Provider must also:

- Ensure that appropriate health promotion material is available for the client group. Actively promotes its uptake and is able to discuss the contents of the material with the client, where appropriate.
- Must review its standard operating procedures and the referral pathways for the service on an annual basis.

Pharmacists and appropriate support staff must attend a Nottingham City Council organised update meeting each year if asked to do so.

All activity delivered in line with this service specification must be recorded onto Pharmoutcomes Online Data Management System in order for payment to be made quarterly. Full auditable records must be kept in respect of any claims made. The Commissioner will perform monitoring visits to Pharmacies and reserves the right to reclaim any amounts paid that are not fully evidenced.

9. Charges

This agreement is to cover the period from 1st April 2022 – 31st March 2031 (3+3+3 with annual review)

Chlamydia Screening and Treatment	Payment
Payment will be made per Asymptomatic Chlamydia screen offered and accepted by each client of the 15-24 year old target group.	£5.09
Payment will be made for each treatment of Doxycycline following a positive Chlamydia screen of the 15-24 year old target group, supplied via the Patient Group Directive (PGD)	£3.39

The Provider must detail the number of services delivered on Pharmoutcomes Online Data Management System within the agreed timescales. Full auditable records must be kept by the Provider of any claims made; the commissioning body may perform monitoring visits to practices and reserve the right to reclaim any amounts paid that are not fully evidenced. Please note that these records may be examined for verification purposes either as part of the annual review or at any other notified time.

Nottingham City Council reserves the right to cap payments or activity if the budget for this Locally Commissioned Public Health Service (LCPHS) is exceeded at all details below this any point during the year.