

SERVICE SPECIFICATION

Service Specification No.	
Service name	Pharmacy Enhanced Services - chlamydia treatment
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Provider Lead	Community Pharmacies
Period	April 2013 – March 2014
Date of Review	

I. Population Needs

I.1 National/local context and evidence base

Improving sexual health is a key national public health priority (*Healthy Lives, Healthy People*, Department of Health, 2010).

Sexual ill health has significant social and economic costs for society. The long term-health implications of sexual ill health such as infertility, ectopic pregnancy, miscarriage, unemployment, social exclusion and discrimination and stigma have significant cost implications for society. These costs outweigh those of providing an integrated system of services concerned with sexual health promotion, the prevention of unintended pregnancy and sexually transmitted infection and disease.

Sexual ill health and unintended pregnancies are strongly linked with deprivation and broader health inequalities. Certain groups experience disproportionately poor sexual health. These include young people, men who have sex with men, black Africans and sex workers. Other vulnerable groups such as refugees and asylum seekers and prisoners also experience poor sexual health.

The *National Strategy for Sexual Health and HIV* (Department of Health, 2001) set out a 10 year plan to reduce the transmission of HIV and STIs, enhance HIV/AIDS care services, modernise sexual health services and dramatically reduce teenage pregnancy rates. It highlighted a shortfall in capacity to meet demand and the need for greater integration of services. The policy identified the following as essential elements of good sexual health:

- equitable relationships and sexual fulfilment
- access to information regarding sexual health
- access to services to avoid the risk of unintended pregnancy, illness and disease

Healthy Lives, Healthy People, (Department of Health, 2010) confirmed the need for an accessible integrated model of sexual health service delivery at a local level. The strategy is supported by a Public Health Outcomes Framework that defines the ambitions for a reformed public health care system. This includes specific indicators concerned with under 18 conceptions, access to non-

cancer screening programmes, chlamydia diagnosis, late presentation of HIV and mortality from conditions considered preventable.

Chlamydia is the most common bacterial sexually transmitted infection, with sexually active young people at highest risk. Genital infections are asymptomatic in around 70% of women and 50% of men. As chlamydia often has no symptoms and can have serious health consequences (e.g. pelvic inflammatory disease, ectopic pregnancy and tubal factor infertility) opportunistic screening remains an essential element of good quality sexual health services for young adults. A substantial proportion of all young adults become infected with chlamydia in a year.

Since 2004 rates of Chlamydia, Herpes and Warts have been increasing year on year in Plymouth. Rates of Sexually Transmitted Infections in the under 25's remain high and above regional and national averages. Rates of teenage conceptions in the city are consistently above regional and national averages.

Community Pharmacies have a significant role in improving public health and preventing ill health. They provide accessible and convenient services that are well placed to deliver a number of sexual health services and interventions including chlamydia screening and treatment and the provision of contraception.

2. Key Service Outcomes

2.1 Insert any locally agreed outcomes and quality requirements

Outcome	Indicator	Target	Reporting Mechanism
Timely treatment of chlamydia	Provision of chlamydia treatment as defined under the local Azithromycin PGD	n/a	Quarterly Report

3. Scope

3.1 Aims and objectives of service

This service specification covers services delivered by community pharmacies currently providing Plymouth's Emergency Hormonal Contraception (EHC) service to offer treatment for chlamydia under a Patient Group Direction (PGD).

The specification of this service is designed to cover the enhanced aspects of clinical care of the patient, all of which are beyond the scope of essential services within pharmacies.

This service aims to contribute to an improvement in the sexual health of the population of Plymouth and reduce sexual health inequalities. They aim to target populations of high need, in particular those between the ages of under 25 years of age.

The Plymouth Chlamydia Screening Programme is designed to ensure that:

- (i) Young men and women who are sexually active and aged between 15 – 24 years old undertake an annual opportunistic chlamydia screening test and test every time they change sexual partner
- (ii) The service to the patient is widely accessible, convenient and they are offered the screening test at the pharmacy or other registered test site
- (iii) The service to the patient is clinically sound
- (iv) The timely treatment of all chlamydia positives
- (v) The timely partner notification, screening and treatment any partners of positives

This services is part of a comprehensive range of sexual health services in Plymouth that aim to

- To ensure access to the full range of contraceptive methods
- Reduce the number of under 18 conceptions
- Delay early onset sexual behaviour in young people
- Reduce the rate of all unintended conceptions and repeat abortions
- Provide timely access to abortion services and increase the proportion of medical abortions and the % of abortions carried out under 9 weeks gestation
- Reduce the transmission of sexually transmitted infections including HIV
- Reduce late diagnosis of HIV and other STIs
- Improve the Chlamydia diagnosis and partner notification rates
- Reduce late diagnosis of HIV and other STIs
- Ensure high levels of satisfaction from users of sexual health services

All pharmacy services detailed in this specification are commissioned to be clinically sound and cost effective. They must provide convenient and timely access and, wherever possible aim to ensure that an individual's needs can be met in one place. They must also ensure appropriate treatment pathways are in place to facilitate referral to other appropriate services, in particular Community Contraception and Sexual Health Services (CCASH) and Genito Urinary Medicine services.

3.2 Service description/pathway

Service Outline

Criteria for treatment:

- The pharmacists delivering this service will have been accredited for and providing the local Emergency Hormonal Contraception (EHC) enhanced service and be providing chlamydia screening as part of that.
- Treatment for chlamydia will be offered under an Azithromycin PGD (Appendix I) for those who receive a positive chlamydia test through the CSP only. Treatment will also be available for their partners.
- Pharmacists will receive training from the Chlamydia Screening Programme (CSP) for the Azithromycin PGD.
- Only clients suitable for the PGD will be issued with treatment
- Pharmacists will have signed up to the Azithromycin PGD (Appendix I).

- The CSP will maintain a list of all those pharmacists able to offer treatment through the PGD.
- Pharmacists will comply with the PCH Policy on Treatment of Chlamydia (Appendix 2)

Referral Policies

- Referrals for the treatment of chlamydia positive clients and any partners will be made by the **CSP only**. (See the PCH Policy on Treatment of Chlamydia).
- Any clients deemed to be unsuitable for treatment via the PGD must be referred to the GUM clinic, their GP or the CSP **immediately** by the pharmacist. The CSP must be informed of any clients treated or not through the patient management form (PMF within the treatment policy).

Clinical procedures.

- Pharmacists will follow PCH Policy on the Treatment of Chlamydia.
- The CSP will assess client's suitability to receive treatment via the PGD, offer treatment options and refer as necessary.
- Pharmacists will deliver the treatment within the criteria set down in the PGD and the PCH Policy on the Treatment of Chlamydia.
- All partners of those offered treatment will also be offered a chlamydia test

Results.

- All results will be actioned by the Chlamydia Screening Programme. Pharmacies will be informed of their volume of screens and positivity rate on a regular basis by the CSP.

Record keeping.

- The pharmacy must maintain adequate records of the performance and results of the service provided.
- The pharmacist must complete and store all patient records pertaining to the PGD in accordance with guidelines (see EHC SOP for further information).
- The pharmacist must complete and return any clinical audits deemed necessary by the CSP and Plymouth City Council.

Training or Accreditation - CPPE; local training, CPD

The following criteria must be met by pharmacies signing up to the chlamydia testing enhanced service:

- Pharmacists must have been delivering the EHC scheme in Plymouth and have completed all the necessary training related to this and be based within a pharmacy in a locality as agreed by the CSP.
- All pharmacists undertaking this enhanced service must attend training which will be facilitated by the CSP. This training takes approximately 1 hour and will deliver information on the clinical pathway, the PGD and treatment policy.
- The pharmacists will attend regular sexual health update training as deemed necessary.
- The pharmacist must be registered with the General Pharmaceutical Council (GPhC).
- Pharmacists will be responsible for identifying their own learning needs and recording their Continuing Professional Development (CPD) in accordance with current GPhC standards.
- Pharmacists should cascade general information on chlamydia treatment to all pharmacy staff to ensure that everyone is aware of the key issues regarding this. This will also help to ensure that all staff respond sensitively and appropriately to enquiries about treatment. In particular, staff should recognise that all requests for treatment should be referred to the pharmacist or if

unavailable to the CSP.

- The following additional online information resources are available to Pharmacists to support them with the delivery of this SOP:
 - www.chlamydia-screening.nhs.uk
 - NHS Sex Worth Talking About
www.nhs.uk/worhtalkingabout/Pages/sex-worth-talking-about.aspx
- Pharmacies delivering this service should hold an up to date signpost sheet that all pharmacy staff can access in order to sign post young people to appropriate services as required
- Lead Pharmacists will sign and return the front page of the PGD to Plymouth City Council to provide evidence that they and their colleagues have undergone the necessary training to deliver chlamydia treatment, Azithromycin.

3.3 Population covered

- These services cover the geographical area of Plymouth. Chlamydia treatment is commissioned for 13-19 year olds as part of an EHC and chlamydia testing consultation and for 16-24s as over the counter requests and from self-selection bins.

3.4 Any acceptance and exclusion criteria or prioritisation criteria

Exclusion criteria

- Who are unsuitable for treatment under the Services on clinical grounds
- Who are temporary unsuitable for treatment by the Service on clinical grounds for as long, as such unsuitability remains
- Who have not validly consented to the treatment provided under the Services; and
- For any unreasonable behaviour unacceptable to the Provider, it's Staff or the named professional clinically responsible for the management of the care of such individual

Signposting (where women are excluded from PGD, where people don't fit the criteria for chlamydia testing and treatment, out of hours and where referral to another service is needed)

- The pharmacists will immediately phone the CSP (tel : 01752 434865) if unable to treat the young person and arrange with them treatment elsewhere. A message may be left of the person's name and contact number if there is no one available out of hours. Or the patient can be referred to GUM service at Derriford Hospital or their GP
- A Patient management form should always be completed and returned to the CSP

3.5 Interdependencies with other services

It is expected that pharmacies will work closely alongside a range of services including GUM service, abortion services, GP practices, chlamydia screening service, Sexual Assault Referral Centre (SARC) and gynaecology and maternity services.

In the delivery of young people's services (under 25 years) at the Zone CCASH will make particular links with Plymouth University, the Youth Service, the Family Nurse Partnership, and schools and colleges.

3.6 Any activity planning assumptions

N/A

3.7 Frequency and times of service and conditions

- **Hours of service**

- a. Supplementary/extended opening hour pharmacies must provide accredited pharmacist cover for at least 80% of their 'core' opening hours and for at least 80% of their supplementary/extended opening hours.
- b. Pharmacies with 'core' opening hours, i.e. 40 hours per week, should provide accredited pharmacist cover for 80% of their opening hours.

- **Premises and equipment**

- a. The pharmacy must provide an area which offers sufficient privacy, confidentiality and comfort for the client.
- b. Pharmacies are encouraged to display relevant promotional materials supplied by the Health Improvement Team and the Chlamydia Screening Programme

3.8 Key Tasks

As defined in in various sections above.

3.9 Exiting the Service

Where appropriate and necessary the pharmacy will ensure referral onto other services.

4. Applicable Service Standards

4.1 Applicable national standards e.g., NICE

It is expected that the Pharmacies will be with national policy and the standards of clinical practice as set out in the guidance published by

- Department of Health
- General Pharmaceutical Council
- National Institute for Health and Clinical Excellence (NICE)
- British Association for Sexual Health and HIV (BASHH)
- Medical Foundation for HIV and Sexual Health (MEDFASH)
- Faculty of Sexual and Reproductive Healthcare (FSRH)
- National Chlamydia Screening Programme

Fraser Guidance

- The accredited pharmacist should make and record an assessment of every young person who is believed to be under 16 years of age in accordance with the Fraser Guidelines about the competence of that young person to receive advice and treatment. Levonorgestrel EHC can

ONLY be provided under the PGD if the woman is assessed by the pharmacist as 'Fraser Competent'. Records of this assessment must be kept in accordance with local standard operating procedures. Discussion with the young person should explore the following issues:

- 1) Whether the young person is sufficiently mature to understand the advice given
 - 2) Advice and encouragement to discuss the situation with parents / guardian
 - 3) The effect on physical/ mental health if advice/treatment is withheld
 - 4) Whether supply of Levonorgestrel EHC is in the best interest of the young person.
- A Fraser assessment form for women aged 13-16 years of age is provided in the Azithromycin PGD. The record sheet should be completed and retained regardless of whether or not Azithromycin is supplied.

4.2 Applicable local standards

Responsibility of Pharmacists

- Satisfactorily comply with his or her obligations under Schedule 1 of the Pharmaceutical Services Regulations to provide essential services and has an acceptable system of clinical governance.
- The pharmacy must identify a lead pharmacist for the service and notify Plymouth City Council.
- The pharmacy contractor has a duty to ensure that the pharmacists and staff involved in the provision of the service are aware of and operate within the Patient Group Direction and Standard Operating Procedure (SOP) for Azithromycin PGD and Treatment Policy and local guidelines on testing.
- The lead pharmacist must ensure that pharmacists employed within their pharmacy are kept up to date with any changes or notifications regarding the service as communicated by the relevant organisations.
- If, for any reason, the pharmacist is unable to provide the service to a client on request, they should signpost the client to another pharmacy that is also accredited to provide the service or other appropriate service.
- Where appropriate, the lead pharmacist must make arrangements with the local Chlamydia Screening Programme for new pharmacists to receive training in order to become accredited to provide Azithromycin through the PGD.
- The lead pharmacist must ensure that a fully accredited pharmacist is available to provide Azithromycin under this contract framework for a minimum of 80% of the pharmacy's opening hours and make an annual declaration to this effect through the sign up form.
- The lead pharmacist must complete the Plymouth City Council sign-up declaration (Appendix 1) and return it to the Plymouth City Council on an annual basis in order to meet the requirements of the service
- An accredited pharmacist must personally speak with and counsel the client requesting Azithromycin treatment. The accredited pharmacist must obtain the information outlined in the PGD before making any recommendation regarding the provision of the treatment.
- Accredited pharmacists should be aware of their Safeguarding responsibilities and the referral pathway for children into Children's Services. Refer to the Plymouth Child Protection Policy.
- The pharmacy must review its internal standard operating procedures and the referral pathways for the service on an annual basis and can provide evidence if audited by Plymouth City Council.

4.3 Staffing requirements – suitably qualified, list any specific experience or qualifications for staff delivering the service

- Pharmacies must ensure that all staff delivering the services are fully accredited to carry out the procedures required as part of this service specification and will be required to demonstrate their professional eligibility, competence, and continuing professional development on request from the commissioner.

4.4 Contract Monitoring and Management Arrangements

- **Record Keeping**

- The accredited pharmacist must ensure that the Assessment and Record Sheet in the PGD (appendix 1) is completed during every consultation, regardless of whether or not treatment is ultimately supplied.
- The accredited pharmacist must ensure that the patient gives verbal consent to receive treatment and testing, this is recorded on the Plymouth Assessment and Record Sheet
- A record should be kept of all treatments issued and of any not issued.
- All forms must be stored in a secure location in order to maintain patient confidentiality and will only be used for record and anonymous audit purposes.
- For patients 18 years of age and over, the pharmacist should retain the assessment and record sheet for a period of 8 years.
- For patients under 18 years of age, the sheet should be retained until the patients are of 25 years of age.

- **Quality indicators**

- a. The pharmacy participates in any Plymouth City Council organised audit of service provision.
- b. The pharmacy can demonstrate that clear and accurate records are kept and stored confidentially.
- c. The pharmacy can demonstrate that any new pharmacist involved in the provision of these services has completed the relevant training which can include
 - CPPE training on emergency contraception
 - Safeguarding children
 - Local Levonorgestrel EHC PGD training, evidenced by the completion of the annual sign-up form
 - Azithromycin PGD training, evidenced by the completion of the annual sign-up form and certificate issued by the CSP.

Payment and reimbursement structure

Chlamydia Treatment

Payment Fee Structure 2013/2014:

Fee of £15.00 per issue of chlamydia treatment and re-imburement cost of Azithromycin 1 gm supplied under the PGD at appropriate Drug Tariff price plus any associated VAT.

The Pharmacy will submit the PCC Quarterly Primary Care Enhanced Services Activity Report as instructed and within 30 days of the end of the quarter.

4.5 Continuous Improvement

The provider will ensure that responsive protocols and procedures will be in place for managing patient complaints. Complaints will be reviewed at regular intervals and learning from these shared with the commissioner.

4.6 Delivery Location

Boots Drake Circus
Boots Mutley
Boots New George Street
Boots Plymstock

6. Required Insurances

6.1

- **Indemnity and disputes**
- The pharmacist is responsible for ensuring that his or her own personal professional indemnity covers the activity as outlined under the PGD and service specification.
- The pharmacy and accredited pharmacist must report any incidents, near-misses and complaints relating to this service according to their organisational policies and procedures and also communicate this to Plymouth City Council

7. Contingency Planning

7.1 Minimum service to be maintained in the event of disaster / emergency (if applicable)