SERVICE SPECIFICATION FOR THE PROVISION OF:

SEXUAL HEALTH SERVICES

Contents

- 1. Introduction
- 2. Duration
- 3. Service Description
- 4. Applicable National Standards
- 5. Service Delivery
- 6. Eligibility and Accreditation
- 7. Premises
- 8. Data Collection and Audit
- 9. Quality and Performance Indicators
- 10. Service Specification Review
- 11. Price and Payment

12. Annexes

Annex I	Child Protection Flowchart
Annex II	Sexual Offences Act 2003
	Fare and Contabilities and

Annex III Fraser Guidelines

Annex IV Chlamydia/Gonorrhoea Screening Primary Care Protocol (flowchart)

Annex V Chlamydia/Gonorrhoea Testing Kit Form

Annex VI Care pathway of patients presenting at Community Pharmacy for Emergency

Hormonal Contraception

Annex VII Emergency Contraceptive referral Under 25's

1.Introduction

- 1.1 Hertfordshire County Council is committed to improving the sexual health outcomes of its population. There are a number of factors that influence sexual health and relationships such as personal beliefs and attitudes, social norms, peer pressure, confidence and self-esteem, stigma and discrimination, culture, religion, drugs and alcohol and coercion and abuse. Individuals also need age-appropriate information and different services and interventions as they move through life. We also know that some groups in society are more at risk of poor sexual health outcomes that others.
- 1.2 The importance of improving sexual health is recognised in the Hertfordshire County Council 'Sexual Health Strategy: 2019 2024'. The strategy outlines the Councils three ambitions: to improve sexual health and wellbeing including the provision of sexual health services; encouraging safe sex, testing and treatment for sexually transmitted infections (STIs) and HIV; and preventing unwanted pregnancy and access to advice and support on sexual health matters.
- 1.3 The sexual health needs for Hertfordshire will be met through the use and development of relevant services that are in line with national and local policies and targets. It is important for service provision to be consistent, evidence-based and delivered in a variety of clinical and community settings so that all individuals can have access to a range of services to meet their needs.
- 1.4 There are currently a wide range of providers across Hertfordshire, including specialist sexual health and contraception services, general practice, community services, acute hospitals, community pharmacy contractors and the voluntary and independent sector. Free STI testing including HIV is also available on-line.
- 1.5 The use of community pharmacies as a point of delivery will build on existing pharmacy skills and improve local access to free sexual health services for Hertfordshire residents at a local level thereby reducing the requirement to travel to alternative services.

2. Duration

2.1 This agreement is valid from 1st April to 31st March 2024 or until the service is terminated according to the conditions in Clause 41 of the main contract. The Council will review service specifications annually.

3. Service description

- 3.1 The provider will:
 - 3.1.1 Offer free emergency hormonal contraception (EHC) within 120 hours (5 days) of earliest risk to females aged 15 and under 25 years and aged at least 13 15 years old who are deemed to be Fraser competent under a Patient Group Directive (PGD). All females to be registered with a GP in Hertfordshire.
 - 3.1.2 **Provide Chlamydia/Gonorrhoea testing kits to people 15 years and above** for example when service user request or purchases condoms, when oral contraceptive pills are dispensed and supplied to patients and when supplying EHC (including those who purchase it).
 - 3.1.3 Advise on how to utilise the Chlamydia/Gonorrhoea kit, how to return it for testing and what will happen following completion of the test in line with the approach adopted by the council.

- 3.1.5 **Provide free condoms** to people 16-24 years including those accessing EHC and/or Chlamydia/Gonorrhoea testing and treatment intervention.
- 3.1.6 **Provide information on the range of contraception choices** available including Long Acting Reversible Contraception (LARC) in order to prevent further unwanted conceptions and pregnancies.
- 3.1.7 **Demonstrate compliance with all relevant national standards** for service quality and clinical governance including compliance with the Faculty of Sexual and Reproductive Healthcare Contraceptive Choices for Young People:

4. Applicable National Standards

- 4.1 The Provider will ensure the Services are delivered in accordance with all current and relevant standards and guidance (as amended from time to time). Including but not limited to:
 - National Chlamydia Screening Programme Standards 8th Edition (PHE Updated 2022): https://www.gov.uk/government/publications/ncsp-standards
 - Service Standards for Sexual and Reproductive Healthcare (FSRH 2016): https://www.fsrh.org/news/updated-service-standards-for-sexual-and-reproductive/
 - UK National Guideline on Safer Sex Advice (BASHH & BHIVA 2012): http://www.bhiva.org/safer-sex-guidelines.aspx
 - Clinical Guidance: Emergency Contraception (FSRH, Amended 2020)
 - https://www.fsrh.org/documents/ceu-clinical-guidance-emergency-contraception-march-2017/
 - Quality standard [QS129] Contraception (NICE 2016) https://www.nice.org.uk/guidance/qs129

5. Service delivery

5.1General

- 5.1.1 To ensure patients accessing the service are supported to make decisions that are right for them, a shared decision making process should be the foundation for any consultation, supporting a patient to reach a choice about their treatment.
- 5.1.2 The service provided will be accessible, non-judgemental and welcoming, valuing and respecting diversity and sensitive to the needs of all, irrespective of race, class, gender, sexuality, disability or age. Staff should never impose their own beliefs or values on a service user or make assumptions on someone's sexual orientation. Negative attitudes can seriously affect a person's feelings and self-worth and could prevent those seeking help and support around issues relating to their sexual health.
- 5.1.3 In order to provide the service, pharmacies must have a consultation room. The consultation room must comply with minimum requirements as specified in section 7 Premises.
- 5.1.4 Where the accredited pharmacist has a long standing absence (3 months and above), the service will be withdrawn until another pharmacist is approved by the Council and routinely based within the pharmacy.
- 5.1.5 If the patient presents with symptoms indicating the need for an urgent medical consultation, they should be signposted to their nearest Sexual Health Service or GP. Contact Sexual Health Hertfordshire on 0300 008 55 22, explaining that the patient is symptomatic

- and requires an urgent appointment. If the surgery or Sexual Health service is closed the service user should be advised to contact the NHS 111 or visit the Herts Urgent Service website www.hucweb.co.uk to find another out of hours service.
- 5.1.6 The Pharmacy will effectively promote safer sex and provide service user education websites https://www.sexwise.fpa.org.uk/, https://www.contraceptionchoices.org/).
- 5.1.7 The Provider will link into existing local networks of community sexual health services so that there is a robust and rapid referral pathway for people who need onward signposting to services that provide on-going contraception, for example long acting reversible contraception (LARC) and diagnosis and management of other STIs. An interactive map of local services is available on the Hertfordshire County Council website www.hertfordshire.gov.uk/sexualhealth
- 5.1.8 The Provider will offer support and advice to people accessing their pharmacy, including advice on safe sex, condom use and advice on the use of regular contraceptive methods, when required.
- 5.1.9 The Provider must maintain appropriate records on the Public Health designated database to ensure effective ongoing service delivery and audit and payment.
- 5.1.10 The Provider may need to 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.
- 5.1.11 Sexual Health Hertfordshire will provide up to date details of other services, which providers can use to refer on service users who require further assistance. The information should include the location, hours of opening and services provided by each service provider. Refer to website http://www.sexualhealthhertfordshire.clch.nhs.uk/
- 5.1.12 The sexual health services provided in the Pharmacy should be clearly promoted.

 Downloadable dual testing posters and digital resources (e.g. for social media, websites) are available from: www.hertfordshire.gov.uk/dualtestprofessionals
- 5.1.13 The provider will ensure all staff are adequately trained to provide information on sexual health services available within the pharmacy, access to relevant resources and websites and other local services in the area (e.g. Sexual Health Hertfordshire, Services for Young People Access Points, other participating Pharmacies).

5.2 Safeguarding

- 5.2.1 Children and young people typically display a range of sexualised behaviours as they grow up. However, some may display problematic or abusive sexualised behaviour. The NSPCC have put together a range of resources to support those working with children and young people distinguish developmentally typical sexual behaviour from sexual behaviours that are problematic or harmful. This will help staff to respond appropriately and provide children and young people with the right protection and support.
- 5.2.2 When the service user is under 16 years of age, pharmacists will abide by the provisions of the Sexual Offences Act 2003 (Annex ii) and apply the Fraser Guidelines and child protection guidelines in dealing with the request.
- 5.2.3 Pharmacists have a responsibility to safeguard and promote the welfare of children, young people and adults.

- 5.2.4 Pharmacists should seek advice from Children Services on 0300 123 4043. If the pharmacist thinks there are concerns, the steps as outlined on the LPC website with a document named Recognise, Respond and Refer should be followed (see annex i). Carefully record your conversation with the patient and any direct or telephone conversations with other professionals/agencies.
- 5.2.5 If you have concerns regarding an adult who is being abused or neglected, call 0300 123 4042 (open 24 hours a day). For more information visit Safeguarding Adults
- 5.2.6 Further information on staff training, reporting incidents and Hertfordshire policies and procedures can be accessed here: Training and Resources

5.3 Emergency Hormonal Contraception

- 5.3.1 Pharmacists providing this service must have completed the <u>Declaration of Competence</u> (<u>DoC</u>) for <u>EHC</u>. The service user consultation must be undertaken in accordance with Hertfordshire County Council's current Patient Group Directions (PGD)
- 5.3.2 Service users presenting with a request for EHC in a participating pharmacy, in the temporary absence of the accredited person, should be immediately informed of an alternative EHC provider. An interactive map of local EHC providers is available from www.hertfordshire.gov.uk/sexualhealth search for Emergency Contraception.
- 5.3.3 In the event of services being restricted and face-to face consultations unavailable, pharmacists can offer EHC telephone or video consultation in accordance with NHSE guidance Remote and video consultations guidance for community pharmacy teams (NHSE 2022). Children under 16 years of age should be offered face-to-face consultations and that clear pathways are in place to signpost them appropriately.
- 5.3.4 The pharmacist should advise the patient requesting EHC that an Intrauterine Device (IUD) is more effective than an oral method of contraception and can also be used as a long-term method of contraception. These are available from some GP's or Sexual Health Hertfordshire. (see Annex VI for EHC care pathway)
 - If the patient would prefer an IUD, they can either contact their GP or call Sexual Health Hertfordshire on 0300 008 5522 explaining emergency contraception (IUD) is needed and requires an urgent appointment. If these services are unable to fit IUDs at presentation, EHC can be offered in the interim.
- 5.3.5 The Pharmacist shall supply the drug and record this in the patient records. Where possible, the accredited pharmacist will ensure that the patient takes the medication on site.
- 5.3.6 Patients under 25 years who access the service for EHC should be routinely given a Chlamydia/Gonorrhoea kit (see 5.4) unless they decline (opt out) The patient should be informed that dual tests are given to all under 25 year old women (even if no change of sexual partner) accessing EHC as Chlamydia and Gonorrhoea can cause inflammation and pain in the pelvis, an ectopic pregnancy (a pregnancy in the fallopian tubes) and infertility (being unable to have children). Because of this, whenever offered an STI test, they should consider taking it.
- 5.3.7 A Chlamydia/Gonorrhoea kit (see 5.4) should be offered to people 15 years and above who access the service for EHC service, even if no change in sexual partner. It should be noted that it can take up to 2 weeks post-infection before Chlamydia/Gonorrhoea will show positive in a urine or swab test. Therefore a Chlamydia/Gonorrhoea screen should be offered immediately with the advice that the patient should be screened again 2-3 weeks

- after the episode of unprotected sex. The patient may wish to take an additional kit to retest after the appropriate window period.
- 5.3.7 A record of the consultation must be entered onto the Public Health designated database within 10 working days of the consultation date. Where possible enter details direct onto the Public Health designated database while with the patient.
- 5.3.8 The patient (those 16-24 years) should be offered a condom wallet (see 5.7)

5.4 Chlamydia/Gonorrhoea Screening

- 5.4.1 Chlamydia is the most common bacterial sexually transmitted infection, with sexually active young people at highest risk. As Chlamydia often has no symptoms and can have serious health consequences such as pelvic inflammatory disease, ectopic pregnancy and tubal factor infertility) opportunistic screening remains an essential element of good quality sexual health services for young adults.
- 5.4.2 The chlamydia detection rate in 15-24 year olds in 2021 in Hertfordshire was 892 per 100,000 population, worse than the rate of 1408 for England. (1,334 positives out of 15,511 screened). 12.1% of 15-24 year olds were tested for chlamydia, compared to 14.8% nationally. This is lower than the previous year as during the Covid-19 pandemic, services will have been impacted and fewer young people will have been tested for Chlamydia. Hertfordshire remains worse than England with a lower rate of diagnosis.
- 5.4.3 To improve access to STI testing and address increases in Chlamydia and Gonorrhoea diagnoses, dual Chlamydia/Gonorrhoea testing kits should be available in community settings.
- 5.4.4 The pharmacist or staff should consider offering all children and young people aged 15-24 a test at every opportunity for example when a person requests/purchase condoms, when oral contraceptive pills are dispensed and supplied to patients and when supplying EHC, as specified by the Council.
- 5.4.5 A patient 25 years and above who is asymptomatic (see 5.4.7) may also request a free chlamydia/gonorrhoea test. The process for completing the test is the same for those aged 24 years and under.
- 5.4.6 The Provider will (see Annex IV flowchart for screening):
 - Ensure that Patients know how to do the test correctly to reduce the likelihood of false test results (false positive or false negative).
 - Ensure that Patients know how to complete the form correctly, including two forms of contact for results
 - Advise on the benefits of accepting a chlamydia/gonorrhoea test.
 - Give brief intervention advice on the frequently symptomless nature of chlamydia/gonorrhoea and the consequences of untreated infection.
 - Offer a free wallet of condoms and lubrication
- 5.4.7 The service will form part of the locally run National Chlamydia Screening Programme (NCSP) delivered by Sexual Health Hertfordshire. If you have any questions or require additional kits and resources contact Sexual Health Hertfordshire on 0208 102 4894 or email clcht.chlamydiascreeningservice@nhs.net
- 5.4.8 Staff will comply with the local and core NCSP requirements.
- 5.4.9 A urine test should ideally be done at least 1 or 2 hours after the patient last urinated

- 5.4.10 A patient declaring symptoms suggestive of sexual ill health should be offered referral to an appropriate service. This may include referral to Sexual Health Hertfordshire www.sexualhealthhertfordshire.clch.nhs.uk
- 5.4.11 The separate screening form should be completed with the NCSP site code (not ODS code) before handing to the patient to complete. A failure to provide this information will result in no payment for samples tested at the laboratory.
- 5.4.12 Patients should be made aware that recently acquired STI may not be detected and that they may need to be retested after the appropriate window period. It can take up to 2 weeks post-infection before chlamydia/gonorrhoea will show positive in a urine or swab test. The patient may wish to take an additional kit in order to retest after the appropriate window period.
- 5.4.13 Any concerns in relation to safeguarding children seek appropriate advice and refer to procedures.
- 5.4.14 Patients who decline a test at the time should be given a kit to take away or given details of how to obtain a free kit via www.sexualhealthhertfordshire.clch.nhs.uk

5.5 Chlamydia/ Gonorrhoea Results

- 5.5.1 The Provider will explain to the patient that:
 - they will receive their results within two weeks of testing in the format that they prefer.
 All results are available to Sexual Health Hertfordshire on a secure database as soon as the results are uploaded by the laboratory.
 - All negative results are automatically texted to the patient by Sexual Health
 Hertfordshire providing the patient has completed the screening form with their
 telephone details.
 - Patients with positive tests are invited via text message to call Sexual Health Hertfordshire as soon as possible.

5.6 Condom Distribution

- 5.7.1 Condoms are the most common method of contraception used by young people in the UK and are the only method that can provide protection against both STIs and pregnancy. Providing condoms as part of a sexual health intervention is to increase the acceptability of condoms to individuals in identified high-risk groups.
- 5.7.2 The Condom Distribution scheme is managed by Sexual Health Hertfordshire on behalf of the Council.
- 5.7.3 A condom wallet can be offered people 16 -24 years (or 13 15 years old who are deemed to be Fraser competent), including those accessing EHC, Chlamydia/ Gonorrhoea Screening
- 5.7.4 It is not possible within current resources to supply all patients with an ongoing supply of condoms. Those patients requesting condoms outside this scheme should be referred to alternative sources of condoms and lubricant, Sexual Health Hertfordshire

 (http://www.sexualhealthhertfordshire.clch.nhs.uk/) or commercial sales where appropriate.
- 5.7.5 The council will work towards increasing the supply of condoms where a need can be demonstrated.

- 5.7.6 No data recording is required unless the offer of condoms is part of an EHC consultation when they should be recorded on the Public Health designated database
- 5.7.7 Between 50 and 200 wallets can be ordered per month.
- 5.7.8 To order condoms please complete the order form using the agreed template on the Public Health designated database. If you have any questions email Sexual Health Hertfordshire on clcht.chlamydiascreeningservice@nhs.net

6. Eligibility and Accreditation

- 6.1. Before providing the service, each community pharmacist intending to provide the Service on behalf of a participating Pharmacy must complete relevant declaration of competence, be able to meet the Patient Group Directive requirements and hold a current contract to provide the Service.
- 6.2 Pharmacists must complete the most recent Declaration of Competence for EHC:
 - Declaration of Competence for EHC

Other recommended CPPE learning as well as signposting to other non CPPE resources/websites include:

- **Sexual Health** https://www.cppe.ac.uk/gateway/sexual
- Contraception- https://www.cppe.ac.uk/gateway/contra
- Emergency contraception https://www.cppe.ac.uk/gateway/ehc

Pharmacists must revisit and work through the Declaration of Competence every two years to reassess their competence.

Visit https://www.cppe.ac.uk/services/declaration-of-competence#navTop to opt in to email reminders every 6 months with expiry dates of your DoCs

The <u>Learning Pharmacy</u> also provides a free interactive learning for community pharmacy, which includes a section on Sexual Health.

- 6.3 Although not mandatory, Pharmacists are expected to attend locally held training events in order to maintain up-to-date knowledge and skills to be able to deliver the commissioned service. These will be offered through the Public Health Hertfordshire and the Local Pharmaceutical Committee.
- 6.4 Pharmacists are expected to read all Quarterly Sexual Health updates provided by Hertfordshire County Council and posted on Pharmoutcomes.
- In order to provide the Service all pharmacists must sign a personal copy of the current PGD or subsequent versions and hold a copy within their community pharmacy.
- Pharmacists providing this service must have a valid enhanced DBS check. DBS checks should be renewed at least once every 3 years. For more information visit https://www.gov.uk/disclosure-barring-service-check/overview Applicants and employers can use the DBS update service to keep a certificate up to date or carry out checks on a potential employee's certificate https://www.gov.uk/dbs-update-service
- Any self-declaration on training, DBS and accreditation will need to be entered on to the Public Health designated database before Pharmacists are able to offer the service. Pharmacists will abide by the GPhC's code of conduct in relation to any self-declaration.

- Participating pharmacy providers are required to fully brief any locum pharmacists about the scheme. Locum pharmacists must be aware that to take part in the sexual heath scheme they must be able to show they have completed the relevant declaration of competence and be able to meet the Patient Group Directive requirements (see 6.2).
- 6.9 The pharmacist will be required to recognise personal and professional limitations in respect of delivering these services and identify and prioritise the pharmacy Staffs' learning and development needs for handling requests for those sexual health services provided.
- 6.10 When a pharmacist leaves a pharmacy, records on the Public Health designated database need to be updated to reflect this The Provider should inform the Council as soon as a pharmacist leaves a pharmacy so that records on Public Health designated database can be updated and the interactive on-line map is accurate.

7. Premises

- 7.1 In order to provide the service, pharmacies must have a consultation room. The consultation room must comply with the following minimum requirements:
 - the consultation room must be clearly designated as an area for confidential consultations
 - it must be distinct from the general public areas of the pharmacy premises
 - it must be a room where both the person receiving services and the pharmacist providing those services are able to sit down together and talk at normal speaking volumes without being overheard by any other person (including pharmacy staff), other than a person whose presence the patient requests or consents to (such as a carer or chaperone).
- 7.2 The consultation room must also meet the General Pharmaceutical Council Standards for Registered Premises.
- 7.3 The sexual health services available should be clearly displayed throughout the premises.

8. Data collection and Audit

- 8.1 The Pharmacy will maintain records of the consultation and treatment to ensure effective ongoing delivery and audit. All records should be entered on to the Public Health designated database within 10 working days of the date of the consultation.
- 8.2 The Council will access all data from the Public Health designated database. The mandatory fields that must be completed on the database are:
 - Date of consultation
 - Postcode of Service User
 - Date of birth
 - Ethnicity
 - Reason for EHC
 - Referral to sexual health services or opt out
 - Chlamydia/ gonorrhoea testing or opt out
 - Condoms wallet offered or opt out
- 8.3 Data must be submitted on the Public Health designated database to ensure payment for services. Payments will be made on a quarterly basis. Records are confidential. Although Pharmacists will have sight of patient information this is anonymised in any Public Health designated database audit report viewed by Commissioners.

8.4 Performance data will be shared with pharmacists on a quarterly basis.

9. Quality and performance indicators

- 9.1 The Provider will be monitored on the following as part of a rolling programme by a Council representative to ensure:
 - They have completed relevant Declaration of Competence and recommended training (see 6.2)
 - Maintenance of accurate records as required by the PGD
 - Minimum of 5 EHC consultations provided per year to maintain competences
 - 100% of all patients receiving a EHC consultation are offered a chlamydia/ gonorrhoea kit
 - Number of chlamydia/ gonorrhoea kits ordered against number of EHC supplied
 - Number of chlamydia/ gonorrhoea kits returned to the lab for testing
 - Service users are given appropriate support and advice on safer sex and local services including, getting tested for STI's, condom use and advice on the use of regular contraceptive methods (e.g. LARC), when required
 - Awareness of local safeguarding procedures
 - Services available are clearly advertised within the pharmacy
 - Printed sexual health resources are in stock and accessible to service users
 - Condom wallets and chlamydia/ gonorrhoea screening kits are in stock and accessible
 - Pharmacists have read the Quarterly Sexual Health updates provided by Hertfordshire County Council and posted on Pharmoutcomes
 - The outcomes of any Service User experience surveys, feedback or complaints
 - 9.2 The Provider will comply with appropriate standards of clinical governance as outlined in the NHS (Pharmaceutical Services) Regulations 2013 Schedule 4 Terms of the Service of NHS Pharmacists (Part 4)
 - 9.3 The provider must ensure they contribute to the wider patient safety agenda including, but not exclusively, the identification, reporting and investigation of incidents and complaints. Where a complaint relates to the delivery of sexual health services under this contract, the Provider will be required to inform the council of the complaint and the outcome of the investigation. Participation in clinical audit and implementation of changes arising from audits should take place. The service should be able to demonstrate learning and improvement across the quality agenda and in response to local and/or national policy guidance.
 - 9.4 The Provider will co-operate with any commissioner-led assessment of the service

10. Service Specification Review

- 10.1 It is recognised within this specification that the Service may be subject to change due to a range of national and local policy initiatives. For example, government guidance and legislation, industry professional standards, NICE Guidance, Public Health England or Hertfordshire County Council Policy.
- 10.2 The Service Specification shall be reviewed annually and updated to reflect any changes. Three months' notice will be given to the Provider of any significant changes, which may impact on the service, provided and will ensure sufficient transition arrangements are secured to ensure service continuity.

11.Price

11.1 The Council will generate a report from the Public Health designated database on the 11th of the month following the end of a quarter. This report will generate the amount of monies that will be paid to pharmacists for the consultations they have carried out within that quarter.

Service	Sexual Health Consultation fee (irrespective of whether supply is made)	Drug Cost
EHC provision		Drug Tariff price
(PGD Supply	• £18.50	
levonorgestrel/ulipristal acetate		
Chlamydia/ Gonorrhoea	£5 per kit tested at the laboratory	
Screening	•	

11.2 If there are significant changes to the cost of the medication then the payment will be reviewed.

12.Annexes

•	Annex I	Child Protection Flowchart
•	Annex II	Sexual Offences Act 2003
•	Annex III	Fraser Guidelines
•	Annex IV	Chlamydia/Gonorrhoea Screening Primary Care Protocol (flowchart)
•	Annex V	Chlamydia/gonorrhoea Testing Kit Form
•	Annex VI	Care pathway of patients presenting at Community Pharmacy for Emergency
		Hormonal Contraception
•	Annex VII	Emergency Contraceptive referral Under 25's

All annexes are available electronically on the LPC website. www.hertslpc.org.uk

Annex i - Child Protection Flowchart



Concerns ongoing

Refer

When a child is at immediate risk of harm

0300 123 4043

Customer Service Centre

Children have a right to be cared for and protected and protecting them is everyone's responsibility

Safeguarding Children

Parents/carers should be informed that you are making a

referral unless this will put the child at more risk

In an emergency situation

call the police 999





Referral form can be found on the HSCP website

Inform the LADO of allegation

within 1 working day

Provide identifying

details of the child

Annex ii - Sexual Offences Act 2003

In England the legal age for children to consent to have sex is 16, whether they are straight, gay or bisexual. The aim of the law is to protect the safety and rights of children and make it easier to prosecute people who pressure or force others into having sex they don't want. Forcing someone to have sex is a crime.

Although the age of consent is still 16, the Government says that the law will not be used to prosecute children under 16 who are of similar ages and mutually agree to engage in sexual activity, unless it involves abuse or exploitation. Children need to be aware of the possible legal consequences of engaging in sexual activity under the age of 16 consensual kissing or other sexual touching is not illegal for those aged 13-16.

The same age limits apply to children with disabilities. Fraser and HSCB guidelines should be used as with any other young person to highlight cause for concern.

The Sexual Offences Act 2003 makes provision for children of less than 16 years old, to be offered confidential professional advice on contraception, condoms, pregnancy and termination.

A person is not guilty of aiding, abetting or counselling a sexual offence against a child where s/he is acting for the purpose of:

- Protecting a child from pregnancy or sexually transmitted infection.
- Protecting the physical safety of a child.
- Promoting a child's emotional well-being by the giving of advice.

This exception, in statute, covers not only health professionals, but also anyone who acts to protect a child, for example teachers, school nurses, personal advisers, youth justice officers, youth workers, social workers and parents.

Annex iii - Fraser Guidelines

There is no law to prevent practitioners providing condoms to individuals under the age of 16. Health professionals trained in Contraceptive and Sexual Health can only supply all other forms of contraception. If youth workers are sufficiently trained, confident and are sure that a clear need has been identified, condoms may be issued to a young person under the age of 16.

It is considered good practice for workers to follow the Fraser Guidelines when discussing personal or sexual matters with a young person under 16. The Fraser Guidelines give guidance to doctors and health professionals in England and Wales on providing advice and treatment to children under 16 years of age. These hold that sexual health services can be offered without parental consent providing that:

Although it is an offence for a man to have sex with a girl under 16 (17 in Northern Ireland) it is lawful for doctors to provide contraceptive advice and treatment without parental consent providing certain criteria is met. These criteria, known as the Fraser Guidelines, were laid down by Lord Fraser in the House of Lords' case and require the professional to be satisfied that:

- The young person will understand the professional's advice;
- The young person cannot be persuaded to inform their parents;
- The young person is likely to begin, or to continue having, sexual intercourse with or without contraceptive treatment;
- Unless the young person receives contraceptive treatment, their physical or mental health, or both, are likely to suffer;
- The young person's best interests require them to receive contraceptive advice or treatment with or without parental consent.

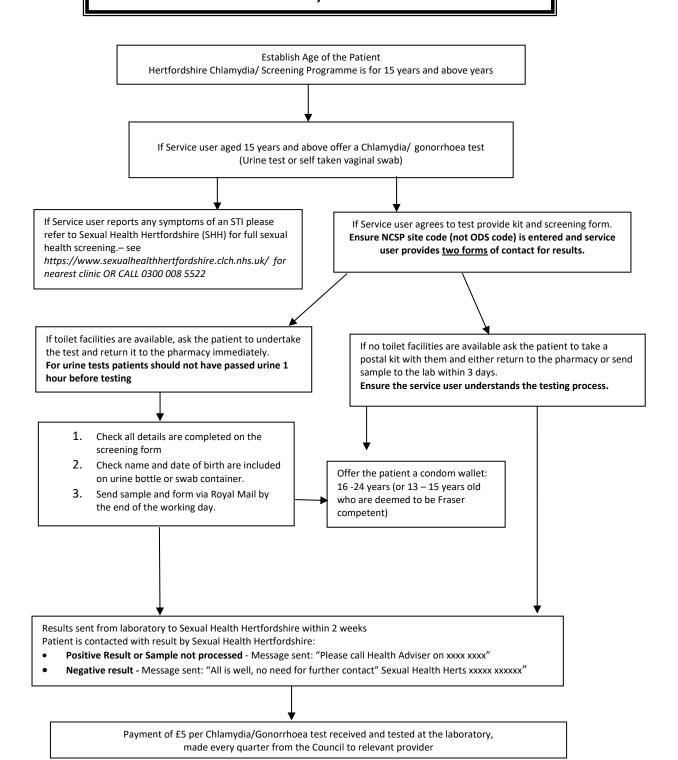
Although these criteria specifically refer to contraception, the principles are deemed to apply to other treatments, including a termination of pregnancy. Children under the age of 16 have as great a right to confidentiality as any other patient. If someone under 16 is not judged mature enough to consent to treatment, the consultation itself can still remain confidential.

The judgement in the House of Lords referred specifically to doctors but it is considered to apply to other health professionals, including nurses. It may also be interpreted as covering youth workers and health promotion workers who may be giving contraceptive advice and condoms to children under 16, but this has not been tested in court.

If a child or young person has a learning difficulty/disability (LDD) and is Fraser Competent, they have the same right to confidentiality and make their own decisions as other children and young people. Assessing competency may take more time and they should be encouraged to talk to a parent or carer. This is a very complex and sensitive issue as many parents and carers would want to be asked for their consent. Therefore, each child or young person with a LDD must be addressed as an individual with individual needs.

Annex iv- Chlamydia/Gonorrhoea Screening Primary Care Protocol (flowchart)

Management of Chlamydia/ Gonorrhoea Screening Pharmacy Protocol







Chlamydia and Gonorrhoea (Dual Screening) Test Kit Order Form

	Date:
NCSP SITE CODE:	
Name of site:	
Address:	
Telephone number:	
Email address:	
Contact name:	
Kits must be ordered in bundles of 10. Please indicate below bundles you would like to order.	ow how many
Urine Kits	
Swab Kits	

Please email this form to clcht.chlamydiascreeningservice@nhs.net by Tuesday morning 10am for delivery on Thursday.

Annex vi- Care pathway of patients presenting at Community Pharmacy for Emergency Hormonal Contraception

1. Confidentiality

- Be open and honest about confidentiality with the patient
- Information will only be shared if the patient or someone else is at risk or in danger. If this needs to happen it will always be discussed with the patient first

2. Safeguarding

- Consider, and if necessary, manage any safeguarding issues.
- Ensure patient is Fraser Competent

3. Options for Emergency Contraception

- Discuss of all options for emergency contraception with the patient:
- Intrauterine Device (IUD): Contact Sexual Health Hertfordshire on 0300 008 55 22 if the patient prefers this option. They will advise on nearest service and opening times.
- Levonelle and Ulipristal

4. Assessment of Suitability

• Assess the patient's suitability to receive EHC in line with the relevant PGD

5. Supply of Emergency Hormonal Contraception

• Supply EHC in line with the PGD if appropriate

6. Advice

- Provide advice on the avoidance of pregnancy and sexually transmitted infections through safer sex and condom use
- Supply condoms when appropriate
- Provide a chlamydia/gonorrhoea screen. The patient should be informed that dual tests
 are given to all under 25 year old women (even if no change of sexual partner) as
 undiagnosed STI;'s can cause other health issues. Ensure the Patient knows how to do the
 test correctly and gives to forms of contact e.g. email, telephone number.
- Offer an additional kit in order to retest after the appropriate window period (2-3 weeks).

7. Information

 Provide information about long-term contraception methods including information about LARCs: https://patient.info/sexual-health/contraception-methods

8. Signposting

- Provide details of where and how to access services that provide:
- Long-term contraceptive methods (GP or Sexual Health Hertfordshire)
- Sexual health advice and STI services (Sexual Health Hertfordshire)
- Further advice and care

9. Confidentiality

- Be open and honest about confidentiality with the patient
- Information will only be shared if the patient or someone else is at risk or in danger. If this needs to happen it will always be discussed with the patient first

10. Safeguarding

- Consider, and if necessary, manage any safeguarding issues.
- Ensure patient is Fraser Competent

11. Options for Emergency Contraception

- Discuss of all options for emergency contraception with the patient:
- Intrauterine Device (IUD): Contact Sexual Health Hertfordshire on 0300 008 55 22 if the patient prefers this option. They will advise on nearest service and opening times.
- Levonelle

12. Assessment of Suitability

Assess the patient's suitability to receive EHC in line with the relevant PGD

13. Supply of Emergency Hormonal Contraception

• Supply EHC in line with the PGD if appropriate

14. Advice

- Provide advice on the avoidance of pregnancy and sexually transmitted infections through safer sex and condom use
- Supply condoms when appropriate
- Offer a chlamydia/gonorrhoea screen. Ensure the Patient knows how to do the test correctly.
- Offer an additional kit in order to retest after the appropriate window period (2-3 weeks).

15. Information

 Provide information about long-term contraception methods including information about LARCs

16. Signposting

- Provide details of where and how to access services that provide:
- Long-term contraceptive methods (GP or Sexual Health Hertfordshire)
- Sexual health advice and STI services (Sexual Health Hertfordshire)
- Further advice and care

Annex vii- Emergency Contraceptive referral Under 25's

1) Pharmacies

Some local pharmacies continue to offer free oral Emergency Contraception to under 25s. To find out where they are click here.

2) Sexual Health Hertfordshire (SHH)

<u>Sexual Health Hertfordshire</u> offer a range of free and confidential services including pregnancy testing, emergency contraception and testing for STI's for young people living in Hertfordshire

3) On-line

Order free and confidential emergency contraception pill via SH:24

*If the young person is under 18 or unable to use online services, please call $0300\,008\,5522$

4) General practice (GP)

Patients can access emergency contraception their GP

If you are unable to provide emergency contraception to a young person, below are a range of services

If making any referral on behalf of a young person, contact the services in advance to see if they are open and the appropriate staff are available to offer support.

Free Walk-in clinics for young people (21 years and under) provided by SHH in Stevenage, Cheshunt, Watford, Hatfield and Borehamwood.

Call **0300 008 5522 or** click **here** for more information

Further Online services available to Hertfordshire residents

SH:24 provides a range of free online services to residents age 16 years or older:

- Contraceptive pill: order on-line via **SH:24**
- Testing for STIs with no symptoms: order a free test via SH:24
- HIV Testing: order online from Free Testing HIV

Hertfordshire County Council interactive map shows a range of sexual health services for 16 years and above. Click **here** to visit the map

Young People can also ask questions about sex and relationships via the Sexual Health texting service on 07860 057 369 or visit Services for Young People for further information. The Public Health Nursing Team also provide a confidential 'chat health' texting service: 0748 063 5050

If the young person is under 18 or unable to use online services, please call 0300 008 5522