|  |  |
| --- | --- |
| **Rationale of Checklist** |  |
| This checklist will be completed by the CPHIOW sub-committee for every new or recommissioned service specification sent to CPHIOW for comment/consultation. The response summary is completed after consultation and agreement by the sub-committee.The Checklist contains the CPHIOW sub-committee’s comments/recommendations for any requested changes to the proposed/draft service specification in order to achieve / improve further the green rating. It will be sent to the service commissioner for consideration of amendments ideally prior to go-live of the service.CPHIOW’s purpose is to work positively with commissioners to ensure high quality outcomes from the service, which are both professionally and commercially viable for contractor participation. |  |
| **Service and Commissioner** |  |
| **Provision of Emergency Contraception (EC)****Southampton City Council** |  |
| **Response summary feedback from CPHIOW** |  |
|  |  |
| CPHIOW has rated this service specification as GREEN based on the comments made below. Our recommended actions to further improve the service are:1. Payment for Pharmacist training time for mandatory training.
2. Training is mandatory. Would recommend changing to same as national pharmacy contraception service with competence self assessment and declaration.
 |  |
| **Time-line & Next Steps for CPHIOW** |  |
| CPHIOW will publish this service participation rating to contractors in **10 days’ time.** Publication of this recommendation will be via individual email and posting on our website.Commissioners are asked to please respond promptly with feedback / proposed changes so that they can be included within CPHIOW’s recommendation to its contractors. |  |
| **Commissioners response to CPHIOW feedback** |  |
| Please enter response here, returning promptly to alison.freemantle@CPSC.org.uk |  |
| **Point Covered** | **Action or Notes** |  |
|  | **CPHIOW Consultation** |  |
| CPHIOW Consulted?  | Yes |  |
| CPHIOW Consulted with sufficient time to comment? | Yes |  |
|  | **Remuneration** |  |
| Does remuneration include/cover set up costs, backfill, consumables etc..? | No set up costs.No backfill to allow for pharmacist training time. |  |
| Does the payment structure use a system that is suitable for all contractors and are the payment terms acceptable? |  Invoicing via PharmOutcomesWill allow a two-month grace period for retrospective claims.Payment monthly. |  |
| Where equipment is required who provides/calibrates/services this? If contractor, does remuneration sufficiently cover the cost of this? | No additional equipment required for the PGD. |  |
| Is remuneration fair? | YesA 9% increase as part of reviewFee per consultation, whether results in supply or not, plus the cost of the oral emergency hormonal contraception drug at Drug Tariff price plus VAT at the applicable rate.Fee for effective onward signposting if the pharmacy cannot provide the service that day. |  |
|  | **Is/does the Service.....** |  |
| Sustainable? | Yes |  |
| Start/ end date | 2 year 1/4/24 – 31/3/26 Mid contract review |  |
| Clinically sound and in line with appropriate National or local guidance? | YesReducing contraception & unplanned pregnancy and preventing teenage pregnancy are local and national priorities. FSRH guidelines: <https://www.fsrh.org/news/fsrh-launches-new-emergency-contraception-guideline/> Fraser guidelines & Gillick competence: <https://www.nspcc.org.uk/preventing-abuse/child-protection-system/legal-definition-child-rights-law/gillick-competency-fraser-guidelines/>NICE guidance: <https://www.nice.org.uk/guidance/ph51>SPC: <https://www.medicines.org.uk/emc/product/8626>and <https://www.medicines.org.uk/emc/product/6657> |  |
| Enhance patient care? | Yes  |  |
| Have suitable monitoring arrangements and termination clauses? | YesMonitoring requirements are in place with the commissioner able to view data on PharmOutcomes.Termination Standard NHS terms. |  |
| Enhance relationships with other HCPs? | YesPatient may require onward referral to SPCL or Sexual Health Service.Patient can also access the Pharmacy Contraception Service at same visit if appropriate. |  |
| Equality, diversity, and inclusion considered? | Available to all eligible patients. PGD exclusions apply. Product is provided FOC. |  |
| Deliverable? | Yes |  |
| Delivery impact on staff (High/ Medium/Low) | Low |  |
| Attractive enough for contractors to consider it worthwhile? | Yes |  |
| Have performance criteria that supports a quality service? | Audit and mystery shopper carried out in conjunction with LPC. |  |
|  | **Service Delivery** |  |
| Are the performance measures reasonable and achievable? | Yes |  |
| Is the administration proportional to size or service and remuneration? | Yes |  |
| Are any reporting systems suitable to all contractors? | YesService uses PharmOutcomes |  |
| Is the training required for the service reasonable? Consider accessibility to CPPE for non-pharmacist/technician staff. | Currently still mandatory training (with exception of IP declaration).Working towards making same as national Pharmacy Contraception Service with no mandatory. |  |
| Does record keeping or sharing of information requirements meet current IG regulations. | YesService uses PharmOutcomes |  |
|  | **Miscellaneous Information** |  |
| Any other information specific to this service. |  |  |
| Suggested RAG Rating |  |  |