PUBLIC HEALTH
LOCAL SERVICES AGREEMENTS 2019/20

GP Practice
Intra-uterine contraceptive device/system
(IUCD/S) fittings

This service specification must be read in conjunction with the Public Health Local Service Agreement (PHLSA) contract document. In addition to the service specific elements set out in this specification all Terms and Conditions set out in the PHLSA must be adhered to by providers delivering this service.

Contract expiry date: 31 March 2020

Specific Training/Accreditation: Evidence is required that all individuals carrying out IUCD fitting hold a current Faculty of Sexual and Reproductive Health (FSRH) Letter of Competence (LoC). Please state if details have already been provided and we will check our records.

Payment: Each practice contracted to provide this service will receive:
£81.31 per insertion
£38.00 per removal
£21.69 for IUCD problem follow up only¹

¹ National guidance changed in 2012 and removed the need for standard coil check at 6 weeks and annual coil checks.
1. Introduction

This service covers fitting and removal of IUCD/S in primary care by an in date FSRH LoC IUT holder.

Adherence to this specification is mandatory for all practitioners providing this service. Payment will only be made if the Practitioner has provided evidence of accreditation and adhered to the specification.

This service specification does not include payment for the use of Intrauterine System (IUS); primarily for the management of menorrhagia

- hormone replacement therapy, nor,
- other non-contraceptive use in primary care.

Complex IUD/S removal and contraceptive requirements will be referred to the appropriately trained consultant staff within the specialist sexual health services.

This service specification requires adherence to the FSRH guidance on intrauterine contraception (2015) [http://www.fsrh.org/pdfs/CEUGuidanceIntrauterineContraception.pdf](http://www.fsrh.org/pdfs/CEUGuidanceIntrauterineContraception.pdf)

2. Background and Evidence Base

NICE Clinical Guideline 30 identifies the following priorities relating to the provision of contraception:

- women requiring contraception will be given information about and offered a choice of all methods, including Long-Acting Reversible Contraception (LARC);
- all currently available LARC methods are more cost effective than the combined oral contraceptive pill, even at one year of use;
- intrauterine devices, the intrauterine system and implants are more cost effective than the injectable contraceptives; and
- increasing the uptake of LARC methods will reduce the numbers of unintended pregnancies.

3. Aims and intended service outcomes

The aims and outcomes of this service are:

- the full range of contraceptive options are provided by practices to patients;
- post-coital copper IUCD fitting for emergency contraception will be provided as a means of reducing unwanted pregnancies
- increase in uptake of long acting reversible contraception, and
- reduce unintended pregnancy;
- reduction in the number of induced abortion of pregnancy.

4. Service outline

A register will be maintained by the service provider of all patients fitted with a contraceptive coil/device.
Sexual history taking: Practices will ensure that all patients have a full sexual history review which will ensure that the contraceptive coil/device is the most appropriate method of contraception based on medical evidence, clinical guidelines, sexual history and practice, and risk assessment.

Risk assessment: Practices will give all patients aged under 25 chlamydia dual self-taken chlamydia swabs (and HIV self-testing kits to all patients who live in Eastbourne, Hastings boroughs and Lewes and Havens district) prior to recommending the contraceptive IUCD.

Provision of information: Practices will ensure information is available for all patients and provide appropriate verbal and written information about all contraceptive options at the time of counselling to ensure informed choice. Understanding regarding coil/device use will be reinforced at fitting with information on effectiveness, duration of use, side effects and those symptoms that require urgent assessment.

Production of an appropriate clinical record: Practices will use the clinical template provided by Public Health. This will ensure there is clear recording of activity and coding for correct activity claims. If the patient is not registered with the provider, the provider must ensure that the patient’s registered practice is given all appropriate clinical details for inclusion into the patient’s notes after obtaining consent from the patient.

As part of good Clinical Governance, Practices are required to develop, implement, monitor and review the clinical quality of the service that they undertake.

All service providers will undertake a risk assessment to ensure adequate facilities and equipment are in place to deliver the service and identify the resources available to support the service.

5. Specific service standards and responsibilities of the provider regarding young people

- All advice and information given to young people will be in line with East Sussex County
- Council’s policies for the provision of contraception and sexual health advice services for young people.
- All staff providing this service to young people will:
  - assess and demonstrate in the records that the young people are Fraser Competent.
  - ensure young people are aware of the limits of confidentiality in line with Sussex Child Protection and Safeguarding Procedures as per the overarching ESSC contract.
  - be responsive to the needs of individual young people regarding age, learning ability, culture, religion, ethnicity, sexuality and gender.
  - provide Chlamydia screening test kits to all women 24 and under before insertion of the IUCD/S (Chlamydia screening programme self test or practice taken non- chlamydia programme test) and to women aged 25 and over who are identified as at risk of STIs (by non-chlamydia programme test).
  - It is expected that any pre insertion screening will be undertaken as part of a contraception consultation and medical examination, and not as part of this service specification. For young people (24 and under) practices will be funded under the chlamydia screening PHLSA for any completed chlamydia screening programme self- test kits received regardless of whether the test is associated with IUCD fitting or not.

Clinical Governance

As part of Clinical Governance Practices will be required to develop, implement, monitor and review the clinical quality of the service that they undertake. All service providers will:

- undertake a risk assessment to ensure adequate facilities and equipment are in place to deliver the service and identify the resources available to support the service. ESCC will require the
following details:
  o where the service will be delivered;
  o administration / IT systems – monitor demand / activity;
  o who will be delivering the services;
  o proposed roles and responsibilities;
  o robust communication systems; and
  o arrangements for transfer of care to other services.
  • maintain appropriate systems for record keeping including patient assessment, follow-up/recall
    and an appropriate clinical record;
  • have an approved complaints system in place; and
  • regularly monitor access times.

6. Referrals & Eligibility

Any woman who is a resident of East Sussex who is a registered or non-registered patient of the
practice is eligible to receive this service following clinical assessment and presentation of the
full choice of contraceptive methods. Complex contraception issues must be carried out by the
appropriately trained staff and will be referred through to the East Sussex Specialist Sexual
Health contraceptive consultant (see contacts).

EXCLUSIONS (elements that cannot be claimed for under this contract):

• Standard thread and annual checking of IUCD/IUCS is not recommended practice as per
current FSRH guidance and are therefore excluded.
• Post 4-6 week fitting checks are not recommended practice as per the current FSRH IUCD
  guidelines (April 2015) and are therefore excluded.
• This service specification does not include fitting IUCD for menorrhagia in non-
  sexually active women
• This service specification does NOT include fitting of IUCD post age fifty five
• This services specification does not include fitting IUCD for hormonal replacement
  therapy(HRT)

The contraceptive services commissioned by NHS England are an ‘additional service’
defined in the standard GP contract (clause 9.3.1) as follows:

• The giving of advice about the full range of contraceptive methods Including advice regarding
  IUD and SDI as they are part of the whole range
• Where appropriate, the medical examination of patients seeking such advice
• For the purpose of this service specification medical examination would include pre-coil swab
  taking if required, under the additional contract.

7. Equipment and Premises

Certain special equipment is required for IUCD/S fitting and removal. This includes an appropriate
room fitted with a couch and with adequate space and equipment for anaphylaxis and
resuscitation. A variety of removal forceps and facility for local anaesthesia provision also need to
be available. This specification also includes the provision of sterile surgical instruments which can
be of the disposable type or obtained from CSSD and other consumables These costs are included
in the service price.

8. Accreditation and Training

Practitioners (both doctors and nurses) undertaking this procedure must have appropriate
accreditation and have completed all relevant training as directed by FSRH. Accreditation involves
a demonstration of skills involved in counselling, knowledge of issues relevant to IUCD/S use,
problem management and observation of insertion and removal followed by supervised insertion
and removal of a minimum number of insertions and removals as specified by the Faculty of
Sexual and Reproductive Health Care (FSRH), and assessment of competence by a FSRH Faculty registered trainer.

An appropriately basic life support trained healthcare assistant also needs to be available to monitor the patient and assist the clinician during the procedure.

Evidence of appropriate training and accreditation will be supplied to the commissioner prior to commencing service provision as follows:

- Evidence of current full accreditation - FSRH LoC IUD (see above link)
- To ensure clinicians are able to maintain competence they will be inserting at least one intrauterine method per month.

For recertification. See details on following link http://www.fsrh.org/pages/Recertification.asp

- It is the responsibility of the practitioner to assess their own competence if accredited following career breaks. Specialist sexual health services can offer attendance and fitting a number of devices in busy IUCD/S clinics for a refresher and update in these circumstances.
- the FSRH requires a log of at least 12 insertions in 12 months or six in six months using at least two different types of device in un-anaesthetised patients.
- Practitioners will undertake regular Continuing Professional Development (CPD). The FSRH require practitioners to attend regular updates. The East Sussex specialist sexual health service provides a free annual update day.

9. DBS Requirements
A DBS check must be in place for all staff delivering this service. Providers will assure themselves that the appropriate DBS check, for the type of service being undertaken is in place for each member of staff providing the service. Please see: www.gov.uk/disclosure-barring-service-check/overview. ESCC policy is that DBS checks are refreshed every three years.

10. Payments and Cost
Each practice contracted to provide this service will receive:
£81.31 per insertion
£38.00 per removal
£21.69 for IUCD problem follow up only (e.g. lost threads). National guidance changed in 2012 and removed the need for standard coil check at six weeks and annual coil checks. Public health will not pay for non-problematic coil follow ups.

The provider is required to use the clinical templates provided at https://www.eastsussex.gov.uk/socialcare/providers/health/phcontracts/phlsas/localserviceagreement/data-searches-and-templates

All payments during 2019/20 will be based on data reported. During 2019/20, a set of clinical system searches will be developed for central reporting of anonymised data for audit and payment purposes. Until this electronic process is in place, providers will continue to use manual claims.

This specification requires that activity is carried out by an FSRH LoC accredited Clinician and the search (currently in development) will identify the name of the accredited Clinician. The name will be cross referenced against the accreditation certificate held by Public Health.
11. Monitoring, Audit and Reporting

The service provider will be required to obtain and maintain good quality and appropriate clinical records of the interventions delivered to patients through this service specification.

The service provider will be required to complete the IUCD Audit template\(^2\) together with the Q4 claim form and return to public.health@eastsussex.gov.uk.

- Service specific information to be included in the annual report is set below.
  - Geodemographic data – LSOA code, age, ethnicity, gender as set out in minimum data set requirements.
  - The practice needs to maintain its own register of patients fitted with a IUCD/S
  - Number of IUCD/S’s fitted
  - Number of IUCD/S’s removed
  - Reasons for removal
  - How long had the removed IUCD/S been in situ
  - Reporting of significant events and analysis in relation to IUCD/S service
  - Monitoring of complaints

The Commissioner will undertake an annual review and will consider compliance with the contract. Any aspect of compliance with this service specification can be considered. All reviews undertaken by the Commissioner will consider (not exhaustive):

- Outcomes for clients and patients
- Benchmarking of current knowledge and practice
- Who gains access to the service
- Quality of service
- Performance against agreed volume and service standards
- Client and patient user satisfaction
- Financial integrity of claims

The commissioner will assist with disseminating good practice and shared learning.

12. Useful Contacts

Josephine Percival, East Sussex Specialist level three Contraceptive lead (based at the two specialist service addresses shown below) Josephine.percival@esht.nhs.uk

| 1st floor, Station Plaza Health Centre, Station Approach, Hastings, East Sussex TN34 1BA 01424 464750 | Avenue House, The Avenue, Eastbourne, East Sussex. BN21 3XY 01323 416100 |

Tony Proom - Strategic Commissioning Manager for Clinical Sexual Health
Tel: 01273 335252
email: Tony.proom@eastsussex.gov.uk

Tracey Houston – Business Manager for Public Health
Tel: 01273 481932
email: Tracey.houston@eastsussex.gov.uk

Chlamydia screening NAATs kits request from
Sophie Lewis - Chlamydia Screening Promotion Officer

\(^2\) [https://www.eastsussex.gov.uk/socialcare/providers/health/phcontracts/phlsas/localserviceagreement/general-practices-phlsa-services/](https://www.eastsussex.gov.uk/socialcare/providers/health/phcontracts/phlsas/localserviceagreement/general-practices-phlsa-services/)
Sexual Health Service
East Sussex Healthcare NHS Trust
Tel: 07896597922 / 07813430401 / 01323 462762
email: Sophielewis@nhs.net /