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Pharmacy Contraception Service

# Frequently asked questions

26 April 2023, Version 1.0

**Aims and Registration**

**What is the aim of the service?**

Tier 1 of the Pharmacy Contraception Service allows pharmacy contractors to establish the first step of a fully integrated care model. This will provide people with greater choice and access to ongoing oral contraception supplies, previously initiated in primary care or a sexual health clinic (or equivalent).

**How is this service being commissioned?**

This service is being commissioned as an Advanced pharmacy service. Therefore, participation is optional for all pharmacies. Contractors are required to meet the terms of the specification prior to registration. The specification can be found here:

[NHS England » NHS Pharmacy Contraception Service Tier 1 – Ongoing supply of oral contraception](https://www.england.nhs.uk/publication/nhs-pharmacy-contraception-service-tier-1-ongoing-supply-of-oral-contraception/)

**Can any pharmacy sign up to deliver this service?**

Any pharmacy can participate provided they meet the terms of the specification (see above).

Contractors should register for the service via MYS:

[MYS – Pharmacy | NHSBSA](https://www.nhsbsa.nhs.uk/pharmacies-gp-practices-and-appliance-contractors/dispensing-contractors-information/manage-your-service-mys/mys-pharmacy)

**When did the Advanced Service go live?**

Tier 1 of the advanced service went live on 24 April 2023.

**Do all pharmacies have to go live from 24 April 2023?**

No. This is an Advanced service, so contractors are free to choose if they will provide the service and when they will start provision.

**If a trained pharmacist works at multiple pharmacy sites, will they need to register for the service at each pharmacy?**

It will be the responsibility of the pharmacy contractor to register their individual pharmacy to deliver the advanced service. As part of the registration, they will be required to declare they can meet the terms of the specification. This includes training and competence of the staff delivering the service.

**Will pharmacists need to re-register for the advanced service if they start working at a new pharmacy?**

Any new pharmacy contractor can register to deliver the service if they have suitably trained staff. Each pharmacy will need to register via MYS.

**Specification requirements**

**My pharmacy has an exemption from NHS England on the requirement to have a consultation room. Can I therefore provide the service from a designated area in the pharmacy or outside my pharmacy?**

No. It is a requirement of the service specification for pharmacies (including DSPs) to have a consultation room which meets the requirements in the Terms of Service to provide the service.

**How will consultation details be captured for the advanced service?**

Contractors are required to use IT solutions which meet the minimum digital requirements of the service (as specified within the NHS technical toolkits).

NHS England has been working with Cegedim Healthcare Solutions and EMIS:PharmOutcomes to develop end-to-end digital solutions to support the Contraception Service, including the API (application programming interface) with the NHSBSA. Other pharmacy suppliers have also expressed interest in developing their solutions to support this service and we will be working with them in due course.

**Can only pharmacists provide the service?**

Where BMI and blood pressure measurements are performed within the pharmacy as part of a Combined Oral Contraception consultation, these can be done by a suitably trained pharmacy technician in advance of the pharmacist consultation. The competence of these individuals will need to be assessed prior to registration.

**Can trainee pharmacists provide this service?**

No. Currently only qualified pharmacists can provide the service.

**Service detail**

**How does the service work?**

A person who is already on oral contraception may self-refer or be referred by their general practice, sexual health clinic or equivalent to a participating pharmacy to access their next supply. The pharmacist will offer a confidential consultation and as part of that will reach a shared decision with the person on the ongoing supply of their current oral contraception, ensuring clinical appropriateness.

**What is the target patient group eligible for this service?**

People already on oral contraception who need their next prescription and do not have any exclusions as per the PGDs. Age inclusion criteria for this service are:

Combined Oral Contraception (COC)

* Individual (age: from menarche up to and including 49 years of age) presenting for an ongoing supply of their ongoing oral contraception.

Progestogen Only Pill

* Individual (age: from menarche up to and including 54 years) presenting for an ongoing supply of their oral contraception.

Please see the PGDs for more information.

**Why is there not a lower age limit for the service?**

Individuals can start this service from menarche onwards. This is in line with services offered by GPs and sexual health clinics. There is guidance in the PGD on dealing with vulnerable individuals such as those who are 13 and under.

**Are individuals who may not be registered with a GP eligible for this service?**  
Yes. Where an individual is identified as suitable for the service, but is not registered with a general practice, the service can still be provided.

**Do I need to notify GPs that an individual has accessed this service from my pharmacy?**

No. With explicit consent, information relating to the consultation will be shared with the person’s general practice. However, if the person does not consent to sharing information with their general practice or they are not registered with a general practice, the consultation can still proceed, and a notification to the practice will not need to be sent.

**Can I offer the service to patients who are not registered in my local PCN?**

Yes - the service can be offered by registered community pharmacists to any patient that presents requesting their next supply of oral contraception provided they meet the inclusion criteria.

**How will I know that a patient is due for a review and subsequent prescription?**

Pharmacists are encouraged to check the person's summary care record and/or the last dispensed box. If the patient is attending their usual pharmacy, there may be a record on the pharmacy PMR system. If still unsure, the pharmacy may contact the person's GP practice or sexual health clinic to confirm.

**Providing the service**

**How does a pharmacy confirm the NHSmail address for a GP practice they do not usually communicate with?**  
Pharmacies can use the NHS Service Finder to look-up non-public email and non-public telephone numbers (where available) for general practices. Pharmacies should then confirm with the practice that the identified email address is a suitable as a secure email that they can be used to send notifications or referrals to.

**Can an individual who has a BP check as part of an oral contraceptive service use the results as part of the blood pressure check service too?**   
If a pharmacy contractor is commissioned to deliver any related services e.g., Hypertension case finding (incorporating BP clinic measurement), the contractor may not claim twice for the same activity.

**How will people know about this service?**

Patient-facing promotional materials for community pharmacies, sexual health clinics and GPs will soon be made available including on our [FutureNHS page](https://future.nhs.uk/PharmacyIntegration/view?objectId=29998384). Community pharmacists and local stakeholders are encouraged to have conversations with eligible people.

**How much will I be paid for providing the service?**

Pharmacies providing this service will be eligible for the following payments:

* **Consultation fee**

Payment of £18 per consultation

* **Pharmacy set up costs**

£900 per pharmacy premises paid in instalments as follows:

£400 paid on signing up to deliver the service via the NHSBSA MYS portal.

£250 paid after claiming the first 5 consultations; and

£250 paid after claiming a further 5 consultations (i.e., 10 consultations completed).

**How do I claim payment?**

Data will be recorded via the approved IT system (currently Cegedim or PharmOutcomes) and this will be shared with the NHSBSA as part of normal payment arrangements. An application programming interface (API) has been developed to facilitate automatic transfer of this data into the NHSBSA MYS platform and to improve payment claim accuracy. All payments will be automatic once submitted via MYS. All submissions made will be paid alongside the respective monthly dispensing payment from the NHSBSA.

Please see the drug tariff and service specification (Section 7. Payment Arrangements) for more details.

**What if I want to stop providing the service?**

If a pharmacy contractor wishes to stop providing the service, they must deregister via the MYS platform, giving at least one month’s notice prior to the cessation of the service.

If de-registration occurs, or the pharmacy contractor ceases trading within 30 days of registration, they will not qualify for the £400 set up fee. In this event, if the £400 fee has already been paid to the contractor, this money will be claimed back.