Public Health Agreement For Contraceptive Implants in Primary Care

1STApril 2023 to 31st March 2024

BETWEEN Surrey County Council **AND** t

Service Specification for the provision of Contraceptive Implants

1.0 Introduction

- 1.1. All practices are expected to provide essential and those additional services they are contracted to provide to all their patients. This specification outlines the more specialised services to be provided.
- 1.2. This specification outlines the more specialised care being offered above that normally provided through essential and additional services that General Medical Services are contracted to provide. No part of the specification by commission, omission or implication defines or redefines essential or additional services.
- 1.3 The services will be reviewed on an annual basis.
- 1.4 In the delivery of any services commissioned on behalf of the Council, Providers must demonstrate awareness and be responsive to the accessibility and needs of underserved groups in attempting to access services.
- 1.5 As part of delivery of this service,
 - anonymised activity data may be shared with the local Place/CCG to support understanding of and improvement in provision.
 - practices will receive information on related local public health services relevant to their patients

2.0 Airms

Ensure that Subdermal Contraceptive Implants (SDI) procedures are provided by practices to patients in line with the NICE guidance CG30 on Long-Acting Reversible Contraception (2005) Updated July 2019.

Offer choice of provider to patients.

Provide equitable provision

Relevant clinical history, examination findings, appropriate discussion e.g., failure rates, risks, side effects etc and test results. Follow up arrangements.

- (a) Sterile packs from a local CSSD
- (b) Disposable sterile instruments
- (c) Approved sterilisation procedures that comply with national guidelines. Medical Devices Directive (93/42/EEC)

5.0 Patient Consent

5.1 In each case the patient should be fully informed of the treatment options and the treatment proposed. It would be considered best practice to obtain written consent for the procedure to be carried out and the completed consent form should be filed in the

6.0 Skills, Training and Accreditation Requirements

6.1

6.16.1 Clinicians undertaking these procedures should have undertaken appropriate **training**. This involves:

a demonstration of skills involved in counselling for implants knowledge of issues relevant to implant 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 (FSRH)/Royal College of Nursing (RCN)

assessment of competence by a Faculty/RCN approved assessor.

This should be based on modern, authoritative medical opinion, for example, the current requirements set down by the FSRH for the letter of competence in subdermal implants (LoC-SDI-IR) or RCN guidance on insertion and removal of subdermal implants together with RCN Accreditation. They should provide evidence of maintaining skills, for example byor Dc/4(ex)13(ampl)4(e by)10(or)9(Dc/4(ex)13(ampl)4(e by)10(or)

7.0 Referrals via the Buddy Scheme

This Public Health Agreement is available under the Buddy Scheme.

- 7.1 An additional £10.28 admin fee (as per the Buddy Scheme PHA) per patient will be paid if the patient is referred for the procedure via the buddy scheme to a clinician in another practice who is providing the actual service. The fee will only be paid where the providing clinician has signed a Buddy Scheme Agreement and has committed to providing this service under the scheme. This fee includes booking appointments and writing back to the referring practice with details /outcome from the consultations. See the buddy scheme specification, available from the public health team for more details.
- 7.2 If a patient is seen following a referral and the procedure is unsuitable the practice must ensure that these encounters are appropriately read coded and reported back to the original referring practice.
- 7.3 If the practice only provides contraceptive implants, it should ensure it is aware of other local practices that provide IUCD via the buddy scheme. If this is the preferred option for the patient, the practice should then be able to refer them via this process. Details of practices providing IUCD procedures via the buddy scheme is available by emailing Publichealthclaims@surreycc.gov.uk)

8.0 DNA of appointments

8.1

Appendix 1

Code

Payment Structure Cost Contraceptive Implants

Fitting of Contraceptive Implant £98.53p 61KA / 169553002

Removal of Contraceptive Implant