

**Locally Commissioned Service for**  
**EMERGENCY HORMONAL CONTRACEPTION (EHC)**

<b>Service Name</b>	EMERGENCY HORMONAL CONTRACEPTION
<b>Commissioner Lead</b>	Monica Saiz-Miranda – Public Health Programme and Commissioning Manager
<b>Period of Agreement</b>	1 <sup>st</sup> April 2024 - 31 <sup>st</sup> March 2025
<b>Date of Review</b>	January 2025

## 1. Executive Summary

### 1.1 Overview

- a. Salford City Council is commissioning and funding an Emergency Hormonal Contraception (EHC) service to ensure that residents have ease of access to this provision. This will contribute to achieving a reduction in the number of unintended conceptions to women of all ages.
- b. The Contractor (this is the term used throughout this specification to refer to the provider signing up to provide this locally commissioned service) is required to arrange for an accredited pharmacist to offer information and advice to women attending for emergency hormonal contraception and, if deemed to be appropriate, to issue and supply medication in line with the relevant Patient Group Direction (PGD). Note the PGDs for both Levonorgestrel and Ulipristal will be reviewed in June 2024 by GMICP (Salford Locality team), expiring in June 2025.

## 2. National Context and Local Context

### 2.1 National Context

#### 2.1.1 Overview of commissioning responsibilities

- a. The Health and Social Care Act 2012 divided responsibilities for the commissioning and funding of sexual and reproductive health services between local authorities, Clinical Commissioning Groups (CCGs) and NHS England. The Health and Care Act (2022) abolished clinical commissioning groups (CCGs) and established statutory integrated care systems (ICSs) to take over CCG commissioning functions.
- b. Local authorities are mandated to commission and fund comprehensive open-access sexual and reproductive health services for the benefit of all persons present in their area. Local authorities can commission and fund other services including HIV/STI prevention and support programmes. Local authorities have the lead for improving health and for coordinating efforts to protect public health.
- c. NHS England is responsible for commissioning and funding GP practices to offer routine methods of contraception for their registered patients. GPs are also required to test for HIV/STIs, as and when required, and to offer or arrange for treatment of infections. NHS England is responsible for commissioning and funding HIV treatment and care.
- d. The Greater Manchester Integrated Care Partnership (GMICP) is responsible for commissioning and funding abortion services. The GMICP is also responsible for arranging for patients to obtain permanent methods of contraception/sterilisation procedures including vasectomies and for the promotion of opportunistic STI testing and treatment within general practice.

#### 2.1.2 Public Health Outcomes Framework

- a. The Public Health Outcomes Framework sets out a vision for public health, desired outcomes and the indicators that will be used to monitor how well public health is being improved and protected. The Framework includes five indicators relating to sexual health:
  - o C01: Total Prescribed long-acting reversible contraception excluding injections rate
  - o C02: Under-18 conceptions

- D02: New STI diagnosis (excluding chlamydia in the under 25s)
  - D02: Chlamydia detection rate
  - D07: People presenting with HIV at a late stage of infection
- b. Provision of emergency hormonal contraception (EHC) as described in this specification is expected to contribute to reducing the number of unintended conceptions both in under-18 and women of all ages

## **2.2 Rationale**

- a. Community pharmacies promote health and wellbeing among their local population.
- b. Emergency contraception can be used if a woman has had sexual intercourse without using a regular method of contraception, referred to as unprotected sexual intercourse (UPSI), or if her regular method has failed to reduce her risk of having an unintended conception. Levonorgestrel 1500 micrograms can be used up to 72 hours and Ulipristal acetate 30mg up to 120 hours following UPSI. Intrauterine devices (IUDs) can also be used for the purposes of emergency contraception if fitted within 120 hours of unprotected sex.

## **3. Local Context**

### **4.1 Overview of Sexual & Reproductive Health of residents in Salford**

Improving the sexual health and wellbeing of the population is one of the public health priorities for Salford. Sexual ill-health is a particular issue for Salford with high rates of sexually transmitted infections including HIV and high rates of unintended conceptions.

#### **4.2.1 Sexually Transmitted Infections**

Sexually transmitted infections (STIs) can be passed from an infected person to their partner during sexual intercourse. Rates of most sexually transmitted infections are highest amongst young people aged 16-24; rates of selected sexually transmitted infections are also high amongst men who have sex with men and women and men from black African and black Caribbean communities living in the UK. Salford has one the highest incidence of HIV outside of London and Manchester. Diagnoses of common sexually transmitted infections including chlamydia, gonorrhoea, genital herpes and genital warts are also increasing. Syphilis is also increasing more rapidly than in other areas.

#### **4.2.2 Conceptions / Contraception**

- a. The correct and consistent use of a regular method of contraception is important for the purpose of avoiding an unintended conception. Residents can obtain routine methods including long-acting methods through their GP.

#### **4.2.3 Services**

- a. In Salford, Integrated Sexual Health Services are provided by Manchester University NHS Foundation Trust. They operate community clinics for Tier 1 and 2 services and a 'hub' providing Tier 1, 2 and 3 services. There are separate young person's pathways and access arrangements. For more information, including online booking links see 15.1 Local Services.
- b. Ongoing work is required to promote the use of condoms across the city, in order to control the transmission of sexually transmitted infections, and work to increase the use of all contraception, particularly long-acting reliable methods (implant or coil) to reduce the numbers of unintended conceptions among women of all ages.

- c. Residents can obtain some contraception from general practices and from sexual health clinics. Outreach services will be developed to target vulnerable young people with the new provider, Manchester University NHS Foundation Trust.
- d. Postal self-testing kits are available to order for Salford residents through The Northern Sexual Health service, part of Manchester University NHS Foundation Trust. See [Home Testing Kits – The Northern Sexual Health](#).

## **5. Aims, Objectives and Outcomes**

### **5.1 Aims**

Salford City Council is commissioning and funding an emergency hormonal contraception (EHC) service to promote the use of, and maintain ease of access to, this provision in order to reduce the number of unintended conceptions amongst female residents of all ages and to encourage safer sex and the use of regular methods of contraception.

### **5.2 Objectives**

In this specification, providers (pharmacies) are referred to as 'contractors'. Contractors offering emergency hormonal contraception as detailed in this specification will:

1. Provide information and advice to clients attending for EHC and offer advice on all methods of emergency contraception including the emergency intrauterine device (IUD). In addition, provide information and advice on the probability of failure with a course of action in the event of this occurring.
2. If deemed to be appropriate, to issue and supply free emergency contraceptive in accordance with the relevant Patient Group Direction (PGD). If the client is under 16 years of age, Fraser competencies will be adhered to.
3. Offer advice, referral and signposting about regular methods of contraception including long-acting methods and how to obtain them (through patient's GP or any integrated sexual health services).
4. Offer information and advice about safer sex and the benefits of screening for sexually transmitted infections.
5. Offer free condoms and lubricants (see section 6.5).

### **5.3 Expected Outcomes**

- a. Provision of emergency hormonal contraception as described in this specification is expected to contribute to achieving the following outcomes:
- Reducing the number and rate of unintended conceptions
  - Reducing the number and rate of abortions
  - Reducing the number and rate of under-18 conceptions.
- b. Improving patients' knowledge and understanding of:
- emergency contraception
  - benefits of using a regular method of contraception
  - importance of condoms
  - Uptake of regular methods of contraception (including long-acting reversible methods)

- Improving the uptake of screening for chlamydia and other sexually transmitted infections.

## **6. Overview**

### **Service Description**

#### **6.1 General Requirements**

- a. Salford City Council is commissioning and funding the Contractor to provide emergency hormonal contraception free of charge, to women attending for this provision, in line with requirements set out in this specification.
- b. If the supply and administration of EHC is considered to be appropriate, the most clinically appropriate medication should be supplied in accordance with the PGDs issued by Salford City Council. In the absence of other considerations, Levonorgestrel 1500 microgram tablet should be supplied if a patient presents within 72 hours of unprotected sexual intercourse (UPSI), whereas Ulipristal acetate 30 milligram tablet should be supplied if a patient presents between 72 and 120 hours following UPSI.
- c. The Contractor is required to ensure that the qualified accredited pharmacist:
  1. Determines if the client is competent to consent to treatment
  2. Discusses the full range of emergency contraception including:
    - Products containing Levonorgestrel
    - Products containing Ulipristal acetate
    - Emergency intrauterine device (IUD)and signposts / refers to other services, if required
  3. Discusses the effectiveness of emergency contraception and the benefits, risks, and possible side effects of the chosen method
  4. Refers to the Patient Group Direction(s) to determine if it is appropriate to issue emergency hormonal contraception - including:
    - Inclusion and exclusion criteria
    - Cautions
    - Drug interactions
  5. Refers to the Patient Group Direction(s) for details of the medication – including:
    - Dose and quantity to be issued and supplied
    - Drug interactions
- d. The Contractor is also required to ensure that the pharmacist:
  1. Discusses the benefits of using a regular method of contraception for protection from an unintended conception and signposts / refers the client to their GP or a sexual and reproductive health clinic.
  2. Discusses the benefits of the consistent use of condoms for protection from sexually transmitted infections and, if deemed appropriate, to offer the client a supply of condoms (see 6.5)

3. Discusses the importance and benefits of regular screening for sexually transmitted infections and signposts / refers the client to sexual and reproductive health clinic if symptomatic or concerned.
  4. Discusses the benefits of regular screening for chlamydia (16–24 year olds), particularly following unprotected sex and on change of partner. Patients can also be signposted to sexual health services or GPs.
- e. The Contractor is required to ensure that consultations occur in a designated room or area. The designated room or area should meet the relevant guidelines and should enable the conversation between the pharmacist and the client to remain confidential.
  - f. The Contractor is required to adhere to national and local guidelines for offering sexual health advice and treatment to young people including the requirement to assess Fraser competence.
  - g. The Contractor will ensure compliance with local policies and procedures for safeguarding children and vulnerable adults.
  - h. The Contractor is required to promote the free emergency hormonal contraception service.

## **6.2 Data collection**

- a. The Contractor is required to ensure that, wherever possible, for all clients attending for emergency hormonal contraception, that a minimum of first 4 digits postcode data is collected and recorded on PharmOutcomes. Non-provision of this information should not preclude a patient from accessing emergency contraception.

## **6.3 Inclusion and exclusion criteria**

### **6.3.1 Emergency hormonal contraception**

- a. The Contractor is responsible for ensuring that emergency hormonal contraception is supplied in accordance with the inclusion and exclusion criteria detailed in the Patient Group Direction(s).

## **6.4 Referral sources and processes**

- a. The Contractor is required to accept self-referrals and referrals from other healthcare professionals
- b. The Contractor is required to signpost or refer clients to other relevant services, as and when required – e.g. sexual and reproductive health services, including supporting online booking if necessary.

## **6.5 Condoms**

- a. Pharmacies should hold a supply of free condoms to offer women accessing emergency hormonal contraception. Youth Services at the Beacon centre in Salford have a supply of free condoms which can be collected by contractors and offered to women accessing emergency hormonal contraception. We would request pharmacies to support if it is possible. If there are any issues with collecting condoms, please contact PHSecretary@salford.gov.uk as delivery is sometimes possible.

## **6.6 Pregnancy Testing**

- a. If the patient is suspected to be or there is a risk that they are pregnant, a pregnancy test should be provided prior to administering emergency contraception. The commissioner will reimburse the contractor for this test as described in this specification.

## **7. Governance and Operation**

### **7.0 Clinical Governance**

#### **7.1 General Requirements**

a. The Contractor is required to ensure compliance with the requirements for clinical governance set out in The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013<sup>1</sup> including to:

1. Design and implement a clinical effectiveness programme<sup>2</sup>
2. Design and implement a risk management programme – to include:
  - Production and use of standard operating procedures for – for instance:
    - Dispensing drugs and appliances
    - Procurement, storage and handling of stock
    - Maintenance of equipment
    - Processes for reporting incidents
    - Processes for disposing of clinical and confidential waste
    - Processes for responding to and reporting safeguarding concerns
3. Design and implement a clinical audit programme
4. Design and implement an information governance programme – to include:
  - Ensuring that data and personal information is collected and recorded in accordance with the approved particulars for information management
5. Design and implement a staffing / staff management programme – to include:
  - Ensuring that all members of staff (and locums) involved in the operation of the emergency hormonal contraception scheme are competent and have the relevant qualifications and accreditations
  - Ensuring that members of staff (and locums, if appropriate) can obtain training and undertake continuing professional development
6. Design and implement a patient / public involvement programme – to include:
  - Promotion of Emergency Contraception programme
  - Implementation of processes to collect and respond to feedback or complaints
7. Design and implement a premises improvement programme – to include:
  - Ensuring the premises are maintained in accordance with the approved particulars for premises

b. The Contractor is required to have a clinical governance lead for the pharmacy.

#### **7.2 Clinical skills and competencies**

a. The Contractor is required to ensure that all pharmacists involved in the provision of emergency hormonal contraception have:

1. Relevant qualifications, registrations and / or accreditations

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<sup>1</sup> See: <https://www.legislation.gov.uk/uksi/2013/349/schedule/4/made?view=plain>

2. Completed relevant learning – for example:
    - CPPE emergency contraception module<sup>3</sup>
    - CPPE safeguarding children and vulnerable adults e-learning module<sup>4</sup>
    - CPPE PGD e-learning module<sup>5</sup>
  3. Self-assessed their knowledge, understanding, skills and confidence, and have self-declared their competence to issue and supply emergency hormonal contraception in line with the relevant PGDs:
    - Pharmacists are required to complete the CPPE declaration of competence form for emergency contraception<sup>6</sup> prior to offering this provision for the first time
    - Pharmacists are required to renew their personal declaration of competence at no more than three-year intervals.
- b. The Contractor is required to ensure that all pharmacists (including locums) have completed and signed the relevant declaration of competence statement. Copies should be kept on file and made available to the Commissioner on request.
  - c. The Contractor is required to ensure that all pharmacists have signed the PGD and that copies are kept on file.
  - d. The Contractor is required to ensure that each pharmacist has had a Disclosure and Barring Service (DBS) enhanced check. DBS checks should be renewed on a periodic basis in line with best practice guidance.
  - e. The PharmOutcomes online consultation form for the supply and administration of Emergency Contraception must be completed at each consultation and securely kept for the minimum time period as stated in this SLA.

### **7.3 Care Pathway and Protocols**

- a. The Contractor is required to discuss the benefits of using a regular method of contraception with all clients attending for emergency contraception and signpost to other services as follows (see Section 15 for more information on local and national services):
  - Clients should be signposted to their GP or sexual health service for contraception
  - Clients should be signposted to sexual health services for sexually transmitted infection advice or testing or treatment.
  - Clients at risk of HIV should be signposted to order a self-sampling kit online at <https://freetesting.hiv/> or can receive testing at any sexual health service clinic.
  - Clients at risk or living with HIV in Greater Manchester should be signposted to PaSH (Passionate about Sexual Health) for advice and support for them and their families.

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<sup>3</sup> See: <https://www.cppe.ac.uk/programmes//ehc-e-03>

<sup>4</sup> See: <https://www.cppe.ac.uk/services/safeguarding>

<sup>5</sup> See: <https://www.cppe.ac.uk/programmes//ptgpdire-01/>

<sup>6</sup> See: <https://www.cppe.ac.uk/services/docs/commissioners/commissioner%20-%20emergency%20contraception.pdf>



- b. The Contractor will signpost or refer clients who need or could benefit from an emergency intrauterine device (IUD) to a sexual and reproductive health clinic.

#### **7.4 Clinical Incidents and reporting**

- a. Pharmacies have a legal obligation<sup>7</sup> to use an approved incident reporting system. Contractors should record, report, and respond to incidents in a manner that complies with the requirements set out in the approved particulars<sup>8</sup> including but not limited to:

1. Maintaining a patient safety incident log
2. Reporting patient safety incidents to the National Patient Safety Agency (NPSA), via the National Reporting and Learning Service (NRLS)

- b. The Contractor is required, as part of this contract, to inform the Commissioner at Salford of any and all incidents relating to the provision of EHC provision.

#### **7.5 Infection Control**

- a. The Contractor will maintain their premises to a high standard of cleanliness in order to minimise the risk of healthcare acquired infection for staff and customers.

#### **7.6 Disposal of Waste**

- a. The Contractor is required to dispose of clinical and other waste in a safe and lawful manner. See: [Health Technical Memorandum 07-01](#)

### **8.0 Information Governance**

#### **8.1 General requirements**

- a. The Contractor must be compliant with the requirements set out in the Information Governance Toolkit. The current version can be found on the website of NHS Digital<sup>9</sup>. The associated assessment should be completed on an annual basis.
- b. The Contractor is required to have an appropriate range of policies, procedures and processes, to secure and protect the personal information of clients in line with the requirements of the law.
- c. The Contractor must ensure that all members of staff (including locums) are aware of their responsibilities in relation to the protection of personal information.

#### **8.2 Confidentiality**

- a. The Contractor is required to have a confidentiality code of conduct (or similar).
- b. The Contractor is required to ensure that consultations occur in a designated room or area (see 6.1.e). The room or area should allow for the conversation between the pharmacist and the client to remain confidential.
- c. The Contractor is required to ensure that all members of staff (and locums) know and understand their responsibilities in relation to maintaining confidentiality and are able to explain the code of conduct (or similar) to clients.

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<sup>7</sup> <https://www.legislation.gov.uk/uksi/2013/349/schedule/4/made?view=plain>

<sup>9</sup> See: <https://www.gov.uk/government/publications/clinical-governance-approved-particulars>

<sup>9</sup> See: <https://digital.nhs.uk/data-and-information/looking-after-information/data-security-and-information-governance/data-security-and-protection-toolkit>

### **8.3 Recording**

- a. Salford City Council requires the Contractor to use PharmOutcomes to record consultations. The Contractor is also required to use PharmOutcomes for the purposes of audit and for generating and submitting invoices to Salford City Council.

## **9. Safeguarding**

### **9.1 General Requirements**

- a. The Contractor is required to develop, adopt and implement policies and procedures for safeguarding children and vulnerable adults. These should be developed with reference to the policies and procedures of the Salford Safeguarding Board which are built in to the PharmOutcomes template.
- b. The Contractor is required to ensure that all members of staff (including locums) are aware of their safeguarding duties and responsibilities. Staff should receive initial and refresher training.
- c. The Contractor is required to ensure that all members of staff (including locums) know how to record concerns and refer to local safeguarding teams. Further information can be found on PharmOutcomes and through the links at Section 15.

### **9.2 Child Sexual Exploitation**

- a. The sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of performing, and/or others performing on them, sexual activities
- b. In all cases those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources
- c. In order to improve the effectiveness of safeguarding and protecting children and young people from this form of abuse the Contractor is expected to follow the Greater Manchester Sexual Health (SH) Child Sexual Exploitation (CSE) checklist as a prompt to ensure a series of key questions are asked during the general consultation process with all under 18 and vulnerable clients if you think there is any risk / or suspect CSE. It is vital that all staff (including non-clinical and reception staff) have access to and complete CSE training to ensure they are fully able to recognise the signs of CSE and act according to the relevant pathways and procedures.

## **10.0 Premises**

### **10.1 General Requirements**

- a. Salford City Council notes that the Contractor has a legal requirement to develop and implement a premises standards programme. NHS England requires contractors to ensure that their programme sets out how the approved particulars<sup>10</sup> will be implemented
- b. The Contractor is required to have a confidential consultation room (or area) and this should be used for consultations for emergency contraception. It must:
  - b. Ensure that there is sufficient space for customers, patients and staff members
  - c. Be kept clean and in good repair

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<sup>10</sup> See: <https://www.england.nhs.uk/publication/approved-particulars/>

- d. Be laid out and organised for the purpose of consulting or providing a healthcare service
- e. Be laid out and organised so that, once a consultation has commenced and is in progress, other members of staff (or customers) cannot interrupt the consultation or enter the room / area without permission
- f. Not be used for storage of stock (other than stock that could be used or supplied during a consultation)

## **11.0 Partnership Working and Relationships**

### **11.1 Integration**

- a. The Contractor should note that Salford City Council and GMICP have contracted Salford Together Local Care Organisation to deliver out-of-hospital health and social care services. The responsibilities for sexual and reproductive health remain with Salford City Council, with joint oversight from GMICP.

### **11.2 Relationship with other services**

- a. The Contractor is required to develop and maintain links with other relevant services including:
  - Manchester University NHS Foundation Trust (including a 'hub' at Lance Burn Health Centre)
  - Integrated Young People's Services
  - GP practices
  - Pharmacies

### **11.3 Interdependencies**

- a. The Contractor should note the following interdependencies:
  1. GMICP is responsible for authorising and issuing Patient Group Directions on behalf of Salford City Council.
  2. Pinnacle Health Partnership is the operator of PharmOutcomes. Salford City Council requires our contractors to use PharmOutcomes to record consultations.
  3. The Centre for Pharmacy Postgraduate Education (CPPE) offers e-learning for pharmacists and technicians involved in the provision of emergency hormonal contraception and operates the Declaration of Competence scheme.

## 12. Performance and Outcomes

### 12.1 Outcomes Monitoring

- a. Salford City Council aims that provision of the emergency hormonal contraception scheme will contribute to achieving the following outcomes which are regularly monitored:

	Outcome	Indicators	Source
1	Reduction in the number of unintended conceptions	Rate and number of abortions Rate and number of second or subsequent abortions	DHSC Abortion Statistics
2	Reduction in the number of under-18 conceptions	Number and rate of under-18 conceptions	ONS Conception Statistics

### 12.2 Service Monitoring

- a. Salford City Council requires the Contractor to record all consultations using PharmOutcomes and to submit invoices through PharmOutcomes.
- b. Salford will use the data for the purposes of monitoring provision, audit and for post-payment verification

	Indicator	Source	Frequency
1	Number of consultations for emergency contraception	PharmOutcomes	Commissioners will extract from PharmOutcomes on a quarterly basis
2	Number of clients issued and supplied with emergency contraceptive pills	PharmOutcomes	Commissioners will extract from PharmOutcomes on a quarterly basis

### 12.3 Contract monitoring and compliance

- a. NHS England is responsible for monitoring compliance with the NHS Community Pharmacy Contractual Framework
- b. Salford City Council will monitor compliance with the terms and conditions set out in this contract and may make arrangements for visits to contractors when appropriate.

### 12.4 Complaints, compliments and suggestions

- a. The Contractor is required to have a process for receiving, reviewing, and responding to complaints and suggestions
- b. The Contractor will inform the Commissioner in the event that a complaint is received about the emergency hormonal contraception scheme.

## 13. Remuneration

### 13.1 Fees

a. Salford City Council has set the following fees:

Emergency Hormonal Contraception		
	Element of services	Fee
A1	EHC Consultation	£10 per completed consultation
A2	Drug costs	Current drug tariff plus VAT @ 5% Levonorgestrel 1.5mg Ulipristal acetate 30mg
A3	Pregnancy Test	£5 per test plus VAT @ 20%

- c. Salford City Council reserves the right to revise fees, with 3 months' notice to providers in order that they may withdraw from the service if required.
- d. Salford City Council will collate activity data from PharmOutcomes on a quarterly basis for EHC consultation, Drug Costs and Pregnancy Tests and reimburse the provider accordingly as a block.
- e. All contractors must record activity 'live' on PharmOutcomes during the intervention with patients. If contractors try to complete interventions retrospectively on PharmOutcomes they may not have asked all of the questions necessary at the time of the intervention to complete the web form correctly. Furthermore, there is a pathway within PharmOutcomes that guides the Contractor and the patient, together, through the service. This includes safeguarding assessments and clinical decision points that ensure the best service for the patient and the right signposting and dispensing of medication (if appropriate).

### 13.2 Volume

- a. Salford City Council is not setting a minimum or maximum number of consultations. However, the Commissioner reserves the right to limit or suspend the service on a temporary basis in the event that demand for provision exceeds the available budget.

## 14. Guidelines and Resources

### 14.1 National Guidelines

#### General

[Department of Health \(2013\) 'A Framework for Sexual Health Improvement in England'](#)

'Sexual Health: Clinical Governance – Key principles to assist service commissioners and providers to operate clinical governance systems in sexual health services', Department of Health, 2013

## **Emergency Contraception**

Faculty of Sexual and Reproductive Health:

[FSRH Clinical Guideline: Emergency Contraception \(March 2017, amended July 2023\) - Faculty of Sexual and Reproductive Healthcare](#)

[Community Pharmacy Contractual Framework: 2019 to 2024 - GOV.UK \(www.gov.uk\)](#)

### **14.2 National resources**

#### **a. National Sexual Health Information Line**

- a. Members of the public can call the National Sexual Health Helpline on 0300 123 7123 between 9am and 8pm, Monday to Friday, 11am – 4pm Saturday and Sunday.

#### **b. Family Planning Association (FPA)**

- Providers of sexual and reproductive health services can register for a free account. Account holders can download patient information leaflets and other resources. See: <https://www.fpa.org.uk/medical-professional/resources/>

### **15.0 Local Guidelines and Services**

#### **15.1 Local Services**

- a. The Northern Sexual Health: [Sexual health services in Salford](#)

The Northern Sexual Health booking service (through Personal Health Record): [The Northern Sexual Health – Home](#)

- b. PaSH - HIV prevention, care and support in Greater Manchester: <https://www.gmpash.org.uk/hiv>

#### **15.2 Safeguarding**

- a. Actions to be carried out when you are worried a child is being abused can be found at <http://greatermanchesterscb.proceduresonline.com/>

- b. GM Protocol on Working with Sexually Active People under the age of 18 years [http://greatermanchesterscb.proceduresonline.com/chapters/p\\_work\\_sexually\\_act\\_yp.html](http://greatermanchesterscb.proceduresonline.com/chapters/p_work_sexually_act_yp.html)

#### **15.3 Point of contact**

- a. The operational contact for the agreement at Salford City Council is Monica Saiz-Miranda.