



TRAFFORD COUNCIL

Service Specification

For the Locally Commissioned Service:

SEXUAL HEALTH PREVENTION SERVICES

Service	Sexual Health Prevention Services
Authority Lead	Jo Bryan
Provider Lead	Rebecca Chadwick
Period	01/04/26 – 31/03/2027
Date of Review	Nov 2025

1. Executive Summary

1.1 Overview

- a. The Pharmacy Contraception Scheme (PCS) is a nationwide scheme through which community pharmacies can supply oral contraception.

Eligible people can start or continue taking the oral contraceptive pill via a pharmacy consultation, rather than a GP or sexual health clinic.

Since 1 December 2023 the service expanded to include initiation of the pill (pharmacy supplying a first prescription) in participating pharmacies.

- b. From October 2025 EHC will be made free of charge at all pharmacies across England under the NHS.

It will be made available from pharmacies who have signed up to deliver the national Pharmacy Contraception Service.

The aim of the scheme is to promote equity of access, ensuring that people can obtain emergency contraception when needed, regardless of financial means or location.

- c. The Provider (this is the term used throughout this specification to refer to the pharmacy signing up to provide this locally commissioned service) is required to arrange for an accredited pharmacist to offer information and advice to individuals attending for sexual health prevention services and, if deemed to be appropriate, to issue and supply medication in line with the relevant Patient Group Direction or Summary of Product Characteristics (SPC).

- d. The Provider will provide safer sex advice to all people accessing this service.

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. Since the introduction of the Health and Care Act 2022, Integrated Care Boards (ICBs) superseded CCGs on 1 July 2022 and have taken over their commissioning functions.

- b. Local authorities are responsible for commissioning and funding the provision of most but not all sexual and reproductive healthcare provision. 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.
- d. Integrated Care Boards (ICBs) are responsible for commissioning and funding abortion services and for arranging for patients to obtain permanent methods of contraception, including sterilisations and vasectomies. ICBs are also responsible for commissioning gynaecology and the non-sexual health elements of psychosexual health services.

2.1.2 Public Health Outcomes Framework

- a. The [Public Health Outcomes Framework](#) sets out a vision for public health. The Framework includes five indicators relating to sexual health:
 - 1. [Indicator C01](#): Total prescribed LARC excluding injections rate per 1,000
 - 2. [Indicator C02a](#): Under-18s conception rate per 1,000
 - 3. [Indicator C02b](#): Under 16s conception rate per 1,000
 - 4. [Indicator D02a](#): Chlamydia detection rate per 100,000 among 15-24-year-olds
 - 5. [Indicator D02b](#): New STI diagnoses (excluding chlamydia diagnoses in under-25-year-olds) per 100,000
- b. Participation in the [SH-24](#) Chlamydia and Gonorrhoea (C&G) Screening Support Service as described in 1.1c and d of this specification will contribute to controlling and preventing the transmission of chlamydia and gonorrhoea.

2.1.3 National Chlamydia Screening Programme (NCSP)

- a. Genital chlamydia infection is the most commonly diagnosed bacterial sexually transmitted infection in the UK. Prevalence of the infection is highest in sexually active women aged 16-19 and men aged 20-24.
- b. Chlamydia often has no symptoms and opportunistic screening of asymptomatic young people is considered the best approach for detecting and treating this infection. Untreated infection can have serious long-term consequences including pelvic inflammatory disease, ectopic pregnancy, and tubal factor infertility.
- c. The National Chlamydia Screening Programme ([NCSP](#)) in England was established in 2003. The programme aims to prevent and control chlamydia through early detection and treatment of asymptomatic infection, so reducing onward transmission and the consequences of untreated infection. In 2021, the NCSP shifted its focus to decreasing the harms from untreated chlamydia infection, which primarily occurs in young women aged 15-24-years-old. In 2022, the UK Health Security Agency introduced a female-only target chlamydia detection rate for local authorities of at least 3,250 per 100,000 in the 15–24-year-old female population.

2.2 Rationale

- a. Community pharmacies can promote health and wellbeing among their local population which includes integrating with existing health and care pathways and other activities to encourage more people to use their services.

b. Community pharmacies offer accessible healthcare because:

1. Appointments are typically unnecessary
2. Opening hours are long
3. Many staff are from the local community and understand local culture and social norms
4. Able to offer advice on healthy behaviours and onward referral to other services, if appropriate

c. The consistent and correct use of regular contraception is the best method for sexually active people to avoid an unintended conception. There is a correlation between high uptake of reliable methods of contraception and low rates of unintended conceptions among women of all ages and low rates of under-18 conceptions.

3. Local Context

3.1 Overview of Commissioning for Trafford

- a. NHS GM Integrated Care Board and Trafford Council are working in partnership to commission selected health and care services in Trafford, including sexual and reproductive health services. The current contracting responsibility is held by Trafford Council.
- b. Trafford Council has contracted GP practices and pharmacies to deliver health and care services in non-hospital settings.

3.2 Overview of Sexual & Reproductive Health of residents in Trafford

- a. Improving the sexual health and wellbeing of the population is one of the public health priorities for Trafford. Sexual ill-health is a particular issue for Trafford with high rates of sexually transmitted infections (STIs) including HIV and a high rate of unintended conceptions in some populations.

3.2.1 Sexually Transmitted Infections and HIV

- a. STIs can be passed from one person to another during unprotected vaginal, anal or oral sex, genital contact, and through the sharing of sex toys. Several infections can lead to long-term health problems if not detected and treated early. Some infections such as HIV can be managed but not cured. The correct and consistent use of condoms and other prevention tools are important to control and prevent the transmission of STIs. Regular testing for STIs is essential to maintain good sexual health.
- b. Rates in 2024
 - Overall, the rate of new STIs diagnoses (excluding chlamydia diagnoses in under 25-year-olds) in Trafford was 372 per 100,000, compared to 482 per 100,000 in England.
 - The chlamydia detection rate for females aged 15-24-years-old in Trafford was 1,468 per 100,000 compared to 1,589 in England.
 - The proportion of 15-24-year-olds screened for chlamydia was 16.7% in Trafford compared to 18% in England.
 - The gonorrhoea diagnostic rate was 87 per 100,000 in Trafford compared to 124 in England.

3.2.2 Conceptions and 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 contraceptive pills from their GP and community pharmacy. Sexual and reproductive health services offer the full range of contraceptive methods. There has been a gradual rise in the proportion of women opting to use a long-acting reversible contraception (LARC) method, such as the contraceptive implant.
- b. In 2023, the total prescribed LARC rate (excluding injections) for Trafford was 45.4 per 1,000 females aged 15-44 years, similar to the England average of 43.5.

In 2023, the percentage of under 25s choosing LARC (excluding injections) was 34.2%, similar to the England average of 35.0%.

Of those women under 25 years who had an abortion in that year, the proportion who had previously had an abortion was 32.8%, similar to the England average of 29.7%. -This indicator is no longer on fingertips.
- c. In 2022, the conception rate for under-18s was 6.7 per 1,000 females aged 15-17 years, below the England average of 13.9. While the conception rate for under-16s was 1.0 per 1,000 females aged 13-15 years, similar to the England average of 2.2

3.3 Locally Commissioned Sexual Health Services

- a. Trafford, along with Stockport and Tameside commission [SH:24/Locala](#) to provide a Chlamydia and Gonorrhoea (C&G) Screening Support Service to contribute to the prevention and control of sexually transmitted infections among young people under the age of 25 years.
- b. The service aims to:
 - Ensure that asymptomatic young individuals (cis women, cis men, trans men, tran and non-binary people assigned female at birth) living in Stockport, Tameside and Trafford can obtain on an opportunistic basis a screen for chlamydia and gonorrhoea via an online ordering system. In Trafford this service includes young males and is open to any gender.
 - Ensure that residents diagnosed with an infection receive treatment for simple chlamydia or are referred to the local sexual health service (for gonorrhoea and complex chlamydia).

4. Aims, Objectives and Outcomes

4.1 Aims

- a. Trafford Council is commissioning and funding a sexual health prevention service to reduce the number of unintended conceptions amongst female residents of all ages, prevent the transmission of chlamydia and gonorrhoea in young people, and encourage safer sex and the use of regular methods of contraception.

4.2 Opportunistic screening for chlamydia and gonorrhoea

- 4.2.1** SH:24 and Locala operate an opportunistic Young People’s Chlamydia and Gonorrhoea (C&G) Screening Support Service for asymptomatic young people on behalf of Trafford Council. SH:24 provide the online home test kit service and Locala provide the community outreach service.
- 4.2.2** Providers can offer an online and/or provide a physical chlamydia and gonorrhoea home test kit to Trafford residents aged 16-24 years old attending for emergency contraception, oral contraception and any other opportunistic chances.
- 4.2.3** Online home test kits cover screening for chlamydia and gonorrhoea can be ordered online via [SH:24](#). The order process also includes advice and guidance to help people understand their risk of STIs and pregnancy.
- 4.2.4** Providers can sign up to be a distribution site to distribute physical chlamydia and gonorrhoea home test kits to Trafford residents aged 16-24 years via [SH:24/Locala](#).
- 4.2.5** The Commissioner will reimburse the Provider for the provision of a physical home test kit to EHC clients who are Trafford residents and aged 16-24 years only, as described in Section 13.1 of this specification.
- 4.2.6** The provider will signpost Trafford residents aged 16-24 years to [SH:24](#) for online chlamydia and gonorrhoea home test kits and/or offer a chlamydia and gonorrhoea physical home test kit if they are asymptomatic and if the minimum advisable time (2 weeks) has passed since UPSI.
- 4.2.7** Two weeks is the minimal advisable time between the last sexual contact/exposure. This window period ensures that accurate and reliable results can be achieved. Testing too early after exposure risks receiving a negative result when infection may be in the early stages.
- 4.2.8** Where appropriate, the provider will refer Trafford residents attending the Pharmacy Contraception Service for the fitting of emergency or non-emergency LARCs for Trafford residents aged 55 and under through Trafford’s specialist sexual health service.
- 4.2.9** SH:24/Locala will provide distribution sites with:
- A supply of home test kits
 - Information for staff of distribution sites on how to deliver the test kits (including access criteria) and how to support young people to access the user-activated/click-and-collect kits available at their distribution site. Instructions for use can be found on test kits
 - A list of available venues for Young People to access the C&G Screening Support service and clear pathways/contacts for issues or onward referrals/signposting.
 - A support offer around the delivery of home test kits to address any issues, including gaps in provision and updating contact details. SH:24/Locala will undertake an audit of distribution site activity on a 6-monthly basis to ensure that sites are still active. Where there is low uptake, reasons for this will be reviewed with the Provider.
- 4.2.10** Providers signed up to be a distribution site for physical C&G home test kits must:
- Ensure the patient is over 16 and a resident of Trafford, Stockport or Tameside

- Check the physical home test kits are in date before distributing to clients
- Provide a brief outline to clients on how to use the home test kit

4.2.11 To sign up to be a distribution site and for more information, contact LSHGM@locala.org.uk

4.2.12 Providers must display a poster in their premises to help promote the SH:24/Locala C&G Screening Support Service offer. The poster features a QR code which directs young people to the SH:24 online order form for chlamydia and gonorrhoea home test kits. A physical copy of the promotional poster will be sent to the Provider. A digital copy of the poster can also be found on the online PharmOutcomes service and here:



0994 SH24 Poster
V3.pdf

4.3 LARC Referrals to Specialist Sexual Health Services

The provider can refer emergency and non-emergency LARC referrals to specialist sexual health services. For each referral a payment of £10 will be issued.

4.4 Distribution of Condoms Using C-card Scheme

- a. Trafford runs a C-Card scheme which provides young people aged 13 to 25 with access to condoms and lubricants. Its primary aim is to promote sexual health by encouraging safe practices and offering support and information on sexual well-being.
- b. Talkshop distribute condoms using C-card and under-18 C-Cards following completion of an assessment with people under 18 accessing condoms.
- c. The form covers areas including consent, relationships, family and social relationships and drugs and alcohol. Following completion of the form, Talkshop will distribute condoms to the young person which ensures safeguarding and eligibility of the young person accessing condoms.
- d. Following the completion of the form, the young person will be issued with the C-card.
- e. The provider will issue 6 condoms and 2 lubricants to a young person aged 16-24 who has been issued with a C-card.
- f. For a young person aged 15 and below, the 10 boxes on the C-card will be amended to 5 and the young person should be reviewed after they have requested condoms on 5 occasions. They can also be signposted to Talkshop [Trafford Directory](#) | * [Trafford Talkshop](#) to conduct the review.
- g. Pharmacies in England participating in the Condom Distribution Scheme will receive £1.75 per complete PharmOutcomes transaction for condom supplies to individuals aged 16–24.

5 Outcomes

5.1 Direct Influence on Outcomes

Provision of sexual health prevention services as described in this specification is expected to contribute to achieving the following outcomes:

- a. Reducing the number and rate of unintended conceptions
- b. Reducing the number and rate of abortions
- c. Reducing the number and rate of under-18 conceptions
- d. Reduction in STI rate and increasing the screening rate for chlamydia and other sexually transmitted infections.
- e. Increasing the number of LARCs fitted

5.2 Referral Sources and Processes

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

6. Governance and Operation

6.0 Clinical Governance

6.1 General Requirements

- a. The Provider is required to ensure compliance with the requirements for clinical governance set out in The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013¹ and adhere with the General Pharmaceutical Council standards for registered pharmacies².
- b. The Provider is required to have a clinical governance lead for the pharmacy.

6.2 Care Pathways

- a. As part of the Pharmacy Contraception Service, the provider may signpost to other services as follows in line with the Signposting Essential Service 5³, (see Section 15 for more information on local and national services):
 - Clients can be signposted to their GP or the [Pharmacy Contraception service \(PCS\)](#) for repeat or routine new prescriptions of oral contraceptive pills. Some GPs may also prescribe and insert contraceptive implants, intrauterine devices (IUDs) and

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

² See: <https://www.pharmacyregulation.org/standards/standards-registered-pharmacies>

³ See: <https://cpe.org.uk/national-pharmacy-services/essential-services/signposting/>

contraceptive injections. A list of GPs can be found online [Trafford Directory | Sexual Health Services in Trafford](#)

- Clients can be signposted to [The Northern](#) sexual and reproductive health clinic to obtain other methods of contraception e.g. contraceptive implant, IUD or contraceptive injection.
 - Clients can be signposted to sexual and reproductive health services in any area for sexually transmitted infection advice, testing or treatment [Free and Confidential Sexual Health Services in Greater Manchester \(GMSHN\)](#)
 - Clients aged 16-24 should be provided with a [SH:24/Locala](#) home test kit.
 - Clients at risk of HIV or syphilis can be signposted to order a home test kit online at <https://freetesting.hiv/> or can receive testing at any sexual and reproductive health service clinic.
 - Clients at risk of 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.
- b. The Provider will signpost or refer clients to [The Northern](#) who need or could benefit from an emergency copper intrauterine device (IUD), LARC or complex contraception via Pharmoutcomes.

6.3 Clinical Governance

The Provider is responsible for ensuring that sufficient arrangements for clinical governance are in place to allow for the provision of safe, effective services delivered to a high standard.

The Provider is required to adhere to Department of Health guidance and is required to have processes and procedures in place for reporting serious incidents and patient safety incidents. It is expected that all serious incidents and patient safety incidents are dealt with in line with organisational and NHS Greater Manchester Integrated Care Board procedures. It is a contractual requirement for the Provider to follow the [Patient Safety Incident Response Framework \(PSIRF\)](#) under the [NHS Standard Contract](#).

Pharmacies have a legal obligation⁴ to use an approved incident reporting system. Providers should record, report, and respond to incidents in a manner that complies with the requirements set out in the approved particulars⁵ including but not limited to:

- a. Maintaining a patient safety incident log
- b. Reporting patient safety incidents to an approved clinical incident reporting system. Although not mandated, NHS England advises all incidents to be reported via the Learn from Patient Safety Events (LFPSE) service; providers can register for an account via the [online LFPSE service](#) or through an LFPSE-compliant Local Risk Management System (LRMS).

The Provider is required, as part of this contract, to inform the Commissioner at Trafford Council of any and all incidents relating to the provision of EHC provision [which directly or indirectly involves a Service User, as soon as reasonably possible of the 'incident'].

6.4 Infection Control

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

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

- a. The Provider will maintain their premises to a high standard of cleanliness in order to minimise the risk of healthcare acquired infection for staff and customers.
- b. The Provider will abide by any national regulation and process to reduce the spread of infection in the event of a pandemic, or epidemic such as COVID-19.

6.5 Disposal of Waste

- a. The Provider is required to dispose of clinical and other waste in a safe and lawful manner in line with NHS England's Health Technical Memorandum (HTM 07-01) guidelines⁶.

7 Information Governance

7.1 General requirements

- a. The Provider 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 (also known as the Health and Social Care Information Centre)⁷. The associated assessment should be completed on an annual basis.
- b. The Provider 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 Provider must ensure that all members of staff (including locums) are aware of their responsibilities in relation to the protection of personal information.
- d. The provider pharmacy shall be the independent Data Controller of personal data processed by the provider pharmacy in providing Services under this Agreement (for example, patient details, medical history and treatment details).

7.2 Confidentiality

- a. The Provider is required to have a confidentiality code of conduct (or similar).
- b. The Provider is required to ensure that consultations occur in a designated room or area. The room or area should allow for the conversation between the pharmacist and the client to remain confidential.
- c. The Provider 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.

7.3 Recording

- a. Trafford Council requires the Provider to use PharmOutcomes to record consultations.
The Provider is also required to use PharmOutcomes for the purposes of audit and for submitting auto-generated invoices to Trafford Council.

OR

- 7.4.1** For data collection purposes and service monitoring, the provider will collect:

⁶ See: <https://www.england.nhs.uk/publication/management-and-disposal-of-healthcare-waste-htm-07-01/>

⁷ See: <https://digital.nhs.uk/data-and-information/looking-after-information/data-security-and-information-governance>

- Postcode (first 3/4 digits)
- Age
- Gender
- Ethnicity

8. Safeguarding

8.1 General Requirements

- a. The Provider 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 Trafford Strategic Safeguarding Partnership (TSSP) which are built into the PharmOutcomes template.
- b. The Provider 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 for safeguarding adults and children:
 1. [Safeguarding Adults Level 1 \(elearning for healthcare\) : CPPE](#)
 2. [Safeguarding Children Level 1 \(elearning for healthcare\) : CPPE](#)
- c. The Provider is required to ensure that all members of staff (including locums) know how to record concerns and refer to local safeguarding teams. Further information and local safeguarding contacts in Trafford can be found in Section 15.2 and on PharmOutcomes.

8.2 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 Provider is expected to follow the Follow TSSP sexual exploitation information: <https://www.trafford.gov.uk/residents/children-and-families/Child-Exploitation.aspx>.
- d. For details of local child safeguarding contacts in Trafford, see Section 15.2.

9. Premises

9.1 General Requirements

- a. Trafford Council notes that the Provider has a legal requirement to develop and implement a premises standards programme. NHS England requires Providers to ensure that their programme sets out how the approved particulars⁸ will be implemented.
- b. The Provider is required to have a confidential consultation room (or area) and this should be used for consultations.. The area must:
 1. Ensure that there is sufficient space for customers, patients and staff members
 2. Be kept clean and in good repair
 3. Be laid out and organised for the purpose of consulting or providing a healthcare service
 4. 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
 5. Not be used for storage of stock (other than stock that could be used or supplied during a consultation)
 6. Display a poster of SH:24/Locala's C&G Screening Support Service home test kit offer for 16-24 year olds (see Section 5.1 above).

10. Partnership Working and Relationships

10.1 Relationship with other services

- a. The Provider is required to develop and maintain links with other relevant services including:
 - The Northern Sexual Health, Contraception and HIV Service is responsible for offering clinical advice for Trafford residents about contraception. It should be noted that residents can attend any sexual and reproductive health service in England free of charge.
 - Young People's Services such as Trafford Talkshop
 - SH:24/Locala are responsible for operating the opportunistic Chlamydia and Gonorrhoea (C&G) Screening Support Service for asymptomatic young people. Pharmacies can order home test kits directly from [SH:24/Locala](#) (see Section 5.1).
 - GP practices
 - Other pharmacies

10.2 Interdependencies

- a. The Provider should note the following interdependencies:

⁸ See: <https://www.england.nhs.uk/long-read/approved-particulars-premises/>

1. The Director of Public Health or Chief Executive at Trafford Council is responsible for the organisational authorisation and issuing of Patient Group Directions.
2. Pinnacle Health Partnership is the operator of PharmOutcomes. Trafford Council requires our Providers to use PharmOutcomes to record consultations.
3. Central and North West London NHS Foundation Trust is the operator of the NHS Freedoms Shop. MHCC will set up an account with Freedoms to allow all Providers to order supplies of condoms.
4. Trafford chlamydia and gonorrhoea screening and treatment providers.

11. Performance and Outcomes

11.1 Outcomes Monitoring

- a. Trafford Council anticipates that provision of sexual health prevention will contribute to achieving the below outcomes which will be regularly monitored:

	Outcome	Indicators	Source
1	Reduction in the number of chlamydia and gonorrhoea infections in 16-24 year olds	Number of infections recorded in 16-24 year olds	GUMCAD STI Information from SHS
2	Reduction in the number of unintended conceptions	Rate and number of abortions Rate and number of second or subsequent abortions	DH Abortion Statistics

	Indicator	Source	Frequency
1	Number of Trafford pharmacies signed up to be distribution sites for chlamydia and gonorrhoea home test kits.	SH:24/Locala	SH:24/Locala will provide commissioners with order data on a quarterly basis
2	Number of physical chlamydia and gonorrhoea home test kits supplied by Trafford pharmacies to clients aged 16-24 years who are Trafford residents.	PharmOutcomes	SH:24/Locala will provide commissioners with order data on a quarterly basis
3	Number of clients who are aged 16-24 years and a Trafford resident signposted by Trafford pharmacies to the online Young People's Chlamydia and Gonorrhoea Screening Support Service.	PharmOutcomes	SH:24/Locala will provide commissioners with order data on a quarterly basis
4	Number of Trafford residents referred for a LARC insertion	PharmOutcomes and The Northern	Commissioners will extract from PharmOutcomes on a quarterly basis and The Northern will provide quarterly data on LARC referrals into the service.
5	Number of condoms distributed as part of the C-card scheme	PharmOutcomes	Commissioners will extract from PharmOutcomes on a quarterly basis

11.2 Service Monitoring

- a. Trafford Council requires the Provider to record all consultations using PharmOutcomes and to submit invoices.
- b. Trafford Council will use the data for the purposes of monitoring provision, audit and for post-payment verification.
- c. The following indicators will be monitoring as part of the sexual health prevention service:

11.3 Contract monitoring and compliance

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

11.4 Complaints, compliments and suggestions

Service Providers must maintain and operate a complaints procedure in compliance with the [Clinical Guidance Framework](#), in compliance with the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009, for the handling and consideration of any complaints.

The Service Provider must ensure that:

- complaints are dealt with efficiently;
- complaints are properly investigated;
- complainants are treated with respect and courtesy;
- complainants receive, so far as is reasonably practical – complainants receive a timely and appropriate response;
 - assistance to enable them to understand the procedure in relation to complaints; or
 - advice on where they may obtain such assistance;
- complainants are told the outcome of the investigation of their complaint; and
- action is taken if necessary in the light of the outcome of a complaint.

12. Remuneration

12.1 Fees

a. Trafford Council has set the following fees:

Sexual Health Prevention		
	Element of services	Fee
A1	Referral of a Trafford resident for LARC or IUD via The Northern (Specialist Sexual Health Service)	£10.00 per referral sent
A5	To supply a chlamydia and gonorrhoea home test kit to clients aged 16-24 years old who are Trafford residents attending for EHC	£2.00 per kit distributed
	To supply 6 condoms and 2 lubricants to 16-24 year olds issued with a C-card	£1.75 per complete PharmOutcomes transaction for condom supplies to individuals aged 16–24

b. Trafford Council reserves the right to revise fees

c. Invoices are automatically submitted via PharmOutcomes

d. All Providers must record activity 'live' on PharmOutcomes during the intervention with clients. Providers must submit their activity claims by 6th of the month after the quarter end. If Providers try to complete interventions retrospectively, 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 Provider 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).

12.2 Volume

TMBC Service Specification: 2026 - 2027

Locally Commissioned Service – Community Pharmacy Sexual Health Prevention

- a. Trafford Council is not setting a minimum or maximum number of patients supported. 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.

13. Guidelines and Resources

13.1 National Guidelines

13.1.1 General

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

[Department of Health \(2013\): 'Sexual Health Clinical Governance: Key principles to assist commissioners and providers to operate clinical governance systems in sexual health services'](#)

13.1.2 Chlamydia Screening and Treatment

[Public Health England \(2014\): 'Developing integrated chlamydia screening provision locally'](#)

[Public Health England \(2014\): 'Development of specifications for the commissioning of chlamydia screening in general practice and community pharmacy'](#)

13.1.3 Gonorrhoea Screening

[Public Health England \(2021\): 'Guidance for the detection of gonorrhoea in England'](#)

13.1.4 STI Prevention and Barrier Methods for Contraception

[FSRH \(2015\) 'Clinical Guideline: Barrier Methods for Contraception and STI Prevention'](#)

13.1.6 Contraception for Young People

[FSRH \(2019\): 'Clinical Guideline: Contraceptive Choices for Young People'](#)

[NICE \(2014\): PH51 Contraceptive services for under 25s](#)

13.1.7 Contraception for Transgender and Non-binary People

Clinical guidance on contraception provision for transgender men and non-binary people assigned female at birth by the FSRH, BASHH, and Guild of Healthcare Pharmacists can be found below.

Current guidance states that trans men and non-binary people assigned female at birth can use both oral EHC (pills) and IUDs (coils) without interfering with hormone regimens; testosterone is not thought to affect the efficacy of emergency contraception.

[FSRH \(2017\): CEU Statement: Contraceptive Choices and Sexual Health for Transgender and Non-binary People](#)

[BASHH \(2019\): BASHH Recommendations for Integrated Sexual Health Services For Trans, Including Non-binary, People](#)

[Guild of Healthcare Pharmacists \(2022\): Improving Care for Trans Patients](#)

13.2 National resources

a. National Sexual Health Information Line

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

b. Contraceptive Choices

- Members of the public can visit <https://www.contraceptionchoices.org/> for information and advice about the range of contraceptive methods available and what options may be most suitable for them.

c. Brook

Brook have a range of downloadable resources on contraception and STIs designed for young people available at: <https://www.brook.org.uk/resources/>.

d. 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/>.
- The FPA's patient guides to emergency contraception, IUD and an overview of contraceptive choices can be found in Appendix C.

14. Local Guidelines and Services

14.1 Local Services

a. Sexual health and wellbeing services available across Trafford

[Trafford Directory | Sexual Health Services in Trafford](#)

b. The Northern Contraception, Sexual Health, and HIV Service

Specialist Sexual Health Service in Trafford - www.thenorthernsexualhealth.co.uk.
Email - urmstonclinic.enquiries@mft.nhs.uk (see Appendix A for referral form).

c. SH:24

Chlamydia and Gonorrhoea (C&G) Screening Support Service for 16-24 year olds

[Sexual Health Experts | SH:24](#)

e. PaSH (Passionate about Sexual Health)

HIV prevention, care and support in Greater Manchester

www.gmpash.org.uk/hiv

f. SH:24 Free Testing

Home test kits for HIV and syphilis

<https://freetesting.hiv/>

14.2 Safeguarding

- a. If you are worried that a child is being harmed or abused, contact Trafford's Strategic Safeguarding Partnership (TSSP) at FirstResponse@trafford.gov.uk or call 0161 912 5125.

- b. For adult safeguarding issues, go to <https://myway.trafford.gov.uk/web/portal/pages/home> or call 0161 912 5135.

- c. GM Safeguarding Children Procedures Manual can be found at:
<https://greatermanchesterscb.proceduresonline.com/>
- d. GM Protocol on Working with Sexually Active People under the age of 18 years is available at:
http://greatermanchesterscb.proceduresonline.com/chapters/p_work_sexually_act_yp.html

14.3 Point of contact

The operational contact for the agreement at Trafford Council is:

Locally Commissioned Services
Public Health
Trafford Council
Trafford Town Hall,
Stretford,
Manchester,
M32 0TH
Email: LCS@trafford.gov.uk
Tel. Number: 0161 912 4334 / 3431

15. Notice Period (for termination)

The Commissioner or the Provider may agree, in writing, to terminate the contract with a minimum notice period of 3 months (90 days).

The Commissioner will have the right to suspend or terminate delivery of the service if the Provider fails to meet the terms of this agreement, including accredited pharmacist status.

16. Variations

The Commissioner reserves the right to vary any part of this agreement at any time as a result of any Act of Parliament or direction of Central Government or outcome of review of audit, providing that no less than 30 days' notice to this effect is given.

The Commissioner reserves the right to propose amendments to service provision that will ensure the contract's purpose is fulfilled and achievable activity is carried out. This may be actioned in the event that Central Government, NHS England, Public Health England or any other regulatory body deem routine activity set out in this document as no longer feasible.