

APPENDIX A
SERVICE SPECIFICATION

Service Specification No.	
Service	Participation in the Nuclear chlamydia and gonorrhoea screening programme (General practices)
Authority Lead	
Provider Lead	
Period	1st April 2014 – 31st March 2015
Date of Review	

1. Population Needs

1. NATIONAL AND LOCAL CONTEXT

1.1 NATIONAL CONTEXT

1.1.1 Overview of commissioning responsibilities

- a. Local authorities have the lead for improving health and for coordinating efforts to protect public health. Public health teams within local authorities are responsible for commissioning and funding a number of mandated services and other services to improve the health and wellbeing of local populations.
- b. Local authorities are mandated to commission and fund comprehensive, open-access HIV/STI testing services, STI treatment services (excluding HIV treatment) and contraception services for the benefit of all persons of all ages present in their area. NHS England is responsible for commissioning and funding HIV treatment services. Clinical Commissioning Groups are now responsible for funding abortion services; vasectomies and sterilisation procedures; and for the promotion of opportunistic Chlamydia and Gonorrhoea testing and treatment within general practice.

1.1.2 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. Untreated infection can have serious long-term consequences including pelvic inflammatory disease, ectopic pregnancy, and tubal factor infertility. Chlamydia often has no symptoms and opportunistic screening of asymptomatic young people is considered the best approach for detecting and treating this infection.
- b. 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.
- c. The Department of Health considers that general practices and pharmacies have an important role in screening for chlamydia, treatment and partner notification. Embedding the offer of an opportunistic screen in core services including general practices and community contraception and sexual health services is recommended practice and the approach that is considered the most viable option for further extending the reach of local programmes.

1.1.3 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 three indicators relating to sexual health:
 - [Indicator 2.04](#): Under-18 conception rate
 - [Indicator 3.02](#): Chlamydia diagnosis rates among young adults aged 15-24s
 - [Indicator 3.04](#): % of persons presenting with HIV at a late stage of infection
- b. Local areas are tasked to continue to work to reduce the number of under-18 conceptions, to prevent and control the transmission of chlamydia, and to promote and increase uptake of HIV testing in order to reduce the number of patients entering HIV treatment services at a late stage of infection.
- c. Public Health England recommends that local areas should be working towards achieving a chlamydia diagnosis rate of at least 2,300 per 100,000 young people aged 15-24. Modelling suggests that achieving a diagnosis rate of >2,300 will contribute to further reducing the prevalence of chlamydia.

1.2 LOCAL CONTEXT

1.2.1 Overview of sexual health data for Salford

- a. 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.
- b. Salford has one the highest incidence of HIV outside of London. Diagnoses of common sexually transmitted infections including chlamydia, gonorrhoea, genital herpes and genital warts are also increasing.
- c. 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.
- d. Uptake of contraception amongst residents is good. Residents can obtain contraception from general practices and from contraception and sexual health clinics. The proportion of women opting for long-acting reversible contraception is increasing.
- e. The rate of abortions among female residents aged 15-44 has been falling since the late 2000s. The abortion rate for Salford is higher than the rate for England but is comparable to other core cities.
- f. The under-18 conception rate for Salford has also fallen – 38.4% since the baseline set in 1998 by the National Teenage Pregnancy Strategy. However, Salford continues to have an under-18 conception rate above the national average.
- g. NHS Salford invested in improving access to contraception, sexual health and abortion services. Residents can obtain contraception from their GP practice, from some pharmacies and from contraception and sexual health clinics including dedicated clinics for young people. Ruclear is an established service and more than 25,000 young people were screened in

2011/12. 48 hour access to GUM clinics has been achieved. However, ongoing work is required to promote the use of condoms and to increase the use of contraception including long acting reliable methods such as the implant in order to control the transmission of sexually transmitted infections and to reduce the numbers of unintended conceptions among women of all ages

1.2.2 Nuclear chlamydia and gonorrhoea screening programme

- a. Salford City Council, in partnership with the other local authorities in Greater Manchester, commission and fund the Nuclear chlamydia and gonorrhoea screening programme. Nuclear processes screens for chlamydia and gonorrhoea, manages results, undertakes partner notification activities, and arranges treatment.
- b. This specification relates to participation in the Nuclear chlamydia and gonorrhoea screening programme. There is no mechanism for Salford City Council to fund practices to perform screening other than through Nuclear.

2. Outcomes

2.0 EXPECTED OUTCOMES

2.1 Direct influence on outcomes

- a. Participation in the Nuclear chlamydia and gonorrhoea screening programme is expected to contribute to:
 1. Increasing the number of asymptomatic young people accepting an opportunistic screen for chlamydia and gonorrhoea from general practices in Salford
 2. Improving knowledge and understanding of chlamydia and gonorrhoea among young men and women attending general practices in Salford
 3. Improving awareness of the importance of regular screening for chlamydia among young women and men attending general practices in Salford.

2.2 Indirect influence on outcomes

- a. Participation in the Nuclear chlamydia and gonorrhoea screening programme is expected to contribute to achieving:
 1. Reducing the prevalence of chlamydia and gonorrhoea among young women and men through the prompt detection and treatment of asymptomatic infection.
 2. Reducing the incidence of chlamydia and gonorrhoea amongst young women and men
 3. Preventing the consequences of untreated infection

3. Scope

3.1 AIMS AND OBJECTIVES

3.1.1 Aims

- a. The overall aim is to embed the offer of an opportunistic screen for chlamydia and gonorrhoea for asymptomatic young people aged 15-24 within general practices in Salford. This will contribute to local efforts to prevent and control chlamydia through the prompt detection and

treatment of asymptomatic infection.

3.1.2 Objectives

(A) Opportunistic screening for chlamydia and gonorrhoea

- a. Contractors delivering this component of the specification are required to participate in the Ruclear chlamydia and gonorrhoea screening programme and:
 - i) Improve knowledge and understanding of chlamydia and gonorrhoea through the provision of information, advice and guidance.
 - ii) Raise awareness of the importance of being screened for chlamydia and gonorrhoea among patients attending the practice.
 - iii) Offer screening on an opportunistic basis for asymptomatic patients aged 15-24.
 - iv) Ensure that patients accepting an Ruclear screen are offered condoms.

(B) Treatment of chlamydia

- a. Contractors acting as a treatment site for the Ruclear chlamydia and gonorrhoea screening programme will:
 - i) Consult with patients (index patients and their partners) referred via Ruclear for treatment of chlamydia and, as appropriate, to supply medication.
 - ii) Ensure that patients receive information and advice about sexually transmitted infections and how to obtain sexual health screening.
 - iii) Ensure that patients receive information and advice about safer sex behaviours and are offered condoms

3.2 SERVICE DESCRIPTION

- a. Salford City Council is commissioning and funding the Contractor to participate in the Ruclear chlamydia and gonorrhoea screening programme as described in this specification. This section details:
 - o Specific requirements relating to offering chlamydia and gonorrhoea screening via Ruclear on an opportunistic basis for asymptomatic young people aged 15-24 (**Component A**)
 - o Requirements of the Ruclear chlamydia and gonorrhoea screening programme in relation to supporting the Contractor.
 - o General requirements relating to the provision of all services detailed in this specification

3.2.1 Opportunistic screening of asymptomatic young people for chlamydia and gonorrhoea via Ruclear (Component A)

- a. Salford City Council is commissioning and funding the Contractor to participate in the Ruclear chlamydia and gonorrhoea screening programme. Ruclear is the opportunistic chlamydia and gonorrhoea screening programme for asymptomatic young people aged 15-24 living in Greater Manchester.
- b. The Contractor is required to offer an Ruclear screen for chlamydia and gonorrhoea on an opportunistic basis to asymptomatic young people aged 15-24 attending the practice. The Contractor should:

- i) Initiate discussion about chlamydia and the importance of screening as part of general consultations with relevant patients.
 - ii) Collect samples from the patient – for women, a choice of providing a urine sample or a self-taken vaginal swab should be offered.
 - iii) Ensure that patients accepting an Ruclear chlamydia and gonorrhoea screen are provided with an Ruclear information card (card includes the patient identification number)
 - iv) Ensure that patients understand the process for receiving their results.
 - v) Ensure that clients receiving an Ruclear screen are offered condoms
- c. The Contractor is also required to:
- i) Ensure that samples are returned to the MRI laboratory using the forms, sample kits, postage and packaging within the Ruclear kits provided.
 - ii) Ensure that staff members offering Ruclear* screening have received appropriate training.
- d. The Contractor should also nominate a member of staff to liaise with Ruclear. Ruclear will liaise with the nominated member of staff to arrange training and support and to deliver promotional materials and test kits
- e. The Contractor should note that this contract relates to participation in the Ruclear opportunistic chlamydia and gonorrhoea screening programme for asymptomatic patients aged 16-24. This contract does not allow for the provision of screening for a) young people aged under-15; b) adults aged 25 and over; or c) symptomatic young people.

3.2.2 Treatment for chlamydia

- a. Salford City Council is commissioning and funding the Contractor to act as a treatment site for the Ruclear chlamydia and gonorrhoea screening programme.
- b. The Contractor is required to accept index patients referred from Ruclear for treatment of chlamydia.
- c. The Contractor is required to ensure that all clinicians involved in the provision of treatment are trained and competent to offer this provision in line with [BASHH clinical guidelines](#). The Contractor should, if nurses are involved in the provision of treatment, ensure that staff are trained in the use of PGDs and adhere to the PGDs for Azithromycin, Doxycycline and Erythromycin issued by Salford City Council.
- d. The Contractor should offer treatment for chlamydia in line with Ruclear* procedures and the [BASHH clinical guidelines](#).
- e. Clinicians are asked, in line with [NCSP standards](#)(p25), to:
 - i) Undertake a sexual history and provide information, advice and guidance about sexually transmitted infections and contraception as appropriate.
 - ii) Encourage the patient to abstain from sex until they, and all their partners, have been treated (including the treatment period and the next seven days).
 - iii) Communicate the importance of partner notification (PN) in relation to preventing repeat infection for the individual.

- iv) Provide information, advice and guidance about safer sex behaviours and offer condoms.
 - v) Signpost / refer patients to contraception and sexual health services if appropriate.
- f. The Contractor should that patients are given medication to consume within the appointment. Patients requiring treatment for sexually transmitted infections should receive this free of any prescription charge. If this is not possible – i.e. FP10 prescriptions and used and the patient is not exempt – then the patient should be offered treatment but also informed that treatment is available, free of charge, from other services.
- g. The Contractor is required to provide details of available treatment slots to Ruclear, as requested, to enable the Ruclear results team to refer young people and their partners to the general practice for treatment.
- h. The Contractor should complete and submit treatment forms to Ruclear. Ruclear will submit returns to the Commissioner to enable fees to be calculated and authorised.

3.2.3 Requirements of the Ruclear chlamydia and gonorrhoea screening programme

- a. Salford City Council commissions and funds Ruclear (CMFT) to:
- i) Supply screening forms and other related consumables
 - ii) Arrange for samples to be processed in line with NCSP guidelines
 - iii) Deliver a results management service and arrange treatment for index cases and their partners in line with NCSP guidelines
 - iv) Deliver partner notification activities in line with NCSP guidelines
 - v) Collect and submit data to CTAD and to the NCSP
 - vi) Provide training and support for chlamydia screening / treatment sites
 - vii) Produce and distribute promotional materials – e.g. poster and leaflets

3.2.3 General requirements

- a. The Contractor is required to adhere to national and local guidelines for offering contraception and sexual health advice and treatment to young people aged under-19 including the requirement to assess Fraser competence.
- b. The Contractor will ensure compliance with relevant policies and procedures for safeguarding children and vulnerable adults.
- c. The Contractor will ensure compliance with relevant guidance for obtaining informed patient consent.
- d. The Contractor is required to have infection control policies and procedures and to ensure compliance with agreed standards and relevant guidelines. Salford City Council reserves the right to request that the Contractor cooperates with the Infection Control Team for assurance of compliance with infection control standards and procedures.
- e. Salford City Council will provide the Contractor with supplies of condoms.
- f. Salford City Council will promote contraception and sexual health services via the sexual health website for Salford and other channels.

- g. Salford City Council will ensure that the Contractor has information about local contraception and sexual health services to aid pharmacists to make accurate and appropriate referrals.
- h. Salford City Council will arrange at least one joint service monitoring meeting per annum for all Practices to attend.

3.3 CLINICAL GOVERNANCE

- a. The Contractor 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. Specifically, the Contractor is required to:
 - i) Establish and maintain links with STI testing and treatment services
 - ii) Have processes and procedures in place for reporting incidents including serious untoward incidents (SUIs). The Contractor is required to inform the Director of Public Health on incidents and near misses as well as reports on complaints and complements and other patient feedback.

3.3.1 Clinical skills and competencies

- a. The Contractor is responsible for ensuring that clinicians are competent and trained to offer the services described in this specification.
- b. Ruclear (CMFT) is responsible for providing training and support for Contractors participating in the Ruclear chlamydia and gonorrhoea screening programme.

3.3.2 Care pathways and protocols

- a. The Contractor is required to support the development and implementation of care pathways and protocols relating to the provision of chlamydia screening and treatment.

3.4 POPULATION

- a. Salford City Council is responsible for commissioning and funding contraception and sexual health services for residents of Salford.
- b. The Contractor is required to provide the services described in this specification for patients registered with the practice as described in the inclusion and exclusion criteria detailed below.

3.5 INCLUSION AND EXCLUSION CRITERIA

3.5.1 Opportunistic chlamydia and gonorrhoea screening for asymptomatic young people

(1) Inclusion criteria

- a. The Contractor is required to offer screening on an opportunistic basis to:
 - o Asymptomatic young people aged 15-24 registered with the practice

(2) Exclusion criteria

- a. The Contractor is required to exclude:
 - o Symptomatic young people
 - o Young people aged 14 and under
 - o Adults aged 25 and over

- b. The Contractor should refer excluded clients, as appropriate, to relevant services including STI testing and treatment services.

3.5.2 Treatment of chlamydia

(1) Inclusion criteria

- a. The Contractor is required to offer treatment of chlamydia to index patients and their partners as follows:
- Index patients (aged between 1 and 24) referred via Ruclear
 - Partners of index patients (all ages) attending with the index patient

(2) Exclusion criteria

- a. The Contractor is required to exclude:
- Young people or adults not referred via Ruclear
 - Young people identified as having contraindications
- b. The Contractor should refer excluded clients, as appropriate, to STI testing and treatment services.

3.6 REFERRALS

- a. The Contractor is required to accept self-referrals from patients registered with the practice

3.7 RELATIONSHIPS WITH OTHER SERVICES

- a. The Service Provider should establish and maintain relationships with relevant organisations including, for example:
- Ruclear chlamydia and gonorrhoea screening programme
 - Pharmacies
 - GUM clinics
 - Integrated contraception and sexual health services
 - Contraception and sexual health services
 - Greater Manchester Sexual Health Network
 - Greater Manchester Safeguarding Children / Adults Boards
 - Safeguarding teams within the NHS and local authorities

3.8 INTERDEPENDENCIES WITH OTHER SERVICES

- a. The following interdependencies have been identified:
1. Salford City Council and the Greater Manchester Commissioning Support Unit for the production and authorisation of Patient Group Directions.
 2. Salford City Council – for the supply of condoms.
 3. Ruclear (Central Manchester Foundation Trust) – for the provision of Ruclear chlamydia and gonorrhoea screening kits.
 4. Ruclear (Central Manchester Foundation Trust) – for the referral of clients for treatment for

chlamydia.

3.8 PLANNING ASSUMPTIONS

4. Applicable Service Standards

General

'A Framework for Sexual Health Improvement in England', Department of Health, 2013

'Integrating the National Chlamydia Screening Programme within local sexual health economies: Guidance for commissioners and public health professionals', Department of Health, 2012

Chlamydia screening and treatment

NCSP guidelines and resources can be found on the NCSP website

'Integrating the National Chlamydia Screening Programme within local sexual health economies: Guidance for commissioners and public health professionals', Department of Health, 2012

'Development of specifications for the commissioning of chlamydia screening in general practice and community pharmacy', Department of Health, 2010

5. Location of Provider Premises

The Contractor is required to deliver the services detailed in this specification from:

Name of Branch 1

Address 1

Address 2

Address 3

Address 4

Postcode

Name of Branch 2

Address 1

Address 2

Address 3

Address 4

Postcode

6. Required Insurances

APPENDIX E

CHARGES

Opportunistic screening for chlamydia and gonorrhoea		
A1	Chlamydia screening carried out	£5 per consultation
A2	Chlamydia diagnosis found and verified by RU Clear	£25 per consultation

Salford City Council reserves the right to revise fees.

Payment is based upon activity confirmed by RU Clear. Salford City Council will collate activity data from RU Clear and pay the provider accordingly on a quarterly basis.

All contractors must submit an invoice and audit data in a timely manner. Payments will not be made if audit data is not submitted. Any invoice which relates to work completed more than four months ago will not be paid.

ALL CHARGES, UNLESS OTHERWISE STATED, ARE INCLUSIVE OF VAT.