Aneurin Bevan Health Board

Service Specification for Local Enhanced Service (LES) for Parenteral Contraceptive Subdermal Device Services

Introduction

All practices are expected to provide essential, and those additional services they are contracted to provide, to all their patients. This Local Enhanced Service (LES) specification includes services that do not meet the criteria for essential or additional services. The specification of this service is in respect of Parenteral Contraceptive Subdermal Device fitting and removal services. No part of the specification by commission, omission or implication defines or redefines essential or additional services.

Background

The aim of this Local Enhanced Service (LES) is to provide a means whereby only accredited persons will actually provide a Parenteral Contraceptive Subdermal Device fitting services Local Enhanced Service on behalf of the practice and thereby improve the quality of care provided by GP practices to patients.

Service outline

1.The specification of the LES will be:

(i) **The fitting and removal** of etonogestrel (Nexplanon®) contraceptive subdermal devices ONLY.

(ii) **Production of an up-to-date register** of patients who have had fitting and removal of parenteral contraceptive devices. This is to be used for audit purposes, and to enable the primary care team to target these patients for health care checks

(iii) **Initial and regular follow up assessment**. At initial assessment, full counselling should be backed up with a patient information leaflet.

(iv) **Assessment of STI risk** should be undertaken on all those seeking contraception.

(v) **Provision of information**. Written information must be provided at the time of counselling to reinforce oral advice. This should be supplemented with information on follow-up and those symptoms that require urgent assessment

(vi) **Production of an appropriate GP record**. Adequate recording should be made regarding the patient's clinical history, the counselling process, the batch number of the parenteral contraceptive subdermal device, and follow-up arrangements.

(vii) **Ensure primary care staff training**. Each practice must ensure that all staff involved in providing any aspect of care under this scheme have the necessary training and skills to do so. Practices should be able to demonstrate that they have in place a policy to cover staff

training and maintenance of skills. Nexplanon® replaces Implanon® and has a new insertion mechanism.

(viii) **The Faculty of Sexual and Reproductive Healthcare has drawn the attention of current LoC SDI holders to form X, (Training requirements for doctors wishing to obtain the letter of competence in sub-dermal contraceptive implant techniques-LoC SDI) which states:**

'It should be noted that this LoC relates to existing implants. It is incumbent upon the candidate to undertake the necessary training relating to any new devices introduced in the future."

The Faculty view is that anyone undertaking a procedure such as implant insertion should ensure they have sufficient theoretical and practical experience before they undertake a procedure on a woman. It is the responsibility of all users of medical devices to ensure they are familiar with them before using them.

The manufacturers of Nexplanon have created a training site www.nexplanontraining.co.uk. On this site you can find details of the training sessions organised by the company.

An on-line introduction to the new device (60 minutes) is also available on the Nexplanon website. The Faculty recommends that you familiarise yourself with the device and perform an insertion with a placebo on a model arm before attempting to fit one on a woman. The company are making placebo inserters available to current SDI fitters; these are single use.

(ix) **Provide safe and suitable facilities** for undertaking invasive procedures. ABHB should be satisfied that practices undertaking to provide the LES have adequate and appropriate facilities and equipment comparable to those required for the safe provision of any invasive procedure.

(x) **An annual review**, which could include an audit of:

i. The register of patients fitted with parenteral contraceptive subdermal devices
ii. Continuous usage rates
iii. Reasons for removal of subdermal devices
iv. Complications

Accreditation

Aneurin Bevan Health Board (ABHB) is responsible for ensuring that enhanced services are delivered by professionals who are properly qualified to do the job. The GMS contract states that those doctors who have previously provided a similar enhanced service and who satisfy at appraisal and revalidation that they have such continuing medical experience, training and competence as necessary to enable them to contract for enhanced services, shall be deemed professionally qualified to do so.

"Long-acting reversible contraception: the effective and appropriate use of long-acting reversible contraception", commissioned by the National Institute for Health and Clinical Excellence and published in October 2005 recommended that "Contraceptive implants should be inserted and removed only by healthcare professionals trained in the procedure". It further stated that "The FFPRHC provides training for healthcare professionals wishing to obtain the letter of competence (LoC) in sub-dermal contraceptive implant techniques. Adequate experience will be deemed to consist of a minimum of two insertions and two removals of sub-dermal implants over a 12 month period.".

GP's wishing to provide this service will be required to either obtain the letter of competence (LoC) issued by the Faculty of Sexual and Reproductive Healthcare or demonstrate equivalent practical and theoretical training.

It is expected that the level of training required for a GP and other health professionals providing an enhanced service is identified in that persons' continuous personal development plan (CPD) and, where additional training is required, local mechanisms are found to address this.

Accreditation of the service should be based upon a consideration of the service outline, as set out in the application for approval, and should be determined by the Primary Medical Care Advisory Team upon the advice of the Aneurin Bevan Health Board. Practice visits will provide the opportunity to explore in more detail any issues which might arise in the provision of the service.

All doctors directly involved in the provision of an enhanced service should be required to identify that responsibility within their CPD plans and discuss the related professional development with their appraiser. They need to assure the GP appraiser that this has been done and the appraisal signed off. A similar model will apply for any practice nursing staff providing direct enhanced services.

Scope of the service to be provided

The funding of the LES will include the following:

(i) those services described above.
(ii) the collection of activity related to the provision of these services including: type of activity, number of contacts and who provides the service
(iii) the maintenance of adequate records of the service provided, incorporating all known information relating to any significant events e.g. hospital admissions, infections
(iv) that each practice must ensure that all staff involved in providing any aspect of care under this scheme has the necessary training and skills to do so.
(v) that a practice will not claim in respect of the LES when there is no approved service provider working in that position in the practice.
(vi) It is a condition of participation in this LES that practices will give notification, in addition to their statutory obligations, within 72 hours of the information becoming known to him/her, to the ABHB Assistant Medical Director or Locality Clinical Director of all emergency admissions or death of any patient under this service, where such admission or death is or may be due to the performance of the parental contraceptive subdermal device services LES or attributable to an underlying medical condition.

Pricing

Each practice contracted to provide the service will receive:

1. Insert fee = £ 43.55
2. Removal fee = £ £87.09

The parental contraception subdermal device service may be claimed on a quarterly basis, as and when performed.