

## Pharmacy Contraception Service – FAQs

### **Q. Can AI technology or smart watches etc be used to take blood pressure readings?**

A. No, blood pressure readings must be taken via a validated BP monitor as stated in the Service Specification only.

### **Q. Do we need to check the patient's Summary Care Records when supplying Emergency Contraception and Oral Contraception?**

A. Yes, whether you are supplying one or both forms of contraception the patient's Summary Care Records must be checked. If for whatever reason you are unable to check the patient's Summary Care Record during the consultation this MUST be recorded on the consultation form with a reason why. You can however still make a supply.

### **Q. Will I still get paid if the patient requests to be referred for a LARC or IUD?**

A. Yes. The consultation fee is to fund the time associated with provision of the consultation and is not dependent on the outcome of the consultation.

### **Q. If the patient vomits within 3 hours of taking their emergency contraception pill and they return to the pharmacy for a second dose will I be paid for this?**

A. Yes, you will be reimbursed for the second supply. You must supply the same medication for all repeat doses.

### **Q. Is there an age restriction for Emergency Contraception?**

A. CoSRH states 55 years and over is no longer of child bearing age but in reality we know this is different for everyone. The Service Specification does NOT state a lower or upper age limit for the supply of Emergency Contraception.

### **Q. Can you provide me with a Standard Operating Procedure (SOP) to support the changes coming into effect from 29<sup>th</sup> October?**

A. Pharmacy contractors are expected to develop their own SOPs in line with the requirements as set out in the Service Specification and relevant PGDs. Organisations such as the NPA can provide you with a SOP, please contact them directly for further information.

### **Q. How many months supply of Oral Contraception can I supply?**

A. On initiation, the quantity of Oral Contraception supplied **should not exceed 3 months**. The **minimum** supply for ongoing supplies should be **6 months**.

### **Q. Can I supply Emergency Contraception on request of a patient for advance supply as a just in case option?**

A. No. The PGD does not cover for advance supply of Emergency Contraception.

### **Q. Am I required to notify the patient's GP following each and every consultation and/or supply of Oral Contraception and Emergency Contraception?**

A. All four community pharmacy IT systems providing support for the service will, where the patient has provided consent, automatically send standard post event messages containing details of the consultation to the GP clinical IT system via a structured message, ready for a staff member at the practice to check and update the patient's record. If the person does not consent to sharing information with their general practice or they are not registered with a general practice, the consultation can still proceed, and a notification to the practice will not need to be sent.

**Q. Can I deliver this service remotely?**

A. Yes. The service specification now confirms that all consultations (face-to-face or remote) should be verbal and must be provided from the pharmacy premises. The use of purely digital asynchronous consultations (e.g. text based digital consultations) is not permitted.

**For a more comprehensive list of FAQs, please visit [Pharmacy Contraception Service \(PCS\) – FAQs - Community Pharmacy England](#)**