

## Sexual and reproductive health

### 1 INTRODUCTION

Bath and North East Somerset (B&NES) Council aims to improve and protect the health and wellbeing of its local communities with an emphasis on reducing health inequalities. This service specification sets out the requirements for the provision of sexual and reproductive health (SRH) services to be delivered within community pharmacies in Bath and North East Somerset (B&NES). The services are:

The provision of Emergency Hormonal Contraception (EHC) involving the supply of Levonorgestrel, by a suitably qualified and competent community pharmacist, free of charge to service users aged under 24 years old, according to the approved Patient Group Direction (PGD)

The provision of Ccard involving the supply of condom packs by a suitably qualified and competent community pharmacist or other pharmacy staff member, free of charge to service users aged 13 – 24 years old

The provision of pregnancy tests by a suitably qualified and competent community pharmacist or other pharmacy staff member, free of charge to service users aged 13 – 24 years old

#### 1.1 Background information

Sexual health is an important area of public health. The Government set out its ambitions for improving sexual health in its publication, A Framework for Sexual Health Improvement in England. Sexual health needs vary according to factors such as age, gender, sexuality and ethnicity, and some groups are particularly at risk of poor sexual health, especially young people, Men who have sex with men (MSM) and BME groups. Strong links exist between deprivation and sexually transmitted infection (STI's), teenage conceptions and abortions. From 1st April 2013 local government has been required by regulation to commission HIV prevention, open access genitourinary medicine (GUM) and contraception and sexual health services (CASH) for all age groups. This includes services commissioned from general practice and pharmacy, such as long acting reversible contraception (LARC) and Emergency Hormonal Contraception (EHC), including chlamydia screening

The total abortion rate per 1,000 women aged 15 to 44 years in 2021 was 11.8 in Bath and North East Somerset, lower than the England rate of 19.2 per 1,000. Of those women under 25 years who had an abortion in 2021, the proportion who had had a previous abortion was 21.2%, lower than 29.7% in England.

In 2021, the conception rate for under-18s in Bath and North East Somerset was 8.7 per 1,000 women aged 15 to 17 years, better than the rate of 13.1 in England.

In 2022/23 community pharmacies undertook approximately 500 EHC consultations, down from 924 that were undertaken in 2019/20

The number of community pharmacies actively providing the sexual and reproductive health service has been declining since 2019/20

## **2 SCOPE OF SERVICE**

### **2.1 Service aims**

- Provide and increase access to sexual and reproductive health services in community pharmacies across B&NES, particularly provision of and access to emergency hormonal contraception
- Provide and increase access to the Ccard scheme for young people aged 13 – 24
- Provide and increase access to chlamydia testing for women aged 13 – 24
- Provide and increase access to pregnancy testing to women aged 13 – 24
- To signpost service users with additional sexual and reproductive health needs to local specialised services such as Riverside Clinic

### **2.2 Service outcomes**

- Increase in the number of emergency hormonal contraception supplies to young women aged under 25
- Increase in the number of Ccard condom packs provided to young people aged 13 – 24
- Increase in the number of pregnancy tests provided to young people aged 13 – 24
- Reduction in the rate of under 18 conceptions
- Reduction in the rate of repeat abortions in women aged under 25
- Reduction in the rate of chlamydia amongst women aged 13 – 24

- Increase in the number of pharmacies actively providing the sexual and reproductive health service

## 2.3 Service description

### Emergency Hormonal Contraception (EHC) service for women aged 24 and under

The Provider will:

- Supply free EHC, involving the supply of Levonorgestrel, to service users aged 24 years or under presenting for emergency contraception between 0 and 96 hours following unprotected sexual intercourse (UPSI) or when regular contraception has been compromised or used incorrectly, and who are not excluded from treatment under the PGD. Service users requiring referral to Riverside Clinic for an emergency IUD can still be provided with EHC provided they are eligible
- Ensure only a qualified pharmacist who has declared competence to deliver EHC delivers this element of the service. No part of the consultation may be undertaken by any other individual, although other pharmacists and pre-registration students may, with the service user's consent, observe for training purposes
- Reinforce at the start of every consultation that the service is completely confidential (the only exception being when the accredited pharmacist judges that the service user is at risk and involvement of others is necessary, for example in safeguarding)
- Deliver a consultation to establish the need and suitability for a service user to receive EHC in line with the approved PGD for the supply of EHC by a community pharmacist from a community pharmacy. Where appropriate a supply will be made; where a supply of EHC is not appropriate, advice and referral to another source of assistance, if appropriate, will be provided
- Ensure that full details of the service user's consultation are recorded and submitted using the EHC consultation template on Pharmoutcomes in real time as the consultation occurs. The service user consultation template has been designed to guide the pharmacist through the safe supply of Levonorgestrel
- Ensure service users aged under 16 are assessed as Fraser competent against the Fraser Guidelines details of which are listed in the Pharmoutcomes consultation template for this service. A service user deemed not to be competent should be referred to an

appropriate sexual health clinic such as Riverside Clinic or GP practice. Details of the service user and their situation should also be discussed with the Service's designated safeguarding lead

- Ensure that service users under the age of 18 are assessed for the potential risk of abuse or child sexual exploitation using the Bichard Checklist, details of which are listed in the Pharmoutcomes consultation template for this service
- Ensure that, regardless of service user age, any safeguarding concerns identified are recorded and discussed with the appropriate Safeguarding Lead. In addition, any request for provision involving service users aged 12 and under must be immediately reported to the Safeguarding Team via <https://beta.bathnes.gov.uk/report-concern-about-child>. Out of office hours the Emergency Duty Team should be contacted on **01454 615165**. Pharmacists are still permitted to supply emergency contraception to service users aged 12 and under, provided all mandatory safeguarding procedures are followed
- Consider the provision of a postal chlamydia testing kit to female service users under 25 years of age. Chlamydia testing kits are available through the local Chlamydia Screening Office
- Ensure that regardless of whether an EHC supply is made, provide information on all forms of contraception including long acting reversible contraception; basic sexual health advice including the importance of using condoms and how to reduce the risk of STIs; information about specialist sexual health services provided by Riverside Clinic and GP practices to support future sexual and reproductive health needs; and details of [www.safebanes.com](http://www.safebanes.com) for further information
- Support verbal advice by providing: a pharmacy Ccard condom pack even if they are not Ccard registered; details of how to register with the Ccard scheme; FPA leaflets; and details of [www.safebanes.com](http://www.safebanes.com) for further information
- Ensure that service users who are excluded from treatment under the PGD are directly referred, or signposted, to the most appropriate and accessible service available. Service users should also be made aware of their option to purchase appropriate emergency hormonal contraception if required
- Ensure a consultation room is available that provides a level of privacy consistent with that which is required for the provision of the Medicines Use Review service
- Ensure they have a chaperone policy and confidentiality statement clearly displayed in the consultation room

- Ensure that any Safebanes posters, window stickers and promotional information are prominently displayed

#### *Ccard condom pack supply for young people aged 13 – 24*

The Provider will:

- Provide a free pharmacy Ccard condom pack to young people aged 13 – 24 who have a valid physical or virtual B&NES Ccard. Ccard condom packs can be ordered by pharmacies free of the charge from the B&NES Healthy Lifestyle Service
- Ensure only suitably trained pharmacy staff (i.e. Pharmacists or any other pharmacy support staff who have received appropriate training) delivers this element of the service. Pharmacy staff may, with the service user's consent, observe for training purposes
- Ensure that where registration or supply is not appropriate, for example if the young person is outside of the age range or where the physical or electronic Ccard has expired, provide advice and referral to another appropriate service such as Riverside Clinic
- Ensure that if a young person is excluded from the Ccard scheme criteria above they can be invited to purchase condoms as an OTC sale from the pharmacy
- Utilise the request for a pregnancy test as an opportunity to provide basic sexual health advice including the importance of using condoms and how to reduce the risk of STIs; information about specialist sexual health services provided by Riverside Clinic and GP practice to support future sexual and reproductive health needs; and details of [www.safebanes.com](http://www.safebanes.com) for further information
- Ensure that any Safebanes posters, window stickers and promotional information are prominently displayed

#### *Pregnancy testing for young women aged 13 – 24*

The Provider will:

- Provide a free pregnancy test for young women aged 13 – 24 upon request or where the Pharmacist deems a clinical need. Pharmacies will utilise their own stock of pregnancy testing kits
- Ensure only suitably trained pharmacy staff (i.e. Pharmacists or any other pharmacy support staff who have received appropriate training)

delivers this element of the service. Pharmacy staff may, with the service user's consent, observe for training purposes

- Ensure Pharmacists and pharmacy staff should use their discretion when working with those aged 13 – 15 and ensure that regardless of whether a pregnancy test is provided, that the service user is referred to Riverside Clinic or their GP practice for further advice
- Consider the provision of a postal chlamydia testing kit. Chlamydia testing kits can be ordered by pharmacies free of charge through the local Chlamydia Screening Office
- Encourage the service user to register for a virtual Ccard via <https://www.safebanes.com/c-card>
- Ensure that if a young person is excluded from the pregnancy test criteria above they can be referred to Riverside Clinic or their GP practice for further advice, or be invited to purchase a pregnancy test as an OTC sale from the pharmacy
- Ensure that pregnancy testing is undertaken by the service user themselves off-site. Pharmacists and pharmacy staff should not be involved in receiving any completed pregnancy tests, interpreting results or describing options for those who test positive
- Utilise the request for a pregnancy test as an opportunity to provide basic sexual health advice including the importance of using condoms and how to reduce the risk of STIs; information about specialist sexual health services provided by Riverside Clinic and GP practice to support future sexual and reproductive health needs; and details of [www.safebanes.com](http://www.safebanes.com) for further information
- Ensure that any Safebanes posters, window stickers and promotional information are prominently displayed

## **2.4 Service requirements**

- The Provider will ensure that the service is user friendly, non-judgemental, person-centred and confidential at all times. The Provider is strongly encouraged to work towards becoming SAFE accredited ([www.safebanes.com](http://www.safebanes.com)) during the duration of this contract
- For EHC provision the Provider must have and use an accredited consultation area. The consultation area must enable both the service user and the pharmacist to sit down together; enable the service user and pharmacist to talk at normal speaking volumes without being overheard by other visitors to the pharmacy, or by staff undertaking their normal duties; be clearly designated as a private consultation area, distinct from the

general public areas of the pharmacy; and have suitable equipment to enable live input of data into the EHC Pharmoutcomes template

- The Provider should use professional judgement to consider, and where appropriate, act on any safeguarding issues coming to their attention as a result of providing the service. This shall be in line with local safeguarding procedures including any national or local guidance on under 16s sexual activity
- The Sexual Offences Act 2003 states that no child under 13 years is able to consent to any sexual activity. If the service user is believed to be under 13 years of age, providing they have been assessed as “Fraser competent”, treatment should not be withheld as the duty to safeguard the child from most harm would include unintended pregnancy. All the details of the consultation must be recorded and discussed at the earliest opportunity with the relevant Local Authority Safeguarding Team (or Child Care Duty Team out of hours). In an emergency, the police can be contacted
- The Provider should ensure that there is a robust system of reporting adverse incidents or serious untoward incidents, that all incidents are documented, investigated and followed up with appropriate action and that any lessons learnt from incidents are shared across the Provider’s organisation. Any adverse incidents that occur must be reported according to general policy/guidance for clinical incident reporting
- The Provider should ensure the service has access to an appropriate electronic service user record system. If the Provider cannot enter the information on the electronic service user record system at the time of the consultation, the information shall be recorded as possible after the consultation
- The Pharmacy shall at its own cost effect and maintain with a reputable insurance company a policy or policies of insurance providing the following levels of cover:
  - (a) Public Liability Insurance with a limit of indemnity of not less than £5 million in relation to any one claim or series of claims:
  - (b) Employer’s Liability Insurance with a limit of indemnity of not less than £10 million;
  - (c) Professional Indemnity Insurance with a limit of indemnity of not less than £1 million in relation to any one claim or series of claims and shall ensure that all professional consultants and sub-contractors involved in the provision of the Services hold and maintain appropriate cover;
- If, for whatever reason, the Pharmacy fails to give effect to and maintain the Required Insurances, the Commissioner may make alternative arrangements to protect its interests and may recover the costs of such arrangements from the Pharmacy

- The parties acknowledge that the Pharmacy is a Regulated Activity Provider with ultimate responsibility for the management and control of the Regulated Activity provided under this Contract and for the purposes of the Safeguarding Vulnerable Groups Act 2006 and the Protection of Freedoms Act 2012. The Pharmacy shall:
  - (1) Ensure that all individuals engaged in Regulated Activity are subject to a valid enhanced disclosure check for regulated activity undertaken through the Disclosure and Barring Service (DBS);
  - (2) Monitor the level and validity of the checks for each member of staff; and
  - (3) Not employ or use the services of any person who is barred from, or whose previous conduct or records indicate that he or she would not be suitable to carry out Regulated Activity or who may otherwise present a risk to service users.
- The Pharmacy warrants that at all times for the purposes of this service it has no reason to believe that any person who is or will be employed or engaged by the Pharmacy in the provision of the Services is barred from the activity in accordance with the provisions of the Safeguarding Vulnerable Groups Act 2006 and the Protection of Freedoms Act 2012 and any regulations made thereunder, as amended from time to time.
- The Pharmacy shall comply with all statutory / national guidance related to safeguarding children and adults, including but not limited to:
  - (1) Children Act 1989 and 2004
  - (2) Children and Social Work Act 2017
  - (3) Working Together to Safeguard Children 2015 (amended 2018)
  - (4) Care Quality Commission Regulation 11 of the Health and Social Care Act 2008 (Regulated Activities) 2010
  - (5) Care Act 2014
  - (6) Equality Act 2010
  - (7) Human Rights Act 1998
  - (8) Mental Capacity Act 2005
  - (9) Safeguarding Vulnerable Groups 2006 (as amended by the Protection of Freedoms Act 2012)
- The Pharmacy shall designate a lead member of staff with responsibility for safeguarding in respect of the Services as set out in the Safeguarding Requirements.



- The Pharmacy shall ensure that it has established its own safeguarding policies in accordance with the Law, the Safeguarding Requirements and local multi-agency policies and shall meet the requirements of the Council in terms of safeguarding audits and monitoring. Where remedial actions are identified by the Council's Authorised Representative, the Pharmacy shall develop and agree an action plan to deliver these.

## **2.5 Service availability**

- The Provider should ensure the service is delivered in person
- The service is to be provided within the full opening hours of the community pharmacy contract

## **3 ANY ACCEPTANCE AND EXCLUSION CRITERIA**

This service is an open access service and therefore anyone can refer service users in, including any healthcare professionals and self-referral

For EHC provision there may be some situations where, based on the information obtained, the accredited pharmacist is unable to supply under the terms of the PGD. In these situations, the scheme requires the pharmacist to urgently refer the service user to an alternative provider. This should be in the first instance, a community pharmacy in B&NES that is accredited to provide the service – the pharmacist should phone the pharmacy in advance to confirm that the service can be provided urgently to the service user. Failing that referral can be made to a specialist SRH service such as Riverside Clinic. The service user must be made completely aware of the decreasing effectiveness of EHC with time

## **4 TRAINING AND COMPETENCY REQUIREMENTS**

### *Emergency Hormonal Contraception (EHC) service for women aged under 24*

The Provider will:

- Enrol via Pharmoutcomes and complete the Declaration of Competence (DoC). The DoC criteria are that the Pharmacist has
  - an up to date enhanced DBS certificate

- have read the most up to date version of the PGD and signed it
- completed the CPPE distance learning Emergency Hormonal Contraception course
- completed the CPPE distance learning Safeguarding Children and Vulnerable Adults Level 2 course

It is also strongly recommended the Pharmacist has completed the B&NES Community Pharmacy sexual health training course either in person or online.

Pharmacists can enrol on the service without having completed the DoC criteria. From the day of enrolment they will have 90 days to complete the outstanding requirements. If the outstanding requirements are not completed within 90 days, the pharmacist will be unable to provide the service specified until such a time as these outstanding requirements are met

#### Ccard condom pack supply for young people aged 13 – 24

The Provider will:

- Complete the B&NES Community Pharmacy sexual health or Ccard training course either in person or online

#### Pregnancy testing for young women aged 13 – 24

The Provider will:

- 4.1 Complete the B&NES Community Pharmacy sexual health or Ccard training course either in person or online

For all service elements the Provider will:

- Demonstrate compliance with all relevant national standards for service quality and clinical governance including compliance with the Code of Practice for Infection Control and relevant NICE guidelines
- Provide evidence of maintaining skills and submit audits of procedures completed by practitioners as requested by the Commissioner
- Ensure that health and safety, safeguarding, equality and diversity training is provided to staff delivering this service and fully comply

with the Multi agency Safeguarding Adults Policy and the LSCB Inter-Agency Procedures for Children and Young People.

## **5 ACTIVITY, PERFORMANCE AND REPORTING REQUIREMENTS**

- 5.1 The Provider will ensure that the necessary information and documentation, as detailed in this service specification, is maintained and made available to the Commissioner for activity and payment verification
- 5.2 The Provider will ensure an internet connection is in place with appropriate electronic recording systems such as Pharmoutcomes to record consultations and activity
- 5.3 The Provider will ensure that claims for payment for the service can be made via the Commissioner's designated reporting/claim process
- 5.4 If required the Provider will share relevant information with other health care professionals and agencies in line with locally determined confidentiality arrangements, including the need for the permission of the service user to share such information if needed
- 5.5 The Provider will complete the appropriate service templates on Pharmoutcomes for each service element. There is a three month (90 days) grace period for submission and payment of historical claims
- 5.6 The Commissioner reserves the right to withhold payment in the event of omissions in reporting/claim data or if the reporting/claim template is submitted after the deadline detailed above
- 5.7 The Provider should submit data on each service via the appropriate Pharmoutcomes service template as described below:

<b>Service</b>	<b>Pharmoutcomes service template</b>
Emergency Hormonal Contraception (EHC) service for women aged 24 and under	EHC from 1 <sup>st</sup> May 2018
Ccard condom pack supply for young people aged 13 – 24	BANES C-Card supply
Pregnancy testing for young women aged 13 – 24	BANES Pregnancy Testing Kit Supply

- 5.8 The Commissioner will use the data for the purposes of monitoring provision, audit and for post payment verification. The Commissioner

reserves the right to amend the service templates and require the Provider to undertake additional data audits to verify activity, monitor performance and provide assurances that services are delivered in line with the terms and conditions set out in this contract, and to understand any service improvements that are needed

5.9 The Pharmacy must comply with all reasonable written requests made by CQC, the National Audit Office, the General Pharmaceutical Council, the Commissioner and the authorised representative of the Local HealthWatch for entry to the Pharmacy's Premises for the purposes of auditing, viewing, observing or inspecting such premises and/or the provision of the Services, and for information relating to the provision of the Services. The Pharmacy may refuse such request to enter the Pharmacy's Premises where it would adversely affect the provision of the Services or, the privacy or dignity of a Service User

5.10 The Commissioner shall use its reasonable endeavours to ensure that the conduct of any audit does not unreasonably disrupt the Pharmacy or delay the provision of the Services

5.11 The Pharmacy shall have clear and comprehensive incident reporting procedures in place to ensure timely identification, reporting, and resolution of any incidents that may occur during service delivery. These procedures must be communicated to all staff members and regularly reviewed and updated as necessary to maintain effectiveness. Incidents include but are not limited to

- (1) Adverse Events: Any unexpected or serious events occurring during the provision of the Services that may result in harm to the Service Users or others must be reported immediately
- (2) Safety Incidents: Incidents involving the safety or welfare of Service Users, staff, or visitors within the premises used to provide the Services must be reported promptly
- (3) Equipment Malfunctions: Any malfunction or failure of equipment used in the provision of the Services that may affect service delivery or Service User safety must be reported and addressed promptly
- (4) Medication Errors: Incidents involving medication errors, such as incorrect dosage, administration, or prescription, must be reported and investigated to prevent recurrence
- (5) Complaints and Feedback: Any complaints or feedback received from Service Users, their families, or other stakeholders regarding the quality or delivery of the Services must be documented and addressed according to the Pharmacy's complaints handling procedure
- (6) Data Breaches: Any breaches of confidentiality or data security related to Service User information must be reported in accordance with the provisions of Clause 9

- (7) Staff Incidents: Incidents involving staff misconduct, negligence, or breaches of professional conduct that may impact the delivery of the Services must be reported and investigated according to the Pharmacy's disciplinary procedure
- (8) Critical Incidents: Critical incidents, such as natural disasters, accidents, or emergencies, occurring within or affecting the Pharmacy's premises or operations, must be reported and managed promptly to ensure the safety and well-being of all involved
- (9) Non-Compliance: Instances of non-compliance with contractual obligations, regulatory requirements, or quality standards related to the provision of the Services must be reported and addressed to mitigate risks and ensure compliance
- (10) Any Other Significant Events: Any other significant events or occurrences that may impact the delivery, quality, or safety of the provision of the Services must be reported and managed according to the Pharmacy's incident reporting procedure

## 6 PAYMENTS

6.1 Payment will be made on a quarterly basis on receipt of a fully completed reporting/claim template

6.2 The Commissioner will pay the Provider at the rates outlined below:

Element of service	Fee
Supply of Ccard condom pack	£2.50
Supply of pregnancy test	£3.50
EHC consultation	£15
Levonorgestrel medication supply	£5.20  (Based on listed unit price of NHS drug tariff, plus VAT, as of October 2024)

## 7 APPLICABLE SERVICE STANDARDS

- Link to all BASHH Guidelines <https://www.bashh.org/guidelines>
- BASHH and Brook. Spotting the signs: a national proforma for identifying risk of CSE in sexual health services (2014) <https://www.brook.org.uk/spotting-the-signs-tool/>
- BASHH CEG September 2018 – Update on the treatment of Chlamydia trachomatis (CT) infection <https://www.bashhguidelines.org/media/1191/update-on-the-treatment-of-chlamydia-trachomatis-infection-final-16-9-18.pdf>
- Electronic BNF <https://bnf.nice.org.uk/>
- Electronic Medicines Compendium <http://www.medicines.org.uk>
- Faculty of Sexual and Reproductive Health Drug Interactions with Hormonal Contraception – May 2022 <https://www.fsrh.org/documents/ceu-clinical-guidance-drug-interactions-with-hormonal/>
- FSRH service standards for confidentiality in SRH services (2020) <https://www.fsrh.org/standards-and-guidance/documents/fsrh-service-standards-for-confidentiality-in-srh-services/>
- Female genital mutilation: safeguarding women and girls at risk of FGM (DHSC 2017) <https://www.gov.uk/government/publications/safeguarding-women-and-girls-at-risk-of-fgm>
- FSRH CEU Statement Response to Edelman 2022 (August 2022) <https://www.fsrh.org/standards-and-guidance/documents/fsrh-ceu-statement-response-to-edelman-2022-august-2022/>
- FSRH service standards for SRH care (2021) <https://www.fsrh.org/documents/final-draft-service-standard-for-sexual-reproductive-healthcare/>
- FSRH standards for emergency contraception (2017 amended 2023) <https://www.fsrh.org/documents/ceu-clinical-guidance-emergency-contraception-march-2017/>
- GMC protecting children and young people (2012, amended April 2019) <https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/protecting-children-and-young-people>
- NICE CG30 LARC (2005 updated July 2019) <https://www.nice.org.uk/guidance/cg30>
- NICE Medicines practice guideline “Patient Group Directions” <https://www.nice.org.uk/guidance/mpg2>
- NICE NG55 harmful sexual behaviour among children and young people (2016) <https://www.nice.org.uk/guidance/ng55>

- NICE NG60 HIV testing: increasing uptake among people who may have undiagnosed HIV (2016) <https://www.nice.org.uk/guidance/ng60>
- NICE NG88 heavy menstrual bleeding: assessment and management (2018 updated May 2021) <https://www.nice.org.uk/guidance/ng88>
- NICE PH49 behaviour change; individual approaches (2014) <https://www.nice.org.uk/guidance/ph49>
- NICE PH50 domestic violence and abuse: multi-agency working (2014) <https://www.nice.org.uk/guidance/ph50>
- NICE PH51 contraceptive services for under 25s (2014) <https://www.nice.org.uk/guidance/ph51>
- NICE QS129 quality standard contraception (2016) <https://www.nice.org.uk/guidance/qs129>
- NICE QS129 quality statement on emergency contraception (2016) <https://www.nice.org.uk/guidance/qs129/chapter/quality-statement-2-emergency-contraception>
- Royal Pharmaceutical Society Safe and Secure Handling of Medicines December 2018 <https://www.rpharms.com/recognition/setting-professional-standards/safe-and-secure-handling-of-medicines>

## 8 DISPUTE RESOLUTION

During any dispute, including a dispute as to the validity of the Contract, it is mutually agreed that the Pharmacy shall continue its performance of the provisions of the Contract (unless the Council requests in writing that the Pharmacy does not do so).

If a dispute arises between the Council and the Pharmacy in relation to any matter which cannot be resolved by the Nominated Representative(s), as detailed in 9, either of the parties may refer such dispute to the Dispute Resolution Procedure.

In the first instance the Council shall arrange for a more senior representative (e.g. Service Manager) who has authority to settle the dispute to meet solely with the Pharmacy in order to resolve the matter in dispute. Such meeting(s) shall be conducted in such manner and at such venue as agreed between the parties (including a meeting conducted over the telephone) as to promote a consensual resolution of the dispute in question

If the meeting(s) does not resolve the matter in question then the Parties will attempt to settle it by mediation in accordance with the Centre for

Effective Dispute Resolution ("CEDR") Model Mediation Procedure or any other model mediation procedure as agreed by the Parties

To initiate mediation the Parties may give notice in writing (a "Mediation Notice") to the other requesting mediation of the dispute and shall send a copy thereof to CEDR or an equivalent mediation organisation as agreed by the Parties asking them to nominate a mediator. The mediation shall commence within 28 days of the Mediation Notice being served

Neither Party will terminate such mediation until each of them has made its opening presentation and the mediator has met each of them separately for at least one hour. Thereafter paragraph 14 of the Model Mediation Procedure will apply (or the equivalent paragraph of any other model mediation procedure agreed by the Parties)

Neither Party to the mediation will commence legal proceedings against the other until 30 days after such mediation of the dispute in question has failed to resolve dispute. The Parties will co-operate with any person appointed as mediator providing him with such information and other assistance as he shall require and will pay his costs, as he shall determine or in the absence of such determination such costs will be shared equally

If CEDR does not produce a result agreed by both parties then an arbitrator is to be appointed by agreement with both parties. If the parties are unable to agree on an arbitrator one is to be appointed by reference to the Chartered Institute of Arbitrators.

## **9 NOTICES**

B&NES Council Representative: Paul Sheehan, Development and Commissioning Manager

Provider's Representative: **XXXXXXXXXX**

- 9.1 Any notices given under this Contract shall be in writing and may be sent by email to the Provider Representative and the Commissioner Representative at the email address provided for this purpose
- 9.2 Any notice shall be deemed to have been received at the time of transmission or if this time falls outside business hours in the place of receipt, when business hours resume
- 9.3 Either Party may change its Representative or address for service by serving a notice in accordance with this clause
- 9.4 Any notice given pursuant to this Agreement by post shall be deemed, unless the contrary is proved, to have been received two (2) days from the date of posting if from and to an address in the United Kingdom and five (5) days from the date of posting if from and/or to an address elsewhere