

EHC: enhancing the nation's well-being

Matthew Wright looks at which enhanced pharmacy services might fulfil a public health function and speaks to a pharmacist who provides an emergency hormonal contraception service in a community pharmacy

As well as the public health promotion that pharmacists undertake as part of the new contract's essential service, there are many other ways for the profession to be more actively involved in public health — various enhanced services provide good opportunities.

Examples of public health initiatives that the profession can take on board are discussed in "Choosing health through pharmacy — a programme for pharmaceutical public health 2005–2015".

The document says: "Pharmacies can give people clear and credible information to allow them to make informed choices, and can provide personalised, practical advice and support. And pharmacists have an excellent record in offering non-judgemental advice on sensitive issues such as emergency hormonal contraception and needle and syringe exchange, which suggests that the public trusts them."

Emergency contraception

The availability of emergency hormonal contraception (EHC) can help to address teenage and unwanted pregnancies. An EHC scheme can be offered by pharmacies as an enhanced service, contracted by a primary care organisation. Kate Molyneux, pharmacist manager, Co-operative group pharmacy, Birchwood, Cheshire, provides an EHC service in the pharmacy — via a patient group direction — for women in her local area. She says that unwanted pregnancy was an area that the primary care trust wanted to address, which was why the scheme was rolled out to pharmacies.

"It's been up and running for about three years, but obviously as people become more and more aware of it, then the service is used a lot more. The local GPs are aware of it as well, so they send patients over requesting emergency contraception. The GPs' appointments are then kept clear for patients with medical conditions that the GP needs to see," Miss Molyneux points out.

She says that, on average, the pharmacy sees between 30 and 40 cases per month, de-

pending on the time of year. Some days of the week are busier than others, she adds.

The amount that PCTs pay pharmacies for the service can vary; the PCT takes its service specifications to the local pharmaceutical committee and an amount is agreed for the local pharmacies depending on the scope of the service. Miss Molyneux says that the pharmacy is paid £10 for each consultation and is also reimbursed for the EHC supplied.

What is involved

Miss Molyneux says that women requesting the service are interviewed in a consultation room. She says: "The patient group direction for our health authority involves filling in a questionnaire — we have to keep the data on record. We go through a number of questions to establish whether emergency contraception is necessary or is the best course of action for them."

She explains that the questionnaire clearly indicates when patients need to be referred to, for example, a doctor or sexual health clinic. "We also offer advice about further contraception and give out free condoms."

There is not a lot of additional work involved, Miss Molyneux says. The questionnaire, which is completed in the consultation, is largely the only paperwork. "At the end of the month," she says, "we tally them up and send them away for payment, which only takes five or 10 minutes."

According to Miss Molyneux, pharmacists in the area attended two evening training sessions, which included roleplays, and undertook a set of questions under exam conditions. Pharmacists had also completed Centre for Pharmacy Postgraduate Education packages on contraception and ECH, she adds.

Advantages of the pharmacy setting

But what does an EHC service offer the public when the product can be purchased over the counter at the pharmacy?

"Women are entitled to emergency contraception free on prescription," Miss Molyneux says. "If people go into the pharmacy to buy [EHC] . . . it is relatively expensive. Sometimes the price puts people off. If someone is a little bit short of money they might take the risk and decide not to have it, with consequences sometimes."

She adds: "The patient doesn't have to wait for an appointment with the doctor. She can just come in when she has the free time, so we have a lot of people coming in on their lunch hour."

She says that some patients may find the pharmacy environment to be a more familiar and relaxed atmosphere than a GP surgery. "But also on the reverse side, some people

Who accesses EHC services?

Kate Molyneux says that a range of people are seen by the service and different health professionals are involved:

- If people come in to the pharmacy asking for advice they are told about the service
- People who are in the area may call into the pharmacy asking for EHC
- If people ring the local GPs for an appointment they will refer them to the pharmacy without an appointment
- A local university campus has a nurse on site who offers advice and can refer to the pharmacy if emergency contraception is necessary

feel a bit embarrassed, so they will go to a pharmacy that they don't normally go to," she points out.

In some areas (for example, in Leeds) pharmacies now offer chlamydia screening to women who access an ECH service.

Barbara Parsons, head of pharmacy practice, Pharmaceutical Services Negotiating Committee, says that it is important for community pharmacy to have a public health role and that this role continues to develop. "The PSNC is working towards having services for obesity, smoking cessation and sexual health included as advanced services," she says.

EHC service aims

The PSNC's template service specification for emergency hormonal contraception lists the following aims and intended service outcomes:

- Increase the knowledge, especially among young people, of the availability of emergency contraception and contraception from pharmacies
- Improve access to emergency contraception and sexual health advice
- Increase the use of EHC by women who have had unprotected sex and help contribute to a reduction in the number of unplanned pregnancies
- Refer clients, especially those from hard-to-reach groups, into mainstream contraceptive services
- Increase the knowledge of risks associated with sexually transmitted infections (STIs)
- Refer clients who may have been at risk of STIs to an appropriate service
- Strengthen the local network of contraception and sexual health services to help ensure easy and swift access to advice

Public health targets — possible enhanced services

- Emergency hormonal contraception
- Sexual health screening
- Needle exchange/substance misuse services
- Smoking cessation
- Weight management
- Immunisation programmes
- Mental health
- Cardiovascular health
- Minor ailment scheme
- Out-of-hours access to medicines