

SCHEDULE 2 – THE SERVICES

A. Service Specifications

Service Specification No.	Central Booking Service Specification v1.1 (DRAFT) NB THIS IS A DRAFT SPECIFICATION WHICH IS LIKELY TO BE AMENDED FOLLOWING FURTHER STAKEHOLDER FEEDBACK.
Service	Termination of Pregnancy Services Central Booking Service
Commissioner Lead	Commissioning Lead CCG - Islington
Provider Lead	
Period	1 st April 2018
Date of Review	31 st March 2019

1. Population Needs

1.1 National/local context and evidence base

The purpose of a Termination of Pregnancy Central Booking Service (CBS) is:

- to support access to North Central London's (NCL) Any Qualified Provider (AQP) Termination of Pregnancy Service which supports North Central London Clinical Commissioning Groups (CCG) to provide its residents with timely and efficient access to the Termination of Pregnancy Service commissioned in the area.
- to provide a point of contact, appointment and referral service for eligible women to access timely termination of pregnancy services.
- to ensure choice of Termination of Pregnancy Service Providers both for referring Health Care Professionals and eligible women seeking access to timely termination of pregnancy services.
- to provide support, advice and counselling to all eligible women who contact the Central Booking Service even if they decide not to proceed with a termination of pregnancy. This includes support, advice and counselling post termination.
- to promote and give sexual health education and contraception advice, with a view to prevention of future unwanted pregnancies and sexually transmitted infections.

Access to abortion is governed by the Abortion Act 1967 and all services must be provided within the terms of this legislation. In addition, independent sector Service Providers must adhere to the requirements of the Care Standards Act 2000 and the Private and Voluntary Healthcare Regulations 2001, and any other relevant legislation.

Commissioning Group Principles

This specification is designed for the residents of following 5 CCGs within the North Central London region:

Barnet
Camden
Enfield
Haringey
Islington

2. Outcomes

2.1 NHS Outcomes Framework Domains & Indicators

Domain 1	Preventing people from dying prematurely	
Domain 2	Enhancing quality of life for people with long-term conditions	
Domain 3	Helping people to recover from episodes of ill-health or following injury	
Domain 4	Ensuring people have a positive experience of care	X
Domain 5	Treating and caring for people in safe environment and protecting them from avoidable harm	

2.2 Local defined outcomes

Expected Outcomes including improving prevention:

- Improved quality & timely access to clinically appropriate termination of pregnancies.
- Increased access to treatment including geographical coverage.
- Improved client choice.
- Improved access to pre and post counselling, advice and support irrespective of whether women go on to receive a termination of pregnancy.
- Increased awareness of sexual and reproductive health, including prevention of sexually transmitted infections and HIV and onward transmission to partners.
- Increased 'onward' referrals to Sexual and Reproductive Health services to include Contraceptive Services, GUM Services and HIV Services.

3. Scope

3.1 Aims and objectives of service

Aims

The Provider shall:

- provide a consistent, effective, comprehensive, accessible, legal and appropriate service for women in North Central London attempting to access termination of pregnancy services.
- ensure that women in North Central London are able to access services as early as possible

and in consideration of their personal circumstances.

- provide a quality service in line with the Royal College of Obstetricians and Gynaecologists Guideline for the “Care of Women Requesting Induced Abortion” (the RCOG Guideline 2011), and current best evidence.

Objectives

The Provider shall:

- provide a minimum of 7 days a week, 364 days per year, telephone booking system that supports women requiring information, advice, counselling and appointments.
- provide women with access to a termination as early as possible through one single access point.
- ensure that women will be able to choose from a number of termination of pregnancy Providers, clinic locations, dates and times convenient to their own circumstances.
- offer choice based on location of service, for example, close to home, work or college.
- provide both pre and post abortion counselling and advice to eligible women who are considering or have accessed the Termination of Pregnancy Service.
- promote increased awareness of sexual and reproductive health, including prevention of sexually transmitted infections and HIV and onward transmission to partners.
- make onward referrals to Sexual and Reproductive Health services to include Contraceptive Services, GUM Services and HIV Services.
- have access, during the CBS Provider’s specified operating hours, to patient medical records relating to the treatment received and medication administered to a patient who has accessed a termination of pregnancy service. The sharing of patient information will be subject to patient consent and will be used to support the ongoing or emergency treatment of a patient in an NHS provision. The CBS Provider will be expected to establish an information and data sharing policy and protocol with AQP Termination of Pregnancy Providers, in order to ensure that patient information records are up to date throughout the ‘patient journey’.
- arrange onward referrals via appropriate and agreed pathways into NHS Acute services for complex cases when Termination of Pregnancy Service Providers cannot support patients in undertaking a termination.

3.2 Service description/care pathway

Service Model

- A call centre will need to provide a central point of contact for information, advice, counselling, appointments and referral access to the Central Booking Service for a minimum of 7 days a week and 364 days per year.
- The number used to access the Central Booking Service should be free.
- Referral arrangements operated by the CBS Provider will be simple and streamlined and will promote speedy access to abortion.
- The CBS Provider must ensure that in the event of a disruption in the telephone system that appropriate steps are in place to rectify this, and must be corrected as soon as possible. The provider must liaise with all the CCGs in regards to progress (which may include notifying the on-call Director).
- The CBS Provider must have Quality Assurance measures in place to check the quality of information given to the calling client. This maybe in the form of mystery shopping.

- The CBS Provider will be expected to ensure that they do not discriminate on grounds of gender, sexuality, ethnicity or religion.
- The CBS Provider will also be expected to be accessible to women whose first language is not English and those with hearing, learning, visual or physical disability.
- Service user consultation must be included in the monitoring and evaluation process, to identify satisfaction levels in order to inform service improvement measures. Referral arrangements operated by the CBS Provider will be simple and streamlined and will promote speedy access to abortion.
- Quality of care through appropriate clinical governance must be ensured (e.g. Audit and risk assessment).
- A complaints policy must be in operation and the complaints rate must be monitored and reported to the lead CCG.

Operating Hours

The Service operating hours will be **a minimum of:**

Monday-Friday 8.00am – 21.00pm

Saturday 8.30am – 18.00pm

Sunday 9.30am – 14.30pm

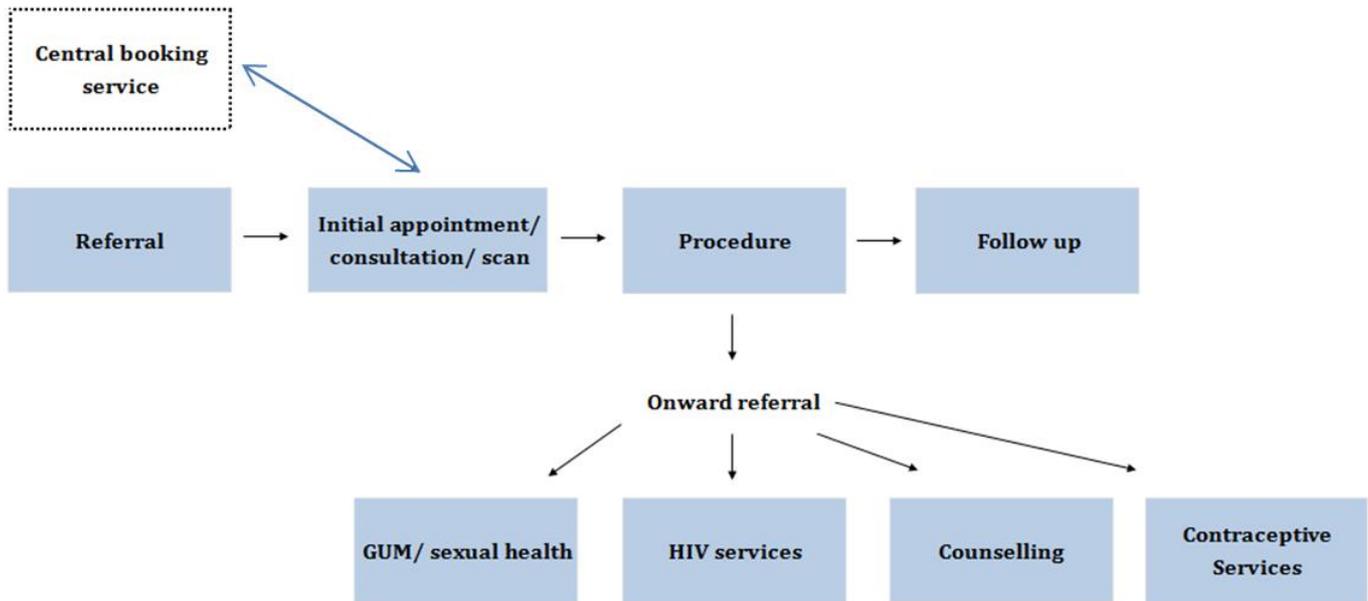
Bank holidays: Sunday service

Not open Xmas Day or Boxing Day

(answer phone service outside of these hours)

Patient Pathway

The CBS Provider shall refer women of reproductive age to any approved AQP Termination of Pregnancy Service Providers, which support the North Central London Clinical Commissioning Groups (CCG), thereby giving greater access to appointments in a wider geographical location. The generic AQP Termination of Pregnancy Service patient pathway is outlined below:



Within the generic overview provided above, there are six main pathways within the Termination of Pregnancy Service according to age/ gestation/ complexity:

- Under 18s
- Early Medical Terminations
- Early Surgical Terminations
- Mid trimester Medical/Surgical Terminations
- Late Surgical/Complex Termination

The above pathways summarise the totality of what can be provided under a TOP service, however Commissioners recognise that some TOP AQP Providers carry out procedures based on gestations levels:

- Up to 10 weeks gestation
- Up to 16 weeks gestation
- Up to 24 weeks gestation

NB: Activity is provided in this format for the benefit of Providers. The CCGs in NCL are looking to commission TOP AQP Providers who are able to deliver services to meet the whole of the pathway. Activity provided by qualifying TOP AQP Providers will be monitored against the availability of gestational access across the sector.

Inclusions

Consultation appointments for NHS funded terminations and associated services as can be booked for service users who are:-

- registered with a GP aligned to North Central London CCGs or
- unregistered residents who live currently in the North Central London region

A list of GPs and postcodes will be provided by the North Central London Central Contracts Team.

Exclusions

Although the AQP Termination of Pregnancy service is restricted to those patients who are either

registered with a North Central London GP or who are resident in North Central London (no GP), there may be instances where there is a query about the eligibility of a patient.

The provider will contact the CCG lead commissioner in such cases for a funding decision, although this must not add undue delay to the provision of the treatment.

Medical Exclusions / Unsuitability of receiving a Termination of Pregnancy under the AQP Specification

In addition to the complex pathway, an exclusions list has been developed for the AQP Termination of Pregnancy Service. The section below outlines 'complex' medical conditions under the Termination of Pregnancy Service - Any Qualified Provider (AQP) contract.

The CBS Provider will also be required to ensure the telephone screening of women who contact the Service covers the conditions listed below. Where a woman has disclosed any of the conditions listed below, they will be excluded from receiving a Termination of Pregnancy Service under the AQP specification. However the CBS Provider will be expected to refer women for consultation to a NHS provision:

- **Anaemia** - this is not generally tested before the procedure but if the haemoglobin is tested and is known to be low (less than 8g/dl), alternative arrangements for TOP at an NHS Hospital is to be made.
- **Asthma** - uncontrolled by therapy, defined by hospital admission within last 3 months, oral steroids within last 3 months, recent change to medication without re-evaluation by GP or chest physician. (Wheezing on the day of the procedure will be a contraindication in both NHS and Independent sector).
- **Bleeding disorders** – haemophilia, Von Willebrand's disease, sickle cell disease.
- **High Body Mass Index** - Women with a BMI of 40 and above.
- **Cardiovascular disease** - previous myocardial infarction, congestive heart failure, uncontrolled angina defined by chest pain in the last 3 months. Congenital or acquired cardiac conditions such as valvular disease with or without pulmonary hypertension.
- **Cerebrovascular disease** - any history of cerebrovascular accident (CVA) or Transient Ischaemic Attack (TIA).
- **Chronic disease with systemic illness** – liver, renal, autoimmune.
- **Current anticoagulant therapy** - being treated by warfarin, low molecular weight heparin, or Direct Oral Anticoagulants (DOAC).
- **Hypertension** - systolic BP >160mm Hg and/or diastolic BP > 90mm Hg on 3 or more readings.
- **Lung Disease** – COPD and emphysema which is affecting pulmonary function.
- **Porphyria.**
- **Seizure disorder uncontrolled by therapy** - defined by women who have discontinued treatment without supervision, recent change in their treatment, or a new onset of unknown cause. 'Controlled' is defined as an absence of seizures for one year.

- **Thyroid abnormalities** especially hyperthyroidism.

Health care professionals referring women for abortion should check the medical history and if in doubt about any condition check with the Provider to ensure the woman is not delayed in the process.

Other conditions where additional and specific planning is required:

- Women on current corticosteroid therapy
- Insulin dependent diabetes
- Rheumatoid arthritis – currently treated with DMARDs, or corticosteroid therapy
- Cancer – women who have a current diagnosis, or undergoing treatment for cancer
- Conditions that can affect surgical abortion
- Fibroid uterus
- Multiple caesarean section or uterine scarring from myomectomy
- Congenital abnormality of uterus
- Thrombophilia (bleeding/clotting disorders) Venous thrombosis and pulmonary embolism – for women who have been recently diagnosed and currently undergoing treatment

For all pathways, the CBS Provider is required to work closely with sexual health, contraceptive, HIV, counselling, psycho-sexual, IAPT, secondary care, and drug and alcohol teams in the local area; this is to ensure Patients continue to receive required support after their procedure, with onward referrals made into these services where appropriate. In addition, the CBS Provider is required to sign-post women to resources in their local area, along with online support forums; ensuring women are fully informed of further sexual health, counselling and reproductive services they are able to access post termination.

For Women who fall outside of this specification either due to high complexity and/or late gestation period, the TOP procedure will be carried out by a designated specialist NHS Acute provider. The local providers pertinent to NCL patients are St. Georges, Kings College, Imperial College and Homerton Hospitals. For the purposes of billing and coding these will come under the standard PbR tariff within the relevant Acute or Specialist contract with the Commissioners. Access to the service may need to be referred from GP or other Acute/Local TOPs providers.

Any acceptance and exclusion criteria and thresholds

Exclusions:

- Prisoner health.
- Women ineligible for NHS treatment.
- Women not registered with a GP or resident in the areas of the commissioning organisations.
- Women post 24 weeks gestation.
- Complex medical cases may be excluded in some settings as per the pre-existing conditions policy – see medical exclusions list under section 3.2.
- Women requiring an overnight stay, including miscarriages.
- Women referred for a termination of pregnancy due to foetal abnormality (TOPFA) – this is NHS England commissioned activity.

Access/ Acceptability

Evidence shows that the earlier a termination is performed, the less the risk and the better the likely outcome for the service user. The CBS Provider shall ensure that women are aware of local termination

services and are able to access these services speedily.

The CBS Provider's policy and practices will ensure that its services are accessible to all, regardless of age, disability, race, culture, religious belief or sexual orientation, income levels or previous abortions, and deals sensitively with all service users, potential service users and their family / friends and advocates.

In particular, the CBS Provider should ensure that any developments or service information is Impact Accessed in line with clause 54 of the contract on "Equity Of Access and No Discrimination". Subject to clause 54.6.4, the CBS Provider shall not discriminate between Service Users on the grounds of gender, age, ethnicity, disability, religion, sexual orientation or any other non-medical characteristics.

Provision should be made for non-English speaking service users.

Response Times

The CBS Provider will offer, depending on clinical appropriateness and patient choice:

- A consultation appointment within 5 calendar days of the service user calling the Central Booking Service (CBS) and..
- If this is not possible then a minimum standard of up to 2 weeks (14 calendar days) is accepted

The CBS Provider will report this activity on a monthly basis to the Lead Commissioner.

It is acknowledged that due to clinical indication and patient choice there will be some service users who are unable to have a consultation appointment booked within this timescale.

The Lead CCG Commissioner will monitor these numbers and may request further details of the reasons for any significant delay to ensure that there is not an issue with regard to capacity at any of the Termination of Pregnancy clinics.

To facilitate timely access and to ensure that there is a choice of clinically appropriate consultation or same day consultation and treatment appointments, the CBS Provider will:

- monitor the availability of appointments and liaise with the Lead CCG Commissioner's preferred AQP Providers of Termination of Pregnancy Services to ensure that there are appointment slots available to meet the above appointment availability threshold.
- report current waiting times for each AQP Termination of Service Provider to the Lead CCG Commissioner on a weekly basis.
- advise the Lead CCG Commissioner as soon as there is a capacity issue which means that the above threshold is not met.

Process for Booking consultation appointments

Appointments will be arranged at point of contact, and at the convenience of the Client, including:

- Clients telephoning the central booking service should have their call answered within 2 minutes.
- Staffing levels must be matched to call demand.
- An on-screen booking system will be used that can be accessed by several operators at the same time.
- These operators will be appropriately trained. The CBS Provider must implement supervision protocols, which identify the purpose, process and aims for all booking staff

- The booking screen will include all details of the current commissioning arrangements in place with North Central London CCGs.
- The first available appointment must be offered in the first instance across all AQP Termination of Pregnancy Providers.
- Women should be presented with all options available to them in order to ensure the quickest possible access, including the option of same day consultation and termination procedure if eligible
- The booking will be confirmed in writing (if requested by the client), otherwise via email, text message. The date, time, location map and any other vital information must be provided
- The booking will also include details of local sexual health services to promote long term follow-up and access to contraception. The Central Contracts Team, in- conjunction with the lead CCG Commissioner will ensure that up to date information is provided to the CBS Provider.
- Cancellations will be taken from Clients, processed and a new appointment given if required.
- The service must have a call abandonment rate of less than 5%.

Clients with later gestation (over 17 weeks), aged under 16 or who have serious medical problems

The CBS Provider will liaise with the Lead CCG Commissioner's preferred AQP Termination of Pregnancy Providers to ensure that they are aware of referral criteria for each of their clinics/services and that this information is available on the booking system.

The booking system will be set up so that these types of clients can be identified.

Clients who are identified during their call as fitting into the category above will be transferred to a 'special' co-ordinator who will be responsible for making arrangements with the most clinically appropriate provider.

Monitoring of Service

On a monthly basis a detailed activity report will be sent to the Lead CCG Commissioner. The activity will include the following data, however further reportable activity will be agreed with Lead CCG Commissioner and the CBS Provider:

- Number of service user/booking reference
- Age
- Date of Birth
- Gestation
- Referral Source
- Ethnicity
- Religion
- Sexuality
- Disability
- Postcode
- GP (if applicable) & GP surgery
- Date of contacting the Central Booking Service
- Date of consultation booked
- AQP Termination of Pregnancy Provider of consultation

The monthly activity must be presented as an excel spreadsheet as supplied by North Central London Contracts Team.

A quarterly report will also be submitted outlining data and trends for each North Central London CCG. The CBS Provider will be expected to attend a quarterly quality meeting with representatives from the North Central London CCGs to discuss the contract, data and quality issues.

Whole System Relationships

The CBS Provider must work with partners to address the needs of service users to ensure that there is safe and timely access to abortion counselling & provision, contraception advice & provision & STI testing/treatment.

The CBS Provider will have developed working relationships with other local, regional and national partners, where appropriate to refer and link to any proposed new service developments with the opportunities afforded by new contracting routes and practice based on World Class Commissioning.

Partners for example, will include:

Other abortion providers (NHS & Private), GUM Services, Contraceptive & Reproductive Health Services, North Central London GPs, other health professionals, Family Planning Association, Brook Advisory service, other advisory agencies.

Interdependencies

Stakeholders and interdependencies will vary but the following links should be made with North Central London GPs:

- Other private abortion providers
- Acute Trusts providing provision of emergency care or for those clients who are not clinically appropriate for their service, for example, where service users have significant concurrent medical conditions, or are at a later gestation than gestation accommodated by the AQP Termination of Pregnancy Service Provider
- North Central London Contraception & Reproductive Health Services
- Third Sector Organisations

Safety, Confidentiality and Safeguarding

Confidentiality and safety are of paramount importance to women seeking to discuss their pregnancy options and undergo abortion. The aim of the service specification is to ensure that confidentiality can be maintained while also recognising the need on occasion to share information in the interests of patients, and to ensure that guidelines on dealing with young people under 18 are observed.

- In order to maintain confidentiality, the CBS Provider should not send information to the Woman's home address unless they expressly wish this.
- The CBS Provider should ensure that information is not shared with anyone else, including the Woman's General Practitioner, without their consent. However, this does not apply to information which must be sent to other agencies to comply with the Abortion Act and the Care Standards Act.
- The CBS Provider will be expected to demonstrate that the collection, storage and transfer of information to other Services, including that in electronic format is secure and complies with any data protection requirements.
- The CBS Provider should also ensure that staff are aware of and abide by the *No secrets* (DH 2000) guidance in relation to safeguarding vulnerable adults from abuse and harm, and should also ensure that staff are aware of and abide by local adult safeguarding policies and

procedures. Further information safeguarding vulnerable adults can be found at:
http://www.dh.gov.uk/en/Consultations/Responsestoconsultations/DH_102764

Safeguarding of Young People

- Service Providers providing services to Clients under the age of 18 shall hold or be working towards accreditation against the “You’re Welcome” service standards for young people’s services.
- The Service Provider shall ensure that all staff are aware of and abide by the Legislation on safeguarding children, and should also ensure that staff are aware of and abide by the safeguarding policies operated by North Central London CCGs.
The “evidence base” section contains a link to further information about these responsibilities.
- The CBS Provider shall ensure that all staff who work with service users under the age of 18 have undertaken appropriate training and have undergone a satisfactory Disclosure and Barring Service (DBS) check.

In dealing with service users under the age of 16, Service Providers must ensure that they adhere to the Department of Health’s guidance document “Best practice guidance for doctors and other health professionals on the provision of advice and treatment to young people under 16 on contraception, sexual and reproductive health” (2004, Gateway reference 3382). This guidance sets out what Service Providers should do to ensure that they protect the confidentiality of young people. It also sets out the good practice contained in the Fraser Guidelines, which detail the circumstances in which treatment can be provided to young people under 16 without parental consent. A link to an electronic copy of this guidance is contained in the “evidence base” section above.

Face to Face Consultations for Under 18’s:

During the initial call into the Service, all clients must be given the option on how they would like their assessment consultation as per RCOG guidelines, however young people under 18 shall be encouraged to have a face to face consultation. If a telephone consultation is chosen and during the consultation the Health Professional has concerns around the ‘Gillick’ competency for a client under 18 years old, then a mandatory face to face consultation will be needed to ascertain whether safeguarding procedures need to be implemented. If a mandatory face to face consultation is declined by the client in this case, then local safeguarding policies should be followed.

Health professionals should adhere to BMA guidance which states Health professionals who assess competence need to be skilled and experienced in interviewing young patients and eliciting their views without distortion.

Confidential Information required by CBS in relation to clients

The CBS will need Women to provide the following information to assist in seeking the most clinically appropriate consultation appointment & provider. This information is confidential and will not be provided to other agencies or the commissioner.

All clients details are needed for referrals and appointments:

- Name
- Age and date of birth
- Gestation / Last Menstrual Period
- Body/Mass Index
- Address and Postcode
- General Practitioner name and address
- Repeat termination (if applicable). This data must be linked to previous patient record if

available.

- Relevant medical history that may be required by the AQP Termination of Pregnancy Service Provider prior to primary appointment, e.g. Diabetes, epilepsy. This will be entirely at the discretion of the individual Client to disclose
- Overseas Visitor Status (where applicable)

Applicable Service Standards

Applicable national standards (e.g. NICE)

The National Institute for Health and Clinical Excellence (NICE) has produced a clinical guideline on long acting reversible contraception (The effective and appropriate use of long-acting reversible contraception, NICE, October 2005) which discussed the efficacy of contraceptive methods and the efficacy in particular of long acting reversible contraception. A copy can be accessed using the link below: <http://www.nice.org.uk/CG030>

The British Association for Sexual Health and HIV (BASHH) produce a number of guidelines on best practice and evidence-based treatment of a number of Sexually Transmitted Infections. The most up to date BASHH guidelines can be accessed using the link below:

<http://www.bashh.org/guidelines>

Applicable standards set out in Guidance and/or issued by a competent body (eg Royal Colleges)

The Royal Colleges of Obstetricians and Gynaecologists produced guidance on abortion services (The Care of Women Requesting Induced Abortion, RCOG, 2011) and this sets out best practice in delivering abortion services. A copy can be accessed using the link below: <http://www.rcog.org.uk/womens-health/clinical-guidance/care-women-requesting-induced-abortion>

Applicable quality requirements and CQUIN goals

Applicable Quality Requirements (See Schedule 4 Parts [A-D])

Applicable CQUIN goals (See Schedule 4 Part [E])

Location of Provider Premises

Not applicable