



PSNE Ltd

Sunderland sexual health services

Valid from 1st March 2026

Provision of community pharmacy sexual health service including provision of chlamydia and gonorrhoea screening kits, distribution of condoms via the local c-card scheme

1 Introduction

The PSNE Ltd is commissioning community pharmacies to deliver a local Sexual Health Service in Sunderland, which has the following components:

- Provision of opportunistic screening for common bacterial sexually transmitted infections (STIs) through dual screening for Chlamydia and Gonorrhoea for Service Users accessing EHC.
- Registration and provision of condoms through the C-Card Scheme for Service Users aged 13-24 years.
- Provision of sexual health advice and support to Service Users, including (but not limited to) advice on the avoidance of pregnancy and STIs through safer sex and condom use, and information on the full range of contraceptive methods and signposting to other relevant services.

2 National context

The consequences of poor sexual health can be far reaching, resulting in unplanned pregnancies, abortion, STIs or Human Immunodeficiency Virus (HIV). Significant inequalities exist within sexual health. Prevention should focus on groups at highest risk, including young adults, men who have sex with men (MSM) and black and ethnic minorities.

Dual Screening for Chlamydia and Gonorrhoea

Sexual Transmitted Infections (STIs) are preventable and can affect anyone but disproportionately affect vulnerable groups and young people. STIs can cause long term morbidity, including cervical cancer, pelvic inflammatory disease, infertility and mortality. The burden of STIs within the North East remains high.

There is evidence to suggest that young people want to be offered Chlamydia and Gonorrhoea screening by health professionals and that those screened in core services (including Community Pharmacies) are more likely to test positive for the disease¹. Offering screening via Community Pharmacies will ensure the scheme is

² [Towards achieving the chlamydia detection rate considerations for commissioning](#)

accessible and targeted at those most likely to benefit from screening. It will also increase the overall health benefits from screening for, and treatment of STIs by offering direct referral to local Integrated Sexual Health services.²

C-Card Schemes

Nationally condom schemes, such as the C-Card, aim to ensure easy access to sexual health advice and confidential access to free condoms for young people, supporting efforts to reduce unplanned pregnancies and STIs.

3 Local context

Sexually Transmitted Infections

In 2023, the Sunderland rate of diagnosis for the most common STIs is below or similar to the England average, with the exception of genital warts with a diagnosis rate of 29.2 per 100,000 (compared to 45.8 per 100,000 for England). The chlamydia detection rate in 2023 in Sunderland is 1,846.8 per 100,000 aged 15-24 years, lower than England at 1961.7 per 100,000. In Sunderland, the percentage of HIV diagnoses made at a late stage of infection in the three-year period between 2021-23 was 57.1%, similar to 43.5% in England³.

Dual testing of Chlamydia and Gonorrhoea through the Chlamydia Screening Programme has been introduced in Sunderland as part of a range of outbreak control measures to tackle an increase in Gonorrhoea infection amongst young adults. Following the successful detection of cases via this route it has been agreed that dual testing of Chlamydia and Gonorrhoea specimens will continue.

C-Card Scheme

In Sunderland the C-Card scheme has historically been offered through youth provision and school nursing services. This scheme is now rolled out in Community Pharmacies in Sunderland to improve accessibility to free condoms for young people and create choice. The addition of the C-Card scheme will enable Community Pharmacies to offer

³ [NCSP: talking with young people about changes to chlamydia screening](#)

³ [SPLASH Sunderland 2025-02-21](#)

a more holistic sexual health service to young people and support the prevention of unplanned pregnancies and STIs.

4 Purpose and outcomes

4.1 Purpose

4.1.1 The purpose of the Service is to deliver conveniently located services that:

- a. Improve access to condoms for young people aged between 13 and 24 years.
- b. Offer opportunistic Chlamydia & Gonorrhoea screening for Service Users accessing EHC.

4.1.2 In addition, the Community Pharmacist must signpost and where appropriate, refer the Service User to the local Integrated Sexual Health Service in Sunderland for on-going contraceptive advice.

4.2 Vision

4.2.1 The overall vision of the Community Pharmacy Sexual Health Service is to:

- a. Reduce health inequalities in harder to reach groups and vulnerable people.
- b. Improve provision of services, providing fast and convenient access and plurality of provision for Service User choice
- c. Provide advice on sexual health as appropriate, including onward signposting and referrals.
- d. Increase referrals, particularly of hard to reach young people, into mainstream Integrated Sexual Health Services.
- e. Contribute to the local network of contraceptive and Integrated Sexual Health services to help ensure easy and swift access to advice and choice.

4.3 Programme Outcomes

4.3.1 Community pharmacies will collectively contribute to the following indicators identified by the Public Health Outcomes Framework [2021 Public Health Outcomes Framework - OHID \(phe.org.uk\)](https://www.phe.org.uk/public-health-outcomes-framework):

Domain	Indicator
Health Protection	Contribute to achieving a Chlamydia Detection rate - diagnosis rate of at least 2,300 per 100,000 (15 – 24 year olds).

4.4 Individual Outcomes

Commissioned community pharmacies will contribute to the following specific outcomes:

- 4.4.1 Increase uptake of opportunistic Chlamydia & Gonorrhoea screening for Service Users accessing EHC.
- 4.4.2 Support the achievement of the local chlamydia diagnostic rate of 2,300 per 100,000 young people aged 15-24 in order to reduce the local prevalence of Chlamydia in young people.
- 4.4.3 Increase access to condoms through the C-Card scheme.
- 4.4.4 Support the achievement of local targets to reduce teenage conceptions.
- 4.4.5 Reduce the number of abortions and repeat abortions.

5 Service criteria

5.1 Inclusion Criteria

- 5.1.1 Chlamydia and Gonorrhoea Postal Packs are available from the Community Pharmacy to Service Users accessing EHC, on request.
- 5.1.2 The C-Card scheme is available from the Community Pharmacy to young people who are aged 13-24.

5.2 Exclusion Criteria

- 5.2.1 Overall, there are no exclusions to the Services on the basis of gender, race, sexual orientation, or physical and/or mental impairment, though the Community Pharmacy will be able exclude Service Users where:

- a. Acceptable behaviour is not upheld.
- b. A professional risk assessment indicates that the Service User poses a serious risk to themselves, to staff, to other Service Users and/or to members of the public.

Where a Service User is excluded from the Service, this must be discussed with, and explained to, the Service User. Clear advice must be given to the Service User to explain how they can remain safe until alternative provision and/or suitable arrangements can be made

5.2.2 **Chlamydia and Gonorrhoea Postal Packs** are not available to young people aged 14 and under.

5.2.3 **The C-Card Scheme** is available to young people both new and already registered on the C-Card database. Where a young person is not already registered on the database and are eligible to access the scheme, the Community Pharmacy should register them.

5.3 Safeguarding Adults and Children

5.3.1 The Community Pharmacy must ensure that safeguarding adults and children is considered and managed at all times.

6 Service description

6.1 Service Overview

6.1.1 There are two components to the delivery of the Service. Service Users may require access to one or more of these components.

6.1.2 Provision of Chlamydia and Gonorrhoea Postal Packs

The Community Pharmacy will:

- a. Supply free Chlamydia and Gonorrhoea postal kits to Service Users accessing EHC upon request.
- b. Proactively offer Chlamydia and Gonorrhoea postal kits to Service Users accessing EHC who are attending the Community Pharmacy (i.e. when collecting prescriptions or asking for health advice).
- c. Liaise with the supplier of Chlamydia and Gonorrhoea postal kits to ensure stock levels are maintained. Chlamydia and Gonorrhoea postal kits and relevant materials will be provided to the Community Pharmacy free of charge.
- d. Ensure each Service User is aware that all instructions are in the kit, though the Community Pharmacy should specifically highlight how to

complete the screening form and how to send the sample off to the laboratory.

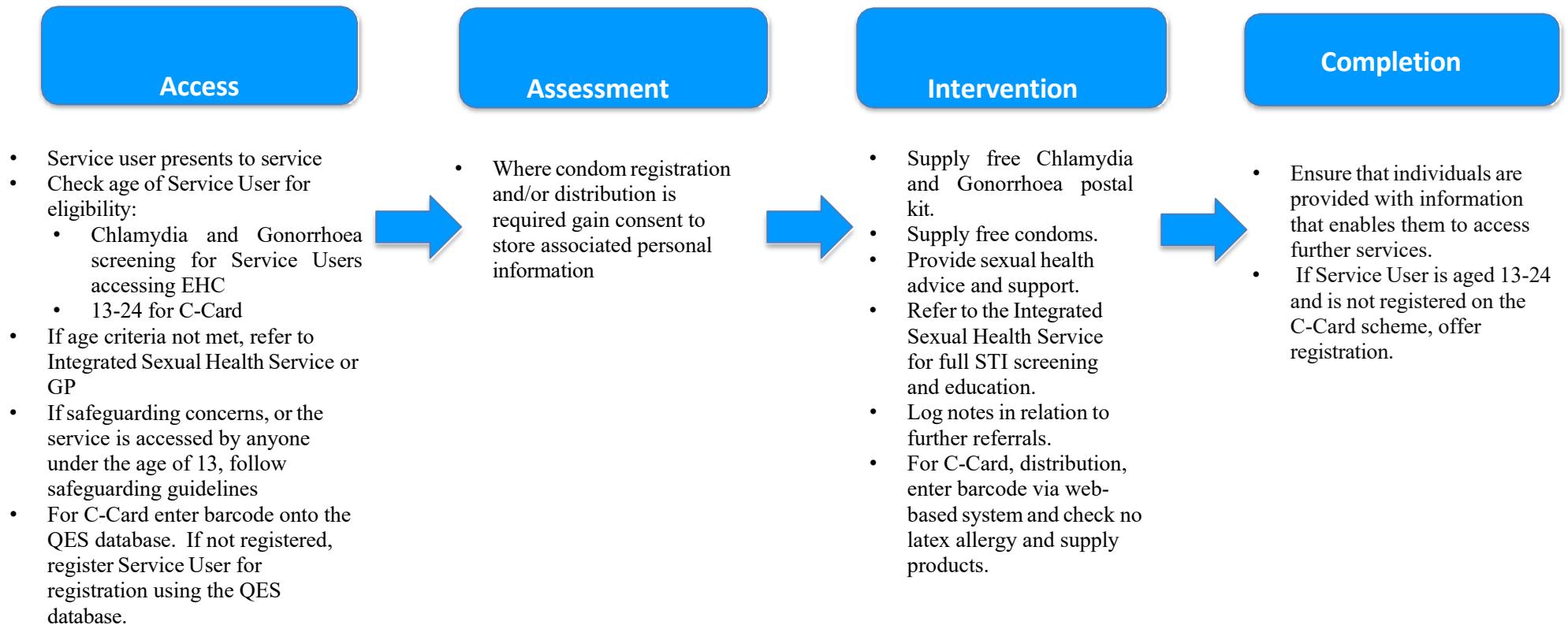
- e. Explain the results notification process to the Service User (for example, phone call, text, email or letter).
- f. Advise that if a person thinks they may be at risk of a chlamydia infection, it is important to be tested immediately. If it is less than two weeks since the person had sex, another test should be repeated 2 weeks post unprotected sexual intercourse as the infection might not always be found in the early stages.

6.1.3 Provision of condom distribution as part of the C-Card Scheme

The Community Pharmacy will:

- a. Distribute free condoms to Service Users aged 13-24 through the C-Card scheme, in accordance with local scheme procedures.
- b. Register new eligible Service Users (re-register if after a period of inactivity on the database).
- c. Liaise with the supplier of condoms for the C-Card scheme to ensure stock levels are maintained. Condoms and any other relevant materials will be provided to the Community Pharmacy free of charge.
- d. Record the C-Card barcode via a designated web-based system.
- e. Provide advice and/ or leaflets on use of condoms and information on the C-Card scheme to prevent STI and unplanned pregnancy.
- f. Refer the young person to another local provider signed up to the C-Card scheme if the Community Pharmacy is not registered or the young person is not already registered on the scheme. Record in PharmOutcomes the quantity of registrations and distributions completed for the month previous.

Figure 1: Flow Chart Summary of the Provision of the Community Pharmacy Sexual Health Service



6.2 Service User Access

The Community Pharmacy will:

6.2.1 Overall

- a. Ensure where a Service User presents at a Community Pharmacy which is temporarily unable to offer the Service (e.g. due to annual leave or sickness), the Service User is signposted promptly to another participating Community Pharmacy (please contact the Community Pharmacy beforehand to ensure that a trained pharmacist is available) or referred to another service provider (e.g. GP or specialist sexual health services).
- b. Ensure that the Service is available to Service Users throughout its business hours.

6.2.2 Chlamydia and Gonorrhoea Postal Pack

The Community Pharmacy will:

- a. Ensure that the Service User is accessing EHC.
- b. Refer Service Users who do not meet the eligibility criteria for the service but continue to require it to local Sexual Health Services to meet their needs.

6.2.3 C-Card Scheme

The Community Pharmacy will:

- a. Check the age of the Service User is between 13 and 24.
- b. Register the Service User if they have not used the Service before (or re-register if they have been inactive)
- c. Distribute condoms as required.

6.3 Assessment

6.3.1 Overall

- a. Ensure the Service protocols reflect national and local guidelines in relation to the protection of children and vulnerable adults.
- b. Ensure the Service provided is compliant with Fraser and Department of Health [guidance on confidential sexual health advice and treatment for young people aged under 16 years](#) (Department of Health, 2013).

6.3.2 C-Card Scheme

Community Pharmacies will:

- a. Gain consent from the Service User to store personal information for C-Card registration and condom distribution on the database. The Service User will have been appropriately assessed when they registered for the C-Card scheme.
- b. Ensure all registrations and distributions are entered on the C-Card database within 48 hours of completion.

6.4 Intervention

6.4.1 Chlamydia and Gonorrhoea Screening

The Community Pharmacy will:

- a. Supply Chlamydia and Gonorrhoea postal pack free of charge to the Service User.
- b. Ensure each Service User is aware that all instructions are in the postal pack. The Pharmacy should inform the Service User how to complete the screening form and how to send the sample off to the laboratory.
- c. Explain the results notification process to the Service User (for example, phone call, text, email or letter).
- d. Advise that if a Service User thinks they may be at risk of a chlamydia infection, it is important to get tested straight away. If it is less than two weeks since the Service User had sex, another test should be repeated 2 weeks post UPSI as the infection might not always be found in the early stages.

6.4.2 C-Card Scheme

The Community Pharmacy will:

- a. Check the Service User has no latex allergy.
- b. Supply condoms through the C-Card condom distribution scheme free of charge to the Service User.
- c. Enter the barcode on the Service User's C-Card via the web-based system and complete the distribution process.

6.5 Completion and Exit

6.5.1 Chlamydia and Gonorrhoea Screening

The Community Pharmacy will:

- a. Ensure that Service Users are provided with information that enables them to access further services as required.

6.5.2 C-Card Scheme

The Community Pharmacy will:

- a. Ensure that Service Users are provided with information that enables them to access further services as required.

6.6 Supplies

The Community Pharmacies will:

6.6.1 Chlamydia and Gonorrhoea Postal Packs

- a. Liaise with the Sunderland Integrated Sexual Health Service to ensure stock levels of Chlamydia and Gonorrhoea Postal Packs are maintained and managed.

6.6.2 C-Card Scheme

- a. Ensure stock levels of condoms are maintained and managed (including stock management, stock rotation and destruction if necessary), as well as liaising with the Sunderland Integrated Sexual Health Service (STSFT).

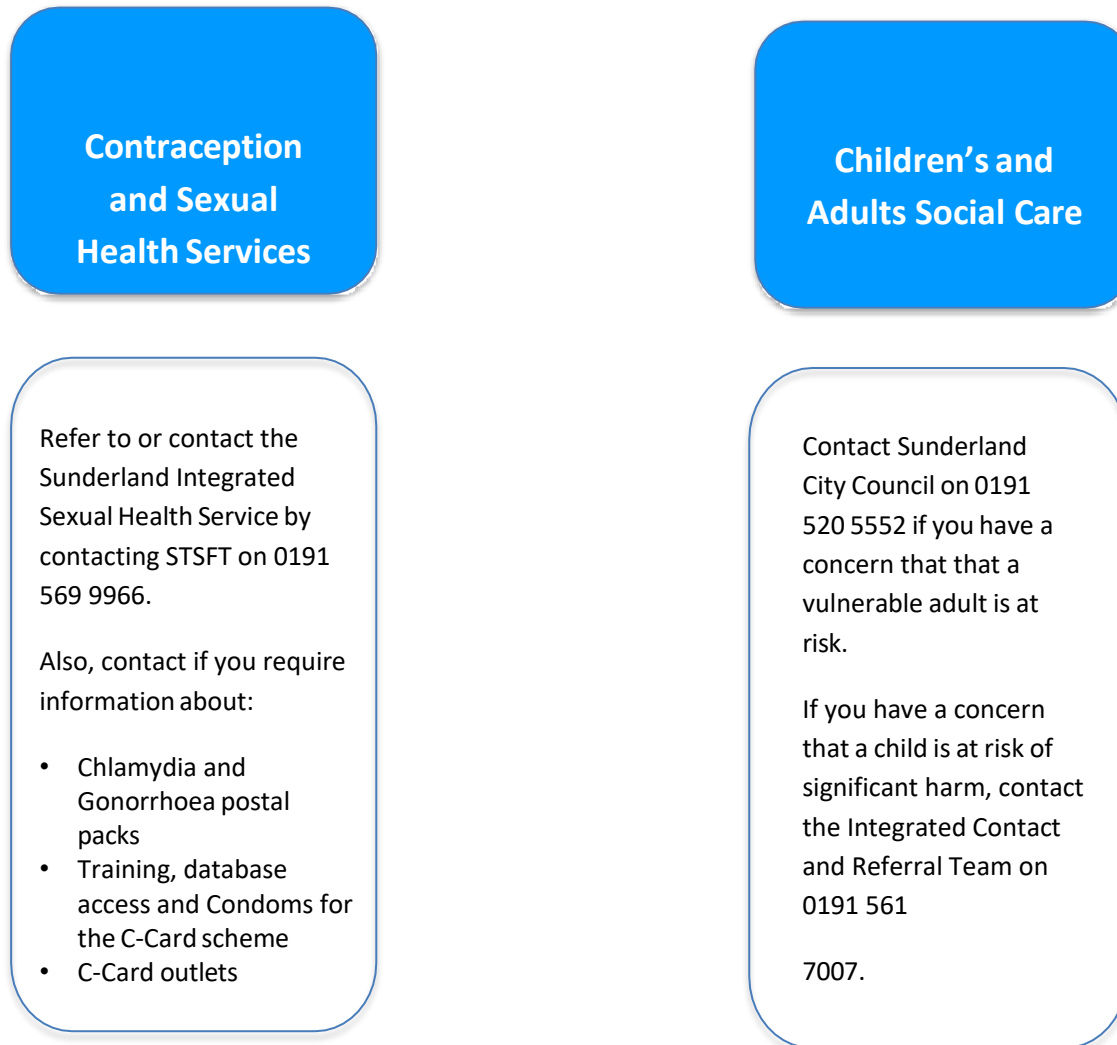
6.7 Facilities

- 6.7.1 Ensure that a private consultation area is available for the delivery of the Service which:
- a. Enables the Service User and the Community Pharmacist to meet and discuss in a private setting without being overheard by other visitors to the Community Pharmacy, or by staff undertaking their normal duties.
 - b. Is clearly designated as a private consultation area and is distinct from the general public areas of the pharmacy.

7 Interdependencies with other services

- 7.1 To deliver a holistic Service, Community Pharmacies must have strong working relationships with a range of partners (Figure 2) including but not limited to:
- a. Integrated Sexual Health Service.
 - b. General Medical Practices.
 - c. Community Pharmacies.
 - d. C-Card Registration Outlets.
 - e. Sunderland City Council.
- 7.2 Wherever possible and appropriate, it will be the responsibility of the Community Pharmacy to facilitate onward referrals into specialist sexual health services.
- 7.3 Staff delivering the Community Pharmacy Sexual Health Service should promote improving health wherever possible. It is the responsibility of the Community Pharmacy to facilitate onward referrals into other general health care services (Figure 2).
- 7.4 Where possible support twice yearly mentoring visits with representative of the Integrated Sexual Health Service to support provision of the service.

Figure 2: Interdependencies with the Provision of the Community Pharmacy Sexual Health Service and Other Services



8 Governance arrangements

8.1 Legislation and Clinical Guidance

8.1.1 In line with the Department of Health and National Institute of Clinical Excellence guidelines, the Pharmacy must operate in compliance within the following core guidance documents and updates thereafter (including but not limited to):

- a. [Framework for Sexual Health Improvement](https://www.gov.uk/government/publications/a-framework-for-sexual-health-improvement-in-england) (Department of Health, 2013): <https://www.gov.uk/government/publications/a-framework-for-sexual-health-improvement-in-england>.
- b. [NG211 - Reducing sexually transmitted infections](#) (NICE, 2022): [Overview | Reducing sexually transmitted infections | Guidance | NICE](#)
- c. [The National Health Service \(Pharmaceutical and Local Pharmaceutical Services\) Regulations 2013](#): http://www.legislation.gov.uk/uksi/2013/349/pdfs/uksi_20130349_en.pdf.
- d. PH51- [Contraceptive services for under 25s](#) (NICE, 2014) [Overview | Contraceptive services for under 25s | Guidance | NICE](#).
- e. [Faculty of Sexual & Reproductive Healthcare Clinical Guidance](#) (FSRH, 2019): <https://www.fsrh.org/Common/Uploaded%20files/documents/fsrh-guideline-contraception-young-people-may-2019.pdf>.
- f. [CG30 – long acting reversible contraception](#) (NICE,2019): <http://www.nice.org.uk/guidance/cg30>.
- g. [Reference guide to consent for examination or treatment, 2nd Edition](#) (Department of Health, 2009): [Reference guide to consent for examination or treatment \(second edition\) - GOV.UK](#).
- h. [Service Standards for Sexual and Reproductive Healthcare](#) (Faculty of Sexual & Reproductive Healthcare): [Clinical Standards | FSRH](#).
- i. [FSRH Guidance Emergency Contraception](#) (March 2017, updated July 2023) [fsrh-guideline-emergency-contraception03dec2020-amendedjuly2023-11jul.pdf](https://www.fsrh.org/Common/Uploaded%20files/documents/fsrh-guideline-emergency-contraception03dec2020-amendedjuly2023-11jul.pdf) The Community Pharmacy must adopt and operate in compliance with new guidance documents as these are published.

8.2 Programme Governance

The Community Pharmacy will:

- 8.2.1 Manage interventions efficiently with sufficient administrative support for general organisation, Service User contact processes and data handling.
- 8.2.2 Ensure that contact details are up to date on Links for Life and local Integrated Sexual Health Service.
- 8.2.3 Liaise with the local Integrated Sexual Health Service to quality assure the Service and provide guidance on the operational delivery including but not limited to:
 - a. Ensuring minimum standards are met around individual outcomes;
 - b. Compliance in core training;
 - c. Provide consumables;
 - d. Providing local marketing/campaign materials.

9 Quality and safety

9.1 Workforce

The Contractor:

- 9.1.1 Will be accountable for ensuring that the skills, knowledge and competencies of each Community Pharmacy delivering sexual health services are up to date. This must be made available to PSNE upon request.
- 9.1.2 Will have knowledge and skills required for the Service and will be verified using the Declaration of Competence (DoC) system to assure PSNE that Community Pharmacy staff are competent to deliver the service (Appendix 3).
- 9.1.3 Will ensure that all Community Pharmacists delivering sexual health services demonstrate they have completed the Centre for Pharmacy Postgraduate Excellence (CPPE) distance learning courses available from www.cppe.ac.uk (Appendix 3).
- 9.1.4 Will ensure that Community Pharmacists competencies are reviewed and

confirmed at least once every three years as evidence of continuing professional development and maintenance of competence as stated on the individual DoC.

9.1.5 Has a duty to ensure that all staff involved in the provision of the Service have relevant knowledge and are appropriately trained in the operation of the Service.

9.1.6 Must ensure that staff are trained in dealing with Service Users in a person-centred, user-friendly, confidential and non-judgmental manner.

9.1.7 Will work towards the principles of the "[You're Welcome](#)" Quality Criteria.

9.2 Quality Requirements

9.2.1 The Contractor will ensure that the Service is delivered in line with the following quality requirements:

No	Quality Measures	Frequency	Methodology
1	Demonstrate that all staff providing the scheme have successfully completed the CPPE Declaration of Competency.	At commencement of Service and in line with Declaration of Competency Requirements.	Declaration of Competency checklists completed by the Community Pharmacists and records maintained by the Contractor – this must be made available to PSNE, if requested.
2	Review the standard operating procedures for the Service on an annual basis.	Annual.	Standard operating procedure available for inspection by PSNE describing review activities, findings and areas for improvement.
3	Participate in audits of Service provision.	Annual.	PSNE will audit the Service to ensure that delivery is in line with the service specification. The Community Pharmacy will ensure that access to premises and any relevant information is made available to PSNE staff.

4	Co-operate with any locally agreed assessment of Service User experience.	As required by PSNE.	PSNE will inform the Contractor in the event of any Service User experience exercises and ensure that access to premises and any relevant information is made available to PSNE staff or their appointed representatives.
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No	Quality Measures	Frequency	Methodology
5	Ensure there is an appropriate consultation area available for the delivery of the Service to ensure that the needs of Service Users can be assessed and met in a confidential manner.	At commencement of service.	The Community Pharmacy will ensure that access to premises and any relevant information is made available to PSNE staff for the purposes of verification.
6	Ensure accredited Pharmacist and/or appropriate Community Pharmacy staff will complete all necessary documentation and collect data as agreed, to enable monitoring and evaluation of the Service.	Activity information submitted monthly.	Activity information will be available to PSNE via PharmOutcomes.
7	Must maintain appropriate records to ensure effective on-going Service delivery and audit. Records will be confidential and should be stored securely and for the length of time expressed in local NHS record retention policies.	On-going.	PSNE will audit the Service to ensure that delivery is in line with the contract. The Community Pharmacy will ensure that access to premises and any relevant information is made possible to PSNE staff.
8	Will need to share relevant information with other health care professionals and agencies, in line with locally determined confidentiality arrangements, including, where appropriate, the need for the consent of the Service User to share the information.	On-going.	PSNE will audit the service to ensure that delivery is in line with the service specification. The Community Pharmacy will ensure that access to premises and any relevant information is made possible to PSNE staff.

9.3 Data Reporting

Community Pharmacies will ensure that they:

- 9.3.1 Fully record all instances of registration for the C-Card Scheme and condom distribution on the Council's Contracted Provider's Electronic Data Management System.
- 9.3.2 Register interventions provided as part of the C-Card Scheme into PharmOutcomes to enable re-imburement. Data must be provided monthly in arrears and will consist of:
 - a. Number of registrations carried out
 - b. Number of distributions carried out

Reports on C-Card Scheme activity will be found on the Council's Contracted Pharmacy Electronic Data Management System.

10 Pricing and payment

10.1 Price Schedule

- 10.1.1 Payments for supply of Chlamydia and Gonorrhoea screening kits and registration and distribution of the C-Card scheme are:
 - a. Service Users receiving Chlamydia and Gonorrhoea screening kit - £1:00
 - b. C-Card Registration - £8.00
 - c. C-Card distribution - £3.00

- 10.1.2 The Community Pharmacy will not receive a payment for the distribution of Chlamydia and Gonorrhoea screening kits, where consultation with Service User is not provided. All Chlamydia and Gonorrhoea screening kits will be supplied, without charge, to the Community Pharmacy by the Local Integrated Sexual Health Service.

10.2 Payment Terms

- 10.2.1 The Community Pharmacy must record all supply figures on Pharmoutcomes to allow generation of invoices to PSNE.
- 10.2.2 Community Pharmacies will be paid monthly in arrears based on the data reports from Pharmoutcomes.

APPENDIX 1 - declaration of competence

Declaration of competence - locally commissioned community pharmacy sexual health service

Each Sunderland Public Health service has a framework that sets out the core professional competencies required for that service. The framework allows self-assessment of competence and outlines the recommended learning to enable self-declaration.

The **training requirements** to meet the competencies in this DoC and enable self-certification to deliver the locally commissioned Community Pharmacy Public Health services in Sunderland are set out below in boxes 1 and 2:

Box 1: Learning and Assessments - Safeguarding

Safeguarding Children and Vulnerable Adults Knowledge

- Complete the CPPE Safeguarding children and vulnerable adults e-learning (1 hour).
- Pass the safeguarding e-assessment.

Or:

Basic Awareness (Alerter) Training in Safeguarding Adults (level 1)

- Complete the [Sunderland Safeguarding Adults Board e-learning](#) (45 minutes).

Basic Awareness (Foundation) Training in Safeguarding Children

- Complete the Sunderland Safeguarding Children Partnership approved Training www.safeguardingchildrensunderland.com in Safeguarding Children (1 to 2 hours)

And:

- Read and understand the Gillick Competence to enable assessment of young people under the age of 16 years for Gillick Competence. Refer to www.cqc.org.uk/content/nigels-surgery-8-gillick-competency-and-fraser-guidelines

Box 2: Learning and Assessments – Service Delivery

Consultation Skills for Pharmacy Practice (3 hours)

- Complete the CPPE Consultation Skills e-learning or distance learning.
- Pass the consultation skills e-assessment.

Chlamydia and Gonorrhoea Screening (1 hour)

- Read the document **National Chlamydia Screening Programme (NCSP): An Overview** available NCSP website using the following link: www.chlamydia-screening.nhs.uk/ps/overview.asp
- Read the documents **Chlamydia: Looking after your sexual health** and **Gonorrhoea: Looking after your sexual health** available to download as a PDF from the Family Planning Association (FPA) website using the following links:
www.fpa.org.uk/sexually-transmitted-infections-stis-help/chlamydia
www.fpa.org.uk/sites/default/files/gonorrhoea-information-and-advice.pdf
- Please note section 5.1 of the BNF provides a Summary of antibacterial therapy Table 1. The section titled Genital system details the antibiotics regimes for the treatment of chlamydial infection and other sexually transmitted infections.

C-Card Scheme

Complete training provided by the Sunderland Integrated Sexual Health Service to enable access to and use of the QES system, process for accessing supplies and relevant considerations for the scheme.