

Essential Guide to Locally Commissioned Services: Brighton & Hove

On behalf Sussex and Surrey LPCs

Public Health Services Commissioned by Brighton and Hove City Council

Public Health Service	Trαining Requirements	Overview of Fees	Service Level Agreeme nt (SLA) Expiry
Emergenc	Pharmacist providing the service should have	Supply of EHC under PGD	
У	signed the PGD. The pharmacist providing the	Consultation- £18.50 + Latest drug tariff price of cost of	31 st March
Hormonal	service will have the necessary knowledge and	treatment	2026
Contracep	skills to provide the service by completing the		
tion (EHC)	Emergency Contraception Declaration of	In exceptional circumstances where EHC is requested	
	Competence (DoC) on <u>CPPE.</u>	Out of Hours (OOH) and the pharmacist on duty is not	Levonorge
		trained to provide EHC under the B&H PGDs, then EHC	strel
	To provide the Emergency Contraception Service	can be issued over the counter (OTC) according to	Expiry-
	you should complete the Declaration of	Pharmacy (P) medicine regulations. Contractors can	31 st July
	Competence framework at least every two years	claim payment at the current retail price of the EHC medicine and an administration fee from BHCC through	2027
	The contractor should offer a	PharmOutcomes. OOH is defined as 6.30pm to 8am on	PGD Ella
	chlamydia/gonorrhoea self-test to all young people	weekdays and all days at the weekends and on bank	One
	(aged 25 or younger) as part of the provision of EHC	holidays. A maximum of 12 claims can be made per	Expiry-
	as well as to young people requesting condoms via	pharmacy per year. Further claims must be agreed with	31 st July
	the C card scheme. Tests should also be offered to	the service commissioner.	2027
	all people identified at risk of having contracted a STI.	Supply of EHC OTC	
		OTC supply of LGN=Retail price	

	This service can be provided by Pharmacists who have completed all necessary training and updates.	OTC supply of UPA=Retail price Administration fee= £2.00 Treatment – Levonorgestrel or Ella One (Ulipristal acetate 30mg tablet).	
		Payments to be claimed via <u>PharmOutcomes</u> Payments are made monthly.	
Chlamydi	Pharmacist providing the service should have	Supply of treatment under PGD	31 st March
a treatment	signed the PGD. The pharmacist should have completed the Emergency Contraception and	Consultation-£18.50 + drug tariff	2026
under	Chlamydia Testing and Treatment Service	Treatment – Doxycycline	PGD
PGD	Declaration of Competence (DoC) on the <u>CPPE.</u>		Doxycyclin
		Payments to be claimed via <u>PharmOutcomes</u>	e Expiry:
	This service can be provided by Pharmacists who		31 st March
	have completed all necessary training and updates	Payments are made quarterly.	2026
Stop	In order to provide the service it is mandatory to	The stop smoking service has a priority patient tariff	31 st March
Smoking Service	provide NRT voucher scheme.	explained in the table below	2026
	To book on the traning please follow the link:	This service also includes an optional to sign up to offer	
	https://learning.brighton-	Vapes to patients via the voucher scheme for Totally	
	hove.gov.uk/courses/bookings/default.asp?ds=1&	Wicked, this voucher entitles a patient to a starter kit	
	keyword=smoking	delivered to their home address. Please remember to	
	Training reimbursements (section 4 for training detail)	adjust the quit date as this may be later due to delay in obtaining vapes. £4.00 administration fee	

• £75 per member of staff to attend one-day	Stage	Interven	Service Specification –	Ti	Fees
training		tion	Outcome	me	
 £25 annual update meeting 	Initial	Type Face to	Assess the client's	30	Non-
	assessme	Face to	 Assess the client's current readiness 	mi	priori
 £25 new staff to complete online NCSCT 	nt	1 400	and ability to quit	ns	ty
core assessment programme: <u>Stop smoking</u>			 Assess physiological 		group
practitioner training	Quit Date		and mental		s-
	set by		functioning		£20
	patient		 Inform the client 		
			about the treatment		Priori
			programme		ty
			Assess current		group
			smoking		s-
			 Assess past quit attempts 		£25
			Explain how tobacco		
			dependence develops		
			and assess nicotine		
			dependence		
			• Explain and conduct		
			carbon monoxide		
			(CO) monitoring		
			 Explain the 		
			importance of abrupt		
			cessation and the		
			 'not α puff' rule Inform the client		
			Inform the client about withdrawal		
			symptoms		
			Discuss stop		
			smoking medications		
			and vaping		
			 Set the Quit Date 		
			 Prompt a 		
			commitment from		
			the client		
			• Plan for the week		
			ahead – any social		
			occasions?		

	Second week follow up appointm ent or as agreed with patient (a maximum of two follow up appointm ents between day 8 and 27)	Telepho ne support or Face to Face	 Discuss preparations and provide a summary Agree treatment plan - if NRT dispensed it must be provided to the individual upon setting a quit date Complete the relevant sections of the standard monitoring form Book in a face-to- face meeting or phone call for follow up Set a 4-week appointment for CO verification on that date Check in on progress Validate success Reminder of coping mechanisms Discuss any issues with medication/vaping Repeat NRT if required Keep motivated CO reading (if face- to-face appointment) Confirm the importance of abrupt cessation Prompt α commitment from the client 		Non- priori ty group s- £7.50 Priori ty group s- £8.50		
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			D : 1 ·	1		
		•	Discuss plans and			
			provide a summary			
Third	Telepho	•	Check in on	10	Non-	
week	ne		progress	mi	priori	
follow up	support	•	Validate success	ns	ty	
appointm	or Face	•	Discuss any issues		group	
ent or as	to Face		with		s –	
agreed			medication/vaping		£7.50	
with			ensure that the			
patient (a			client has sufficient		Priori	
maximum			supply		ty	
of two		•	Discuss any		group	
follow up			withdrawal		s-	
appointm			symptoms and		£8.50	
ents			cravings / urges to			
between			smoke that the			
day 8 and			client has			
27)			experienced and			
277			how they dealt with			
			them			
		•	Discuss any difficult			
		•	situations			
			experienced and			
			methods of coping			
			Address any			
		•				
			potential high-risk			
			situations in the			
			coming week			
		•	Confirm the			
			importance of the			
			ʻnot a puff' rule and			
			prompt a			
			commitment from			
			the client			
		•	Provide a summary			
Four week	Face to	•	Check on client's	15-	Priori	
follow up	Face for		progress	20	ty	
i.e. 4	CO	•	Validate success	mi	group	
weeks	verified	•	Measure carbon	ns	s-	
after Quit			monoxide levels – CO			
•	1					1

Day (must	Tolorbo		verification must be	£85	1
Day (must be carried	Telepho ne for		verification must be undertaken for		
				for CO	
out	non-CO verified		higher 4-week quit		
between		•	payment to be made	verifi	
day 28	individu	•	If client has not	ed.	
and day	αl Self-		remained smokefree,	£28	
42 from	reported		record as not-quit (if	for	
the quit	quit		the client is ready,	non-	
dαte)			committed and	CO	
			confident to attempt	verifi	
			another quit,	ed.	
			consider setting a		
			new quit date,	Non-	
			assessing readiness	priori	
			to quit, and	ty	
			beginning new	group	
			treatment episode or	s –	
			referring to council's	£75	
			Health Trainer	for	
			Team:	CO	
			www.brighton-	verifi	
			<u>hove.gov.uk/healthyl</u>	ed.	
			<u>ifestyles</u> 01273	£25	
			294589)	for	
		•	Advise about	non-	
			continued	CO	
			medication or vape	verifi	
			use and ensure that	ed	
			the client knows		
			where to obtain		
			further supplies		
		•	Discuss cravings /		
			urges to smoke that		
			the client has		
			experienced and how		
			they can deal with		
			them in the future		
		•	Discuss any difficult		
			situations		
			experienced and		

methods of coping
and address any
potential high-risk
situations in the
future
Inform individual of
further online quit
support resources
available via
Smokefree website
here.
Carry out weight
management
discussion and brief
intervention as per
section 3.4 of this
specification and
issues information
sheet in Appendix 10.
Confirm this on
Pharmoutcomes.
NOTE: A self-reported 4-
week quitter (one without
CO validation) is defined
as someone who reports
complete abstinence
between days 15 and 28
from the quit date with
the 4-week review to be
carried out between day
28 and day 42 from the
quit date. See Appendix 4
for guidance on the
questions required to ask
individuals via the
telephone conversation in
order to make a claim.

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12-week	Face-to-	•	Check on client's	10	CO	
follow up	face for		progress	mi	verifi	
for 4-week	CO	•	Validate success	ns	ed.	
quitters	verified	•	Measure carbon		Priori	
from			monoxide levels –		ty	
priority	Telepho		CO verification must		group	
populatio	ne for		be undertaken for		s -	
ns <u>only</u> (8	non-CO		higher 12-week quit		£40	
weeks	verified		payment to be made			
after 4-	individu	•	If client has not		£16	
week quit	al self-		remained		for	
achieved)	reported		smokefree, record as		non-	
(must be	quit		not-quit (if the client		CO	
carried			is ready, committed		verifi	
out			and confident to		ed.	
between			attempt another		Priori	
the first			quit, consider		ty	
day of			setting a new quit		group	
week 12			date, assessing		s	
and the			readiness to quit,			
last day of			and beginning new			
week 14			treatment episode			
measured			or referring to			
from the			council's Health			
quit date)			Trainer Team:			
1 /			www.brighton-			
			hove.gov.uk/healthy			
			lifestyles 01273			
			294589)			
		•	Advise about			
			continued			
			medication or vape			
			use and ensure that			
			the client knows			
			where to obtain			
			further supplies			
		•	Discuss cravings /			
			urges to smoke that			
			the client has			
			experienced and			
			experienced and			

					,
		how they can deal			
		with them in the			
		future			
		 Discuss any difficult 			
		situations			
		experienced and			
		methods of coping			
		and address any			
		potential high-risk			
		situations in the			
		future			
		• Inform individual of			
		further online quit			
		support resources			
		available via			
		Smokefree website			
		here.			
		<u>mere.</u>			
		NOTE: A self-reported 12-			
		week quitter (one without			
		CO validation) is defined			
		as someone who reports			
		complete abstinence from			
		the date of the confirmed			
		4-week quit date, with the			
		12-week review to be			
		carried out between the			
		first day of week 12 and			
		the last day of week 12 and			
		measured from the quit			
		date. See Appendix 4 for			
		guidance on the			
		questions required to ask			
		individuals via the			
		telephone conversation in			
		order to make a claim.			
Onward	Face-to-	order to make a cialin.	n/α	£3.50	
referrals	face, or	When appropriate, via	ii/u	10.00	
to Health	phone	single point of contact to			
to Health Trainers	pnone online	single point of contact to			
Trainers	online				

		for non- quittersHealth Trainers or call 01273 294589It is important to enter all the conversations at different stages to claim via PharmOutcomes.The pharmacy will be reimbursed for the cost price for the NRT product. (Drug tariff cost).	
Domiciliar y Stop Smoking (DSS) Service	Contractors offering the DSS must meet all the requirements of the Community Pharmacy Stop Smoking Service Specification above. • Contractors must ensure there are no exclusions to the DSS service before visiting an individual. • Lone working and risk assessment policies must be in place to safeguard and protect SSAs providing the domiciliary service. Contractors must ensure that all SSAs providing the domiciliary service have completed a successful enhanced DBS check.	The payment schedule and claim procedure for the delivery of the SS aspect of the domiciliary service is defined in the Community Pharmacy Stop Smoking Service Specification as above. Home visits provided as part of the optional Stop Smoking Services Domiciliary Service (Appendix 6) are paid at £40 per visit for up to three visits per patient.	31 st March 2026
Young Persons (aged 12- 15 years) Stop Smoking Service (YPSS)	Contractors offering the YPSS must meet all the requirements of the Community Pharmacy Stop Smoking Service Specification. • Contractors must ensure that all SSAs providing the YPSS service have completed a successful enhanced DBS check.	The payment schedule and claim procedure for the delivery of the YPSS is defined in the Community Pharmacy Stop Smoking Service Specification. The 4-week quit payment for the Young People's Stop Smoking Service (Appendix 7) is classed as a priority population and will be paid at that tariff plus an additional payment of £30 per patient provided, they achieve a CO verified four-week quit.	31 st March 2026

Public Health Services commissioned by Change, Grow Live (CGL)

Public Health Services	Training Requirements	Overview of Fees	Service Level Agreement (SLA) Expiry
Supervised Consumption	<u>CPPE</u> pack for Substance Use and Misuse every 3 years The Service can be provided by Pharmacist and trained pharmacy staff who have meet the requirement of training. All pharmacists will be required to complete the CPPE Declaration of Competence for Supervised Administration of prescribed medication. It is recommended that all registered pharmacy technicians complete the same declaration. The declaration training and reading and signing the SOP will need to be confirmed on PharmOutcomes via enrolment.	Methadone and Espranor £2.60 Buprenorphine £3.50 Per Supervised dose Missed Dose £1.25 Payments to be claimed monthly via <u>PharmOutcomes</u> .	31 st March 2026
Needle Exchange	<u>CPPE</u> Training and Declaration of Competence for Needle	Needles Exchange payment per transaction: £2.00	31 st July 2025

	Exchange and Supervised services as part of other service provisions.	Payments to be claimed monthly via <u>PharmOutcomes</u> .	
	<u>e-learning for healthcare</u> (elfh) e-learning module Safeguarding Children & Vulnerable Adults and the associated e-assessment		
	The Service can be provided by Pharmacist and trained pharmacy staff who have meet the requirement of training.		
	All pharmacists will be required to complete the CPPE Declaration of Competence for Needle Exchange Programme. It is recommended that all registered pharmacy technicians complete the same declaration.		
Take Home Naloxone Service	Naloxone training can be accessed <u>HERE</u>	Naloxone Supply: £10.00 (VAT exempt) + cost price (including VAT).	31 st July 2025
		Payments to be claimed monthly via <u>PharmOutcomes</u> .	

Locally commissioned services by NHS Sussex Commissioning

NHS Sussex Services	Contact Details	Overview of Fees
Palliative Care Scheme	<u>sxicb.mot-αdmin@nhs.net</u>	£1027 per annum. Pharmacies will be reimbursed to compensate for date expired medicines in the formulary and Community Pharmacy should submit a list of expired stock as per specification.
Supply of Oral Antiviral Medication for the Treatment of COVID-19 and Management of Influenza	<u>sxicb.mot-admin@nhs.net</u>	Initial set up fee (one-off) £490.56 Reimbursement of initial drug stock* As per drug tariff price plus VAT Monthly retainer fee £79.64 PSD professional service fee (out of flu season only) £12 per PSD Reimbursement of influenza stock supplied on PSD (out of season only) As per drug tariff price plus VAT Delivery fee within usual delivery period/catchment area £11 per delivery Delivery fee outside of usual delivery period/catchment area As per receipt supplied Replacement of date expired stock* (alongside supporting evidence) As per drug tariff price plus VAT

Brighton and Hove City Council Local Enhanced Services now known as Public Health Local Service Agreements (PHLSA) - Key Contact Details

Service	Contact	Email address
Substance Misuse	CGL Tina Fowler Pharmacy Liaison Lead 07789414270	<u>Tina.Fowler@cgl.org.uk</u>
Sexual Health Team	Stephen Nicholson 01273 296554	Stephen.Nicholson@brighton-hove.gov.uk
Stop Smoking Service	Alex Buniakin	oleksandr.buniakin@brighton-hove.gov.uk

Disclaimer: All the participating pharmacies must read and understand the service specification for each service. This document must be read and used in conjuction with the service specification/overarcing contract for each service. Please always refer to the updated version of the service specification. This guidance has been produced by LPC after reviewing all the information available to us concerning pharmacy services. Every care has been taken in the completion of this Essential Services reference guide – no responsibility can be accepted for any error or consequence of such an error