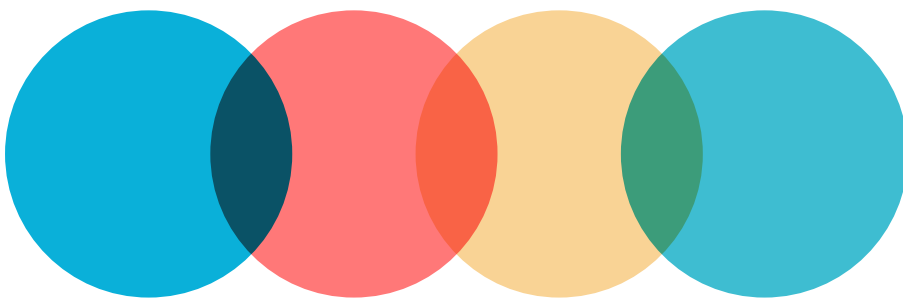


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# National Framework for e-Sexual and Reproductive Healthcare Brochure

## October 2020



# Brochure Navigation

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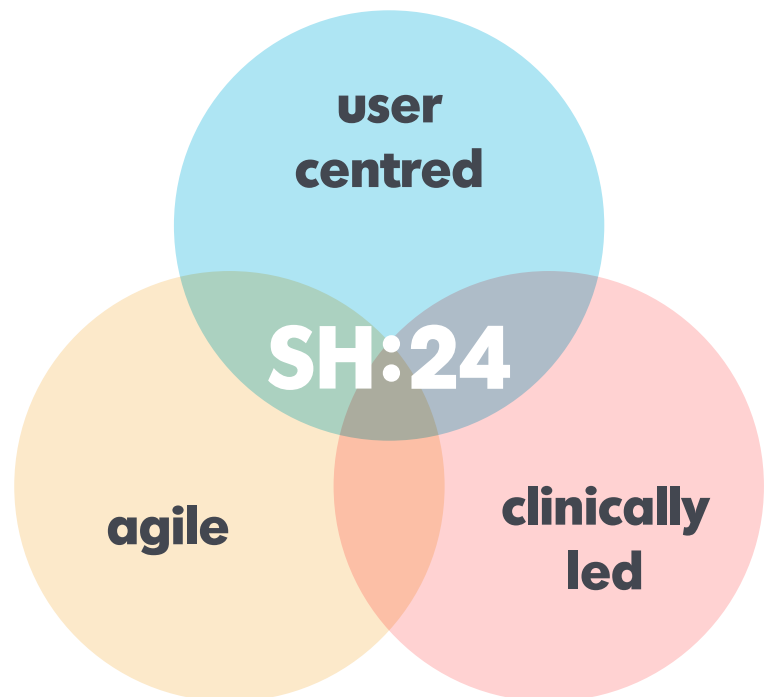
## Why SH:24?

SH:24 is a multiple award-winning, not-for-profit Community Interest Company. We work in partnership with the NHS with the explicit aim of improving the sexual and reproductive health of the population.

**SH:24 is a clinically-led not for profit, committed to social value.**

**We provide a holistic service with users at the heart.**

**We enable behaviour change and deliver system transformation.**



**SH:24** seeks to improve the sexual and reproductive health of the population and realise efficiency savings through a more holistic, user-centred service. SH:24 works to:

- Improve the sexual health of the local population through rapid diagnosis and treatment of infections
- Promote self-management by improving access and experience through a convenient, discreet, user-centred 24/7 service
- Increase productivity and reduce costs by freeing up capacity in existing specialist services for more complex case management

## What makes us different?

SH:24 was the vision of a group of public health doctors and sexual health clinicians who wanted to improve access to sexual health services and sexual health outcomes in an area of London with the highest rates of sexually transmitted infections and insufficient clinic capacity.

Through the use of user-centred design and technology, the group aspired to promote self management among service users and free up clinical capacity for complex cases and for those who need it most. The technology and expertise which built SH:24 was made possible through a grant from Guy's and St Thomas' Charity.

### 1. A pioneering service, built around users



SH:24 is the exception among online Sexual and Reproductive Health service providers. We prioritise user needs and experiences, using human-centred design and an iterative development process, in line with robust academic evaluation.

This has enabled SH:24 to become the UK's leading online Sexual and Reproductive Health service and the first to provide these free services to users:

- Chlamydia treatment (July 2016)
- Oral contraception (August 2016)
- Genital warts and herpes treatment (October 2018)
- Emergency contraception (March 2020)

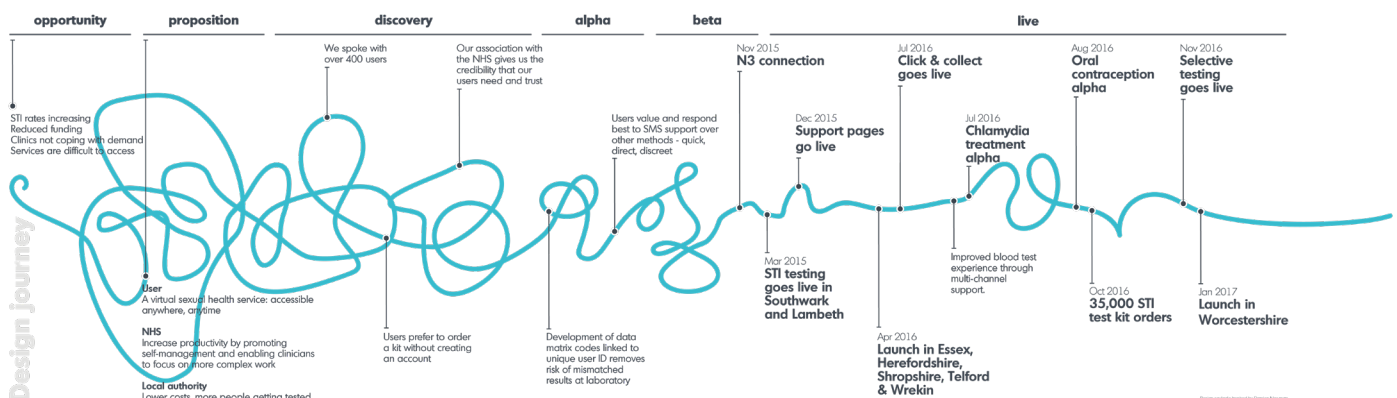


Figure 1. Iterative Service Development Timeline

## 2. A clinically-led service



SH:24 brings the expertise of a dedicated, in-house, experienced team of NHS clinicians and sexual health support workers, available to users at every service interaction. Our clinical team perform results management as well as over-the-phone support with all aspects of users' sexual and reproductive health.

The SH:24 team is made up of senior NHS and public health consultants, as well as designers, software developers, clinicians, agile project managers and data analysts. Collectively, we have in-depth knowledge of the sexual and reproductive health economy and have demonstrated the ability to lead change.

## 3. Rapid service mobilisation



The SH:24 team has extensive experience of working with local authorities, NHS providers and third sector organisations to transform sexual health service delivery.

We create bespoke service design solutions that meet the needs of local populations and of partner clinical teams. Having mobilised in over 70 different areas over the last 5 years, our service has evolved. A bespoke offer can now be up and running, including local adaptations, within 4 weeks.

## 4. A trusted, robust provider



As a clinically-led service, we are committed to maintaining and building on the quality and expertise that have defined modern NHS sexual health services, as those services move online. We partner with industry-leading pathology and pharmacy providers, ensuring the continued delivery of safe and resilient services, even in light of the current challenging times.

99.0% of our users rate our service 4 or 5 out of 5. We believe that sustained growth and uptake needs to be driven by a trusted and consistent brand, effective search engine optimisation and robust referral pathways, rather than expensive marketing.

## Unique features

### Continuous development

SH:24 continues to evolve and improve - optimising the service, soliciting feedback and involvement from service users, providers and commissioners.

### Training and support

SH:24 provides its partners with ongoing support and training throughout the delivery of services, not just when they start.

### Robust safeguarding protocols

SH:24 has developed special safeguarding questions, where an affirmative answer will alert the clinical team to ensure follow up and appropriate referral where necessary.

### Clinical support

SH:24's 'Talk to us by text' service allows users to seek clinical or non-clinical support 7 days a week, posing their questions by text message or requesting a call back from a senior clinician. SH:24 service users can also access real-time, discreet support via webchat with a clinician.

### Information for all

SH:24 has developed a series of online resources specifically designed to improve usability and access. By carefully simplifying and illustrating complex content, SH:24 has developed easy-to-read guides on STIs, contraception and genital health.

### Health promotion

Health promotion opportunities are firmly on SH:24's agenda. SH:24 continues to use its rapport with service users to drive awareness, educate and enable healthier behaviours, and promote self care.

### Registration with regulatory bodies

SH:24 is registered with the CQC for the Treatment of disease, disorder or injury; transport services, triage and medical advice provided remotely.



Laboratory partners are accredited to ISO 15189 - the appropriate accreditation for laboratories providing testing on clinical samples i.e. those from humans for screening, diagnosis and monitoring. Laboratories are also registered with CQC for diagnostic and screening procedures.

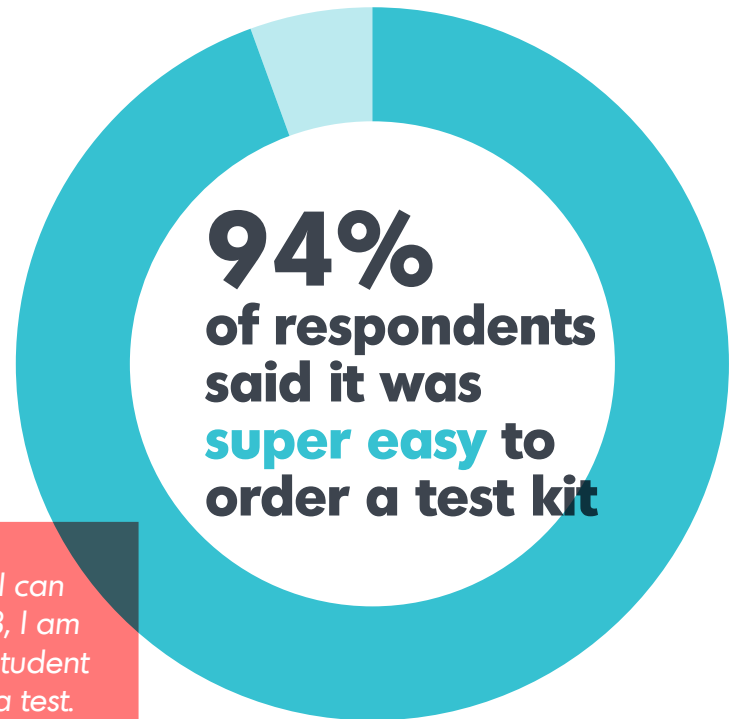
Pharmacy partners are registered and regulated by the MHRA, CQC and the General Pharmaceutical Council.



Certified cyber security via the Cyber Essentials (CREST approved). Completion of NHS Digital's Data Security and Protection Toolkit.



**4.93 out of 5**  
OVERALL SATISFACTION



*"I was so impressed by this incredible service. I can think of endless reasons why. At the age of 38, I am reminded of how it felt to be an 18 year old student having to deal with the logistics of arranging a test. I think the whole experience has eliminated the shame and awkwardness that may put off many people from seeking help. My mother is a former Sexual Health nurse and could not believe it when I told her about this service – absolutely fantastic!"*

**Service user**

*"During the mobilisation of the new model in Medway, SH:24 were proactive and with the support of their visual project management tools were able to deliver exactly what they said they would and on time. SH:24 did a great job in preparing the clinical staff for the implementation of the service. They communicated to staff clearly and consistently and resolved any anxieties they had about delivering clinical services."*

**Jinny Robinson, Head of Sexual Health Services, Kent Community Health NHS Foundation Trust**

**Figure 2.**  
Service User Feedback

The following sections give more detail of how our service works, how we can adapt our unique service to the needs of your users, local clinicians, service managers and staff, and the measures we take to maintain high standards of safety and quality while continuously evaluating and improving our offer.

## 1. A pioneering service, built around users



SH:24 is the exception among online Sexual and Reproductive Health service providers. We prioritise user needs and experiences, using human-centred design and an iterative development process, in line with robust academic evaluation.

### Service Overview

SH:24 empowers people to maximise their sexual and reproductive health and wellbeing through holistic Sexual and Reproductive Health care.

Users move seamlessly between STI testing, treatment and contraceptive services and can access specialist support, developed in line with BASHH and FSRH policies and standards.

### Services are available individually or as a fully integrated package

- **STI self-sample test kits** for Chlamydia, Gonorrhoea, Syphilis, HIV, HBV and/or HCV . Kits are dispatched by our Logistics centre in Keele University via post or local click and collect. Testing can include an optional offer of **postal treatment for uncomplicated chlamydia** infection, and/or packs of condoms and lubricant
- Assessment for **emergency contraception** and delivery of medication via Royal Mail 24hr Tracked post. This can include the optional offer of packs of condoms and lubricant, 3 months of bridging POP, pregnancy tests, and chlamydia screening kits
- Assessment for **contraception** delivered via Royal Mail 24hr Tracked post including the combined oral contraceptive pill, the progestogen-only pill, the contraceptive patch, the contraceptive ring and the self-administered contraceptive injectable. This can include the optional offer of packs of condoms and lubricant, and STI test kits with postal chlamydia treatment



SH:24 Service Map

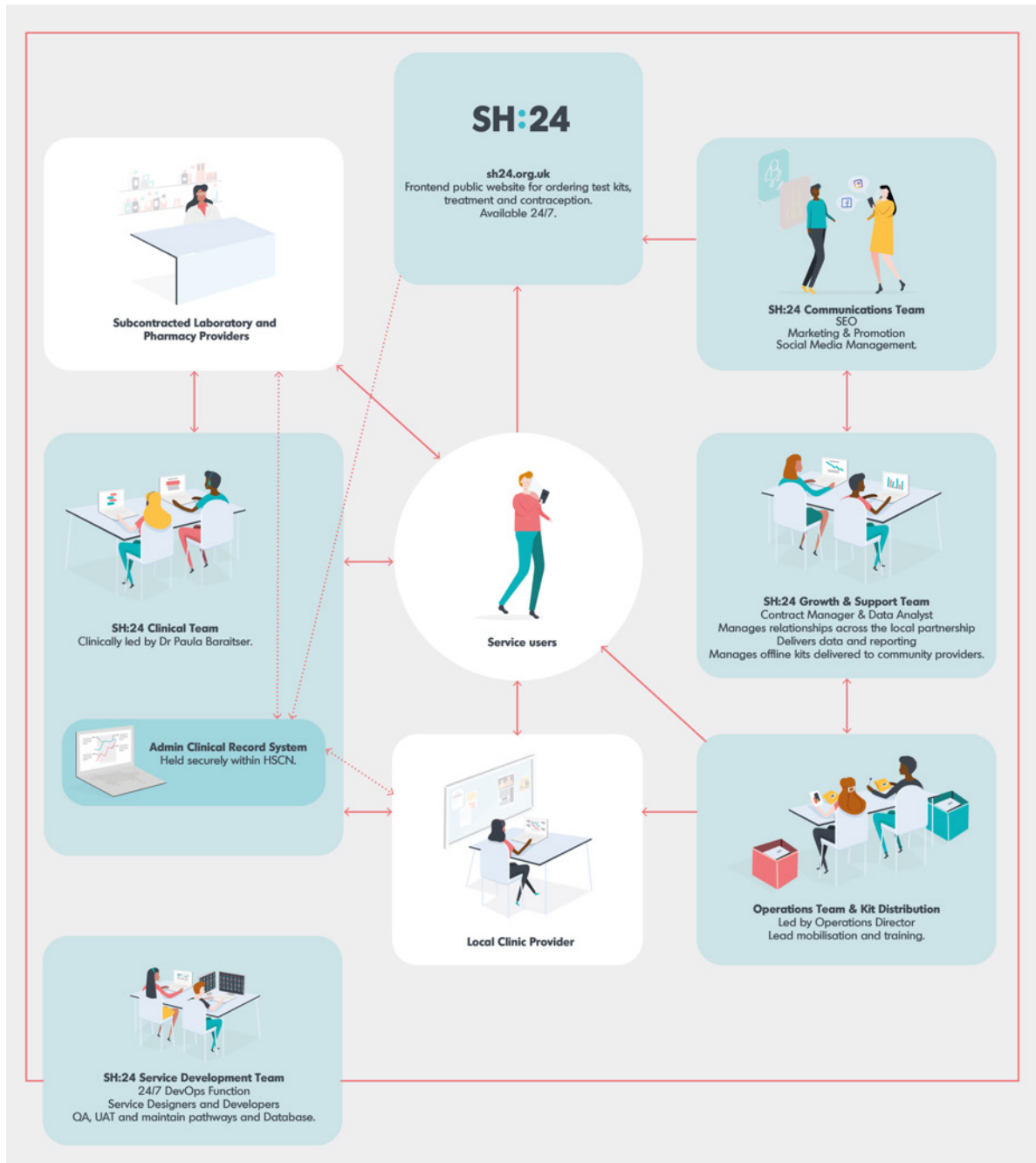


Figure 3. Service Map

## Online Platform - [www.sh24.org.uk](http://www.sh24.org.uk) (frontend)

What your service users will see

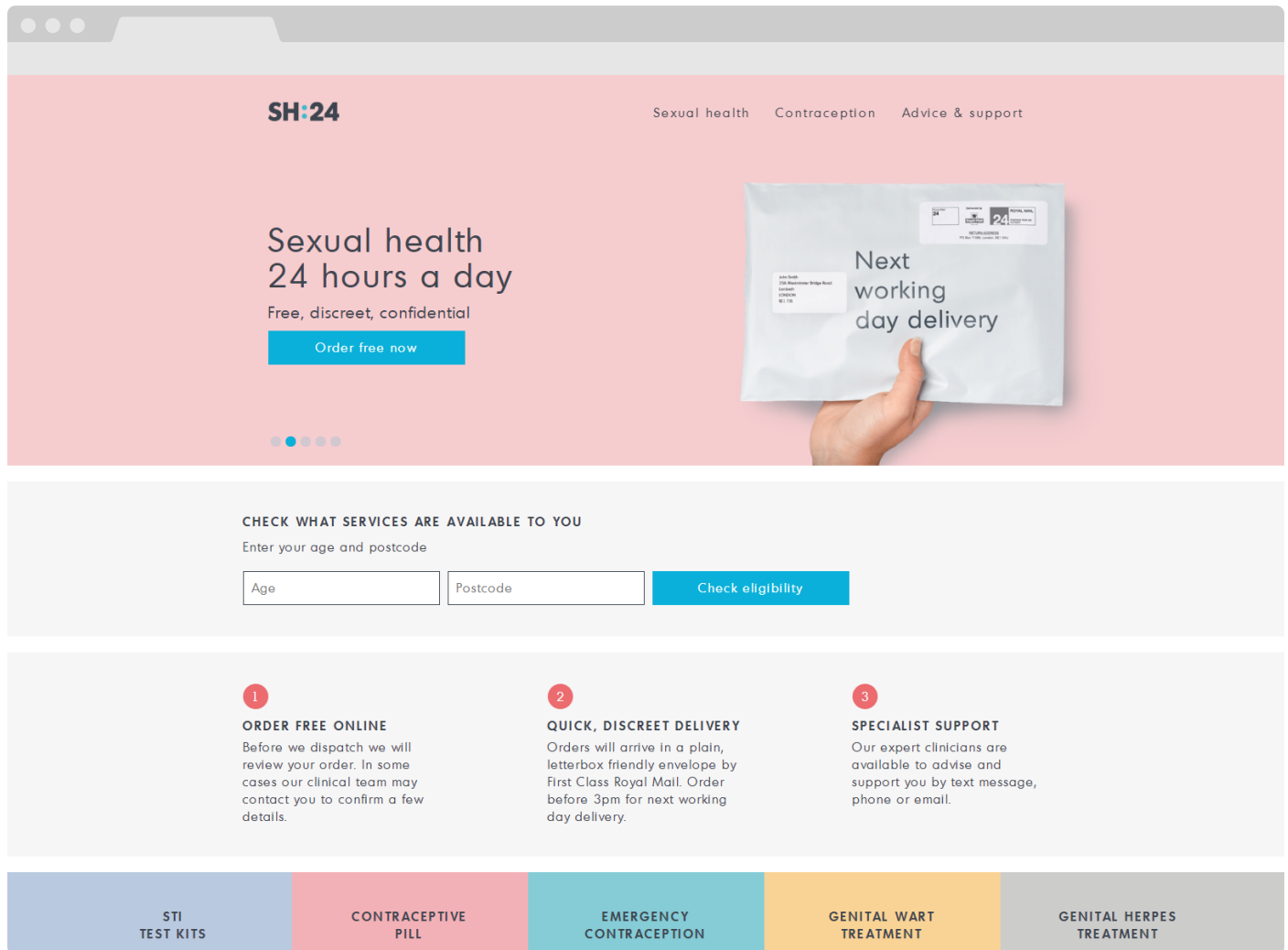


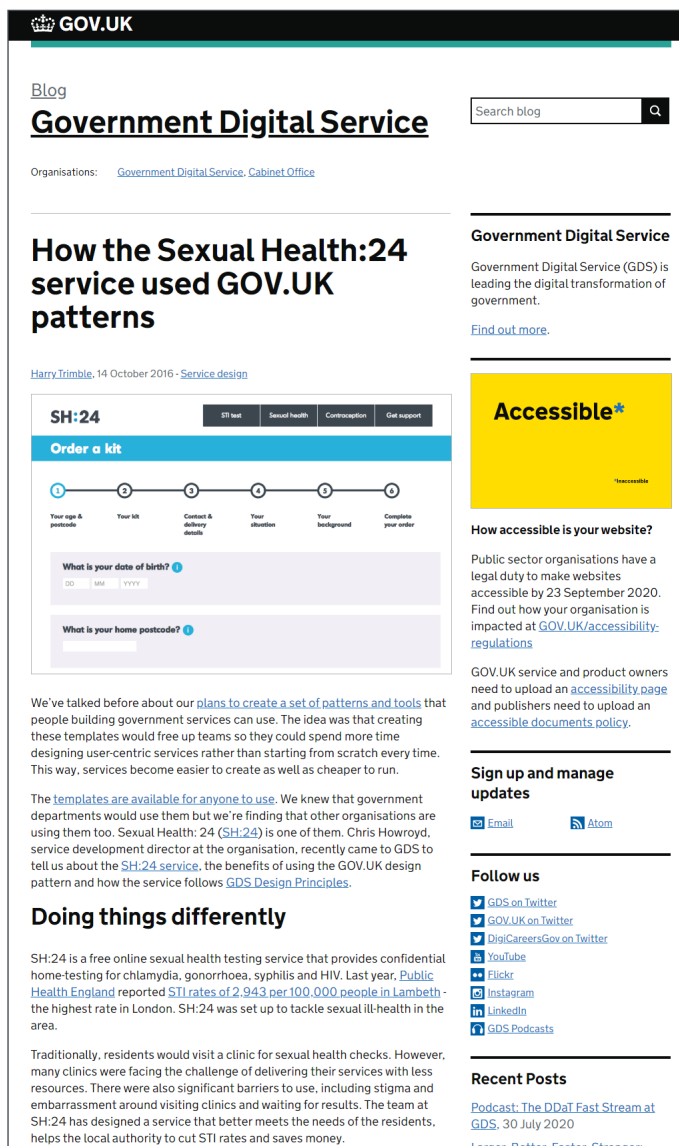
Figure 4. Homepage Screenshot

When service users land on our homepage they can access:

- An eligibility check by inputting their age and postcode
- A list of services they are eligible for, with signposting to where they can access these for free locally, or navigation to the online order journey. During development, users told us that creating an account was a barrier due to confidentiality concerns, so SH:24 doesn't require this extra step
- Clear and simple information about how to use our services
- Comprehensive information pages (via the top menu) on STIs, genital health, contraception, common sexual problems and STI prevention. Interactive tools help users to make decisions, such as easily comparing different methods of contraception.
- Signposting to free local and national support organisations for all aspects of their sexual health

## Platform Development and Standards

The development of the SH:24 platform followed Government Digital Service and Agile design principles. Our successful journey in bringing these methodologies together was used as a case study on the GOV.UK Blog: <https://gds.blog.gov.uk/2016/10/14/how-the-sexual-health-24-service-used-gov-uk-patterns/>



The platform and our content have been co-produced with service users, designers, specialist sexual health clinicians and public health consultants; iterated upon with continuous feedback and optimisation.

Our platform complies with the Accessible Information Standard. Google Translate is embedded throughout the site, so all users can get the information they need, including those with visual impairments and learning difficulties. We make ongoing accessibility improvements through user testing, feedback and audit (e.g. we monitor drop off rates between the pages of the order journey, and make adjustments to improve the user experience).

Figure 5. Government Digital Services Blog

## Admin Clinical Record System - [www.admin.sh24.org.uk](http://www.admin.sh24.org.uk) (backend)

How you will access the service as a Customer

SH:24 has developed its own clinical record system, 'Admin'. SH:24 grants access to Admin to local clinic partners to allow seamless transition of patient care and live reporting.

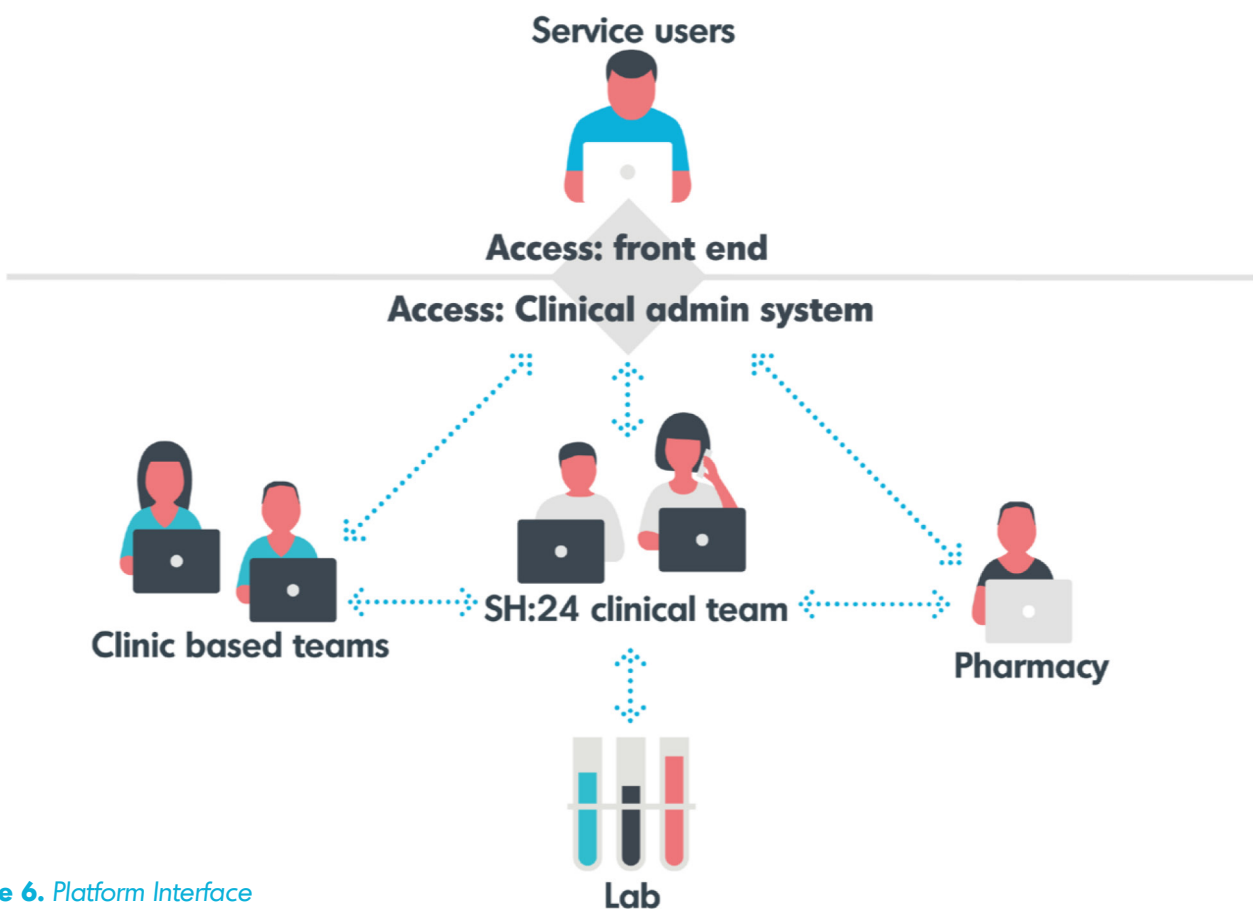


Figure 6. Platform Interface

Admin ensures a safe and efficient clinical management and prescription process.

- Clinicians are presented with a complete clinical history pre-filled by the service user
- Contraindications or clinical concerns are highlighted with colour coded flags
- SH:24 and local clinicians are able to use the simple search function to find a patient's record and can filter users in their area
- Clinicians can communicate directly with service users by SMS via Admin and log any phone discussions

The service user’s clinical record logs and details all communication via text or phone and allows different clinicians to effectively follow up with and support the user.

Certain flags can be managed by SH:24’s dedicated clinical team or local clinicians.

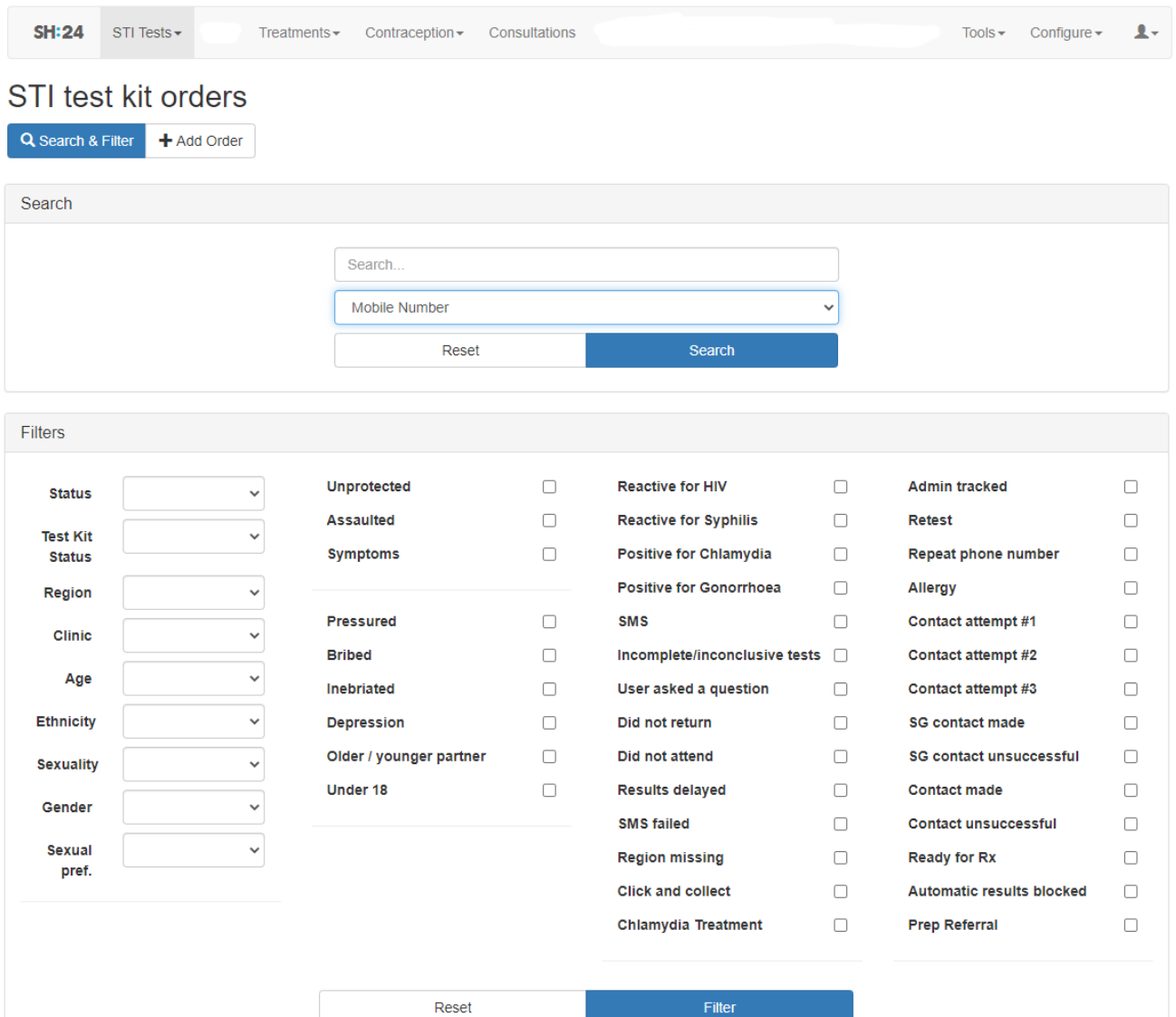


Figure 7. Admin Clinical System view for local clinicians - screenshot

Admin is held securely within the NHS Health and Social Care Network and has been optimised in collaboration with clinic staff. We only capture and store information that is necessary for our service delivery. We record and store data in line with BASHH guidelines and the NHS Records Management: Code of Practice.

### **Platform Support**

The platform is supported by our server provider Amazon Web Services (AWS) and our in-house Design and Development Team, with a 24/7 DevOps rota to manage any IT issues.

The platform has been developed to provide added resilience through a multi-lab adapter which easily (and rapidly) plugs in to multiple laboratory providers to diversify our supply chain.

## i) STI Testing

SH:24 has a number of testing and delivery models available to meet the needs of local users, clinicians and Customers.

SH:24 has the full capability to assess needs and to provide testing for Chlamydia, Gonorrhoea, HIV, Syphilis, HBV and HCV as required.

Testing configurations are flexible and can be modified at any point in time.

Customers will be required to determine who is eligible and what tests are offered to each user based on responses to the online risk assessment.

### SH:24 Testing Options

#### T4/TT Online Model

This offers a full STI test to all users, with MSM offered triple-site testing (TT):

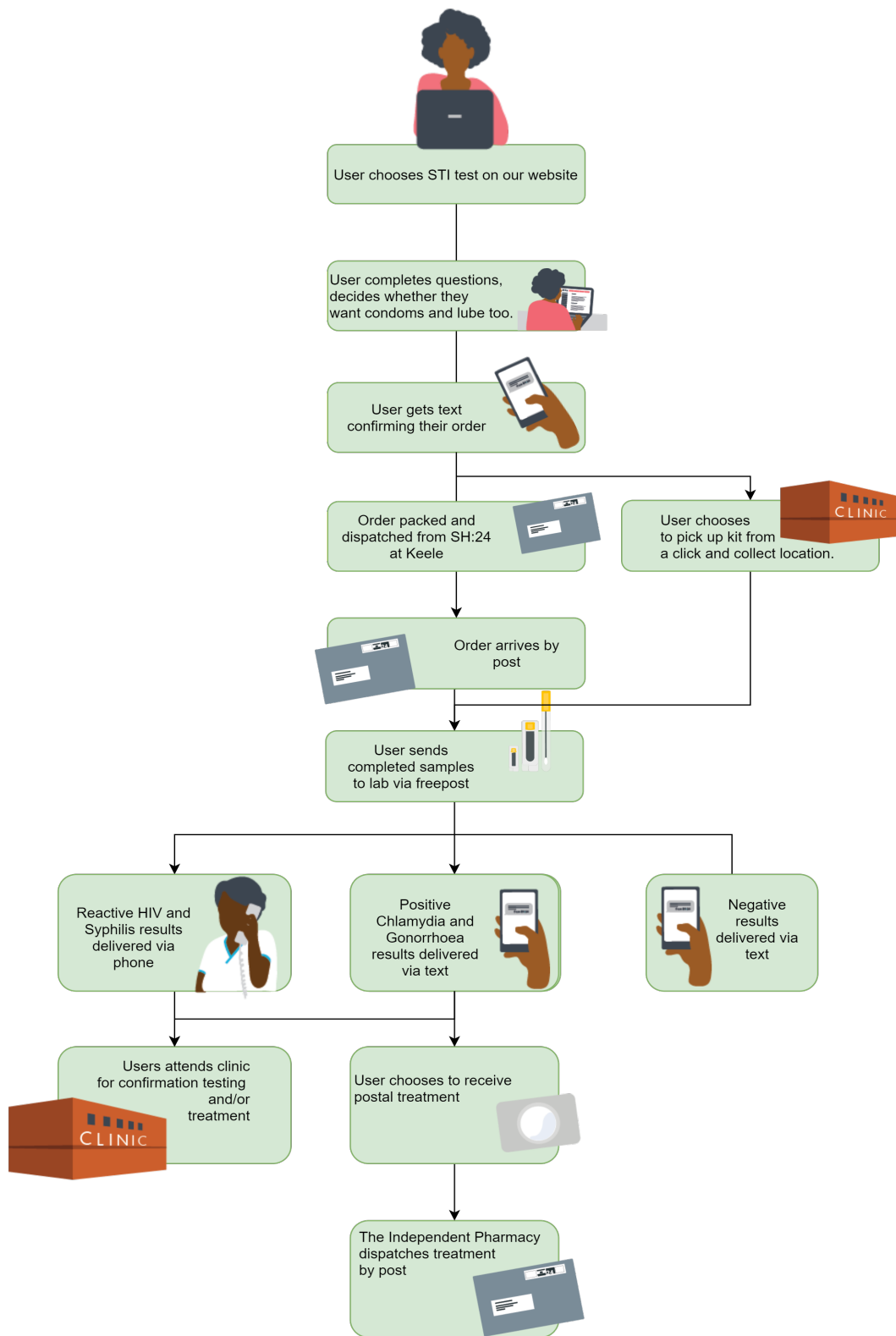
- T4, male (urine) or female (high vaginal swab) test for chlamydia, gonorrhoea with blood test for syphilis and HIV
- T4/TT, triple site (anus, throat, urinary tract) test for chlamydia and gonorrhoea with blood test for syphilis and HIV (test assigned to MSM)

#### T4/TT & T2 Online Model

As above, but under 25s who are not MSM and/or a 'defined ethnicity' are only offered a T2 chlamydia and gonorrhoea screen. Customers can select what tests should be available for each risk profile, with different balances available between cost and breadth of testing.

#### Example 1 of triage criteria selected:

	Under 25	25+	Ethnicity: Black (African/ Caribbean/ British)	MSM
Genital CT/GC	Ticked	Ticked	Ticked	Ticked
Oral CT/GC	Unticked	Unticked	Unticked	Ticked
Rectal CT/GC	Unticked	Unticked	Unticked	Ticked
Syphilis	Unticked	Ticked	Ticked	Ticked
HIV	Unticked	Ticked	Ticked	Ticked



**Figure 8.**  
STI Testing service map



## Selective Testing

Service users can be given the option to modify their recommended tests on the order confirmation page. Customers can choose to allow users to opt in and/or out of any recommended tests. This helps to promote self-efficacy, improve return rates and reduce wastage.

The screenshot shows the 'Order a kit' page on the SH:24 website. At the top, there are navigation links for 'Sexual health', 'Contraception', and 'Advice & support'. The page title is 'Order a kit'. Below this is a progress bar with seven steps: 1. Your age & postcode, 2. Your kit, 3. Contact & delivery details, 4. Your situation, 5. Your background, 6. What would you like to test for? (the current step), and 7. Complete your order. The main content area is titled 'What would you like to test for?' and includes a sub-instruction: 'Select the tests that you would like us to send you - you can deselect a test by clicking a ticked box'. There is a list of five test options, each with a checked checkbox, the test name, the sample type, and a '+' icon for expansion:

- Genital Chlamydia and Gonorrhoea**  
Urine sample
- Oral Chlamydia and Gonorrhoea**  
Swab
- Anal Chlamydia and Gonorrhoea**  
Swab
- Syphilis**  
Blood sample
- HIV**  
Blood sample

At the bottom right, there are 'Previous' and 'Next' buttons.

**Figure 9.** Screenshot of Selective Testing What would you like to test for?

## Retesting Frequency

Service users who order a repeat test within a defined period are flagged to our clinical team to assess the user's need to re-test, provide information to the user on when it's appropriate to re-test or refer the user to clinic if our clinical team identifies signs of vulnerability or service misuse.

We can change the repeat user flag to any defined period (usually 6 or 12 weeks) depending on the Customer's preference, but maintain the ability for service users to order a test of cure. This can be modified for different user groups, for example 6 weeks for MSM and 12 weeks for all other users.

## Distribution Methods

Distribution methods offer varying ways to improve patient access to postal testing and support a wider integrated partnership.

### Online Home delivery or Click and Collect

This is the core of the SH:24 service, and represents the highest amount of activity, and greatest access for patients.

#### Supporting key groups with bespoke testing offers

If customers prefer that certain service users are referred by the local clinic to use SH:24 we can provide any number of tokenised URLs (such as <https://sh24.org.uk/localclinic>) to give to service users who are clinically indicated. Testing models can be differentiated through the tokenised URLs in order to provide selected users with a different user journey.

### Local Distribution for Click & Collect

Customers can identify local venues (such as sexual health clinics or pharmacies) or outreach services where users can order and/or pick-up their STI test kits.

### Ordering from Click & Collect Kiosks

We can set up a tablet within local venues for users to order their STI test kit or contraception. Users can pick up their test kit immediately from this venue or have it posted to their address.



Figure 10. Kiosk user journey for click & collect

### Offline STI Kits (including BBV testing kits for Drug and Alcohol services)

Where digital assessments are not appropriate, we offer local distribution of offline kits. There are two options which require the either the user (16 years and above) or the outreach worker on behalf of the user (13 years and above) to complete a paper request form to be returned with their samples.

Venues and services are associated with our Admin platform so we can monitor volumes, uptake, returns and outcomes from each site.

**Offline user kit:**

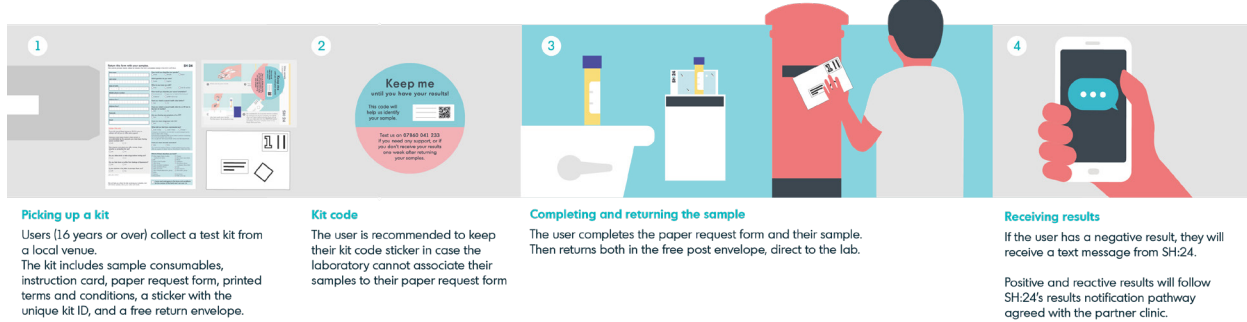


Figure 11. Offline user kit pathway

**Offline worker kit:**

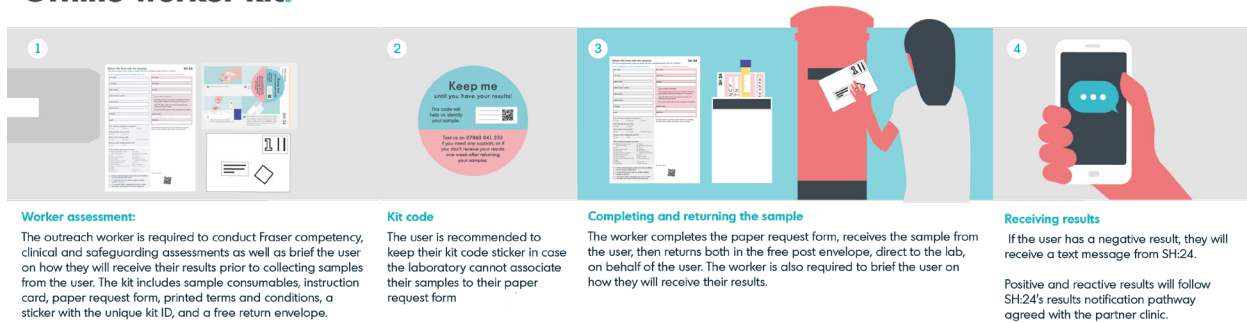


Figure 12. Offline worker kit pathway

## Postal Chlamydia Treatment

SH:24 offers doxycycline (or azithromycin where doxycycline is contraindicated) for the treatment of chlamydia.

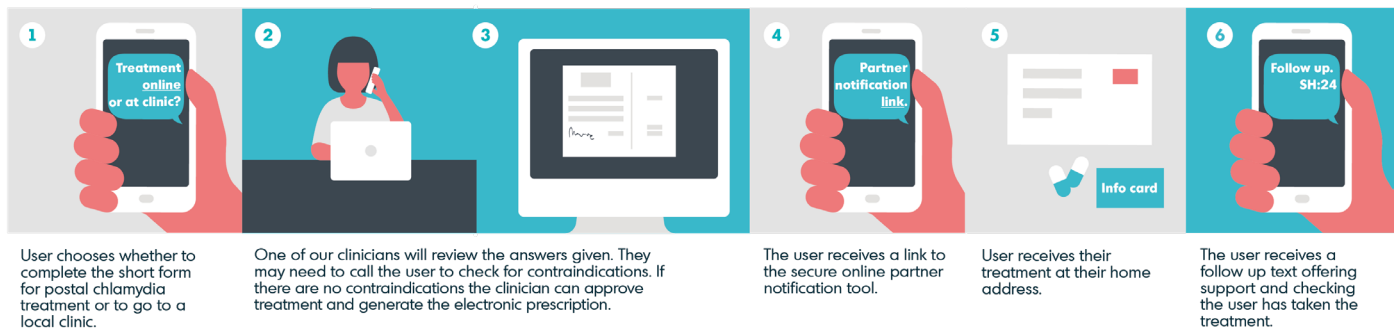
Service users aged 18+ with a positive genital chlamydia result receive an SMS and options to obtain postal treatment or receive treatment at their local clinic.

16 -17 year olds are sent a message asking for a good time to talk. A clinician will call them to revisit safeguarding questions and discuss treatment options.

Users who choose postal treatment complete an online assessment form, which identifies contraindications.

If no contraindications are identified, the clinician makes the decision to treat. Users with contraindications will be referred in to their local clinic.

### Chlamydia treatment: user journey



### Prescribing: Chlamydia Treatment

If the decision to treat is made, SH:24 generates and signs a private prescription with an advanced electronic signature, compliant with the Human Medicines Regulations 2012. Prescriptions are accessed by our partner pharmacy, The Independent Pharmacy (TIP, GPhC 1120908) through our Admin system for dispensing and dispatch.

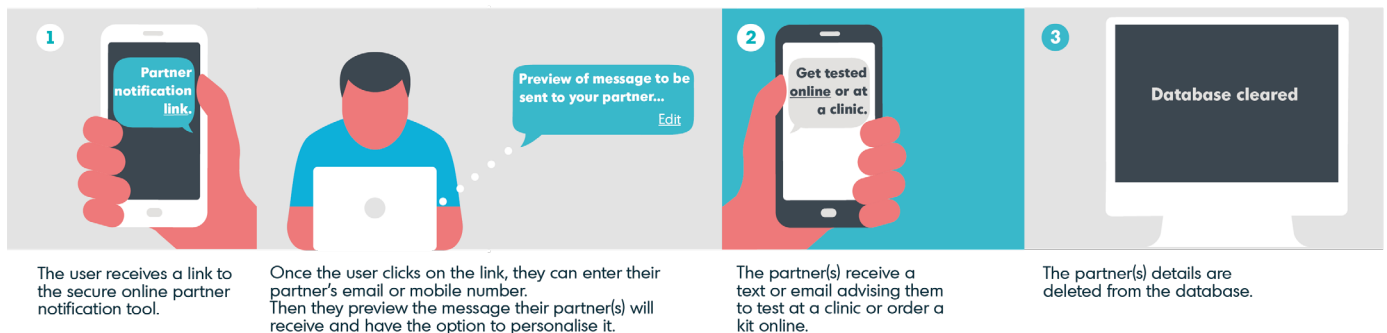
When dispatched, the user is informed by SMS that their treatment will be sent the same day by Royal Mail 24hr Tracked. Tracking info is also sent to the user so they can see the journey of their medication. Another SMS is sent 7 days later to confirm receipt and successful completion of treatment.

## Partner Notification

SH:24 works with SXT (sxt.org.uk) to provide a digital Partner Notification (PN) service via SMS or email.

SXT's PN has been developed by NHS professionals to meet the requirements of BASHH's chlamydia management guidelines (2015) and the Society of Sexual Health Advisors 'Guidance on Partner Notification' (2015).

### Partner notification: user journey



Once chlamydia treatment prescription has been authorised, the SH:24 team inputs the information into SXT. The user is notified that they will be sent an SXT weblink, to enter their partner/s' contact details (mobile phone/email).

SXT offers an interactive digital contact slip (idCS) and referral service, allowing it to contact partners anonymously, advise them they have been in contact with someone with an STI, and provide a link to local clinics, where they can access testing and treatment.

## ii) Contraception

Since 2016, SH:24 has offered a consultant-led contraception service in line with the Faculty of Sexual and Reproductive Healthcare’s (FSRH) medical eligibility guidelines to ensure safe prescribing. We prescribe contraception for over 2,500 people each month.

SH:24 believes informed and supported contraceptive decision-making is essential. We offer quality online information and professional support to help women find contraception that is right for them.

Customers can choose from the following methods to offer to people in their region:

- Combined oral contraceptive and progestogen-only pills
- Contraceptive ring
- Contraceptive patch
- Self-administered injectable contraception

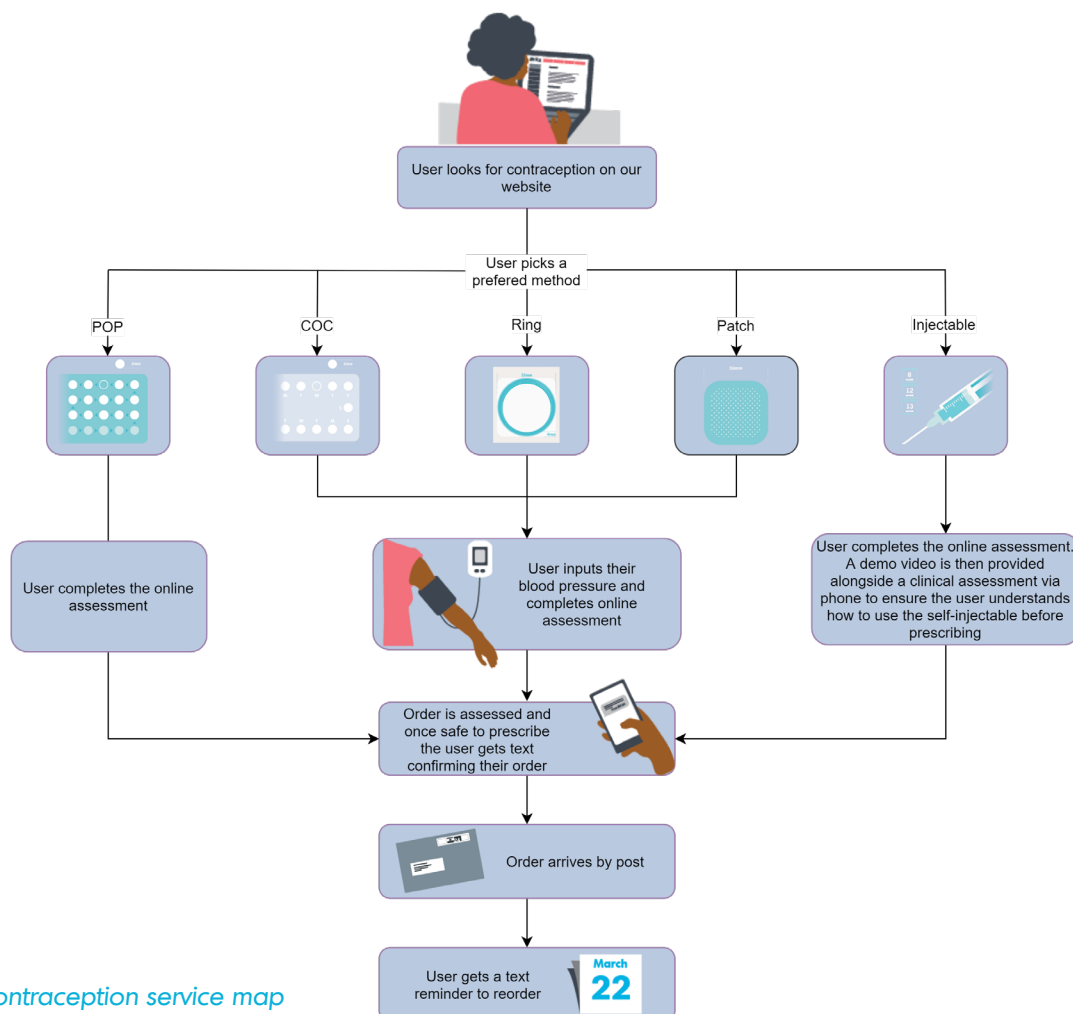


Figure 13. Contraception service map

## Flexibility and Enhanced offer

Customers can:

- Determine user eligibility based on age and postcode
- Choose add on services such as chlamydia screening, and packs of condoms or lubricant

## Self-injectables

SH:24 has a specific protocol in place for the management of users of self-injectables who have already had their first injection in a face-to-face clinical setting. Users who order this method from SH:24 for the first time are sent a short video on how to administer the self-injectable. A specialist clinician will call them to talk through the video, identify concerns and answer questions. If the clinician assesses the user as understanding the process they will prescribe their order.

## Combined Methods





Our approach to safe prescribing for combined methods is to provide additional information and support to help users understand the connection between blood pressure and taking the pill. This has been informed by an NIHR funded research study.

**Order combined contraceptive pill**

1 — 2 — 3 — 4 — 5 — 6 — 7

Start your order    About you    Your health    Your health history    Contact & delivery details    More about you    Complete your order

**Hello, we are the specialist clinical team who are working with you**  
We need to ask you some questions about your health before we can safely prescribe the combined pill for you.

Dr Paula Baraitser    Dr Gillian Holdsworth    Emma Fletcher  
Senior nurse    Charlotte Sullivan  
Senior nurse

**We want to help you understand the connection between blood pressure and taking the combined pill.**  
Blood pressure is the force that moves blood around your body. It is normally measured by a cuff around your upper arm.  
Everybody's blood pressure is different, and it can change (become high or low) without you noticing.  
For some people, the combined pill makes their blood pressure higher. Unmanaged high blood pressure puts you at increased risk of stroke or heart attack. It is important to check your blood pressure before you start taking the combined pill, and once a year whilst you continue to take it.

**Need help?** If you have any questions, or need help or advice, text: 07860 041 233 to speak to our clinical team.

**Figure 14.** Screenshot - step 1 combined oral contraception order journey

Once the order is complete, the information is summarised on the clinical record within Admin, with any contraindications flagged.

Health Questions	
Journey Version	2
Stopped smoking	N/A
Blood Pressure Systolic	134
Height (cm)	165
BMI	27.2
Taken COC before?	Yes
Baby (2 Months)	No
Unusual vaginal blee...	No
Allergy oestrogen pro...	No
Clot/stroke/heart dis...	No
Fh, Breast cancer (2+ ...	No
Gastrointestinal/gallb...	No
Migraines	No
Autoimmune disease	No
Advised Against	No
Does smoke	N/A
Normal period (4 wks)	No
Blood Pressure Diast...	85
Weight (kg)	73.94
Age	29
Ordered COC from S...	No
Breastfeeding	No
Pregnancy risk (3 mths)	Yes
Taking Prescription	No
Breast cancer	No
Liver problems	No
Diabetes	No
Limited mobility	No
Serious Health Issues	No
Fh, clot/stroke/heart ...	No
Existing contraception	Patch - Evra

Figure 15. Screenshot of contraindications flagged in the Admin Clinical Record System

## Prescribing: Contraception

After the contraception order has been reviewed and confirmed as appropriate for prescription, an SH:24 prescriber generates and signs a private prescription with an advanced electronic signature, compliant with the Human Medicines Regulations 2012, Regulation 219. These are then accessed by our partner pharmacy The Independent Pharmacy (TIP) through Admin for dispensing and dispatch.

An A6 insert is packaged with the medication (and manufacturer's instructions) with detailed information including how to take the medication and possible side-effects.

All of our instruction and guidance cards are developed with users and iterated through user testing.

The card includes an offer of further support, and links to information and tools to support effective contraception choices.



## Combined pill

Ensure that you read the enclosed instruction leaflet.

**Take one pill every day for 21 days, then have a 7 day break.**

Choose a convenient time in the day to take your first pill, and continue to take it close to that time every day.

If you miss pills you may not be protected against pregnancy.


**Side effects**

Serious health risks are very rare, but if you have any of these symptoms - stop the pill and see your doctor immediately:

- painful swelling of one leg
- chest pain, difficulty breathing or coughing blood
- numbness or weakness of one arm/leg
- first attack of migraine on the pill.

**Repeat order:**

We will text you two weeks before you are due to run out with a link to repeat order.



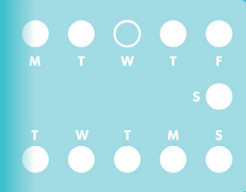
**More information**

Watch this video on how to take the combined pill:  
[bit.ly/taking-coc](https://bit.ly/taking-coc)

Read about how the combined pill works, its effectiveness, what to do if you forget to take it, side effects and risks here:  
[sh24.org.uk/contraception/combined-pill](https://sh24.org.uk/contraception/combined-pill)

**Things to consider**

- pills do not protect you from STIs - use a condom as well
- tell your doctor you are taking the combined pill if you are prescribed medicines.



**Figure 16.** Combined hormonal pill instruction card

TIP dispatches all contraception methods using Royal Mail 24hr Tracked (not signed). SH:24 texts all users within 48 hours of dispatch to confirm receipt, provide an opportunity for the service user to ask any questions and offer a contraceptive choices discussion with the user via text or phone.

## Interface with local service providers

All patient information is kept on the SH:24 electronic patient record and can be viewed by local clinicians via Admin. During the order process service users are asked if they consent to their information being shared with their GP. SH:24 will then inform their GP via secure email.

**Would you like us to share a record of the services we provide you with your GP?** i

yes  no

We will contact you by SMS or telephone to confirm the details of your GP. We only share user records with GPs by secure email or registered post on request.

Previous
Next

**Figure 17.** Screenshot of request for consent to share information with GP

## Supporting informed contraceptive choices

We believe that people should be empowered to find contraception options which work for them. 'The Pill or What?' (<https://discuss.sh24.org.uk>) is a clinically moderated discussion forum that combines the shared experience of a social networking site with the individual clinical advice of a contraceptive consultation. It adapts highly innovative, online, supported self-management strategies from mental health care and translates them for contraception.

**SH:24** Sign Up Log In

**the POW**  
The pill or what?  
thepillorwhat.org #thePOW

**Just getting started?**

- [Search](#) for what you want to know
- [Tag @Dr. Paula](#) to ask her a question
- Read discussions on [each method](#)
- Share your [contraceptive journey](#)
- [Create a new topic](#)

The Pill or What - a clinically supported forum helping us make more informed contraceptive choices.

Pick a category ▾ **Categories** Latest Popular

Category	Topics	Latest
<b>General</b>	107	<a href="#">Can I get pregnant this way?</a> 3d <a href="#">Do I need to test again?</a> 5d <a href="#">HIV test accuracy</a> 5d
<b>Progestogen only pill</b>	47	<a href="#">COC or POP I'm so torn and very apprehensive about side effects</a> 3h <a href="#">Different Brands of POP</a> 5d <a href="#">Missed 2 cerazette pills in a row</a> 14d
<b>Combined pill</b>	89	<a href="#">Extending pill cycle</a> 4h <a href="#">Sick in your mouth</a> 22h <a href="#">Struggling</a> 24d

**Figure 18.** Screenshot 'The Pill or What?' Contraception Forum

These user-driven, clinically informed contraceptive consultations complement:

- The co-produced information pages
- Our Contraception Eligibility Checker (<https://sh24.org.uk/contraception/suitability>) and
- Contraception Comparator Tool (<https://sh24.org.uk/contraception/compare?>)

These tools allow women to check whether they are medically eligible, and to select and compare contraceptive options side by side.

Sexual health   Contraception   Advice & support

Compare 2 options

<b>Hormonal coil (IUS)</b> 	<b>Non-hormonal coil (IUD)</b> 	<b>Combined pill</b> 	<b>Progestogen only pill</b> 
<b>Implant</b> 	<b>Injection</b> 	<b>Ring</b> 	<b>Patch</b> 
<b>Condom (male)</b> 	<b>Condom (female)</b> 	<b>Diaphragm</b> 	<b>Withdrawal</b> 
<b>Female sterilisation</b> 	<b>Vasectomy</b> 	<b>Natural family planning</b> 	

Compare 2 options

<p>Hormonal coil (IUS) <span style="color: red;">✕</span></p>	<p>Ring <span style="color: red;">✕</span></p>
<p>A small T-shaped plastic device that is inserted into your uterus by a trained clinician. The hormones prevent pregnancy by thickening the mucus in the cervix and thinning the lining of the uterus. They may also stop the ovaries from releasing an egg.</p>	<p>A small ring that you insert into your vagina. The hormones prevent pregnancy by thickening the mucus in the cervix and thinning the lining of the uterus. They may also stop the ovaries from releasing an egg.</p>
<b>Effectiveness</b>	
<p>99% +</p>	<p>91%</p> <p>for typical use (99% for perfect use)</p>
<b>Length of use</b>	
<p>3 or 5 years</p>	<p>Use one ring for 3 weeks</p> <p>Use one ring for 3 weeks, then take a 7 day break and insert a new ring.</p>
<b>Periods and bleeding</b>	
<p>Irregular bleeding or spotting is likely during the first 6 weeks. Usually makes bleeding regular, lighter and less.</p>	

Figure 19. Contraception Comparator Tool - Screenshot 1-2

### iii) Emergency Contraception

SH:24 offers a consultant-led emergency contraception (EC) service in line with FSRH medical eligibility guidelines, using Royal Mail 24hr Tracked delivery to ensure treatment arrives on time.

Our unique system calculates time since pregnancy risk and last period to provide appropriate information and signposting to users who are outside the time limits.

We inform service users about the IUD as the most effective method of EC on our information pages, throughout the EC order journey, on completion of their order and when we follow up with users. We provide information, advice and support to facilitate access to the IUD and effective ongoing contraception.

We actively promote transition to an effective method of contraception by offering:

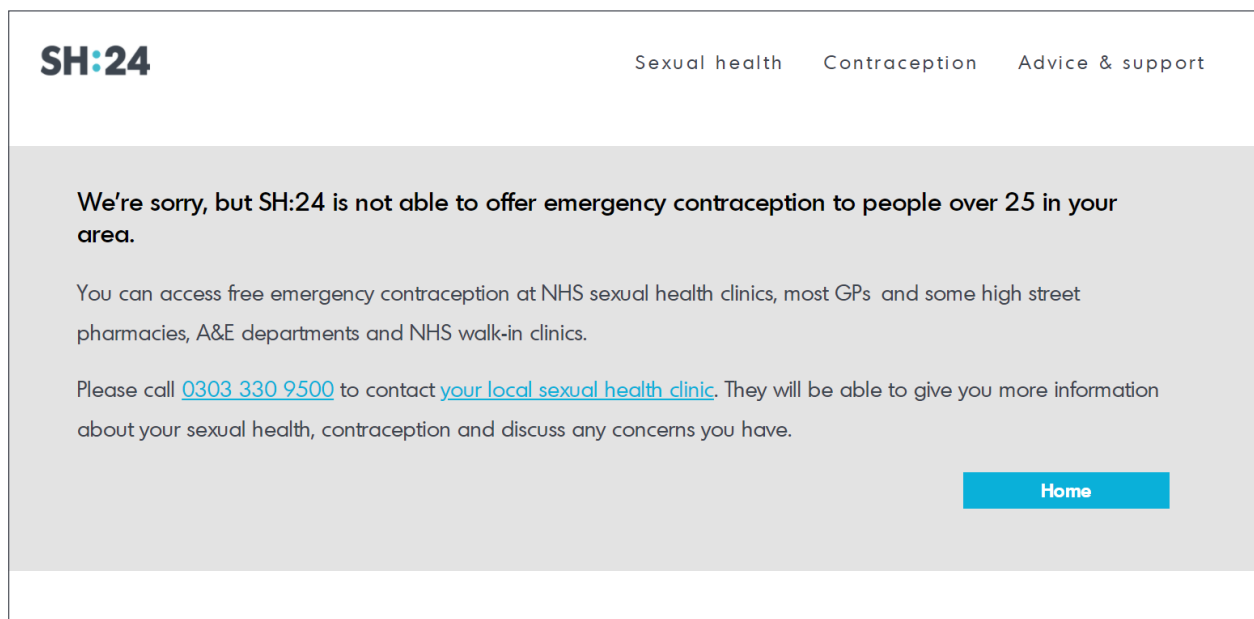
- Information throughout the order journey
- Support to make appropriate and safe choices about daily or longer term methods of contraception
- Signposting to LARC/IUD services
- Option to dispatch preferred contraception with EC order, such as a POP bridge.

### Targeted clinical support for EC users

- Direct clinical support available on the website through live webchat (embedded on popular pages) or by phone, text and email
- Users who request EC more than four times in a six month period are offered a telephone consultation. We give the user additional information about all methods of contraception and support to access their chosen method

## Signposting ineligible users

If the service user is not eligible for the EC service at Step 1 or 2 they will get a clear explanation why and be signposted to alternative options. We can adapt the information users see at this point to show relevant free services in their area, and/or to connect users to our service finder tools.



The screenshot shows the SH:24 website interface. At the top left is the SH:24 logo. To the right are navigation links for 'Sexual health', 'Contraception', and 'Advice & support'. The main content area has a grey background and contains the following text:

**We're sorry, but SH:24 is not able to offer emergency contraception to people over 25 in your area.**

You can access free emergency contraception at NHS sexual health clinics, most GPs and some high street pharmacies, A&E departments and NHS walk-in clinics.

Please call [0303 330 9500](tel:03033309500) to contact [your local sexual health clinic](#). They will be able to give you more information about your sexual health, contraception and discuss any concerns you have.

At the bottom right of the message area is a blue button labeled 'Home'.

**Figure 20.** Screenshot of ineligible emergency contraception service user

## Flexibility and Enhanced Offer

Customers can:

- Determine user eligibility based on age and postcode
- Choose add on services such as chlamydia screening, bridging progestogen-only pills, pregnancy tests and packs of condoms or lubricant

**SH:24** NHS

### Order emergency contraception

- 1 Your age & postcode
- 2 About you
- 3 Your health
- 4 Contact & delivery details
- 5 More about you
- 6 Your background
- 7 Complete your order

**Before you order the morning after pill...**

The non-hormonal coil, also known as the IUD (intrauterine device) is also a very effective emergency contraception if inserted up to five days after you've had unprotected sex.

Sometimes called the 'copper coil', the IUD is a small T-shaped device that sits in your womb. It is long-acting but can be easily removed if you decide you want to become pregnant or use alternative contraception.

**SH:24** NHS

### Order a kit

- 1 Your age & postcode
- 2 About you
- 3 Your health
- 4 Contact & delivery details
- 5 More about you
- 6 Your background
- 7 Complete your order

**Would you like us to send you a pack of 6 male condoms?** ⓘ

Condoms are easy to use, very effective and the only contraceptive method that protect against sexually transmitted infections (STIs). [Learn more here.](#)

yes

no

Figures 21-22. Screenshots of EC user journey

## Prescribing

Once the order is complete, the information provided by the user is summarised on the clinical record within Admin, with any contraindications to emergency contraception flagged.

Health Questions	
Weight (kg)	55.0
Started last period	N/A
Taking Prescription	No
Allergic to lactose	No
Breastfeeding	No
HC last 7 days	Yes
Normal periods?	No Period on current contraception
EC last 7 days	No
Allergic to progestogen	No
Liver problems	No
UPSI more than once	No
Baby last 21 days	No
Termination last 5 days	No
Last UPSI since period 10-06-2020 16:00 (BST) 18-19 hours ago (-1-0 hours before ordering)	

**Figure 23.** Screenshot of contraindications flagged in the Clinical Admin System

Orders are assessed 7 days per week by clinicians who hold the FSRH Diploma. By default, we prescribe ulipristal acetate (UPA), as this is the more effective of the two types of hormonal emergency contraception, and levonorgestrel (LNG) when there is a contraindication to UPA, such as recent hormonal contraception use. These choices can be tailored according to the needs of the Customer.

After the EC order has been reviewed and confirmed as appropriate for prescription, an SH:24 prescriber generates and signs a private prescription with an advanced electronic signature, compliant with the Human Medicines Regulations 2012, Regulation 219. These are then accessed by our partner pharmacy The Independent Pharmacy (TIP) through Admin for dispensing and dispatch.

An A6 insert is packaged with the medication (and manufacturer's instructions) with detailed information including how to take the medication, advice to take a pregnancy test and possible side effects. All of our instruction and guidance cards are developed with users and iterated through user testing. The card includes an offer of further support, links to information and tools to support effective contraception choices.

### How to take UPA

Take one pill as soon as you can after unprotected sex (within 120 hours).

Do not take this pill if you have:

- used hormonal contraception in the last 5 days (UPA will not be as effective)
- taken an LNG emergency contraceptive pill in the last 7 days e.g. Levonelle (UPA may interact)
- taken St John's Wort or prescription medication for TB, epilepsy, HIV, asthma (inhalers are not a problem), stomach acid levels or liver problems (UPA will not be as effective)
- an allergy to lactose or ulipristal acetate.

*If you vomit within 3 hours of taking UPA, get in touch as you may need another dose.*

SH:24

**THINGS TO CONSIDER:**

- if you have already ovulated, the emergency contraceptive pill will not have any effect as it works by delaying ovulation
- if you are breastfeeding, discard your milk for 36 hours after taking UPA
- this pill will not prevent pregnancy after future unprotected sex
- this pill does not protect against STIs, so you may want to take an STI test
- your period may be a bit earlier or later than usual, you may also experience some spotting. If your period is over a week late, you may want to take a pregnancy test.


Get in touch if you need advice:  
07860 041 233

**RESTARTING YOUR REGULAR CONTRACEPTION:**

If you usually take the pill, or use the patch or ring, do not start for 5 days after taking UPA. Then use extra protection (condoms) for the first 7 days after restarting (2 days for POP).

### Ulipristal acetate (UPA)

Emergency contraception



SH:24

**MORE INFORMATION:**

- ensure you read the A4 medication leaflet
- learn about how the emergency contraceptive pill works, its effectiveness, side effects and risks here: [sh24.org.uk/contraception/ec](https://sh24.org.uk/contraception/ec)
- if you're not using a regular method of contraception, you might consider doing so in order to lower the risk of unintended pregnancy. Read, ask, share and discuss all methods of contraception on our clinically supported forum: [discuss.sh24.org.uk](https://discuss.sh24.org.uk)

**Talk to us:**  
If you need help, text:  
07860 041 233

**Questions?**  
Read our FAQs:  
[sh24.org.uk/contraception/ec](https://sh24.org.uk/contraception/ec)

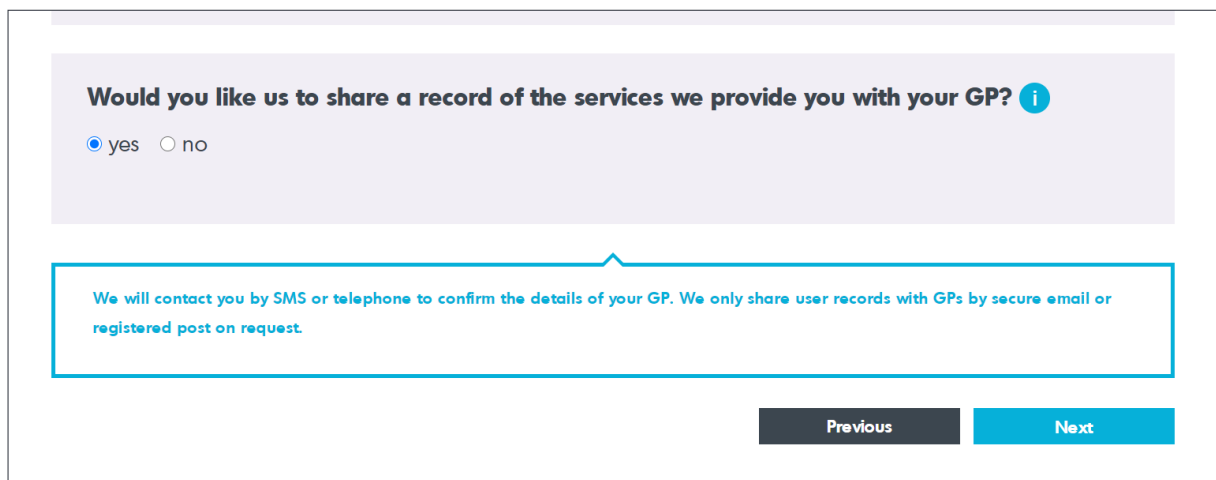
Figures 24-25. UPA Instruction card (front and back)

TIP dispatches all emergency contraception medicines using Royal Mail 24hr Tracked (not signed). SH:24 texts all users within 48 hours of dispatch to confirm receipt, to give the user the opportunity to ask any questions and offer a contraceptive choices discussion with the user via text or phone.



## Interface with local service providers

All patient information is kept on the SH:24 electronic patient record and can be viewed by local clinicians with access to Admin. During the order process service users are asked if they consent to their information being shared with their GP. SH:24 will then inform their GP via secure email. This provides a record of all information provided by the patient and all decisions made by the registered nurse and prescriber.



The screenshot shows a digital consent form. At the top, a grey header bar contains the question: "Would you like us to share a record of the services we provide you with your GP?" followed by an information icon (i). Below this, there are two radio buttons: "yes" (which is selected) and "no". A light blue box below the question contains the text: "We will contact you by SMS or telephone to confirm the details of your GP. We only share user records with GPs by secure email or registered post on request." At the bottom right of the form, there are two buttons: "Previous" (dark grey) and "Next" (light blue).

**Figure 26.** Screenshot of request for consent to share information with GP

During mobilisation, Customers will be asked to identify referral contact details (phone number and website) to show to ineligible users in their region or for users requesting the IUD. This will be collated within the Customer's notification logic document which our clinical team uses to facilitate onward referral.

## 2. A clinically-led service



SH:24 is built on the clinical expertise of an in-house, highly experienced team of NHS clinicians and sexual health support workers, available to users at every service interaction. Our clinical team perform results management as well as over-the-phone support with all aspects of users' sexual and reproductive health.

### Integrated clinical governance

SH:24 is committed to ensuring that the quality and expertise that has defined statutory sexual health services is maintained and built upon, as those services move online. Our strong clinical governance has enabled us to take a lead on developing safeguarding for online services, offer holistic clinical support, and continue to evolve our offer with prescribing and diagnostic services.

In line with the UK Department of Health Guidance on Clinical Governance in Sexual Health (Department of Health, 2013), SH:24 has designated clinical leads who report to the SH:24 Board on Clinical Governance.

- Clinical and Information Governance Leads
- Quality Assurance and Risk Management Lead
- Reproductive Health, Safeguarding and Evaluation Lead
- Caldicott Guardian



**Dr Gillian Holdsworth** is a consultant in public health and led the proposal to develop the service, bringing more than 18 years' experience to her role as Managing Director of SH:24. Gillian is also the Lead for Information Governance and Quality Assurance.



**Dr Paula Baraitser** is a consultant of Sexual and Reproductive Health and brings more than 25 years' experience to her role as Clinical Director, Lead on Reproductive Health, Safeguarding and Evaluation, and Caldicott Guardian of SH:24.

The SH:24 Board is chaired by Dame Donna Kinnair, the Chief Executive and General Secretary of the Royal College of Nursing.

## Essential clinical accreditations

As a provider of online clinical services, SH:24 is registered with the CQC (1-2519508791) for the provision of transport services, triage and medical advice provided remotely, and treatment of disease, disorder and injury.

Clinical staff are registered with professional bodies including the General Medical Council (GMC) and the Nursing and Midwifery Council (NMC).

SH:24 invests in its clinical team to ensure safety, quality and continuity of service provision across all regions and as the service continues to grow.

## Comprehensive clinical policies and processes

SH:24 has a comprehensive range of clinical policies, which contain standard operating procedures and guidance for all clinical services, ensuring that we deliver services that are:

- Safe
- Regulated
- Confidential
- Systematically risk assessed and managed
- Evidence-based and consistent with best clinical practice
- Delivered by competent, trained, supervised staff who are registered with professional bodies and abide by codes of professional practice/conduct

The implementation of these policies is overseen by the Managing Director and Clinical Director, who have responsibility to promote safe, high quality care, monitor performance and audits, and oversee clinical complaints, incidents and significant events.

SH:24's clinical governance is overseen at the Quality and Risk Management Meeting. This brings together all of our clinical staff together, providing oversight of practical governance issues at SH:24, including:

- Safeguarding
- Clinical incidents
- Performance
- User feedback
- Audit and research
- Clinical effectiveness (new guidelines and review of policies)
- Staff training and competencies
- Risk register

## Specialist clinical support

Service users are supported by our specialist in-house clinical team via webchat, email, phone or text 12 hours per day, 7 days per week, with integrated safeguarding, order management, results and supported onward referral.

Our clinical team is led by Dr Paula Baraitser, and is made up of experienced sexual health nurses, health advisors and clinical support workers. SH:24 invests in its clinical team to ensure quality and continuity of service provision across all regions and as the service continues to grow.

SH:24 believes in 'making every contact count' in order to provide comprehensive clinical advice and support to complement our holistic service offer of testing, treatment and contraception.

## Staff competence, training and development

The following staff management mechanisms ensure we provide high quality care and that our staff work in an efficient team and in a well supported environment:

- A mandatory training programme, including safeguarding, information governance, equality and diversity, health and safety. Clinical staff receive training up to level 3 for safeguarding, including FGM, domestic abuse and mental capacity
- Annual appraisal and personal development plans
- Opportunities to update and learn new skills
- Provision of a workplace that promotes the wider welfare of our employees
- Comprehensive whistleblowing, complaints, bullying and harassment policies

## Comprehensive clinical development and support for staff

Our clinical staff are registered with professional bodies, including the General Medical Council (GMC) and the Nursing and Midwifery Council (NMC). We maintain annual checks of all medical and nursing staff to ensure compliance with professional registration and revalidation.

SH:24 has close links with its partner organisations, including Guys & St Thomas' and King's College London, which enables clinical staff to attend joint service and academic seminars, access clinical advice, support and research opportunities.

All professionally qualified clinical staff maintain their STIF and FSRH competencies and clinical skills, undertaking regular clinical sessions in sexual health clinics as part of their contracted hours. Monthly clinical 1:1 and safeguarding supervision for nursing staff is provided by a senior SH:24 clinician.

## Ongoing clinical service development

We are constantly evolving our service. We identify service optimisations through weekly clinical quality and safety reviews involving our clinical and service development teams.

Monthly performance reviews with Customers allow us to monitor quality and safety, and identify opportunities for improvement or future development based on local need.

## Complementing local knowledge and services

Our clinical team are experienced sexual health specialists with a breadth of skill across all facets of sexual and reproductive health care. They will provide direct support to users and staff to develop local referral pathways and refine communication to users, capitalising on local clinician experience and knowledge.

Our service offer is developed with continued feedback from local clinicians. In response to COVID-19, SH:24 made rapid changes to our service offering to help support local services, including lowering the age for OC and EC, expanding chlamydia treatment options to include rectal infections, and offering bespoke Hep B and C testing for users on request from local clinicians.

## Continued innovation

Continuous improvement is fundamental to the vision and aims of SH:24, which is why we have a dedicated in-house developer team. As a clinically-led organisation, SH:24 can continue to rapidly and safely evolve its service as new technologies and clinical processes become available.

Our continued investment in innovation has meant that we already have the services defined in the eSRH Framework, live and successfully delivering across the UK. As a Customer of SH:24, you will have advanced access to any developments or additions to our offer, ensuring your residents can make use of the broadest range of digital sexual and reproductive services available in the UK.

## Safeguarding

In the move to increased provision of sexual health services online, it is vital that safety is not compromised by a diminished safeguarding offer. This message is clearly articulated in the 'Standards for Online and Remote Providers of Sexual and Reproductive Health Services' (FSRH/BASHH).

SH:24 developed our approach to safeguarding by consulting with national safeguarding experts, local safeguarding leads and young people (who are advisers to the safeguarding boards on child sexual exploitation). We continuously monitor, evaluate and publish our approach and regularly share our experiences and learning to help inform best practice guidelines for online safeguarding.

## Safeguarding Governance

Dr Paula Baraitser is SH:24's designated lead for safeguarding, and is a consultant in sexual and reproductive health. Paula has over 25 years' experience working in sexual health and safeguarding, and oversees regular review of all SH:24's safeguarding policies and processes. The SH:24 clinical team, which consists of specialist sexual health and contraception nurses, health advisors and clinical support workers, can access immediate advice from Paula or the senior nurses, including out of hours as necessary. All safeguarding cases are discussed at the monthly quality and risk management meeting.



We maintain a close working relationship with designated safeguarding leads in the areas where we operate to facilitate prompt referral and effective information transfer.

SH:24's policy on safeguarding of young people is compliant with relevant legislation and national guidance including Working Together to Safeguard Children (2018), section 11 of the Children's Act (2004), and with national (BASHH, FSRH, DHSC) policies and procedures for children and young people.

SH:24's policy on safeguarding of adults is compliant with the Care Act (2014), the Mental Capacity Act (2005) and Adult Safeguarding – Intercollegiate Guidance for healthcare staff (2015), and with national (BASHH, FRSH, DH) policies and procedures for safeguarding adults.

## Identifying and responding to safeguarding concerns

SH:24 users are asked a series of questions designed to identify safeguarding concerns when they order. Admin flags any safeguarding concerns highlighted by a user, which triggers contact from an SH:24 clinician after the order is completed.

### Adults (18 years and over)

Adult users are asked about any history of sexual assault. When an adult reports a history of sexual assault this triggers an SMS to be sent to the user from SH:24 offering them the opportunity to discuss the reported assault with a specialist sexual health clinician.

Adults wishing to discuss the reported assault are offered contact by telephone at a time of their choice by an SH:24 clinician who offers support, takes a history, carries out a risk assessment and, where appropriate, arranges referral to a sexual assault referral centre, to a face-to-face sexual health clinic or other services (e.g. social services) as required.

### Young people (16-17 years)

In addition to being asked about a history of sexual assault, users aged 16-17 years are asked further safeguarding questions which have been adapted from BASHH's Spotting the Signs Guidance (2014)

and developed in consultation with national safeguarding experts. As with adults, an affirmative answer to any of these questions triggers a safeguarding alert, but for young people, their order is also put on hold.

**Extra support**

As you are under 18 we would like to ask you some more questions. [What happens if I answer yes to any of these questions?](#)

Have you ever been pressured into sex? [Read more...](#)

Yes  No

Have you ever been made to feel scared or uncomfortable by the person/s you have been having sexual contact with? [Read more...](#)

Yes  No

Has anyone ever given you gifts, money, drugs, alcohol or protection for sex? [Read more...](#)

Yes  No

Do you feel down or suffer from feelings of depression? [Read more...](#)

Yes  No

Is your partner a lot older than you? [Read more...](#)

Yes  No

Previous
Next

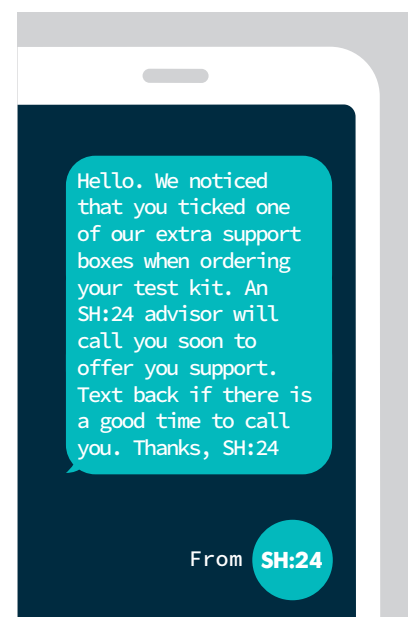
**Figure 27.** Additional safeguarding questions for 16-17 year olds

A text message is sent to the young person, saying that a clinician would like to talk to them about the extra support buttons they selected, to allow us to complete their order. An SH:24 clinician then carries out a safeguarding assessment over the phone.

Around 80% of young people with a safeguarding flag are successfully contacted and have a discussion over the phone with one of our clinicians, which is testament to our approach of withholding their test kit dispatch. We make 3 different attempts to contact the young person, by text and email.

All safeguarding cases who SH:24 are unable to contact are discussed with SH:24's Safeguarding Lead and their electronic clinical record is flagged to reflect this.

When contacting service users, SH:24 clinicians routinely explain the principles of confidentiality, including an explanation of the type of situation which would require information sharing with other agencies.



If a risk of significant harm is identified by the SH:24 clinician, the young person is informed that referral is needed to clinical or social services and they are referred immediately, ideally with their consent. An SH:24 clinician will then follow up with the service to confirm attendance.

If there is no risk of significant harm but there are other concerns, the SH:24 clinician will offer information, support and advice. If appropriate, the order is then completed and the test kit dispatched.

## Integration with local safeguarding

Any complex or challenging cases, and any cases where an SH:24 clinician has identified that the user is at risk of harm, are discussed immediately with the local safeguarding lead. These concerns are also referred on to the Local Authority Social Services Department safeguarding team.

Full details of all safeguarding cases, including communication, risk assessment data and referrals, are contained within that user's record on Admin. This can be accessed by relevant local clinicians and the local safeguarding lead.

Users referred to sexual health services, specialist support organisations or social services will be followed up by the clinical support team to check with either the user or the service (depending on what is most appropriate for that case) to determine if the user attended. If the user has not attended or contacted the relevant support service after one week, the user will be contacted by the SH:24 clinical support team for follow up again.

### Case study 7: Female (aged 17 years)

An under-18 user ticked safeguarding and sexual assault boxes.



- Phone conversation. User had been assaulted 5 months ago by someone she knew
- User was safe and well. We discussed her options and she did not want to report what happened
- She was groomed aged 12 yrs old by a male aged 44 yrs old. This was managed by police at the time
- Her current partner is similar age to her (no concern)
- She uses cannabis and would like to get help because she uses this regularly
- We talked about her going to a sexual health clinic and the support they can give her in clinic (HA input). She was keen to have this
- Referred her to clinic
- Followed user up and she DNA'd clinic twice. She found it hard to get to clinic due to commitment at college
- Spoke to her about local sexual health team and that they can meet her wherever is convenient to her and explained who they are and how they can support her. She agreed to this referral
- Referral made to local sexual health team and user has now been allocated a specialist nurse to work with her
- Follow up – user now engaged with local sexual health team
- All documented in user's Admin notes



### 3. Rapid service mobilisation



We are highly experienced in rapid mobilisation of local services. As our service has evolved over the last 5 years, we have reduced our mobilisation times. Services can now be up and running, including local adaptations, within 4 weeks.

#### SH:24's investment and experience in rapid mobilisation

SH:24 recognises the importance of rapid mobilisation to our local delivery partners. Often when a contract is awarded to a new Integrated Service, the e-sexual health component has a core role to play in sustaining access while physical services are in transition.

SH:24 have extensive experience of providing real-world STI testing, oral and emergency contraception services, which can be commissioned through this new PHE Framework. Local Customers can feel confident that SH:24 can rapidly mobilise these services, which are already being successfully delivered across the UK.

#### Rapid mobilisation by design

We have built rapid mobilisation into the design of our service through:

##### Responding to individual customer needs

Working in over 70 regions, we have significantly expanded the diversity of our service offer. We now have 'off the shelf' templates for most customisation requests, including testing models, targeting, distribution methods and referral pathways. Developer capacity is freed up, enabling us to facilitate new service customisations rapidly.

##### Adopting Agile design principles

We prioritise creation of simple solutions, which are tested and iterated upon. We use digital productivity and communication tools throughout SH:24, including Slack, Trello and Clubhouse, to increase efficiency between teams and support rapid mobilisation.

## Managing demand

Our in-house distribution team manages reserves for kits and consumables, allowing rapid response to growth in the service. National HIV Testing Week annually causes a 100% increase on peak testing demand, which we accommodate comfortably. Clinical capacity is also scalable with sessional support from clinicians.

## Built-in resilience

We have established 6 month reserves of all medications, and extra capacity available through our pharmacy provider, TIP. Our 2 pathology partners (TDL and SPS) are part of large international laboratory networks, so have significant capacity and resilience (especially relevant due to COVID-19) for dealing with rapid increases in activity.

## Integrated clinical governance

We are able to safely and quickly design and implement changes to our service model.

## Multi-disciplinary mobilisation teams

For each new area, we bring together key staff from SH:24, including:

- The Service Development Director, and the head of the respective Developer Team leading on the mobilisation
- A dedicated Partnerships and Communications Lead who will represent SH:24 at the Steering Group and be the key contact for PHE
- A dedicated Delivery Manager (who will manage the service going forward for each Customer)
- The Operations Director, with support from the Operations Manager and Officers
- Clinical Director

## Experienced in rapid response

Alongside the 70+ areas where we have successfully mobilised services within a month, other notable examples of rapid mobilisation include:

- Simultaneous mobilisation of 30 local authorities for the launch of the second stage of the National HIV sampling programme in 2020
- Comprehensive service mobilisations in areas such as Cornwall, which saw a full range of e-services launch on the first day of the service, including a new website, STI testing, OC and CT treatment

During the COVID-19 lockdown, SH:24's ability to rapidly mobilise has been called on to support a wide number of services. Within one month we strengthened existing services by:

- Adding CT treatment to 8 areas, and expanded eligibility to treat rectal CT
- Adding OC to 12 areas, and lowered age of access to 16, adding enhanced safeguarding
- Launching EC, which went live in 13 areas simultaneously
- Changing access and branding for the National HIV Sampling programme to support the Break the Chain campaign, in 3 days

SH:24 also brought forward mobilisations scheduled for later in the year to support services during COVID-19, with 6 entirely new services launching in areas including Dorset, Nottingham and Liverpool.

### Local integration and training

When a Customer commissions SH:24 via the eSRH Framework, we will mobilise a new service within a month. To date, SH:24 has successfully integrated with clinics from over 30 different areas in the UK and internationally, training and on-boarding over 250 local clinic staff to use SH:24.

## Impact

**Dr Michael Brady**  
**Consultant in Sexual Health & HIV and Clinical Lead for Sexual Health Services, King's College Hospital NHS Foundation Trust**

SH:24 are a great organisation. I have had the pleasure of working closely with them over the last couple of years and have a huge respect for their energy, vision and innovative approach to sexual health service delivery. Our local area has high levels of need and huge demands on services, which increasingly have limited capacity. SH:24 have worked closely with us to not only improve access to STI testing but to also create an on-line service which fully integrates with our local clinics.

SH:24 has worked collaboratively with us to understand both our needs and the needs of service users. Together we developed a new clinic triage pathway that enables asymptomatic users to order STI tests directly online via tablets in the clinic. Since going live in July 2016 our partnership has increased the capacity in clinic to deal with more complex cases by over 20% whilst SH:24 undertakes the vast majority of the simple asymptomatic STI testing.

  
**King's College Hospital**  
 NHS Foundation Trust

Local mobilisation is usually split into two key sessions, with the first focusing on service design in a Planning and Strategy session, followed by Training Sessions to onboard all relevant staff.

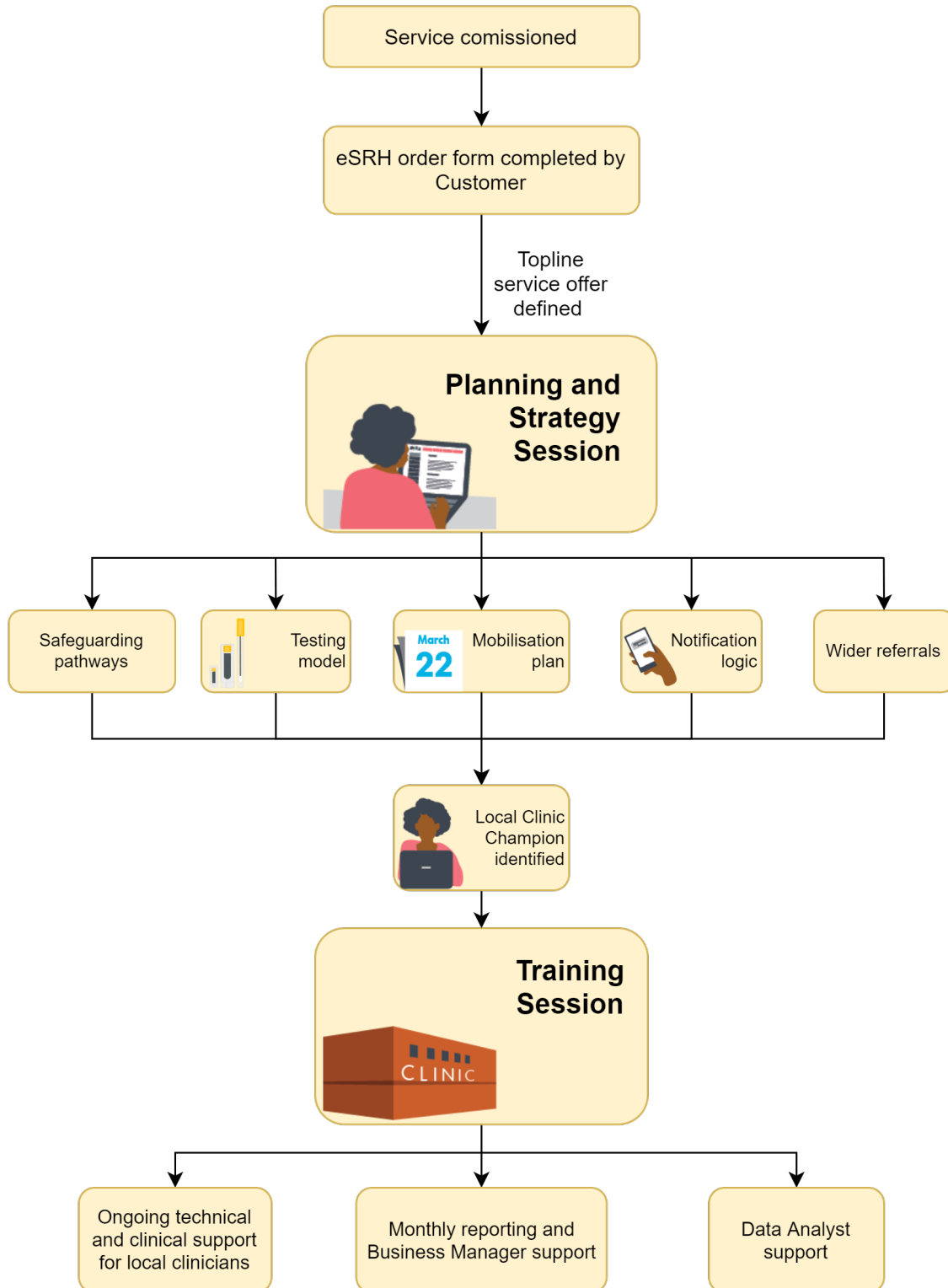


Figure 28. Mobilisation map

**Strategy and service design session:**

Before the first planning session, SH:24 will circulate our eSRH Order Form, which covers a number of top-line choices for the customer, including:

- Which lots they wish to commission
- For each lot, customisation choices, such as:
  - STI testing model - which tests for which risk groups/populations
  - Additional add-on services
  - Delivery timelines
  - Budget
  - Range of contraception options within a specific method

Using the Order Form as a base, SH:24 will work with local clinicians and service managers to refine the digital offer, combining our experience from our services in other areas with their local expertise. The strategy and service design session will explore and define:

- Both online and offline service models and how they can be effectively supported by clinic staff
- The overall user journey in the integrated sexual health service model
- A unique results notification pathway with clinic staff (including how SH:24 will handle specific results and the language used)
- Safeguarding processes, referral pathways and wider support services
- Timelines for subsequent stages of the mobilisation period
- A full programme of training that includes small staff group sessions (including receptionists, health advisors, clinicians), one-to-ones and full staff briefings

In the first planning session, SH:24 and local leads will identify a clinic champion for each site, who will be a main point of contact, and help support change and delivery of the new service model.

Following the session the Mobilisation Plan will be updated, with key deliverables and milestones highlighted, including dates for subsequent training sessions.

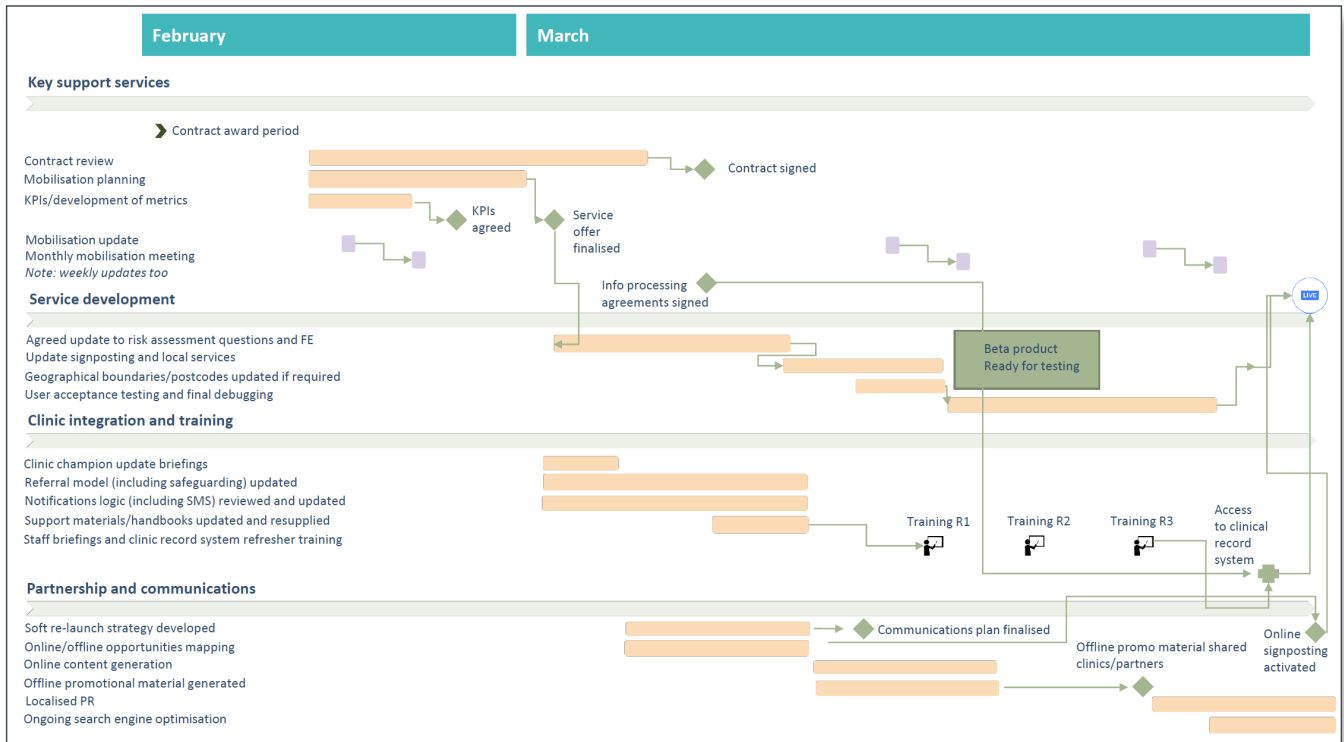


Figure 29. Example mobilisation plan

## Training sessions:

Training sessions will be run with expanded staff teams, from consultants, to nurses and reception staff. These will provide:

- An overview of the SH:24 service, including all local-specified service elements
- Training and secure access to SH:24's Admin portal, so clinic staff can access patient identifiable data (PID), results and risk information
- Details of liaison and support available from SH:24 (including clinical, developer and operations)

Dedicated Click and Collect training sessions with receptionists will be run if that service option has been chosen. SH:24 staff will attend the Click and Collect location on the launch date and run live training on the day with staff and users going through the system.

Ongoing support

SH:24's local area handbooks, which give overviews of the SH:24 service, and use of the Admin record system, will be sent to clinic staff as a supporting resource.

# SH:24

Sexual health:  
24 hours a day

## The Basics Handbook

---

Version 02  
Revised 31.03.20  
Area Essex  
Service level STI Testing

1.

### 3.0 Provider journey

SH:24 is not a standalone service – it is integrated into local clinical services to ensure that users have a seamless pathway into treatment and care.

Positive/reactive results are referred into the Essex Results Hub who will then set-up the user with an appointment in a local clinic. When an SH:24 user presents at clinic they are able to show their results text message (which includes a unique identifier) to a receptionist. The Results Hub/clinic staff have access to the SH:24 admin portal which holds key information about the user (including their results).

SH:24's team includes NHS clinicians and managers with a background in health/public health. They work closely with new geographical areas to help successfully localise and mobilise the service - working alongside clinic staff (receptionists, health advisors, nurses, doctors and service managers) to ensure SH:24 is effectively integrated into clinical services.

### Interfaces: Lab and clinic relationship

#### SH:24

- Order review**  
Use codes and user message are reviewed and tagged. Outgoing and the destination response are tagged. Where appropriate, users are offered referral to their local GPs or referred to other services.
- Order dispatch**  
Following review, user and request orders are printed, posted and dispatched. User only channels about the status of their order by text message.
- Result notification**  
Automated text messages notify users of their results. Users will be notified of their result via text message to the Essex Results Hub. The Hub will then communicate the result via text message to the user and refer them to the Results Hub.

#### Essex Results Hub

- Secure login**  
Staff securely log on to the SH:24 via 2 factor authentication portal which logs all orders, users, messages and text. Orders are automatically added on to the SH:24 portal.
- Security**  
There are 3 levels of staff permissions to access the portal.
- Communication with user**  
Clinic and communication with users via text messages and if required by telephone, email, text or face to face consultation where required.
- Results management**  
Management of traceable results referred to the hub by SH:24 and making-up of appointments for the user in clinic.

#### Lab

Lab results are sent to SH:24 via a secure interface. A unique identifier (LID) is used to track identifying users.

User

Results

5487238

Figure 30. Extract from our local area handbooks

YouTube videos are also provided, which detail step-by-step tutorials of common tasks.

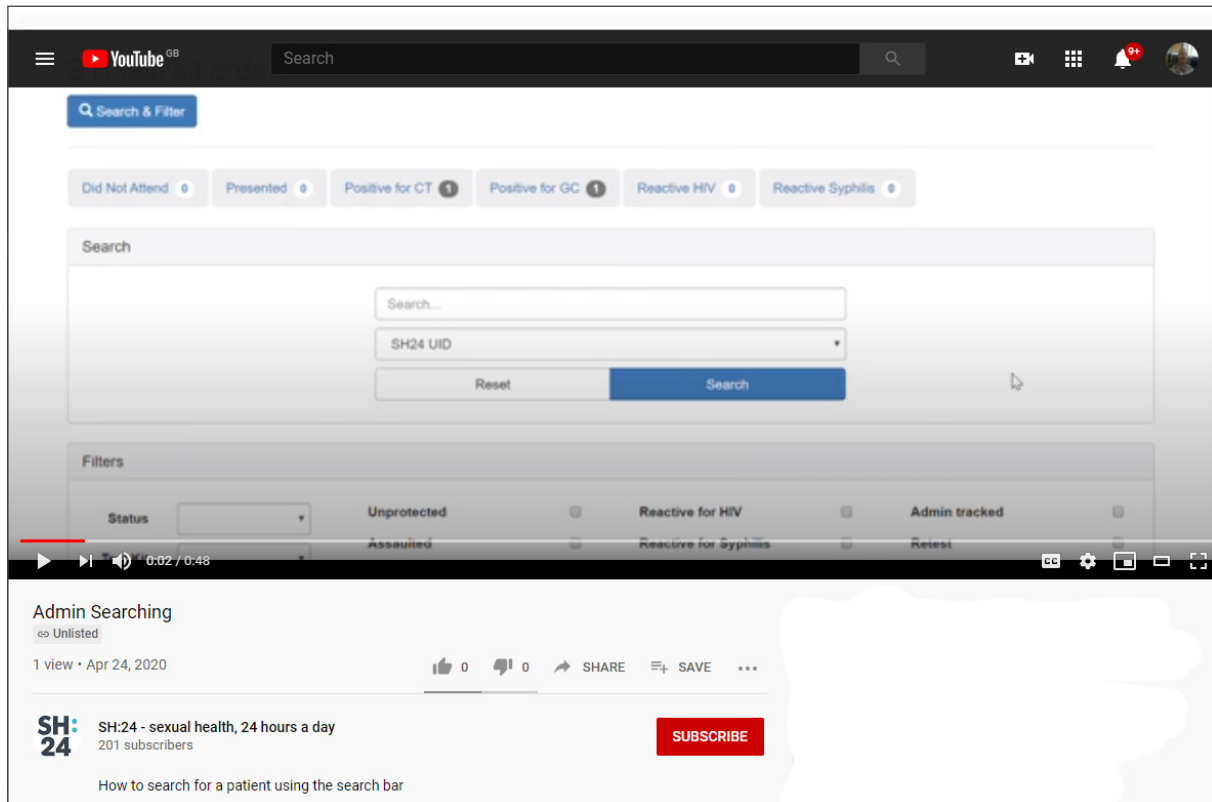


Figure 31. Training videos of Clinical Admin System

Training sessions can be re-run for new members of staff, or put on as refresher sessions.

SH:24 can provide training sessions in person, or remotely via Zoom or Microsoft Teams, which have proved vital tools in response to COVID-19.

### Tech support

Local clinical users have access to a range of tools which can help resolve issues such as forgotten passwords or other access issues.

Ongoing technical support, for issues such as a locked user account, is provided by our clinical and developer team, who can help with any queries on using Admin, or clinical user queries, 7 days a week.



## 4. A robust, trusted provider



As a clinically-led service, we are committed to maintaining and building on the quality and expertise that have defined modern NHS sexual health services, as those services move online. We partner with industry-leading pathology and pharmacy providers, ensuring the continued delivery of safe and resilient services, even in light of the current challenging times.

### Expert delivery partners

SH:24 partners with industry-leading, expert pathology and pharmacy providers, ensuring the continued delivery of robust and safe services, even in periods of unprecedented change.

### Pathology

Samples are returned to our laboratory partners by prepaid Royal Mail 48hr Tracked envelopes, in line with recent changes implemented by Royal Mail.

### Managing demand

We use multiple laboratories deliberately to allow for contingency during periods of peak demand (such as national campaigns) and in the event of a threat to service continuity. The Doctor's Laboratory (TDL) and Southwest Pathology Services (SPS) have an extensive track record of working closely with SH:24, and have successfully delivered over 300,000 tests, in line with our high standards for quick turn-around times for results.

### Built-in resilience

With new challenges such as Brexit and COVID-19, partnering with large, internationally-connected pathology services provides SH:24 with the resilience and confidence to maintain a healthy supply chain and maintain uninterrupted delivery. Our laboratory partners have robust business continuity plans to respond to emergencies and avoid disruption to the pathology service. This includes an extensive network of 'fall back' facilities within the UK as part of two leading worldwide groups of laboratories; Sonic Healthcare Ltd (TDL); and Synlab (SPS).

### Maintaining standards

Both laboratories are CPA/UKAS accredited, compliant with ISO 15189 and CQC registered for diagnosis and screening. SH:24 requires its partner laboratories to be compliant with these standards to ensure that they are clinically led and that there is clinical oversight of the reporting of results.

For added resilience, our clinical team monitors daily, in real-time, the time taken for the labs to turn around results. Admin flags any results taking more than 60 hours to process.

Our clinicians then contact our dedicated service manager at the laboratory to review and prioritise any late orders.

Our clinical team will also reassure the service user that they are working with the lab to issue the results.

SH:24 clinicians monitor the number of late results and escalate spikes to our laboratory partner to investigate. Through consistent and prompt communication with our laboratory partners we have maintained rapid return of results. Typically 80% of results are given within 24 hours.



## Pharmacy

SH:24's pharmacy partner, The Independent Pharmacy LTD (TIP), dispenses and dispatches all medication. TIP is registered with the General Pharmaceutical Council (GPhC 1120908) and compliant with the principles that are set out by the GPhC and Royal Pharmaceutical Society.

TIP is appropriately insured and is regulated by the MHRA and with CQC (Treatment of disease, disorder or injury, Caring for adults under 65 yrs, Caring for adults over 65 yrs) with the following licences:

- Wholesale Dealers Authorisation (Human) – WDA(H) 19054
- Certificate of GDP Compliance
- Certificate of GMP compliance
- Controlled Drugs Licence (Schedules II,III,IV(Part1&2),V)

SH:24 ensures that TIP continues to demonstrate a secure supply chain that guarantees the safety and efficacy of the relevant medicines (for example, we have worked with TIP during COVID-19 to secure supplies of specific contraceptive pills - Microgynon and Norgeston) as well as value for money for medicine obtained in relation to the NHS Drug Tariff.

SH:24 uses a digital prescription to quickly and securely send these to TIP for dispensing. Orders are sent by TIP using Royal Mail 24hr Tracked, to ensure prompt and safe receipt of medication.

### **Prescribing oversight**

SH:24's Registered Manager is responsible for implementing and delivering the guidance and safeguards from our Remote Prescribing of Medicines Management Policy. SH:24's monitoring and incident response meets the requirements set out in GPhC's Guidance "Management of Dispensing Errors, 2010", to provide a safe and effective service.

We seek continuous feedback from service users, pharmacists and prescribers to uphold quality and ensure services remain fully optimised.

We regularly review potential improvements to processes and procedures (including procurement and supply chain) with TIP, to stay ahead of any challenges.



## Data Protection and Security

SH:24's approach to data protection and security is designed to mirror the same high standards met by our NHS partners.

Our Information Governance (IG) policies have been shaped by relevant legislation, including General Data Protection Regulation (GDPR), Data Protection Act (2018), UK Freedom of Information (2000), UK Human Rights Act (1998), UK Health and Social Care Act (2012) and NHS frameworks and guidance.

These policies have been continually honed, with ongoing input from users, clinicians, data protection experts, NHS partner Trusts and public health experts.

## SH:24's IG credentials

SH:24 are registered with the Information Commissioner's Office. NHS Trusts across the UK have peer-reviewed and approved our service. Our systems' security and compliance with data protection laws are externally tested and validated by commercial penetration testing and external audit by the Data Protection Office Centre.

We have completed Cyber Essentials. In our current Data Security and Protection (DSP) Toolkit submission, we provided 100% of the mandatory evidence items and confirmed 100% of all assertions.

## Industry leading security

SH:24s hosting for our platforms is provided by Amazon Web Services (AWS), who provide industry leading security, resilience and contingency data solutions. AWS provides secure access to the NHS's HSCN network, for the secure storage of our patient records. SH:24 is also approved to access the NHS spine.

## Integration of IG throughout the service

Security and confidentiality is especially important to users of online sexual health services, so SH:24 has ensured that this is reflected throughout the user's experience of using SH:24, including:

- Rapid order process and use of GlobalSign and Extended SSL web browsing security.
- Use of plain grey envelopes for dispatch of kits.
- No personal identifiable information on returned samples (these are marked with data matrix codes instead).
- Removing the need to make an online profile, which can be a barrier for many users.

## Research and Evaluation

SH:24 supports the development of a robust evidence base on online services. We foster the production of high quality clinical evidence and share this learning.

If you want to know more please contact Dr Paula Baraitser: [paula@sh24.org.uk](mailto:paula@sh24.org.uk)

SH:24's model is evidence-based, reflects best practice and NICE, BASHH and FSRH standards and guidelines. The impact of the SH:24 service model on facilitating the digital transformation of sexual health services across the UK and Europe is testament to the robust academic evaluation informing our ongoing development.

- 20 papers published in peer reviewed journals
- Research funded by grants from GSTT Charity, The Health Foundation, NIHR and MRC
- Presented findings at more than 30 international academic conferences
- Evaluation of the service feeds directly into service innovation and improvement

Our published research includes:

- An initial evaluation of our online STI testing service, conducted by randomised controlled trial (RCT)
- A population-based health economic evaluation of online testing
- A cohort study of online contraception.

During development, we also conducted a critical analysis of our service using a 'Theory of Change' and interviewed clinicians and senior managers from our partner clinics, service users, and senior managers within local government, public health and commissioning to help identify anticipated outcomes and support for adoption of our service as it developed.

## List of publications

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## Data analysis and reporting

SH:24 is a data-driven organisation, taking an intelligence-led approach to improving the services that it offers. We use metrics (qualitative and quantitative) every day to optimise our service operationally and shape its continued development.

We use a broad range of analytical and visual tools (Kissmetrics, Google Analytics, Excel, Tableau Professional) and a dedicated Data Analyst to:

- Make data meaningful through highly visual methods
- Understand data through multiple lenses including public health, clinical and business improvement
- Use data trends to continuously iterate our services and data-based dialogue/decisions throughout our governance structure

We monitor our performance through key internal metrics via a live dashboard on our Admin portal which supports our overarching Objective Key Results (a goal-setting framework for defining and tracking objectives and their outcomes).

Our Business Support Team includes our Business Development Managers (who will be Delivery Managers for specific areas commissioned via the Framework) and our Data Analyst. The team have an acute understanding of SRH service delivery with extensive experience working in complex commissioning and stakeholder partnerships. Drawing on the wider experience of the multidisciplinary SH:24 team as needed, they work directly with Customers and stakeholders across the wider partnership to understand their needs and ensure SH:24 continues to evolve and work effectively alongside their service.

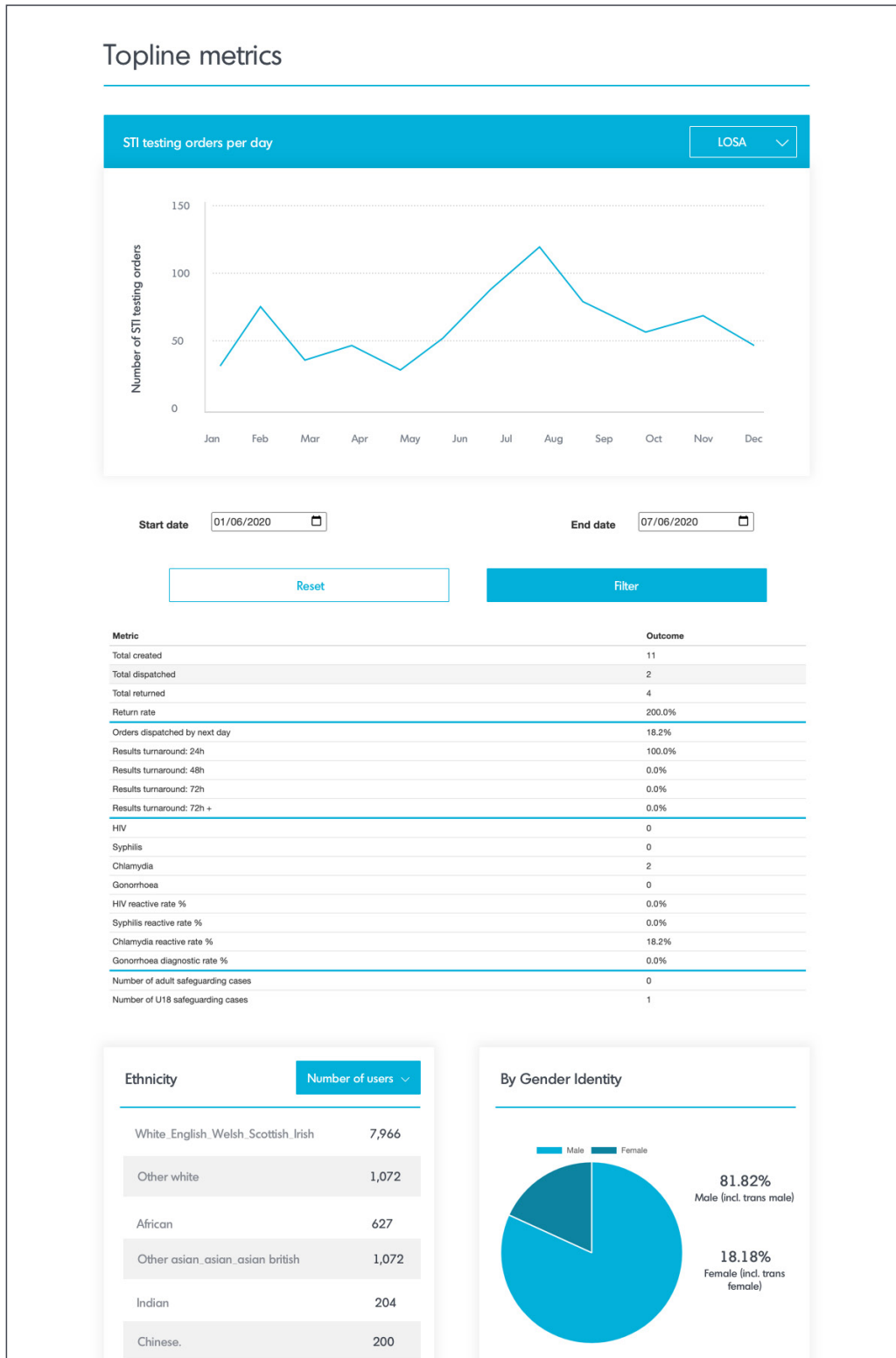
## National datasets

GUMCAD, CTAD and SRHAD data is prepared and submitted by SH:24 directly to PHE, in line with requirements. We adhere to national reporting guidelines and can respond to amendments to national datasets.

## Data Portal

Our Admin portal forms the data backbone of our platform, providing clinicians (SH:24 and Customers), developers and our logistics team with appropriate access to the data they need.

SH:24's database also provides a secure direct feed into our Tableau dashboard which is analysed and manipulated by our SQL queries to visualise the key performance metrics we are commissioned to deliver.



**Figure 32.**  
Topline metrics

With a secure login to our web-based dashboard, Customers can view regional performance data 24/7 in real-time. Customers can filter their dataset by date range and then download as a PDF, or extract as a .csv, for importing into existing Business Intelligence systems.



## Monthly performance reports

SH:24 will prepare and submit to PHE on a quarterly basis a Framework-level performance report. The performance monitoring report will include all of the performance monitoring and quality indicators set out in the service specification. The report will also include, but is not limited to: web analytics; safeguarding referrals; outcomes of confirmatory testing and treatment; confirmation of attendance of users referred to clinic partners; presentation of all GUMCAD data items.

SH:24 can also prepare a monthly performance report for each Customer. This report will present performance monitoring data and quality indicators at Customer-level.

Mock Report Data summary		SH:24											
TOPLINE METRICS													
	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Cumulative
Number of orders	450	439	415	486	565	562	560						3,477
Returned tests	373	336	357	376	398	485	429						2,754
Return Rate	82.9%	76.5%	86.0%	77.4%	70.4%	86.3%	76.6%						79.2%
Insufficient blood sample / sample haemolysed	47	53	45	44	43	34	31						10.8%
<u>Results turnaround</u>													
24 hours	72.6%	79.4%	75.8%	85.8%	84.5%	87.9%	89.4%						83.1%
48 hours	20.9%	16.2%	18.4%	9.0%	12.4%	9.0%	7.5%						12.1%
72 hours	3.9%	3.2%	2.8%	2.6%	2.5%	1.2%	1.6%						2.3%
72 hours +	2.6%	1.2%	3.0%	2.6%	0.7%	1.9%	1.4%						2.5%
<u>Total reactive results</u>													
Syphilis	3	2	2	3	3	7	1						21
HIV	1	2	2	2	1	2	2						12
Chlamydia	31	22	26	25	25	34	18						181
Gonorrhoea	3	2	5	6	3	5	6						30

Figure 33. Monthly Performance Report excerpt

SH:24 will also provide Customers and PHE (shared securely through password protected spreadsheet via nhs.net email) access to the pseudo-anonymised, disaggregate, raw backing data, ahead of scheduled quarterly review meetings. This file includes individual anonymised information (for example, date of birth is converted to age, and we recommend the use of Lower Layer Super Output Area instead of postcodes).

## Financial Reporting

In addition to the current spend calculator available via the Data Portal, Customers will receive monthly financial analyses and flatline projections of annual spend compared with the affordability limit for each component. Financial reports are summarised visually (see Figure X below) with recommendations provided to adjust service capping or online configuration in good time, to manage expenditure and uptake.

### Monthly Financial Analysis

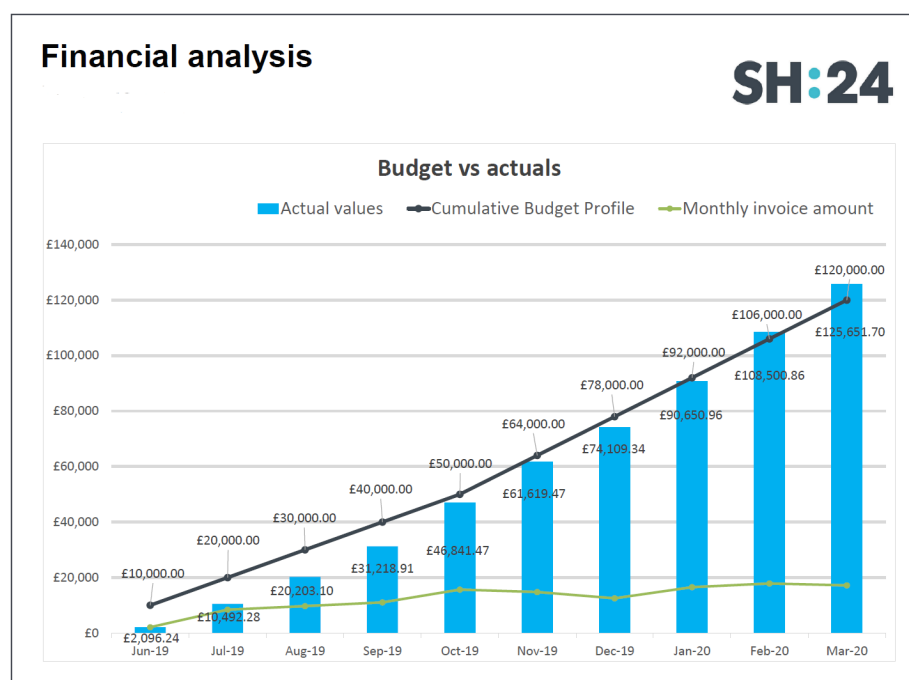


Figure 34. Monthly financial analysis

## Managing expenditure and uptake

SH:24 is experienced in working with Customers to manage changing activity levels at relatively short notice. This might include using resources from underspends to increase volumes, or actively managing a reduction in spend between contract years.

To control uptake and ensure that the service remains within budget, SH:24 can place a 'cap' on the number of orders available each day. This restricts the number of orders available for a service component for a given region, and can be targeted to different user groups. SH:24 currently uses different combinations of 'caps' successfully across its 70+ areas of delivery. SH:24 will discuss different capping options with Customers during mobilisation and consider how they wish to manage demand in their area. These can be managed flexibly by the Delivery Managers on a daily basis to meet monthly activity targets.

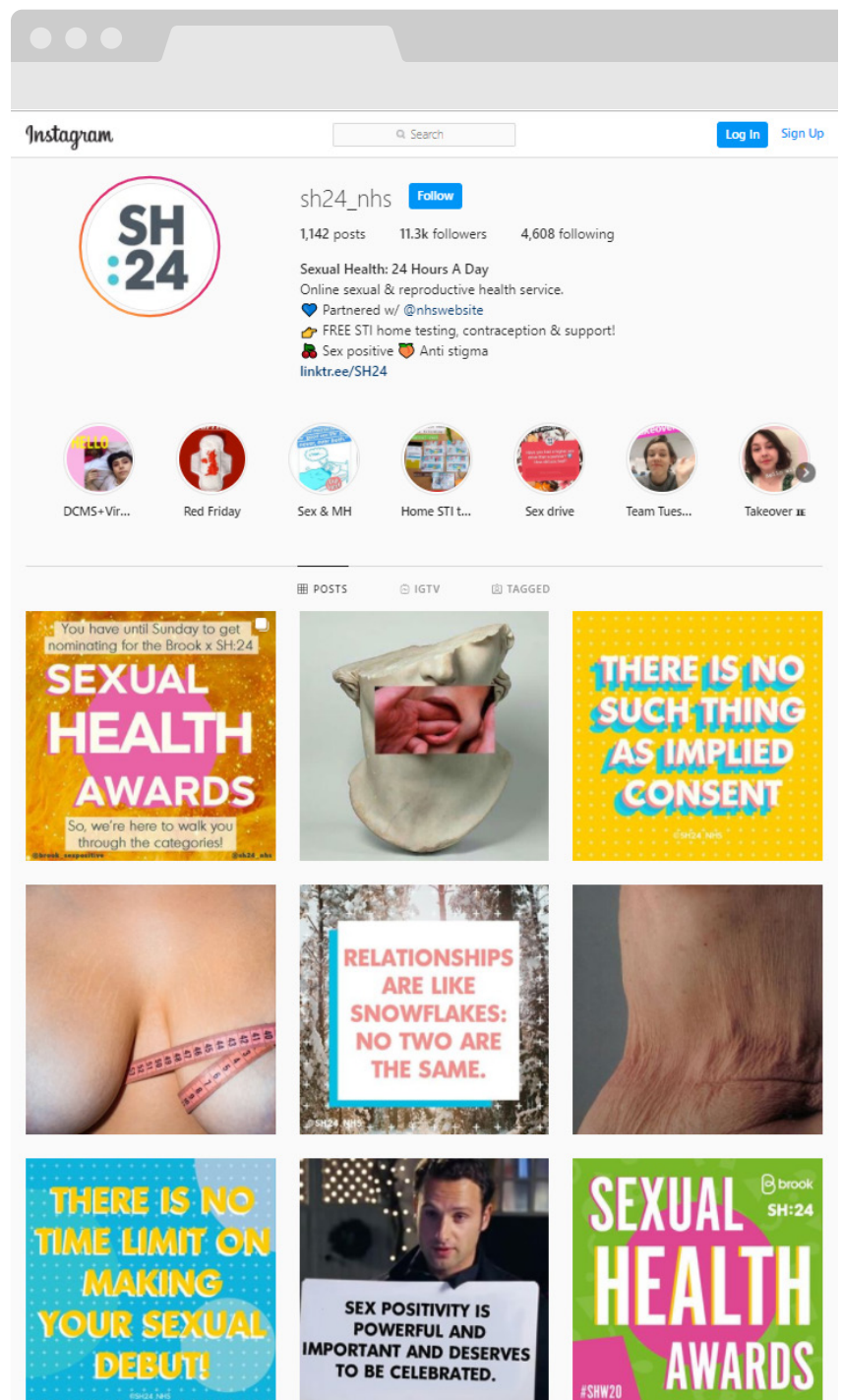
### Service user feedback

As a key partner of public health services, SH:24 recognises that sustained growth and uptake needs to be driven by a trusted and consistent brand, effective search engine optimisation and referral pathways, rather than expensive marketing.

We invest time in building an engaged online community of over 15,000 members (more than 10K on Instagram) through social media, producing original and holistic content on sexual wellbeing.

Every month the SH:24 brand is searched more than 15,000 times and our platform has more than 100,000 visitors.

This is testament to SH:24's proven, evidence-based model, strong public and academic visibility, brand awareness, trust and high levels of user satisfaction (99.0% of users rate our service 4 or 5 out of 5).



**4.93 out of 5**  
OVERALL



Figure 34. SH:24's Instagram page

## Our Reach and Impact

From our beginnings in 2014 in South East London, SH:24 has grown in both scale and breadth, helping to shape the future of sexual and reproductive services in the UK and across the world. Online sexual health and reproductive services have grown from simple STI testing, to the comprehensive range of services now defined by the eSRH Framework.

SH:24 now delivers STI testing, treatment, and oral and emergency contraception in over 30 areas across the UK, alongside delivering international projects in Ireland, Romania, Germany and Kenya.

- Berkshire
- Bradford
- Cheshire East
- Cornwall
- County Durham
- Darlington
- Derbyshire
- Dorset
- East Cheshire
- Essex
- Gateshead
- Halton
- Hertfordshire
- Hillingdon
- Liverpool
- Manchester HIVE/  
StepUP programme
- Medway
- Nottingham
- Telford and Wrekin
- Shropshire
- Staffordshire
- Sunderland
- Warrington
- Worcestershire
- Freetesting.HIV  
National HIV Sampling  
Service
- Northern Ireland
- Scotland
- Ireland
- Germany
- Romania
- Kenya

### Each year SH:24:

- Delivers over 500,000 tests
- Treats over 12,000 people for chlamydia infection
- Prescribes and dispatches contraception medication for over 30,000 people

We have played a key role in evolving best practice for online services in the UK (please see Research and Evaluation section, above) and are committed to building on this with the latest technology and design methodologies.

# Awards

SH:24 is proud to have been nominated for and won commendations from a diverse range of illustrious design, clinical and technological awards, including the BMJ Awards, the Queen’s Awards for Enterprise, and the Guardian Public Service Awards.



Best User Experience – Winner



Innovation Team of the Year 2017 – Winner



Best Innovation – Winner



Digital Leaders 100 – Cross Sector Digital Collaboration of the Year – Finalist



Excellence in mobile healthcare – Finalist



Design Museum Beazley Designs of the Year 2016 – Nominee – Digital category



Best Public Sector – Winner



The Lovie Awards, health & fitness – Winner (Silver)



The People’s Lovie Award, health & fitness – Winner



Best Creative Solution – Winner



Digital Innovation of the Year – Finalist



Queen’s Award for Enterprise; Digital Impact Award, health - Winner



Guardian Public Service Award in Digital and Technology - Winner

## Price List

**Volume Discounts:** Reduced prices for STI testing are available with volume discounts. These are determined in discussion with customers, based on type and volume of testing required.

Our prices include:

- SH:24's 5-star rated, in house clinical support and impartial advice for service users\*
- Administrative support by text, phone and web chat to provide security and comfort to users unfamiliar with digital health services
- Access to bespoke online clinical admin platform
- Mobilisation training and ongoing support for local teams

\*A reduced price is available to Customers who wish to retain clinical support within their existing service provision.

### STI Self-Sampling and Postal Chlamydia Treatment

Kit Dispatch for home delivery or local pick-up

Kit Description	SHHAPT Code/s	Cost Before Volume Discount
Urine / Swab	T2	£4.25
2 x Urine / Swab	T2/DT	£5.44
3 x Urine / Swab	T2/TT	£5.85
Urine / swab + Blood	T3, T4, T5, T6	£5.52
2 x Urine / swab + Blood	T3/DT, T4/DT, T5/DT, T6/DT	£6.54
3 x Urine / swab + Blood	T3/TT, T4/TT, T5/TT, T6/TT	£7.60
Blood only	P1z, T7, HBV, HCV	£4.94
Supply of 6 pack of condoms and lubricant		£1.31

\*Tracked freepost return envelope included within each kit

## Kit Returns and Results Management

Test Type	SHHAPT Code/s	Cost Before Volume Discount
CT (single site)	T1	£19.01
CT/GT (single site)	T2	£19.01
CT/GT (dual site)	T2/DT	£37.07*
CT/GT (triple site)	T2/TT	£46.13*
HIV, Syphilis + CT/GC (single site)	T4	£30.33
HIV, Syphilis + CT/GC (dual site)	T4/DT	£46.45*
HIV, Syphilis + CT/GC (triple site)	T4/TT	£49.26*
HIV + CT/GC (single site)	T4	£33.70
HIV + CT/GC (dual site)	T4/DT	£39.04*
HIV + CT/GC (triple site)	T4/TT	£46.26*
HIV	P1a	£16.47
HIV and Syphilis	T7	£20.67
Syphilis	T7	£13.37
Syphilis + CT/GC (single site)	T3	£33.70
Syphilis + CT/GC (dual site)	T3/DT	£39.04*
Syphilis + CT/GC (triple site)	T3/TT	£46.26*
HIV, Syphilis, Hep B, Hep C + CT/GC (single site)	T6	£50.73
HIV, Syphilis, Hep B, Hep C + CT/GC (dual site)	T6/DT	£65.39*

Test Type	SHHAPT Code/s	Cost Before Volume Discount
HIV, Syphilis, Hep B, Hep C + CT/GC (triple site)	T6/TT	£72.67*
HIV, Hep B, Hep C + CT/GC (single site)	T6	£45.73
HIV, Hep B, Hep C + CT/GC (dual site)	T6/DT	£59.39*
HIV, Hep B, Hep C + CT/GC (triple site)	T6/TT	£66.67*
Syphilis, Hep B, Hep C + CT/GC (single site)	T6	£45.73
Syphilis, Hep B, Hep C + CT/GC (dual site)	T6/DT	£59.39*
Syphilis, Hep B, Hep C + CT/GC (triple site)	T6/TT	£66.67*
HIV, Syphilis, Hep B, Hep C	T6	£39.59
HIV, Hep B, Hep C	T6	£33.39
Syphilis, Hep B, Hep C	T6	£33.39
Azithromycin 500mg, single course + PN		£21.71**
Doxycycline 100mg, single course + PN		£21.20**

\*Site-specific CT/GC result provided to service user and accessible on Admin CRS for local clinicians

\*\*Includes 24hr Tracked dispatch

### Volume Discounts: find out more

Please contact us for a bespoke price list based on your requirements.



## Emergency Hormonal Contraception

Includes clinical support, prescribing, dispensing and 24hr Tracked dispatch

<b>Product</b>	<b>Cost</b>
<b>EllaOne UPA 30mg (single supply)</b>	<b>£28.18</b>
<b>Levonelle LNG</b>	<b>£17.67</b>
<b>Levonelle LNG (double supply)</b>	<b>£20.66</b>
<b>Additional cost for Bridging Method 1: Desogestrel 75 micrograms (3 month supply)</b>	<b>£3.48</b>
<b>Additional cost for Bridging Method 1: Desogestrel 75 micrograms (1 month supply)</b>	<b>£1.16</b>
<b>Supply of 6 pack of condoms and lubricant</b>	<b>£1.31</b>
<b>Supply of pregnancy test</b>	<b>£0.65</b>
<b>Supply of chlamydia self-sampling kit</b>	<b>£4.25</b>

## Routine Contraception

Includes clinical support, prescribing, dispensing and 24hr Tracked dispatch

Product	Cost
Ethinyl oestradiol 30 micrograms + levonorgestrel 150 micrograms (3 month supply)	£16.74
Ethinyl oestradiol 30 micrograms + levonorgestrel 150 micrograms (6 month supply)	£18.63
Ethinyl oestradiol 30 micrograms + levonorgestrel 150 micrograms (12 month supply)	£20.52
Ethinyl oestradiol 35 micrograms + norgestimate 250 micrograms (3 month supply)	£19.50
Ethinyl oestradiol 35 micrograms + norgestimate 250 micrograms (6 month supply)	£24.15
Ethinyl oestradiol 35 micrograms + norgestimate 250 micrograms (12 month supply)	£28.80
Ethinyl oestradiol 30 micrograms + desogestrel 150 micrograms (3 month supply)	£19.04
Ethinyl oestradiol 30 micrograms + desogestrel 150 micrograms (6 month supply)	£23.23
Ethinyl oestradiol 30 micrograms + desogestrel 150 micrograms (12 month supply)	£27.42
Ethinyl oestradiol 30 micrograms + gestodene 0.075 mg (3 month supply)	£20.26
Ethinyl oestradiol 30 micrograms + gestodene 0.075 mg (6 month supply)	£25.67
Ethinyl oestradiol 30 micrograms + gestodene 0.075 mg (12 month supply)	£31.08
Desogestrel 75 micrograms (3 month supply)	£18.33
Desogestrel 75 micrograms (6 month supply)	£21.81

<b>Product</b>	<b>Cost</b>
<b>Desogestrel 75 micrograms (12 month supply)</b>	<b>£25.29</b>
<b>Levonorgestrel 30 micrograms (3 month supply)</b>	<b>£17.61</b>
<b>Levonorgestrel 30 micrograms (6 month supply)</b>	<b>£20.37</b>
<b>Levonorgestrel 30 micrograms (12 month supply)</b>	<b>£23.13</b>
<b>Nuva Ring (3 month supply)</b>	<b>£34.36</b>
<b>Nuva Ring (6 month supply)</b>	<b>£53.87</b>
<b>Nuva Ring (12 month supply)</b>	<b>£73.38</b>
<b>Evra Patch (3 month supply)</b>	<b>£44.55</b>
<b>Evra Patch (6 month supply)</b>	<b>£74.25</b>
<b>Evra Patch (12 month supply)</b>	<b>£103.95</b>
<b>Sayana Press 104mg / 0.65ml (3 month supply)</b>	<b>£29.75</b>
<b>Sayana Press 104mg / 0.65ml (6 month supply)</b>	<b>£36.65</b>
<b>Sayana Press 104mg / 0.65ml (12 month supply)</b>	<b>£43.55</b>
<b>Supply of 6 pack of condoms and lubricant</b>	<b>£1.31</b>
<b>Supply of chlamydia self-sampling kit</b>	<b>£4.25</b>

### **Set-up Costs**

New services attract a mobilisation fee, which includes staff time, online development, training, and marketing resources. The fee will be costed based on the particular needs of the service. We will ensure it remains proportionate to activity levels.

## Talk To Us

### SH:24 are:

Committed to supporting and transforming the UK's sexual and reproductive health in partnership with public and third sector providers.

Proven providers to multiple and diverse population groups, regardless of their location, with a limited set-up time.

Delivering services in partnership with NHS Trusts, local authorities and social enterprises across the country in addition to collaboratively responding to new tender opportunities.

SH:24 would welcome new commissioning and provider partners.

To discuss partnership opportunities or for more information about SH:24 please contact:

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