

# **Lot 2**

## **Provision of Emergency Hormonal Contraception (EHC) services**

**Reference DN382042**

**April 2023 – March 2024  
(12 months)**

# Service Specification

## 1. Introduction

- 1.1. Public Health Dorset (PHD) aims to improve and protect the health and wellbeing of the local population with an emphasis on reducing health inequalities. We are a shared service across Bournemouth, Christchurch and Poole (BCP) Council and Dorset Council.
- 1.2. Public Health Dorset is the Commissioner of Community Health Improvement Services (CHIS) which includes NHS Health Checks, Emergency Hormonal Contraception (EHC), Long-Acting Reversible Contraception (LARC), Needle Exchange, Supervised Consumption and Smoking Cessation.
- 1.3. These services are commissioned through an Any Qualified Provider (AQP) Framework approach which broadens the scope for Providers who fulfil the CHIS Selection Criteria to apply to deliver those services on the framework.
- 1.4. This service specification sets out the requirements for the provision of a Public Health Service for Emergency Hormonal Contraception (EHC). The service will cover the county of Dorset. Out of area service users who require the service in Dorset are also eligible.
- 1.5. The other main sexual health services across the county of Dorset are delivered by Sexual Health Dorset, ensuring the level of access is appropriate to meet local need.
- 1.6. Young people are more likely to engage in risk taking behaviour which may lead to unwanted pregnancy. Emergency contraception provides women with a means of preventing unintended pregnancy following unprotected sexual intercourse. National Institute for Health and Care Excellence (NICE) recommends identifying adults and young people who may be at risk with key groups including those who repeatedly seek emergency contraception.
- 1.7. Due to the potential risk-taking behaviour women may engage in, this service will be required to assess the need to signpost the service user to an online Chlamydia testing service and provide free condoms.
- 1.8. Public Health Dorset measures two outcomes in which this service contributes to:
  - Under 18 conception rates - Teenage pregnancy rates have declined in the county but there are key hotspots across Dorset within areas of deprivation where numbers are higher, in Bournemouth, Poole, Weymouth, Portland
  - Chlamydia rates per 100,000 young people aged 15-24 (2017) were:
    - Bournemouth – 4,498, Poole – 3,390, Dorset – 2,863
- 1.9. Other local priorities linked to this service include:
  - Reducing abortion in under 18's – In 2016, the percentage of under 18's conceptions leading to abortion is 56.4% in Bournemouth, 58.8% in Dorset and 50% in Poole.
  - Repeat abortion in under 25's – In 2017, the percentage of under 25's undergoing repeat abortions is 21.9% in Bournemouth, 22.6% in Dorset and 25.6% in Poole.

## 2. Scope of Service

- 2.1. The aims of the service are to:
  - Describe the availability of emergency contraception, especially among young people.

- Improve access to Emergency Hormonal Contraception (EHC) and sexual health advice for women who have had unprotected sex.
- Effectively administer EHC with users and help contribute to a reduction in the number of unplanned pregnancies.
- To signpost service users who may have been at risk of Chlamydia to access on line Chlamydia testing services.
- To provide free condoms to the service user as part of the consultation.
- To increase awareness of and where appropriate refer to the integrated sexual health service for service users' contraceptive or STI needs.
- To reduce women's repeated reliance on EHC through behaviour change interventions and effective referral for contraception.

### **3. Service Description**

#### **3.1. Emergency Hormonal Contraception**

- 3.1.1. The Provider shall undertake consultation where a comprehensive assessment of the service user's history is undertaken to assess appropriate the supply of EHC, referencing the inclusion and exclusion criteria detailed in the Patient Group Direction (PGD).
- 3.1.2. Where possible, the initial consultation and supply of the specified drug should take place within the Provider premises. Where this is not possible, the provider may offer the service using a range of delivery methods, including telephone or video call, where appropriate to meet the needs of the client.
- 3.1.3. The Provider shall offer a supply of free condoms to all service users.
- 3.1.4. The Provider will issue a free supply of levonorgestrel (Levonelle) and ulipristal acetate (ellaOne) Emergency Hormonal Contraception (EHC) when appropriate to eligible clients in line with the requirements of the locally agreed PGDs and the procedures set out in the consultation form.
- 3.1.5. The Provider shall refer service users who are excluded from the service under the terms of the PGDs to other local contraceptive services for treatment and advice within the time frame for emergency contraception treatment to be effective.
- 3.1.6. Service users who have exceeded the time limit for EHC will be informed about the use of an intra-uterine device (IUD) and referred to a GP or Sexual Health Dorset.
- 3.1.7. The Provider shall give advice to the service user on the use of EHC including:
  - Mode of action
  - Side effects and cautions, Effects on menstrual cycle
  - Failure rate, future contraception options and Sexual Health Advice
  - Follow up and referral
- 3.1.8. The Provider shall supply the specified drug and supervise its consumption at the same time as the initial consultation, where possible, and record this in the patient medication record.
- 3.1.9. Where the service is delivered virtually and the service user is unable to collect the specified drugs, the service user will need to confirm the name of a representative to collect these and the expected time of collection. On collection, staff should confirm it is the representative nominated by the service user collecting the specified drugs and record this supply appropriately in the patient medication record.

- 3.1.10. The Provider shall ensure maintenance of records for each supply and may be required to share information with appropriate parties in line with confidentiality protocols.
- 3.1.11. The Provider shall deliver a behaviour change and prevention intervention and refer where appropriate to a contraceptive service to prevent repeat visits for EHC.

### **3.2. Online Chlamydia Testing Services**

- 3.2.1. The Provider must include as part of the EHC consultation a discussion about Chlamydia and signpost individuals to SH:24, if needed: [www.sh24.org.uk](http://www.sh24.org.uk)
- 3.2.2. The Provider shall explain the benefits of Chlamydia screening to the service user, advise how to use the kit, the importance of completing and returning the kit and what to expect following test completion.
- 3.2.3. The Provider shall update PharmOutcomes or Outcomes4Health after a service user has been signposted to an online Chlamydia service.
- 3.2.4. The Provider will not receive information regarding diagnosis and are not required to contact the service user to discuss their test post consultation.

### **3.3. Condom Distribution**

- 3.3.1. The Provider shall give advice on safe sex and supply the service user with a free pack of condoms as part of the consultation.

### **3.4. Service Requirements**

- 3.4.1. Ensure the Provider premises is open at least 35 hours a week, spread over at least 5 days, and be open access during these times for women requiring this service, as outlined in the PGDs, as a same day walk-in service with no appointment necessary.
- 3.4.2. Ensure that the service is user friendly, non-judgemental, person-centred and confidential at all times.
- 3.4.3. Ensure a trained member of staff is available on site to deliver the services at all times during opening hours.
- 3.4.4. Refer any service user who is excluded from the PGD criteria as soon as possible to another local service that will be able to assist them. Where possible, the Provider must ensure that the service they refer a service user to is open and accessible, by phoning ahead if necessary.
- 3.4.5. Ensure staff within the organisation are familiar with the Public Health Dorset website Provider Resources page <http://www.publichealthdorset.org.uk/Provider-resources/> where key information to support service delivery is published. Details of other locations providing public health commissioned services are also available on this web page.
- 3.4.6. Ensure the service can be provided from an accessible and private consultation room on the premises.
- 3.4.7. Provide service users with assurance at the start of every consultation that the service is confidential (the only exception being when the accredited practitioner judges that the service user is at risk and the involvement of others is necessary, e.g. child protection).
- 3.4.8. Ensure, where appropriate, that the service user is counselled on other sexual health matters and related topics. Where required, the Provider shall deliver support and advice to people

accessing the service, including advice on safe sex, condom use and advice on the use of regular contraceptive methods. Appropriate written information shall also be available on these topics.

- 3.4.9. Ensure adequate supplies are in stock so that all service users are offered the following:
- Up to date details of the local commissioned sexual health services (also accessible via Sexual Health Dorset **0300 3031948**; <https://sexualhealthdorset.org/>)
  - “Your Guide to Emergency Contraception” and “Your Guide to Contraception” leaflets\*
  - The patient information leaflet from the medicine packaging.
- \*Leaflets can be downloaded online for free or ordered by the Provider from the FPA
- 3.4.10. If the service user consents, make a referral to the locally commissioned contraceptive and sexual health service using the locally agreed pathway as specified by Public Health Dorset.
- 3.4.11. Where necessary, share relevant information (e.g. for referrals) with other health care professionals and agencies, in line with locally determined confidentiality agreements, including, the need for the permission of the service user to share the information.
- 3.4.12. Use professional judgement to consider, and where appropriate act on, any safeguarding children issues coming to their attention as a result of providing the service. This shall be in line with local safeguarding children procedures and any national or local guidance on under 16s sexual activity.
- 3.4.13. The Sexual Offences Act 2003 states that no child under 13 years is able to consent to any sexual activity. If the service user is believed to be under 13 years of age, providing they have been assessed as ‘Fraser competent’, treatment should not be withheld, as the duty to safeguard the child from most harm, would include unintended pregnancy.
- 3.4.14. All the details of the consultation must be recorded and discussed at the earliest opportunity with the relevant Local Authority Safeguarding Team (or Child Care Duty Team out of hours). In an emergency, the police can be contacted.
- 3.4.15. Deliver the service according to the relevant guidance by NICE.
- 3.4.16. The Provider shall recognise and value diversity, and respect cultural differences, making sure that every person is treated fairly, and person-centred care is not compromised, whatever their values and beliefs. Staff providing this service should all be familiar with, and work within the principles set out in the General Pharmaceutical Council document [“In practice: Guidance on religion, personal value and beliefs”](#)
- 3.4.17. Ensure that all staff providing the service do so in accordance with the principles of up to date PGDs.
- 3.4.18. Ensure internet access to use PharmOutcomes or Outcomes4Health and the PGD Consultation Forms and record all relevant information as outlined below in an accurate and timely fashion. If the Provider cannot enter the information on the electronic data system at the time of the consultation, the information shall be recorded on the consultation form (see the paper version in the PGD appendices) and entered on to the electronic data system as soon as possible after the consultation.
- 3.4.19. Consult with the service user, take a comprehensive service user history and establish the need, considering any possibility of current pregnancy, any contra-indications, previous use and current medication to ensure the supply is safe and appropriate.

- 3.4.20. The Provider shall ensure that all staff delivering the Service have an Enhanced Level DBS check.
- 3.4.21. The Provider shall have in place a standard operating procedure for the delivery of the service and review its standard operating procedures and the referral pathways for the service every 2 years or sooner if there are changes to the service.
- 3.4.22. The Commissioner reserves the right to undertake a visit to the Provider's premises to inspect the provision of the service and to ensure that the Provider is meeting the service specification.

### **3.5. Service Availability Requirements**

- 3.5.1. Ensure the service is delivered in person. If there is a change to staffing or circumstances that will affect service delivery, the Provider must inform Public Health Dorset within 12 hours by emailing [phcontracts@dorsetcouncil.gov.uk](mailto:phcontracts@dorsetcouncil.gov.uk) or phoning **01305 224400** to agree any contingency plans.
- 3.5.2. The Provider will have a suitably private consultation room and ensure accessibility for all service users, including those with additional needs relating to their mobility.
- 3.5.3. The Provider shall ensure the service is made available to all eligible residents of the county of Dorset. Out of area service users who require the service in Dorset are also eligible.
- 3.5.4. The Provider will ensure the service is accessible for a minimum of 35 hours a week, as a same day, walk in service with a trained member of staff available at all times.

## **4. Training and Competency Requirements**

- 4.1. The Provider has qualified staff providing treatment who are trained in safeguarding children and emergency contraception according to the CPPE e-learning and online assessment or equivalent
- 4.2. The Provider is qualified, professionally registered, trained and competent, in line with NICE good practice guidance: to supply service users with the medication outlined in the specification either as a prescription or under the terms of the Public Health Dorset Patient Group Directions (PGDs) for EHC.
- 4.3. **Initial training** - all clinical staff providing treatment under the current PGDs must complete the Centre for Pharmacy Postgraduate Education (CPPE) e-learning course and online assessment for Safeguarding Children and Emergency Contraception or equivalent: <https://www.cppe.ac.uk/>. Staff providing the service must comply with the appropriate requirements of their regulatory body, for example General Medical Council.
- 4.4. **Competency assessment** – all staff delivering this service shall have completed the CPPE e-learning course and online assessment for Safeguarding Children and Emergency Contraception, or equivalent, and any additional local training to address changes to national guidance.
- 4.5. All staff delivering this service shall be able to demonstrate competency in line with the NICE Good Practice Guidance: [Patient group directions: competency framework for health professionals using patient group directions](#)

- 4.6. **At least** every 3 years, all staff delivering this service shall complete the CPPE online assessment on Safeguarding Children and the CPPE Emergency Contraception e-learning course or equivalent
- 4.7. The Provider is responsible for identifying the learning needs of their own staff and recording their Continuing Professional Development (CPD) and can demonstrate this if required.
- 4.8. Where relevant the Provider is responsible for cascading training/the process on the supply of EHC to all staff to ensure all staff are aware the process, operate within local protocols and can respond sensitively and appropriately to enquiries.
- 4.9. Provider staff shall regularly check the Public Health Dorset Provider Resources page [www.publichealthdorset.org.uk/Provider-resources](http://www.publichealthdorset.org.uk/Provider-resources) for service and training related updates and information
- 4.10. The Provider is responsible for ensuring all staff delivering the service are registered with their relevant professional body commensurate to their role.

## 5. Activity, Performance and Reporting Requirements

- 5.1. The Provider shall have internet access in place at all times and shall use appropriate electronic systems to record all consultations and activity and ensure that claims for payment for provision of this service can be collected through the electronic system as stipulated by the Commissioner.
- 5.2. The Provider shall ensure that all consultations are logged on either the PharmOutcomes or Outcomes4Health system to enable the Commissioner to monitor activity and verify payments for Services provided.
- 5.3. The Provider shall complete the relevant template on PharmOutcomes or Outcomes4Health to submit their activity to the Commissioner on a **monthly** basis.
- 5.4. The deadline to submit any relevant reporting templates to the Commissioner for payment is the end of each month.
- 5.5. Any late Provider data submissions will not be paid until the following month.
- 5.6. Providers will not be paid for data submitted more than six months after the activity was undertaken.
- 5.7. No claim shall be submitted more than one month after the end of this agreement.
- 5.8. The Provider shall ensure that the necessary documentation, as detailed in this service specification, is maintained and made available to the Commissioner for post payment verification.
- 5.9. The Provider may need to share relevant information with other health care professionals and agencies, in line with locally determined confidentiality arrangements, including, the need for the permission of the client to share the information.
- 5.10. Records will be confidential and should be stored securely and for a length of time in line with record retention policies.
- 5.11. The Provider shall participate in any audit of service provision or assessment of user experience conducted or authorised by the Commissioner.

## 6. Payments

- 6.1. Payment will be made on a monthly basis on receipt of a fully completed PharmOutcomes or Outcomes4Health reporting template.
- 6.2. The Commissioner will pay the Provider at the rates outlined below for the claimed activity:

Description of Activity	Charge	VAT
Completed consultation (regardless of whether a supply is made to the service user or not) including issue of free condoms	£ 15.50	Set fee
Cost of provision of a supervised dose of Levonorgestrel <i>Based on the Drug Tariff Price and subject to BNF rate changes</i>	£ 5.20	Excluding @ 5%
Cost of provision of a supervised <b>double dose</b> of Levonorgestrel where BMI > 26 or individuals weighing more than 70kg <i>Based on the Drug Tariff Price and subject to BNF rate changes</i>	£ 5.20	Excluding @ 5%
Cost of provision of a supervised dose of EllaOne <i>Based on the Drug Tariff Price and subject to BNF rate changes</i>	£ 14.05	Excluding @ 5%

## 7. Notifying the Commissioner of Changes to Delivery or Organisational Details

- 7.1. The Provider is required to contact the Commissioner (Public Health Dorset), using the relevant letter (see Appendix 1) to provide formal notification of changes to:
- Bank details
  - Contact details
  - Changes to ownership
- 7.2. If the Provider is temporarily unable to deliver the service, they must notify Public Health Dorset within one-working day by emailing [phcontracts@dorsetcouncil.gov.uk](mailto:phcontracts@dorsetcouncil.gov.uk) or by phoning **01305 224400** to agree any contingency plans and enable the Commissioner to maintain up to date records of active providers.
- 7.3. The Provider should contact Public Health Dorset as soon as possible if they wish to be permanently removed from the Any Qualified Provider (AQP) Framework for delivery of a service, or services, by completing the **“Removal from the AQP Framework Agreement for Delivery of CHIS Services”** letter in Appendix 1.

## 8. Minimum Provider Qualification Requirements for Any Qualified Provider (AQP) Framework



As referenced in the Community Health Improvement Services Framework Agreement Selection Questionnaire (Part 4) the essential qualifications that a Provider must demonstrate to be awarded a position on the Framework for this service are listed below:

- 8.1. The Provider has qualified staff providing treatment who are trained in safeguarding children and emergency contraception according to the CPPE e-learning and online assessment or equivalent
- 8.2. The Provider is qualified, professionally registered, trained and competent, in line with NICE good practice guidance: to supply service users with the medication outlined in the specification either as a prescription or under the terms of the PHD Patient Group Direction (PGD) for EHC.
- 8.3. The Provider will have a suitably private consultation room and ensure accessibility for all service users, including those with additional needs relating to their mobility.
- 8.4. The Provider shall ensure the service is made available to all eligible residents of the county of Dorset. Out of area service users who require the service in Dorset are also eligible.
- 8.5. The Provider will ensure the service is accessible for a minimum of 35 hours a week, as a same day, walk in service with a trained member of staff available at all times.
- 8.6. The Provider will ensure the service has internet access and access to secure electronic systems (PharmOutcomes or Outcomes4Health) which enables collection of service user information.
- 8.7. The Provider shall ensure that all staff delivering the Service have an Enhanced Level DBS check.

## **9. Safeguarding**

- 9.1. The Provider shall fully comply with the Dorset Safeguarding Adults Board (DSAB) and the Bournemouth, Christchurch and Poole Safeguarding Adults Board (BCPSAB) policies and the Pan-Dorset Safeguarding Children Partnership procedures including Inter-Agency Procedures for Children and Young People and Child Sexual Exploitation (CSE).
- 9.2. Providers are required under statute and regulation to have effective arrangements in place to safeguard and promote the welfare of children and adults at risk of harm and abuse in every service that they deliver.
- 9.3. Providers must demonstrate safeguarding is embedded at every level in their organisation with effective governance processes evident.
- 9.4. It remains the responsibility of every (NHS-funded) organisation, and each individual working healthcare professional (in the NHS), to ensure that the principles and duties of safeguarding children and adults are holistically, consistently and conscientiously applied. Every (NHS funded) organisation needs to ensure that sufficient capacity is in place for them to fulfil their statutory duties; they should regularly review their arrangements to assure themselves that they are working effectively.
- 9.5. Public Health Dorset will take a proportionate approach to assuring Safeguarding and Quality, commensurate with the responsibilities and financial value of each contract.

### **Public Health Commissioned services will be required to provide:**

- 9.6. Policies and evidence of robust safeguarding arrangements as part of formal Contract Award documentation.
- 9.7. An annual declaration on safeguarding arrangements:
  - a. Designated Officers / Leads for Safeguarding in the Organisation

- b. Safeguarding Policies, Procedures and Practice
- c. Recruitment, Training and Workforce Development
- d. Managing Allegations of Abuse
- e. Record Keeping

## Appendix 1: Letter templates for notifying the Commissioner of changes to delivery or organisational details



Public Health Dorset (PHD)  
County Hall  
Colliton Park  
Dorchester  
Dorset  
DT1 1XJ

Email: [phcontracts@dorsetcouncil.co.uk](mailto:phcontracts@dorsetcouncil.co.uk)

Date: \*\*\*\*\*

Your ref: CHIS\_provider\_details

Dear Colleague,

### **RE: Change of provider details – contact or bank information**

You are currently on the Public Health Dorset Any Qualified Provider (AQP) framework for the provision of Community Health Improvement services (“CHIS”). We have been notified / you have notified us of amendments to information submitted through your application, either organisation contact details or bank details.

In order to maintain our records and process payments, can we kindly request that you complete the relevant information below to formally notify us of any changes:

#### **1. Changes to contact details**

Previous details	
Organisation name	
Address	
Postcode	
Telephone number	
Email address	
Contact name	
New details	
Organisation name	
Address	
Postcode	
Telephone number	
Email address	
Contact name	

Change request completed by: \_\_\_\_\_

**Date:** \_\_\_\_\_

Please email this updated information to [phcontracts@dorsetcouncil.gov.uk](mailto:phcontracts@dorsetcouncil.gov.uk)

**2. Changes to bank details**

Please tick this box if you have recently changed your organisation's bank details

**Provider name:** \_\_\_\_\_

**Provider postcode:** \_\_\_\_\_

**Change request completed by:** \_\_\_\_\_

**Date:** \_\_\_\_\_


When a provider changes their bank details, Public Health Dorset requires the following information, on the organisation's headed paper, for our records:

- Organisation name
- Organisation address
- Email address (for remittance)
- Organisation phone number
- VAT registration number (if applicable)
- Sort code
- Account number

To enable timely payment for CHIS activity claims, please ensure this updated information is provided to us as soon as possible. Please email your new bank details, on company headed paper, to [phcontracts@dorsetcouncil.gov.uk](mailto:phcontracts@dorsetcouncil.gov.uk)

If you have any questions, please do not hesitate to contact Public Health Dorset using the email address above.

Kind regards,



Jen Spencer  
CHIS Contract Manager, Public Health Dorset

Public Health Dorset (PHD)  
County Hall  
Colliton Park  
Dorchester  
Dorset  
DT1 1XJ

Email: [phcontracts@dorsetcouncil.co.uk](mailto:phcontracts@dorsetcouncil.co.uk)

Date: \*\*\*\*

Your ref: CHISChangeofOwnership

Dear Colleague,

**RE: Change of ownership**

We have been notified / you have notified us of a change of ownership of [organisation name] to the new organisation [name].

This organisation is a provider on the Public Health Dorset Any Qualified Provider (AQP) framework for the delivery of the following Community Health Improvement services (“CHIS”):

1. \*\*\*\*
2. \*\*\*\*
3. \*\*\*\*

As a result of this change of ownership, in-line with clause B23 of the Framework Agreement, we now require the following from you:

- a) completed Change of Ownership Details (below). Please return this to Public Health Dorset via [phcontracts@dorsetcouncil.gov.uk](mailto:phcontracts@dorsetcouncil.gov.uk)
- b) a new AQP framework application for the required CHIS services:  
<https://www.publichealthdorset.org.uk/provider-resources/procurement-information>

**Change of Ownership Details**

Previous provider	
Organisation name	
Address	
Postcode	
Phone number	
Email address	
Contact name	
New provider	
Organisation name	
Address	

<b>Postcode</b>	
<b>Phone number</b>	
<b>Email address</b>	
<b>Contact name</b>	
<b>CHIS services to be provided by the new organisation</b>	
<b>Change of ownership details</b>	
<b>Reason for change of ownership</b>	
<b>Change of ownership date</b>	

**Change request completed by:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Please email this updated information to [phcontracts@dorsetcouncil.gov.uk](mailto:phcontracts@dorsetcouncil.gov.uk)

By submitting a new application on the Any Qualified Provider Framework, this enables us, as the commissioner of CHIS services, to approve the change of ownership in accordance with the terms of the Framework Agreement, ensuring that you would not be in breach of your obligations under the Framework Agreement. The new application also provides key information for purchasing from the Framework, including updated company details such as the bank account, which will enable timely payments for activity in accordance with the service specifications.

If you have any questions please do not hesitate to contact Public Health Dorset:  
[phcontracts@dorsetcouncil.gov.uk](mailto:phcontracts@dorsetcouncil.gov.uk)

Kind regards,



Jen Spencer  
 CHIS Contract Manager  
 Public Health Dorset



Public Health Dorset (PHD)  
County Hall  
Colliton Park  
Dorchester  
Dorset  
DT1 1XJ

Email: [phcontracts@dorsetcouncil.co.uk](mailto:phcontracts@dorsetcouncil.co.uk)

Date: \*\*\*\*

Your ref: CHIS\_remove\_from\_AQP

Dear Colleague,

**RE: Remove provider from the Public Health Dorset AQP framework**

You are currently on the Public Health Dorset Any Qualified Provider (AQP) framework for the provision of Community Health Improvement services ("CHIS"). We have been notified / you have notified us that the provider(s) below should now be permanently removed from the framework for the indicated service(s):

Provider Name	Provider Postcode	Service(s) to be removed from AQP framework

**Change request completed by:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Please email this updated information to [phcontracts@dorsetcouncil.gov.uk](mailto:phcontracts@dorsetcouncil.gov.uk)

Any outstanding activity claims should be submitted to Public Health Dorset at your earliest convenience, in accordance with the process outlined in the service specification(s) and will be paid as part of the next scheduled payments.

We are required to maintain records of changes to providers on the Any Qualified Provider framework and appreciate you taking the time to complete and return this information to us. Should you wish to apply in the future to deliver additional Public Health Dorset CHIS

services or to restart the service(s) indicated above, please visit our website for further information about opportunities and application the process:

[Procurement information - Public Health Dorset - Dorset Council](#)

If you have any questions, please do not hesitate to contact us using the email address above.

Kind regards,

A handwritten signature in black ink, appearing to be 'Jen Spencer', written over a horizontal line.

Jen Spencer  
CHIS Contract Manager  
Public Health Dorset