

SCHEDULE 1

Service Specification

Service: To Provide One YOU Kent Health Improvement Interventions

Purchaser Leads: Professional Lead for Stop Smoking and Professional Lead for Weight and Activity

1. BACKGROUND

1.1 This specification lays out details for delivery against **EITHER** or **BOTH** of the following programmes/interventions

- **One YOU Kent Smoke Free**
- **One YOU Kent Weight Loss**

Due to a planned contract review in 2022-23, changes to this Service Specification may be required and will be widely communicated to all Providers.

2. PURPOSE:

2.1. This Service Specification sets out the arrangements between Kent Community Health NHS Foundation Trust (KCHFT) and the Provider to provide One You Kent Adult Health Improvement Interventions to support service users who wish to join **either/or One YOU Kent Smoke Free** or **Weight Loss** programmes

2.2. This Service Specification sets out the expectations and obligations on the Parties and constitutes the entire agreement between the Parties. It supersedes all prior agreements, understandings and arrangements between them and representations by them, whether oral or written, which relate to the subject matter of this specification

3. SERVICE – One YOU Smoke Free (OYSF)

The Provider may choose to provide one or more of the following services:

- Full Delivery Service
- Nicotine Replacement Therapy provision and Varenicline (PGD)
- Referral

Where the Provider is providing One You Smoke Free Full Delivery Service:-

3.1. The Provider shall provide an appropriately trained One You Smoke Free (OYSF) Adviser, who has completed the National Centre for Smoking Cessation and Training (NCSCT) online training and assessment programme, and KCHFT Smoke Free Level 2: Helping Smokers to Quit training.

3.2. The OYSF Adviser will meet with service users who may self-refer or be referred by health care professionals throughout Kent and will outline the benefits of participating in the OYSF programme.

3.3. The Provider will be measured on the success rate of individuals who abstain from

smoking, for a period longer than 4 weeks from quit date. Success rates below 35% or above 70% will be monitored by KCHFT (classed as exception reporting) and both Parties will work to implement an action plan.

- 3.4. Carbon Monoxide (CO) monitors, tubes, calibration equipment, mouthpieces and cleaning wipes required to deliver this service, must be provided and maintained by the Provider in accordance with both the manufacturer's instructions and the procedures implemented by KCHFT.

Where the Provider is providing Patient Group Direction (PGD) for Varenicline:

- 3.5 The Provider must ensure that all Pharmacists involved in the provision of the Service operate within the current PGD for Varenicline.

Where the Provider is providing Nicotine Replacement Therapy (NRT):

- 3.6 The Provider will access the NRT request on the client record of One System for Health (1S4H) before supplying the product.
- 3.7 The Provider will record each supply on 1S4H.

Where the Provider is providing Referral:

- 3.8 The Provider will refer smokers into the OYSF programme using 1S4H or the appropriate referral form which can be found at Appendix A.
- 3.9 The Provider will only receive payment for the referral if the service user successfully quits with the KCHFT OYSF team at 4 weeks after setting their quit date.

4. PROGRAMME OF ACTIVITY – Smoke Free FULL DELIVERY

- 4.1. Upon completion of the Smoke Free training, the OYSF Adviser will provide each service user with a programme of one to one support.
- 4.2. The programme will be delivered over a seven (7) consecutive week period. During the seven weeks, the service user will receive a total of between 1.5 and 2 hours of appointment time with the OYSF Adviser. This intervention should be delivered face to face where possible, but in the event that the service user is unable to attend one of their seven appointments due to sickness or other external factors impact the ability to deliver the intervention face to face, telephone consultations can take place.
- 4.3. At each meeting the OYSF Adviser will check and verify the service user's CO levels, calculating the overall reduction from the first appointment. All contacts, measurements and outcomes must be recorded on the One System for Health (1S4H) database after each consultation.
- 4.4. The OYSF Adviser will inform each service user of the treatment options that are available and their success rates. This will include an assessment for the suitability of any pharmacological support that is available.
- 4.5. The OYSF Adviser will work with the service user to set the quit date.
- 4.6. The OYSF Adviser will provide details of the behavioural support programme and emphasise to service users that they must be committed to the seven (7) week programme.

- 4.7. Where no appointments are taken up after commencement of the programme, the OYSF Adviser must make up to three (3) attempts within a one (1) month period from the initial contact to contact service users, which must be recorded on 1S4H.
- 4.8. Where the OYSF Adviser successfully contacts the service user, they will attempt to ascertain whether the service user has quit smoking. These outcomes must be recorded on 1S4H. Where three (3) separate unsuccessful attempts (within a one (1) month period) to contact the service user have been made, the OYSF Adviser must record the outcome as 'lost to service' on 1S4H and remove the service user from their caseload.
- 4.9. Where a service user fails to complete the full programme before quitting, or resumes smoking after the quit date, they may return to access the programme, however, this will only be for a maximum of two (2) separate times in any twelve (12) month period. After this period the Provider should refer the service user to the KCHFT OYSF Service using the appropriate referral form, where a £5 payment will be made to the Provider by KCHFT upon a successful 4 week quit with the core team.
- 4.10. The OYSF Adviser will signpost service users to additional support services, where necessary, as part of their exit strategy from the OYSF programme.

5. PROGRAMME OF ACTIVITY – Smoke Free Referral

- 5.1. The Provider will undergo the following process for referring a service user to KCHFT's OYSF service:
 - ASK – if the service user is a smoker;
 - ADVISE – service user of the health benefits of quitting;
 - ACT – on service user's response, build confidence and if service user would like help to become smoke free, refer to the KCHFT OYSF service using 1S4H or the referral form at appendix A.

The provider is advised to complete the NCSCCT Very Brief Advice on smoking module at <https://www.ncsct.co.uk/>

6. PROGRAMME OF ACTIVITY – Smoke Free PGD and NRT supply Pharmacies

- 6.1. The Provider must ensure that all Pharmacists involved in the provision of the Service operate within the current Patient Group Direction for Varenicline (available on completion of relevant training).
- 6.2. The Service will be available throughout the pharmacy's opening hours. The Provider will maintain an acceptable level of staffing at all times, and will provide suitably accredited, skilled, trained and experienced staff to provide the Service.
- 6.3. The Service will only be available to service users referred by OYSF Advisers with the appropriate authority of the contracted KCHFT service.
- 6.4. The Pharmacist must assess the service user for suitability for treatment. If the outcome of the initial assessment is to not supply Varenicline the Pharmacist must advise the service user to return to the OYSF Adviser so that an alternative treatment may be offered.

- 6.5. The Pharmacist will provide the full course of treatment and not refer the service user on to another provider except in unavoidable circumstances e.g. sickness, and must inform KCHFT.
- 6.6. The Pharmacist shall maintain and keep a record of supply of Varenicline or NRT to the service user via 1S4H.
- 6.7. Prescription charges will only apply to the supply of Varenicline.
- 6.8. The service user's declaration of exemption from prescription charge is to be completed as part of the claim via 1S4H.

7 PROVIDER RESPONSIBILITIES – Smoke Free

- 7.1 The Provider will provide the OYSF Adviser with a CO monitor and ensure that the CO monitor is cleaned and maintained in accordance with the manufacturer's instructions. OYSF Advisers must only use non-alcohol wipes as per the manufacturer's guidelines – alcohol wipes can affect the performance of the monitor and CO readings.
- 7.2 The Provider will take on all responsibility for maintaining the CO monitor, replacing and disposing of the monitor when necessary. Calibration and supply of tubes and oral mouthpieces for the CO Monitors are the sole responsibility of the Provider.
- 7.3 Work to KCHFT's targets as follows:
 - Advisers will achieve a minimum of one (1) quit date set per month in order to maintain competency levels
 - 50% of service users enrolled into the programme to still have quit smoking 4 weeks after the agreed quit date
 - Where the Provider's 4-week quit attainment falls below 35% or above 70%, the Parties will agree an action plan to improve or withdraw from the Service.
 - KCHFT will monitor the Provider's performance against these targets as often as reasonably necessary.

8 SERVICE – One YOU Weight Loss (OYWL)

- 8.1 All service users who express an interest in accessing the weight loss programme within the pharmacy must be referred to KCHFT where they will be assessed according to the eligibility criteria for this programme. Service users who do not meet the eligibility criteria for One You Pharmacy Weight Loss (OYWL) will be triaged to the appropriate service.
- 8.1 The Provider shall provide an appropriately trained One You Weight Loss Adviser who has completed the KCHFT One You Weight Loss (OYWL) Training to deliver the OYWL programme.
- 8.2 The OYWL Adviser will meet those service users who have been registered with One You and who meet the eligibility criteria: Adults (18 years +), BMI 25-35. Exclusion criteria includes BMI 35+, pregnant, breastfeeding, eating disorders, unexplained weight loss, Type 1 Diabetes, newly diagnosed and uncontrolled Coeliac, food intolerances, Irritable Bowel Syndrome and Irritable Bowel Diseases.
- 8.3 The OYWL Adviser will discuss the OYWL programme with the service user, which will include responsibilities, expectations, personal aims and objectives.
- 8.4 The OYWL Adviser must ensure that all contacts, measurements and outcomes are recorded on the 1S4H database after each consultation.
- 8.5 The OYWL Adviser will work with the service user to achieve a weight loss with a 5% weight loss goal and attend a minimum of nine out of twelve sessions. KCHFT will monitor the Provider's performance against this target as often as reasonably necessary.

9 PROGRAMME OF ACTIVITY – Weight Loss

- 9.1 The OYWL Adviser will meet with those service users who have been registered with One You.
- 9.2 The OYWL Adviser will offer a twelve (12) week weight loss programme and arrange weekly one to one appointments with the service user.
- 9.3 The programme will be delivered over a twelve (12) week period. During the twelve weeks, the service user will receive a scheduled appointment time with the OYWL Adviser. This intervention should be delivered face to face where possible, but in the event that the service user is unable to attend one of their twelve appointments, due to sickness or other external factors that impact the ability to deliver the intervention face to face, telephone consultations can take place and recorded on 1S4H.
- 9.4 Where no appointments are taken up after registration to the programme, the OYWL Adviser must make up to three (3) attempts to contact the service user within fourteen (14) days of the initial contact, which will be noted on 1S4H.
- 9.5 Where three (3) separate unsuccessful attempts, within a one (1) month period, to contact the client has been made, the OYWL Adviser must record the outcome as 'lost to service' on 1S4H and remove the service user from their caseload.
- 9.6 The OYWL Adviser will provide each service user with a one to one appointment based on the education sessions outlined within the OYWL Training.

- 9.7 The OYWL Adviser will weigh the service user each week and must calculate and record their current weight and BMI using 1S4H.
- 9.8 The OYWL Adviser will work with the service user to achieve a weight loss with a 5% weight loss goal and attend a minimum of nine out of twelve sessions.
- 9.9 The OYWL Adviser must input all data from service user contacts, measurements and outcomes following each consultation, on the 1S4H database.
- 9.10 The Weight Loss Adviser will signpost service users to additional support services, where necessary, as part of their exit strategy from the OYWL programme.

10 PROVIDER RESPONSIBILITIES – Weight Loss

- 10.1 The Provider will work to the KCHFT targets as follows:
- 60% of service users enrolled into the programme to have attended 75% of the programme (9 out of the 12 sessions) and achieved a weight loss.
 - Where this attainment falls below this threshold, the parties will agree an action plan to improve or withdraw from the Service.
- 10.2 The Provider will provide the following equipment and agree that the equipment will be calibrated annually and cleaned in accordance with the manufacturer's instructions and replaced when necessary:
- Steadiometer (height measure)
 - Category 3 Digital scales to weigh and monitor patients' weight

11 GENERAL PROVIDER RESPONSIBILITIES

- 11.1 If the trained OYSF/OYWL Adviser leaves their employer within six (6) months of completing the training, then KCHFT will levy a training recovery cost of £75.
- 11.2 If the OYSF/OYWL Adviser does not record any treatment outcomes within six (6) months of completing the training, then KCHFT will charge a training recovery cost of £75.
- 11.3 KCHFT reserves the right to carry out work based observations to support and assure quality standards of delivery.
- 11.4 The Provider will ensure that the premises from which the service is delivered is safe and suitable for purpose and fully accessible to all those using the OYSF and/or Weight Loss Programme.
- 11.5 The Provider will:
- ensure that all facilities from which the Services are delivered are maintained in accordance with legislation and Department of Health (DOH) guidance and provide a clean and safe environment that is fit for purpose and fully accessible to all those using the OYSF and/or OYWL Services
 - sign the KCHFT Confidentiality Code of Conduct on behalf of their organisation
 - provide an appropriately trained OYSF and/or OYWL Adviser. This must include topic specific training provided by KCHFT and training on the use of 1S4H

- ensure that a separate, private area is available where the Adviser can meet with service users. The Advisers will ensure that the environment and service supports the KCHFT policy of treating patients in ways that maintain their confidentiality, privacy and dignity
- have available a secure lockable cabinet to store and maintain the confidential client records and information in line with KCHFT governance requirements
- give KCHFT at least four weeks' notice where possible if the trained Adviser or Pharmacist leaves the Provider's employment. The name and date of the staff member whom is leaving should be emailed to kcht.ssspharmacy@nhs.net.
- in the event of unplanned staff absences of more than four weeks, then the Provider will contact KCHFT and confirm the arrangements for the management of the service and its existing service users.
- provide their Advisers with access to a computer that has Microsoft Edge/Google Chrome (preferred browsers) and/or -Internet Explorer version 11 or above (as a minimum requirement) for use of 1S4H.
- have an NHS.net or secure email account in order to send and receive confidential emails
- support trained Advisers to maintain their knowledge and competence
- ensure timely response (within 7 days) to communication from KCHFT adhering to any request for information deadlines
- ensure referrals via 1S4H are checked and responded to weekly
- ensure the promotion of the KCHFT 3rd Party survey to service users and be expected to complete this survey via 1S4H with a minimum of 10% of all service users that participate in a One You programme.

12 GENERAL KCHFT RESPONSIBILITIES

- 12.1 KCHFT will ensure that the Provider is notified of any changes to the service specification, templates and notice of training dates in writing.
- 12.2 KCHFT will provide a training programme to new staff wishing to become, nominated to be, or employed as a OYSF or OYWL Adviser.
- 12.3 KCHFT will provide a training programme where appropriate for Pharmacies wishing to supply NRT through the voucher scheme or Varenicline via a PGD.

13 QUALITY STANDARDS

- 13.1 Both Parties will work to the highest standards of service quality and continuous improvement and use the following KCHFT or Provider equivalent codes of organisational practice.
- Clinical Governance
 - Information Governance and Patient Confidentiality
 - Infection Prevention and Control
 - Patient Group Directions for Nicotine Replacement Therapy and/or Varenicline
 - Controls Assurance

- Clinical/Audit
 - Equipment maintenance, testing and calibration standards
 - Safe Handling of Medicines and Medical Devices
 - Needlestick injuries and the reporting of Incidents
 - Care Quality Commission (CQC) Accreditation and CQC Quality and Safety Outcomes
 - All relevant standard operating procedures regarding the Services covered by this Service Specification
- 13.2 Access to reports on performance against the above standards will be made available at the reasonable request of either Party.
- 13.3 Both Parties will take account of the key principles of the NHS Constitution and operate within all NHS standards, guidance, protocols, policies and mandates and deliver the Services under this Service Specification with due care and diligence.
- 13.4 The Provider will warrant that each member of staff involved in the delivery of this Service Specification has the appropriate level of Disclosure and Barring (DBS) check (formally Criminal Records Bureau, CRB). DBS checks must be current and renewed every three years.
- 13.5 The Provider will comply with practice recommended by the Department of Health as set out monitoring guidelines and any other documented guidance as they apply to the Services covered in this Service Specification.
- 13.6 The Provider will ensure that any equipment that is used is properly maintained and in good repair and condition, complying with all health and safety standards and electrical testing.
- 13.7 The Provider will ensure that the OYSF and/or OYWL Adviser are fully competent, understands their responsibilities, has completed the relevant training as stipulated
- 13.8 Both Parties will comply with practice recommended by the Department of Health as set out in Health Notices, circulars and other documented guidance as they apply to the Services covered in this Service Specification.
- 13.9 Both Parties comply with all relevant legislation and KCHFT policies including but not limited to; Health and Safety at Work Act 1974, EU Health and Safety Regulations, Data Protection Laws including GDPR, the Caldicott Report, Computer Misuse Act 1990 and codes of conduct for business continuity and cyber security. The Provider will have in operation an Equality and Diversity Policy for their staff which confirms that they are committed to ensuring equality of opportunity regardless of race, colour, disability, gender, sexual orientation, age, or religious belief.
- 13.10 The Provider will ensure that all information should be handled securely and confidentially in line with legislation, KCHFT policies/procedures and best practice and that all breaches must be notified to the KCHFT Information Security Manager.
- 13.11 KCHFT will conduct random audits to obtain feedback of the service users' experiences.

13.12 Pharmacies must be accredited to Healthy Living Pharmacy (HLP) status and be able to provide satisfactory evidence that they meet the HLP commissioning requirements.

14 COMPLAINTS

14.1 Both Parties will fully investigate all complaints and supply a comprehensive report on the issues raised and their proposed solution.

14.2 Informal complaints, which can be resolved easily, may be dealt with by either Party, as appropriate, however, all reports shall be recorded by both Parties and the records shared so that common or serious problems can be identified and discussed at the monitoring meetings.

14.3 Formal complaints will be dealt with in accordance with accepted NHS Complaints Procedure by the relevant Party.

15 INFORMATION GOVERNANCE

15.1 All Information Governance breaches must be reported to the KCHFT Data Protection Manager within 24 hours.

15.2 The Provider and their staff are responsible for ensuring that at all times:-

- They keep all service user details secure and do not disclose any confidential information to any unauthorised person
- They maintain the integrity of all systems and data and do not put them at risk
- They do not act in any manner that may have an adverse impact on, for example:-
- The reputation of the NHS and KCHFT
- Threat to personal safety or privacy
- The legal obligations of KCHFT or acts that result in a penalty
- The financial standing of KCHFT
- Activities within this Service Specification, causing a disruption to the service or a complaint arising from a breach of privacy.

15.3 The Provider will ensure that all information is handled securely and confidentially in line with legislation, organisational policies/procedures and best practice and that all breaches are notified to the KCHFT Information Governance Compliance Manager within 24 hours on 01233 667704.

16 PATIENT/SCHEME RECORDS

16.1 OYSF and/or OYWL Advisers will ensure that they have an effective system for managing confidential information in a secure and safe manner.

16.2 Information must be stored in a lockable cabinet or otherwise in accordance with Data Protection and Information Governance legislation that is secured each time an Adviser is not accessing the information.

16.3 Where an electronic patient record system is maintained that the Provider ensures that it complies with local and statutory requirements and includes the recording of each

patient's unique NHS number. The recording and retention of data required by statute will be maintained at all times.

- 16.4 All enquiries regarding service users using the programme will be communicated with KCHFT via a secure NHS email account and will refer only to the KCHFT supplied patient identifier or the NHS number and not the individual's name.
- 16.5 All records will be kept a minimum of one year and/or in accordance with audit requirements and statutory retention periods before being securely destroyed. Destruction certificates shall be made available to KCHFT upon request.

17 DATA COLLECTION AND REPORTING

- 17.1 The OYSF and/or OYWL Advisers must ensure that all interventions are completed on 1S4H each week. The Adviser must ensure that a treatment outcome is recorded at the end of the programme. Failure to do so may result in delayed or non-payment of claim. A treatment outcome must be recorded to enable payment.
- 17.2 A valid CO reading each week, and the client's smoking status **MUST** be recorded on 1S4H for service users receiving a OYSF intervention, and weekly weight checks recorded on 1SFH for those receiving the OYWL intervention.

SCHEDULE 2

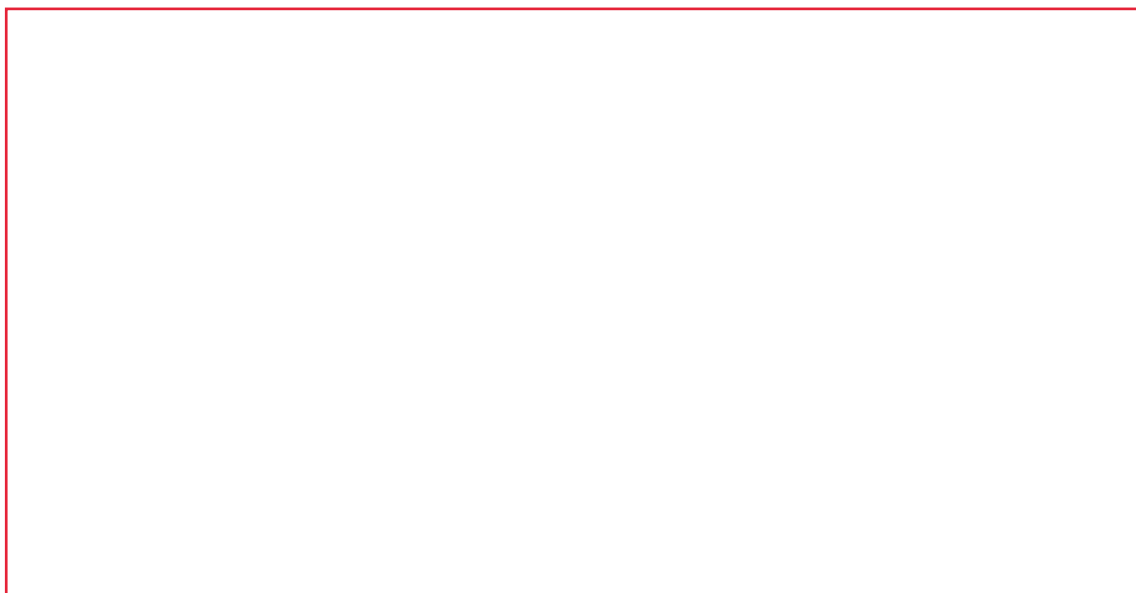
Commercial Schedule – One YOU Smoke Free

1 TERMS OF PAYMENT

1.1 KCHFT will pay in accordance with the following schedule of costs and upon action of the following process:

- The OYSF Adviser will input the weekly consultations for each service user on 1S4H.
- Invoices will be generated by the Provider via 1S4H and must be checked by the Provider before electronic submission via email to KCHFT payments department. Invoices will be generated and submitted on a monthly basis.

1.2 The payment schedule for this Service is exclusive of VAT, which, if properly chargeable, KCHFT shall pay at the prevailing rate subject to receipt from the Supplier of a valid and accurate VAT invoice:



*For referrals made on 1S4H or on appropriate forms which result in a qualifying four week quit with the KCHFT OYSF Service.

**Payments will be triggered by the recording of quit dates set, self-reported quits or confirmed quits (confirmed by carbon monoxide reading)

1.3 Payment will not be generated for 4 week quits until the outcome is recorded on 1S4H.

1.4 Payments for the referral only Service will be made on a **monthly basis and will be generated by the KCHFT Finance Officer.**

1.5 Payments for the full delivery Service will be made in accordance with the Provider's payment terms upon receipt of the invoice.

1.6 Payments will only be made in accordance with Clause 1.1 above.

1.7 Any changes to these arrangements will be notified to the other Party in writing.

Commercial Schedule – One YOU Weight Loss

2 TERMS OF PAYMENT

2.1 KCHFT will pay in accordance with the following Schedule of Costs and upon action of the following process:

- The OYWL Adviser will input the weekly consultations for each service user on 1S4H
- Invoices will be generated by 1S4H and must be checked by the OYWL Adviser before electronic submission via email to KCHFT payments department. Invoices will be generated and submitted on a monthly basis.

2.2 The payment schedule for this Service is exclusive of VAT, which, if properly chargeable, KCHFT shall pay at the prevailing rate subject to receipt from the Supplier of a valid and accurate VAT invoice:



2.3 Each service user will attract the maximum amount if they attend the full number of interventions over the twelve (12) week period. All payments will be made pro rata for incomplete interventions.

2.4 Any changes to these arrangements will be notified in writing.

Appendix A
One You referral form



**OYK-HI-general
referral e-form-v14.ç**