



INTRA-UTERINE CONTRACEPTIVE DEVICES SERVICE SPECIFICATION

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Contracts for Enhanced Services 1 October 2024 - 31 March 2030

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INTRA-UTERINE CONTRACEPTIVE DEVICES SERVICE SPECIFICATION

1 INTRODUCTION

This Service Specification along with the Contract Details forms the National Enhanced Service (ES) for Intra-Uterine Contraceptive Devices (IUD) in primary care.

This Service Specification works towards meeting the Scottish Government priorities and NHS Local Delivery Plan (LDP): Outcome 3, Stay well, Outcome 4, Anchor well and Outcome 9, Care well.

2 CLINICAL SPECIFICATION

This is the Clinical Specification for the provision of IUD Fittings. Service may be provided by an appropriately trained GP or Nurse.

Purpose

Service Aims

This ES specification is designed to:

- Ensure the availability of IUDs through primary care, as part of a range of contraceptive options offered by the practices.
- Promote IUDs as an effective Long-Acting Reversible Contraceptive (LARC) method of contraception.
- Increase uptake and ongoing use of IUDs thereby contribute to reducing unintended pregnancies; and particularly teenage pregnancies.
- LNG-IUS for the management of menorrhagia, dysmenorrhoea and menopause management in primary care as part of a care pathway agreed and developed with local obstetric and gynaecology department and sexual health service. To ensure these devices are used for the correct patients and approved indications and in line with current guidance.

Service Criteria

Enhanced service requirement
From 1 October 2024, the practice must:
Complete and submit the pre-audit for providers of an IUD service in primary care.
Ensure the correct clinical coding and template is used to ensure compliance with the recording and monitoring requirements of the ES.
Ensure that the fitting, monitoring and removal of IUDs is appropriate in line with current guidelines on best practice (e.g. NICE guidance on LARCs, FSRH (Faculty of Sexual and Reproductive Health) and manufacturers' recommendations. All IUDs must be licensed for use in the UK.
Fitting of LNG-IUS for the management of menorrhagia, dysmenorrhoea and menopause management in primary care as part of a care pathway agreed and developed with local obstetric and gynaecology department and sexual health service
Sexual history taking. Assessment in terms of suitability, and specifically patients to be excluded from the service, to ensure that the IUD is the most appropriate method of contraception or treatment based on medical evidence, clinical guidelines (https://www.nice.org.uk/guidance/CG30), sexual history and practice. Based on sexual history to assess the need for pre-insertion swabs, testing for STIs, including HIV, prior to recommending the IUD

Written information e.g. NICE patient information leaflet: <https://www.nice.org.uk/guidance/cg30/resources/longacting-reversible-contraception-pdf-8864171715013> should be provided at the time of counselling and reinforced after fitting with information about symptoms that require urgent assessment, non-contraceptive benefits, procedures for initiation and discontinuation, side-effects and effectiveness; in a format appropriate to their needs. The patient's understanding of IUDs should be checked prior to fitting; considering use of interpreting services as required.

The clinician will ensure the process for obtaining valid patient consent is in line with the FSRH (Faculty of Sexual and Reproductive Health) Service Standards document on obtaining valid consent in Sexual and Reproductive Health.

Assessment and follow up.

A face-to-face follow-up appointment, where deemed necessary by the performing clinician, should be offered at 5-8 weeks after IUD insertion to exclude infection, perforation or expulsion.

Routine annual checks are no longer recommended.

Arrangements should be in place to review patients experiencing problems in a timely fashion and to provide information and treatment to manage common side effects and problems, in line with NICE guidelines and current best practice. Arrangements should be in place (under GMS contractual arrangements) to ensure timely access for women requesting removal of the device for any reason including problems or at expiry of the device.

Record Keeping.

Production of an appropriate clinical record using appropriate read codes. Adequate recording should be made, to include the patient's clinical, reproductive and sexual history and details of the counselling process. Including the following information;

- the results of any STI testing
- any contraindications
- problems with fitting/removal
- the type and batch number of the IUD
- reason for IUD fitting
- expiry date of the device and follow-up arrangements
- any adverse reactions
- name and designation of person(s) completing the procedure
- referring practice if applicable

Provision of adequate equipment.

Certain special equipment is required for IUD fitting and removal. This includes an appropriate room fitted with a couch and with adequate space and equipment for resuscitation. A variety of vaginal specula, cervical dilators, and equipment for cervical anaesthesia also need to be available. An appropriately trained assistant also needs to be present to support the patient and assist the clinician during the procedure.

Sterilisation and infection prevention and control.

Although general practitioner IUD insertions have a low incidence of complications, it is important that practices providing the procedures listed in this specification operate to the highest possible standards. Practices must use disposable sterile instruments. Practices must have infection control policies that are compliant with national guidelines including the handling of used instruments, aseptic technique and the disposal of clinical waste.

Training

IUD fitting - [Education & Training - Faculty of Sexual and Reproductive Healthcare \(fsrh.org\)](#)

Practitioners undertaking IUD insertion and/or removal procedures should have undertaken appropriate training. This should be based on modern, authoritative medical opinion, for example, the current requirements set down by the FSRH (Faculty of Sexual and Reproductive Health) for the letter of competence (LoC-IUD) or Royal College of Nursing (RCN) guidance on insertion and removal of IUD devices together with RCN Accreditation. This involves a demonstration of skills involved in counselling for IUD, knowledge of issues relevant to IUD use, problem management and observation of insertion and removal followed by supervised insertion and removal of a minimum number of insertions and removals as specified by the FSRH / RCN (as appropriate), and assessment of competence by a Faculty/RCN approved assessor. They should provide evidence of maintaining skills for example, by re-certifying according to FSRH / RCN regulations.

Practitioners undertaking these procedures should have undertaken appropriate training and met the requirements of at least 12 IUD fittings per annum, along with a minimum of two hours of education in five years.

Evidence of Continuing Professional Development (CPD) and training should be maintained by the provider.

IUD removal - [FSRH Bitesize: Intrauterine contraception \(IUC\) removal | video](#)

Useful links

Links to NHHSH TAM Guidance:

1. Menorrhagia - [Menorrhagia \(nhsh.scot\)](#)
2. Menopause & HRT - [Menopause and HRT \(Guidelines\) | Right Decisions \(scot.nhs.uk\)](#)
3. Managing lost threads and suspected perforation - [Management of Non-visible Threads & Suspected Perforation of Uterus with Intrauterine Contraception \(IUC\) \(nhsh.scot\)](#)
4. Emergency Contraception - [Emergency Contraception \(nhsh.scot\)](#)

Link to national guidance (clinical)

1. FSRH Guidelines and Statements (All) - [FSRH Guidelines & Statements | FSRH](#)
2. IUC - [Intrauterine Contraception | FSRH](#)
3. SDI - [Progestogen-only Implants | FSRH](#)
4. RCN - [Login | Royal College of Nursing \(rcn.org.uk\)](#)

Links to patient information

<https://www.highlandsexualhealth.co.uk/>

Recording information

The following read codes will be used for monitoring and payment purposes:

3 codes must be used to claim under the LES.

1. Counselling for IUD
2. Informed consent for IUD
3. Coding of procedure / attempted procedure - 1 option required

Read code	Screen description	Read code description	When to use
9kA0.	NA - automated	IUCD fitting – enhanced service completed	Automated when recorded fitting - claim
677S	NA - automated	Counselling for intrauterine device	Automated when recorded fitting - claim
892	NA - automated	Informed consent for procedure	Automated when recorded fitting - claim
6151	IUD fitted (other)	IUD fitted	IUD fitted as part of LES - claim
7E094	IUD fitted (Mirena)	Introduction of mirena coil	IUD fitted as part of LES - claim
615J	IUD fitting Unsuccessful	Unsuccessful intrauterine contraceptive device insertion	IUD fitting attempted, but unsuccessful - claim
615P	IUD fitted elsewhere	IUCD fitted by other healthcare provider	IUCD fitted elsewhere – no claim
6152	IUD removed (any setting)	IUD removed	IUD removed in any setting – no claim

3 QUALITY

It is the responsibility of the Practice to:

- Continually improve the quality of service delivery, for example, in response to an audit (undertaking and completing the audit cycle), user and staff feedback (complaints, compliments, suggestions) and incidents.
- Continually review and be aware of relevant new and emerging guidance and recommendations and take the appropriate steps to assess and improve services to achieve current best practice
- Ensure that appropriate professional standards are maintained updated and validated through clinical supervision and provision of relevant training to support reflective practice and CPD.

To revalidate and meet the standards of an IUD fitter an annual audit is required which as a minimum should include:

- (a) the register of patients fitted with an IUD
- (b) continuous usage rates
- (c) reasons for removal
- (d) complications

4 FINANCE & SERVICE PRICING

Contract value

Payment per patient registered identified and treated under contraceptive IUD LES in primary care.

The payment for patients being treated in general practice will be:

IUD fitting (or attempted fitting) - **£169.46** per patient.

Consumables are included within the item of service fee.