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**Service Specification for Routine Ring Pessary Initial Fit**

**Period: 1st April 2017 to 31st March 2018**

**Date of Review: Annual**

**Introduction**

All practices are expected to provide essential and those additional services they are contracted to provide to all their patients.

This specification outlines the more specialised services to be provided. The specification of this service is designed to cover the enhanced aspects of clinical care of the patient, all of which are beyond the scope of essential services.

No part of the specification by commission, omission or implication defines or redefines essential or additional services.

## **Background**

Plain ring pessaries (not containing any hormonal or other substance) can be an effective symptomatic treatment for uterovaginal prolapse and are more acceptable to some patients than surgery. A suitably fitted pessary requires changing every 3 to 6 months in order to reduce the risk of ulceration and infection. This procedure has traditionally been carried out in hospital gynaecology departments which are less convenient for patients and less cost effective than provision in primary care.

#### **Aims**

Extending the current routine ring pessary change service to include the initial fitting and making this service available to all patients registered with a Doncaster GP would:

* Help reduce inequality of care across Doncaster
* Provide convenient primary care locations for all patients
* Offer choice for all patients
* Provide a cost effective alternative to secondary care supporting national and local CCG priorities and ensuring value for money

# **Service Outline**

This service extends the current service for routine ring pessary changes to allow practices to include the initial fitting of ring pessary. Furthermore this service will also allow practices to offer this service to all patients registered with a GP in Doncaster.

A check of the ring pessary after fitting is suggested at 6 weeks and thereafter annually.

#### **Accreditation**

Practitioners involved in the delivery of this service will be appropriately trained and competent. It is expected that the practitioner will have appropriate training and experience of working in a Gynaecology Unit and demonstrate on-going activity in this field to maintain competency.

In accordance with Good Medical Practice guidelines those interested to provide this service need to self-certify that they have the appropriate training and experience and that they will abide by the good medical practice guidelines and ensure that they keep their knowledge and skill up to date throughout the time that they are providing this service.

Practices should submit a written application to take part in this service indicating their intention to fulfil the service outline.

**Performance and Payment**

Activity data should be submitted on a monthly basis to the CCG

The practice will be required to submit audit information on request.

Activity should be submitted within 14 days of month end for activity undertaken in month.

Activity for March 2018 should be submitted within 7 days of month end. DCCG reserve the right to withhold payment on activity not received within these time scales