

Appendix 1 – Long-Acting Reversible Contraception Service Commissioning Options

Option	Description	Risk
Decommissioning the Long-Acting Reversible Contraception (LARC) Service in Primary Care.	Ceasing the commissioning of LARC services through Primary Care, while maintaining the community offer provided by Kent Community Health Foundation Trust (KCHFT) and Maidstone and Tunbridge Wells NHS Trust (MTW). This means that primary care settings would no longer offer LARC services, and patients would need to rely solely on community providers.	The lack of easily accessible and convenient primary care option for LARC could lead to a decrease in uptake and utilisation of LARC methods, potentially resulting in an increase in unintended pregnancies and terminations. Integrated sexual health service, which also offer LARC, will not have the capacity to accommodate the additional workload, leading to longer waiting times and limited appointment availability. Shifting LARC services away from primary care could create fragmentation in the delivery of reproductive health services and limit patient choice, as individuals may prefer receiving care from their familiar primary care provider.
Extending the current contract	Continue to contract with the existing primary care providers by issuing an extension. This would involve renewing the agreement with the current providers for a specified period.	While extending the current contract providers continuity, it poses a risk of non-compliance with PCR 2015 as viable extensions have already been exhausted. This could lead to potential legal and regulatory challenges.
Direct award the provision of LARC through primary care	Awarding the contract directly to a provider without advertising the opportunity. This would involve selecting a specific provider based on pre-determined criteria without a competitive process.	Directly awarding the contract without conducting a legal procurement process may raise concerns about transparency, fairness, and equal opportunities for other potential providers. It could be seen as a breach of procurement regulations and may invite legal challenges or criticism for favouritism.
Developing a	Creating a DPS on the	There will be limited

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<p>Dynamic Purchasing System (DPS)</p>	<p>Kent Business Portal for any suitable provider to sign up and deliver the service. This would establish a framework where accredited and interested providers meeting the criteria can participate and offer LARC.</p>	<p>opportunities for primary care to access the DPS, as its primary focus is on LARC services. This could restrict the involvement of primary care providers in the system. Providers participating in the DPS may require guidance and support to navigate the process effectively, which could potentially strain the available resources. Lastly, there is a risk of limited provider participation, which could lead to an inequitable distribution of LARC services across different areas.</p>
<p>Running a procurement complaint process.</p>	<p>Advertising the opportunity and conducting a light-touch streamlined procurement process. This involves publicising the need for LARC services and inviting interested providers to submit a light-touch questionnaire.</p>	<p>There is a low risk of provider participation or lack of interest, which could limit the pool of potential providers. This may result in reduced competition and potentially fewer options for service delivery.</p>