



Emergency contraception Top Tips

CPPE resources

Aims of the pharmacy contraception service

- The aim of the Pharmacy Contraception Service (PCS) is to offer greater choice from where people can access contraception services and create additional capacity in primary care and sexual health clinics (or equivalent) to support meeting the demand for more complex assessments.
- This service supports the important role community pharmacy teams play in helping address health inequalities by providing wider healthcare access in their communities and signposting service users to local sexual health services in line with [NICE guideline NG 102](#).
- The service provides consistent access for women from community pharmacies across England to free OC and oral EC, removing variation in the service offer found within locally commissioned services.

Making it work in practice

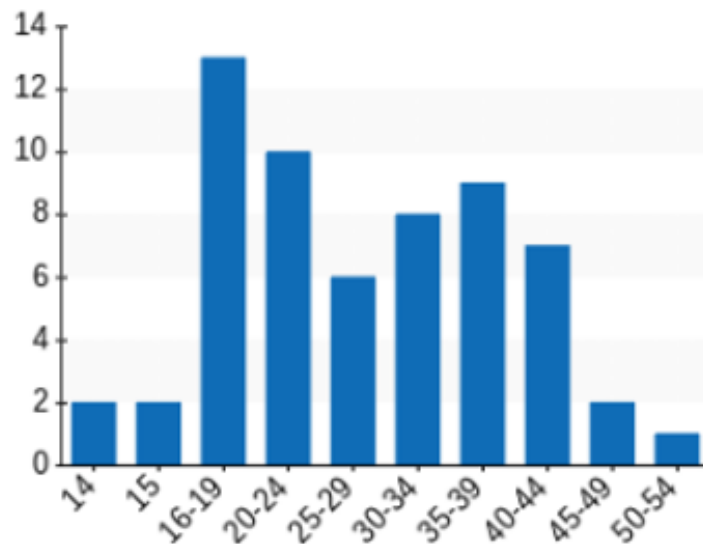
- Consultations should be verbal, with the person whom the service is for, this means that remote consultations are allowed, if you consider this to be appropriate.
- **Consider the mix of walk-in slots vs appointments.**
- If you cannot provide EC within an appropriate time frame you need to sign post. Make sure that you are aware of local options.
- You can provide emergency contraception and ongoing contraception in one appointment.
- However, individuals must be advised not to take progestogen containing drugs, including combined oral contraception, for 5 days after UPA-EC.

Evans Pharmacy East Leake

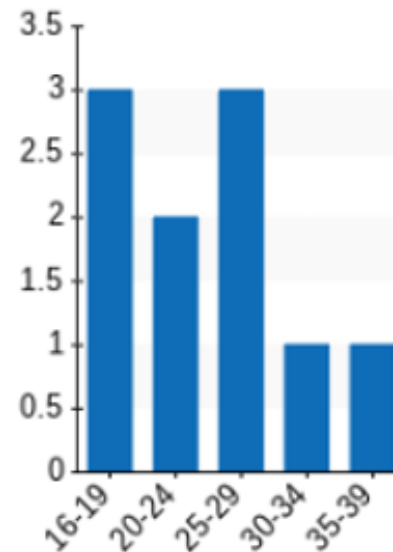
- Rural location
- Busy on the day illness service
- Good joint working with GPs
- Around 60 NHS Pharmacy contraception service provisions per month.
- 10 emergency contraception service provisions per month.

Age mix of those accessing contraception services in Evans Pharmacy East Leake

The NHS Pharmacy contraception service



The local Emergency contraception service.



Emergency contraception will be available to all people of childbearing age.

The Golden minute

Top tip the golden minute

- After introductions and outlining the limits of confidentiality, ask the person open questions to allow them to tell their story without interruption.



Can you tell me a little bit about what happened.

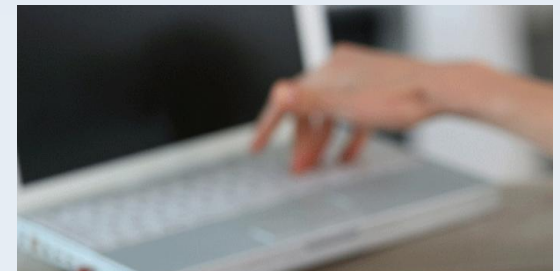


Choice of oral emergency contraception

- Local services in the past have sometimes restricted UPA to close to when the person has ovulated. This is not the case for the national service.
- Whilst all individuals should be informed that insertion of a copper intrauterine device (Cu-IUD) within five days of UPSI or within five days from earliest estimated ovulation is the most effective method of EC, you can still give oral emergency contraception according to PGDs at any point in the person's cycle.
- It is true that oral emergency contraception delays ovulation but even with regular cycles working out when someone will ovulation is not very reliable.



- Copper intrauterine device (Cu-IUD)
- Ulipristal acetate – ellaOne (UPA)
- Levonorgestrel – Levonelle 1500/One Step and other brands – (LNG)



 online workshop

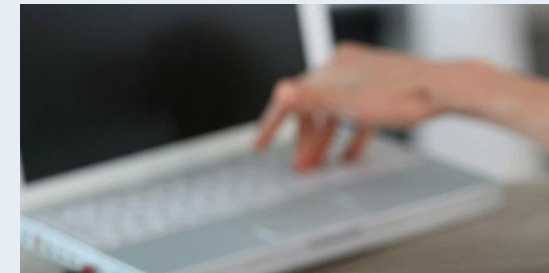
Emergency contraception

Points of advice

- Most people do not suffer many side effects, but if vomiting occurs within three hours of oral emergency contraception, then another supply is needed.
- The timing of the next period can be altered: if it is more than seven days late then follow-up is required.

The 4 Cs

- **Coil** (IUD) is the most effective method of emergency contraception – give EHC in case the person does not present for fitting within five days after UPSI or ovulation
- **Contraception** – ongoing needs should be assessed
- **Condoms** – to reduce STI risk
- **Chlamydia** and other STIs; there is a two-week window for chlamydia screening – consider the need for post-exposure HIV prophylaxis



 online workshop

Emergency contraception



Further CPPE resources

CPPE learning gateway.

Emergency hormonal contraception

Introduction



Introduction to emergency hormonal contraception

Declaration of Competence



Emergency contraception

Book a workshop



Emergency contraception

Core and foundation learning





Emergency contraception



Safeguarding Children Level 1 (elearning for healthcare)

Safeguarding Children Level 2 (elearning for healthcare)

Core and foundation learning continued



Safeguarding Adults Level 1 (elearning for healthcare)



Safeguarding Adults Level 2 (elearning for healthcare)



Safeguarding: Information

Further CPPE resources

NHS Pharmacy Contraception Service (PCS)

Community pharmacy is well established in the provision of locally commissioned contraception and sexual health services.

[The Delivery Plan for recovering access in primary care](#) (May 2023) highlighted the ambition to expand the Pharmacy Contraception Service (PCS) to increase access to and convenience of contraception services in line with the Government's [Women's Health Strategy for England](#) (August 2022) that flagged community pharmacy had a part to play in the ways for people accessing contraception.

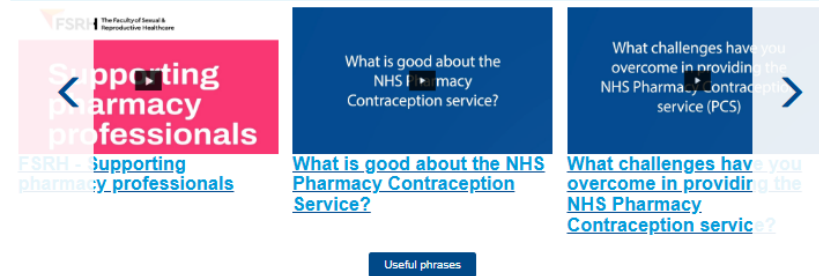
The NHS 10 Year Health Plan for England: Fit for the Future discusses the provision of emergency contraception as part of the PCS. The Community Pharmacy England Briefing 010/25: Funding Settlement for 2024/25 and 2025/26, published in March 2025, launched in October 2025, announced the following changes to the PCS:

- suitably trained and competent Pharmacy Technicians will also be able to provide the service, supporting greater use of skill mix by pharmacy owners, where that fits within their business plans.
- the service will be expanded to include Emergency Hormonal Contraception (EHC).
- addition of drospirenone within the list of contraceptives which can be supplied.

The aim of the PCS is to offer greater choice for people in terms of where they can access contraception services, and create additional capacity in primary care and sexual health clinics (or equivalent) to support meeting the demand for more complex assessments.

This service will support the important role community pharmacy teams can play in helping address health inequalities. The service will help to provide wider healthcare access in local communities and signpost service users to local sexual health services in line with [NICE guideline NG102](#).

The following video montages share experiences of the NHS Pharmacy Contraception Service. We asked pharmacy professionals and service users to share what is good about the service, challenges that have been overcome in delivering this service, and their top tips for delivering a successful service. This is what they said. Click on the videos below to view.



FSRH | The Faculty of Sexual & Reproductive Healthcare

[Supporting pharmacy professionals](#)

[What is good about the NHS Pharmacy Contraception Service?](#)

[What challenges have you overcome in providing the NHS Pharmacy Contraception service \(PCS\)?](#)

[Useful phrases](#)

CPPE Pharmacy Contraception service page which now includes emergency contraception.

This page includes previous webinars.

Questions for panel webinar



[NHS Pharmacy Contraception service \(PCS\) - panel discussion 2 : CPPE](#)

Next date
9th March 2026

Send in questions now!





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