New year, new services? PGDs explained

The types of patient group direction offered by pharmacists have grown, with the latest covering supply of salbutamol inhalers. Tony Steele gives some background information.

PATIENT group directions (PGDs) have been in use since 2003. They are a device used in the NHS and private sector — in hospitals, clinics and pharmacies — to streamline access to prescription-only medicines while ensuring that these medicines are supplied or administered appropriately.

Panel 1 lists some of the non-NHS PGDs currently available for use in community pharmacies. The supply of Timodine for nappy rash, fusidic acid cream for impetigo, nystatin suspension for oral thrush and emergency contraception for girls under 16 years are examples of NHS PGDs. Such PGDs may be used in England, and to date by convention, in Scotland and Wales, but not in Northern Ireland where the regulations are different.

PGDs are, in essence, documents that specify the conditions under which a named POM (or named POMs in a class), can be supplied or administered without a prescription or a direct instruction. They allow the supply of a POM to any one of a group of patients, in contrast to a patient specific prescription (eg, ‘prescription’) which allows the supply of a POM to a named patient only.

Only specific healthcare practitioners, such as nurses and chiropodists, can follow PGDs. In addition, pharmacists with the appropriate training and authorisation can use PGDs to supply POMs provided the conditions in the PGD are met.

PGD documents must specify how, where, when, by whom and to whom a POM can be supplied. A list of the particulars that they must include is given in Panel 2. There is usually a comprehensive leaflet which patients must read as part of the PGD procedures.

Most PGDs require a record of the assessment and POM supplied to be forwarded to patient’s surgeries. (For some PGDs this is compulsory.) Legislation relating to PGDs was updated last year and is to be found in the Human Medicines Regulations 2012. It is augmented by advice and guidance from the Medicines and Healthcare products Regulatory Agency.

Panel 3 gives some information about the writing of PGDs.

PGDs are used in situations where there is a clinical rationale for the supply of a POM without a prescription. For example, a non-prescribing nurse or a pharmacist could use a PGD to administer influenza vaccines without the need for a prescription for each patient. This increases access to influenza vaccination and saves the time of prescribers, but it also extends the role of pharmacists and other healthcare professionals.

Some PGDs are written to be used by a small number of local practitioners. For example, a primary care trust might write a PGD to allow nurses in its area to write a particular prescription-only wound dressing in its outpatient clinics. Others are written to be used nationally. For example, a number of non-NHS organisations have written PGDs for the supply of malaria tablets by community pharmacists.

Private PGDs

Individual pharmacies, groups and chains can access PGDs via private providers. For a fee, usually in the region of £50 per year per PGD, pharmacists can train to use a PGD and have access to the forms and leaflets required to administer it. The fee usually includes telephone and email support from the body that writes and updates the PGDs. Training to use private PGDs is usually carried out online, with testing of learning refreshed each year. However, PGDs for vaccines require additional annual face-to-face training in injection technique and resuscitation.

Individual pharmacists train and obtain rights to use PGDs. Pharmacy owners or superintendents are responsible for ensuring the requirements for PGD use, including insurance, are in place. Premises requirements may include sharps disposal and temperature monitored vaccine storage.

The bodies that write PGDs are responsible for ensuring the PGDs are clinically sound and comply with legislation, and that governance and audit procedures are in place. Individual practitioners are required to ensure their use of PGDs complies with professional standards. It would be normal, as part of the registration and training process, for a private PGD provider to specify the standards and responsibilities that apply.

Pharmacists using private PGDs may change under new commissioning arrangements.

Scope

Not all POMs can be supplied by pharmacy PGDs. Pharmacists currently have limited training in diagnostics, limited access to patients records and little access to examination and testing facilities. On the other hand, they have valuable communication skills and are used to assessing and advising patients. They are used to exercising professional judgement and being meticulous about probity and procedures. PGDs take account of these factors. The inclusion and...

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Patient group directions (PGDs) — developing, implementing and using them safely.

Only specified NHS and private organisations can write PGDs. All PGDs must be signed on behalf of the body which has the authority to write them, by a doctor (or dentist) and a pharmacist. It would be normal for the signing pharmacist to be involved in writing the PGD. However, writing PGDs is beyond the scope of most pharmacies and pharmacy chains, which — in most cases — do not have the relevant capacity for allowing the supply of PGDs for use within the NHS.

Considerable resources and expertise are needed to write, review, support and audit PGDs. The writing is usually by a team which, in addition to the authorising pharmacist, doctor and representative from the authorising body, may also include nurses, administrators and others with interests and relevant expertise. Pharmacists involved in writing and signing PGDs need to be competent, experienced and familiar with the pharmaceutical aspects of the clinical area covered but there is no specific training for pharmacists. I am aware of nor specific qualification requirements (but see Resources).

Services

• The Human Medicines Regulations 2012
• Exemption for supply etc under a PGD by person conducting a retail pharmacy business
• MHRA website Patient Group Directions in the private, prison and police sectors (Not updated to take account of change in legislation Aug 2012)
• The National electronic Library for Medicines. “To PGD or not to PGD” guidance for NHS bodies.” 2012.
• The National Prescribing Centre PGD guidance document. (The NPC website also has frequently asked questions about PGDs.
• Centre for Pharmacy Postgraduate Education “Patient group directions (PGDs) — developing, implementing and using them safely.”

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