

Patient Group Direction (Maternity)



Patient Group Direction Mandatory Training

March 2019

Decorative graphic element consisting of several overlapping, curved bands of different shades of blue, sweeping from the bottom left towards the top right of the slide.

Learning Outcomes

- Demonstrate the knowledge and understanding of Patient Group Directions (PGDs).
- Can identify drugs administered or supplied under PGDs at LGT Maternity units.
- Be familiar with the content of each PGD.
- Understand the process of stock control and demonstrate the ability to maintain accurate records on administration and supply.



Introduction

- Patient group directions (PGDs) provide a legal framework that allows the supply and/or administration of a specified medicine(s), by named, authorised, registered health professionals, to a pre-defined group of patients needing prophylaxis or treatment for a condition described in the PGD, without the need for a prescription or an instruction from a prescriber.

A PGD is defined in Health Service Circular (HSC 2000/026) as:

- ‘Written instructions for the supply or administration of medicines to groups of patients who may not be individually identified before presentation for treatment.’

Remember that ‘the majority of clinical care should be provided on an individualised prescription ‘

- Supplying and/or administering medicines under PGDs should be reserved for situations in which this offers an advantage for patient care without compromising patient safety, and there are clear governance arrangements and accountability.
- Using a PGD is not a form of prescribing



Prescribing, Supplying and Administering Medicines

There are many legal options available, however, those connected to midwifery practice are listed below.

- Patient Specific Directions (PSDs) – Still the preferred option and used most of the time.
- Patient Group Directions (PGDs)
- Exemptions from The Human Medicines Regulation 2012 e.g. for midwives (Midwives Exemptions)
- Independent prescribing - the prescriber (a doctor, dentist or non-medical independent prescriber) takes responsibility for the clinical assessment of the patient, establishing a diagnosis, the clinical management needed and prescribing.



The Purpose of using a PGD

- Deliver effective patient care that is appropriate in a pre-defined clinical situation without comprising patient safety.
- Offer a significant advantage to patient care by improving access to appropriate medicines.
- Provide equity in the availability and quality of services when other options for supplying and/or administering medicines are not available.
- Provide a safe legal framework to protect patients.
- Reduce delays in treatment.
- Maximise the use of skills of a range of health professionals



Who can use PGDs?

- Qualified health professionals such as midwives, nurses, pharmacists, optometrists, podiatrists and chiropodists, radiographers, orthoptists, physiotherapists and ambulance paramedics can all work using PGDs.
- The Professional in the above groups must be registered members of the profession and act within their own council's code of professional conduct and as described in the PGD.



Using Patient Group Directions

Midwives or nurses should follow local organisational policies and act within their code(s) of professional conduct and local governance arrangement.

Before practising under a PGD, midwives or nurses should ensure that they

- Have undertaken the necessary initial training and continuing professional development
- Have been assessed as competent and authorised to practise by the provider organisation.
- Have signed the appropriate documentation.
- Are using a copy of the most recent and in date final signed version of the PGD
- Have read and understand the context and content of the PGD.



When Practising Under a PGD, Health Professionals Should

- not delegate their responsibility
- ensure that they can determine that the patient meets the inclusion criteria as set out in the PGD
- ensure that they can determine that no exclusion criteria apply
- discuss alternative options for treating the patient's condition, when appropriate
- assess each individual patient's circumstances and preferences
- recognise when signposting or referral to another health professional or service is needed, as specified in the PGD
- understand relevant information about the medicine(s) included in the PGD, such as:
 - how to administer the medicine
 - how the medicine acts within the body
 - dosage calculations
 - potential adverse effects and how to manage them
 - drug interactions, precautions and contraindications
 - storage requirements, including maintenance of the 'cold chain'
 - follow-up arrangements
 - be able to advise the patient or their carer about the medicine(s), as appropriate.
 - When supplying a medicine(s), provide an appropriately labelled pack. Health professionals (other than pharmacists or dispensing doctors) should not split packs.
 - Ensure that the patient receives a manufacturer's patient information leaflet with each medicine.



The Trust's Responsibilities to PGDs

- The Trust must ensure appropriate training is available for healthcare professionals using PGDs. The competency framework is discussed towards the back of these slides, and should be used to ensure staff has the appropriate competencies.
- The Trust must also ensure that an appropriate person is designated (e.g. line manager) to ensure that all staff using PGDs are competent, qualified and trained. The individual using the PGD is responsible to complete the training provided at LGT



What Medicines are used under PGD in Maternity at LGT?

Medicine	Indication	Type
Dinoprostone	Induction of labour	For Administration
Metoclopramide IV	Pre-med prior to EMCS	For Administration
Metoclopramide PO	Pre-med Prior to ELCS	For Administration
Ranitidine IV	Pre-med prior to EMCS	For Administration
Ranitidine PO	Pre-med Prior to ELCS	For Administration & Supply (ANC)
Misoprostol PR (Homebirths & Midwifery led units)	Primary treatment of PPH	For Administration
Dihydrocodeine PO (Birth Centres only)	Pain relief in labour	For Administration
Benzylpenicillin IV (Birth Centres only)	Antibiotic prophylaxis against GBS in neonates	For Administration
Influenza vaccine IM(antenatal Clinic)	Prevention of influenza disease	For Administration
Pertussis Vaccine IM (antenatal clinic)	Booster vaccination against diphtheria, tetanus, pertussis and poliomyelitis	For Administration



Resources: Medicines used under PGD in Maternity at LGT?

- Benzylpenicillin-PGD-against-GBS---Final-September-2017
<http://lgnetadmin/download.cfm?doc=docm93jjjm4n11742.pdf&ver=21754>
- Boostrix PGDs final approved and signed 29th Aug 2018
<http://lgnetadmin/download.cfm?doc=docm93jjjm4n11746.pdf&ver=21758>
- Dinoprostone vaginal delivery final approved and signed 29th Aug 2018
<http://lgnetadmin/download.cfm?doc=docm93jjjm4n11743.pdf&ver=21755>
- Influenza PGD final approved and signed 29th August 2018
<http://lgnetadmin/download.cfm?doc=docm93jjjm4n11745.pdf&ver=21757>
- Metoclopramide IV 2017
<http://lgnetadmin/download.cfm?doc=docm93jjjm4n11741.pdf&ver=21753>
- Metoclopramide oral 2017
<http://lgnetadmin/download.cfm?doc=docm93jjjm4n11744.pdf&ver=21756>
- PGD-Policy-2017
<http://lgnetadmin/download.cfm?doc=docm93jjjm4n11749.pdf&ver=21761>
- Ranitidine IV 2017
<http://lgnetadmin/download.cfm?doc=docm93jjjm4n11747.pdf&ver=21759>
- Ranitidine oral 150mg tabs 2017
<http://lgnetadmin/download.cfm?doc=docm93jjjm4n11748.pdf&ver=21760>
- Dihydrocodeine PO & Misoprostol PR - Documents await approval



Legislation requires that each PGD must contain the following information

- The date the PGD comes into force and when it expires
- the description or class of medicinal product to which the direction relates
- the clinical situations which medicinal products of that description or class may be used to treat or manage in any form
- whether there are any restrictions on the quantity of medicinal product that may be sold or supplied on any one occasion and, if so, what restrictions
- the clinical criteria under which a person is to be eligible for treatment
- whether any class of person is excluded from treatment under the direction and, if so, what class of person



Legislation requires that each PGD must contain the following information (Continued)

- whether there are circumstances in which further advice should be sought from a doctor and if so, what circumstances
- The pharmaceutical form or forms in which medicinal products of that description or class are to be administered
- the strength, or maximum strength, at which medicinal products of that description or class are to be administered
- the route of administration, the frequency of administration
- any minimum or maximum period of administration applicable to medicinal products of that description or class
- whether there are any relevant warnings to note and, if so, what warnings
- whether there is any follow up action to be taken in any circumstances and, if so, what action and in what circumstances
- arrangements for referral for medical advice
- details of the records to be kept of the supply, or the administration, of products under the direction'.



Approval and Authorisation of a PGD

- Once a PGD has been drafted and consulted, it will then be approved by the directorate, or another relevant Trust wide body.
- The PGD should be submitted to the Medicines Management Committee for ratification and signed by the chair on behalf of the Trust for clinical governance purposes
- A PGD is usually valid for 3 years and should be reviewed, updated and re-ratified prior to expiry.



Patient Group Directions

That completes the slides for this training module.

Read the Trust's 'Patient Group Direction Policy' 2017

<http://lgnet/download.cfm?doc=docm93jjjm4n5679.pdf&ver=14697>

For midwives to be deemed competent working under PGDs at LGT, they must complete the following:

1. Take the test on e-learning and achieve a pass mark of 80% or above.
2. The Midwifery Staff Competency Assessment Form on the relevant PGDs applicable to your midwifery practice. This is a face to face practical assessment.



References and Resources

1. Patient Group Direction Policy' 2017

<http://lgnet/download.cfm?doc=docm93jjjm4n5679.pdf&ver=14697>

2. Patient Group Directions. NICE guideline March 2017

<https://www.nice.org.uk/guidance/mpg2/evidence/full-guideline-pdf-4420760941>

3. Competency Framework: For healthcare professionals using Patient Group directions. NICE guidance Jan 2014 (updated March 2017)

4. Practising as a Midwife in the UK

<https://www.nmc.org.uk/globalassets/sitedocuments/nmc-publications/practising-as-a-midwife-in-the-uk.pdf>

