NATIONAL PATIENT GROUP DIRECTION: URGENT PROVISION OF REPEAT MEDICINES, APPLIANCES AND ACBS PRODUCTS

OPERATIONAL PROCEDURE FOR PHARMACISTS:

PATIENT GROUP DIRECTION FOR THE URGENT PROVISION OF CURRENT REPEAT MEDICINES, APPLIANCES AND ACBS PRODUCTS LISTED IN THE BNF & BNFC, TO NHS PATIENTS BY PHARMACISTS

Purpose

The purpose of this Patient Group Direction (PGD) is to allow patients to receive up to one cycle of their repeat medicine, appliance and/or ACBS product from a pharmacist when the patient's prescriber is unavailable e.g. the surgery is closed or an out-of-hours system is in operation.

Background

A patient who runs out of their prescribed medicine, appliance and or ACBS product and cannot obtain a prescription for further supplies within a reasonable period can obtain an emergency supply from a pharmacist. Pharmacists can issue an emergency supply provided the conditions specified within the 'Human Medicines Regulations 2012' are met. The statutory supply allowed is limited to no more than thirty days for Prescription Only Medication (POMs). In Scotland, it is also possible to help patients who lose or run out of their medicines using a national Patient Group Direction (PGD).

A PGD is a written instruction for the supply or administration of medicines to groups of patients who may not be individually identified before presentation for prescribing treatment. The PGD for Urgent Provision of Repeat Medicines, Appliances and ACBS Products has been developed by NHS Scotland and implemented by NHS Boards since 2005, and enables pharmacists located in premises with an NHS Pharmaceutical Care Service Contract to provide patients with up to one prescribing cycle of their repeat medicines and appliances when the patient's prescriber is unavailable e.g. the surgery is closed or an out-of-hours system is in operation.

The majority of clinical care should be provided on an individual, patient-specific basis. The supply and administration of medicines, appliances and/or ACBS Products under PGD should be reserved for those limited situations where this offers an advantage for patient care without compromising patient safety, and where it is consistent with appropriate professional relationships and accountability.

Scope of Urgent Provision PGD

These arrangements apply only to urgent provision of repeat medicines, appliances and ACBS Products under the NHS in Scotland. The PGD supports a supply of most medicines, appliances and ACBS Products (with some exceptions) in the current British National Formulary (BNF) and the Paediatric British National Formulary (BNFC). However, certain medicines listed in the BNF and BNFC are excluded and these are specifically highlighted in the PGD. The PGD is deliberately structured to match the existing BNF and BNFC sections to aid cross-referencing where required.

All appliances and ACBS Products allowable on repeat prescription can be provided using the PGD. The PGD limits the quantity of medicine to be provided up to the quantity the patient normally receives on their repeat prescription, or up to one month if unknown.

The PGD can only be used when the patient's most recent prescription for the particular medicine requested was issued by the patient's prescriber, i.e. two successive supplies of the same medicine is not permissive under this PGD.

Use of the PGD can be in response to a direct request from the patient, the patient's representative, the patient's prescriber; an out-of-hours collaborative, NHS 24 and hospital A&E Departments.

Authority for Use

This PGD has been developed under the control of NHS 24, by medical and pharmaceutical clinicians and authorised for use by each individual NHS board. Pharmacists may only use the PGD if it has been authorised by the NHS board in their area. The pharmacist using the PGD must read, agree and sign the PGD.

Operating Procedures

Situation:	The PGD can be used when a patient requires a further supply of their repeat medicines, appliances and/or ACBS Products at times when their prescriber is unavailable e.g. the surgery is closed or an out-of-hours system is operating. The request can be directly from the patient or patient's representative, the patient's prescriber, OOH service, Hospital A&E Department or NHS 24 referral.
Inclusion Criteria:	The pharmacist must satisfy themselves that the situation is appropriate for use of the PGD. The patient requires to be registered with a NHS GP in Scotland or have temporary registration in Scotland The patient must agree that all relevant clinical information is shared between their prescriber and the pharmacist. Minimum information should include, current medicines being prescribed, any allergies and diagnosis (clinical condition being treated) as necessary. The patient should also agree to the pharmacist giving the prescriber any relevant information.
Exclusion Criteria:	The PGD should not be used where a patient or the medicine, appliance and/or ACBS Product requested falls into the exclusion criteria specified within the relevant section of this PGD.

Action of Exclusion:	Patients within the exclusion criteria may be offered an emergency supply of appropriate medicine, appliance and/or ACBS product. The patient's prescriber should be notified of the exclusion circumstance. It would be good practice for the Pharmacy to record any instance of exclusion.
Referral to Prescriber:	The patient should be referred to their usual prescriber or the OOH service if there is a significant change in their clinical condition, which would make this PGD inappropriate.

Description of Treatment

Medicines:	The PGD can be used to supply any medicine, appliance and/or ACBS Product provided they are included in the scope of the PGD.
Legal Status:	The legal status of the medicine can be POM, P, GSL or CD depending on the specific medicine.
Dosage Form and Strength:	Whenever possible the patient should be supplied with the same manufacturer's preparation, dosage form and strength normally prescribed and dispensed. However, in exceptional circumstances the strength and dosage form and manufacturer's preparation can be altered provided it is equivalent in terms of active base drug (i.e. salt can vary provided bioequivalent) and dosage regimen.
Dose:	Dose as normally prescribed by the patient's prescriber or if not known as recommended by BNF or BNFC. The pharmacist should use their professional judgement on the course of action should a dose be unknown.
Exceptions:	This section lists medicines, appliances and/or ACBS Products deemed unsuitable for supply under this PGD. Patients presenting with a request for these medicines should be referred to their prescriber or OOH service.
Duration of Supply:	The quantity of medicine, appliance and/or ACBS Product provided should be equivalent to the quantity normally prescribed for the patient on their repeat prescription. This will avoid additional workload by the prescriber and the pharmacist and maintain the patient's normal prescribing cycle. The pharmacist should exercise their professional judgement when assessing the duration of supply.
Patient Information:	The patient should be supplied with Patient Information Leaflets and any other relevant information. They should also be made aware that their next cycle must be prescribed by their usual prescriber.

Documentation:	Where a supply of medicines, appliances and/or ACBS Products is made, the pharmacist is required to complete a CP(US) form for onward transmission to Practitioner Services Division. This will enable the contractor to be reimbursed the cost of the medicine/ appliance/ ACBS product. It will also be part of the audit trail. The CP(US) form for the purposes of this PGD is the equivalent of an NHS prescription and should contain the patient details, the CHI number, the medicines and/or appliances dispensed, dosage form, strength and dose and total quantity to be provided. It should also contain the identifier of the patient's prescriber. The patient's prescriber requires to be informed of the transaction and patient details.
Supply:	The supply should be in the form of a normal dispensed product appropriately labelled and packaged. Ensure that the patient's prescriber is notified of any supply made, that all records are complete and the CP(US) form is forwarded to NHS NSS.
Adverse Reactions/ Side Effects:	As described in BNF/BNFC.
Record/Audit Trail:	The CP (US) form should be forwarded to NHS NSS for processing and payment. A record of the transaction requires to be forwarded to the patient's prescriber along with patient's name, address and CHI number. A record of the transaction should be entered on the PMR and annotated urgent supply (US).
Characteristic of Staff:	The PGD can only be used by a pharmacist whose name is currently on the practising section of the pharmaceutical register held by The General Pharmaceutical Council (GPhC).
Action by NSS:	The CP(US) will be processed similar to a GP prescription. The pharmacy contractor shall receive the ingredient cost as reimbursement. The information regarding patient details and medicines, appliances and/or ACBS Products provided to the patient should be forwarded to the patient's prescriber. The cost of the medicines will be attributed to the patient's GP's drugs budget. Information on urgent supplies made under these arrangements will be published from time to time as requested by NHS boards and the Scottish Government Health Directorates.
Legal Liability:	As with any other professional activity, the liability for actions taken under this PGD lies with the pharmacist making the supply.