Maidstone and Tunbridge Wells NHS Trust

Ref: FOI/GS/ID 8597

Please reply to:
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28 November 2023

Freedom of Information Act 2000

I am writing in response to your request for information made under the Freedom of Information Act 2000 in relation to Patient Group Directions (PGDs).

You asked: All questions are shown as received by the Trust.
I am writing to request information under the Freedom of Information Act 2000. My queries pertain to the use, development, and audit of Patient Group Directions (PGDs) within [NHS Trust Name].
Specifically, I am seeking answers to the following questions:
1. General Information:
a. How many active Patient Group Directions (PGDs) does the Trust currently have in place?
b. In which departments or services within the Trust are PGDs most used?
2. Usage of PGDs:
a. Over the past 3 years, how many patients have been treated under a PGD in the Trust?
b. How does the Trust ensure that PGDs are only used by those healthcare professionals (HCP) competent to do so?
3. Types of Medications:
a. Please provide a list of all medications currently administered under a PGD within the Trust.
b. Are there specific medications that the Trust has deemed unsuitable for PGD use? If so, which ones?
4. Audit Policy:
a. How frequently does the Trust audit the use of PGDs?
b. What measures are in place to ensure the safe and appropriate use of PGDs, based on audit findings?
c. Have there been any adverse events or incidents in the past 3 years related to the use of PGDs? If so, how many and what were the main issues identified?

5. Review and Update:
a. What is the Trust's policy on the regular review and update of PGDs?
b. How often are PGDs typically reviewed and updated within the Trust?
c. Who is responsible for the creation, review, and update of PGDs within the Trust?
6. Training:
a. What training does the Trust provide to staff regarding the use of PGDs?
b. How frequently is this training provided and updated?

Trust response:
1. General Information:
a. 299 in place
b. A&E, sexual health, diagnostic radiology, treatment radiotherapy

2. Usage of PGDs:
a. This is unknown as we have different electronic systems across the Trust
b. There is a PGD policy and a training and competency assessment process run by pharmacy to ensure only trained HCPs work under PGD – we also audit the use of PGDs checking who has signed up to use the PGDs in areas

3. Types of Medications:
a. See attached section of the PGD database
b. Only medication which is not able to be administered/supplied under PGD as per the legislation

4. Audit Policy:
a. This does vary between departments, we aim for 1 audit per year
b. Presentation and review of audit results at the NMP&PGD group meeting
c. No, we are not aware of any adverse incident related to the use of PGDs

5. Review and Update:
a. PGDs should be reviewed every 2 to 3 years as in the Trust PGD Policy and NICE Guidelines on PGDs. Updates will be conducted following review of MHRA safety alerts at NMP&PGD group meetings
b. Every 2 to 3 years
c. There is a NMP&PGD group which reports to the Drugs and Therapeutics Committee. The PGD&NMP group consists of HCPs from a range of specialities and is well attended. The group review all proposals for new PGDs and all draft PGDs before approval. All PGDs are reviewed by a clinical lead from that speciality and a member of pharmacy

6. Training:
a. We have a one-day course for underpinning knowledge on the safe use of PGDs and legalities plus a competency assessment undertaken within the clinical area – once both are completed the HCP is authorised to work under PGDs in their area – if that HCP wants to work under PGDs in another clinical area, they have to undergo the competency assessment again in the new clinical area.
b. PGD trained staff should undertake the PGD e-learning refresher training every 2 years.