Ensuring PGD Compliance In A Mobile Workforce

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Background

Paramedics have a limited scope of medicines they are legally authorised to administer[1].
As pre-hospital care advances, more medicines are being added to formulary and administered using Patient Group Directions (PGDs)[2] The use of PGDs help patients receive the right treatment in the right place at the right time. Many paramedics at North West Ambulance Service (NWAS) are novices at using the new formulary medicines. We describe the impact pharmacy technicians have in ensuring compliance with PGDs across a diverse, mobile and geographical widespread workforce such as the ambulance service.
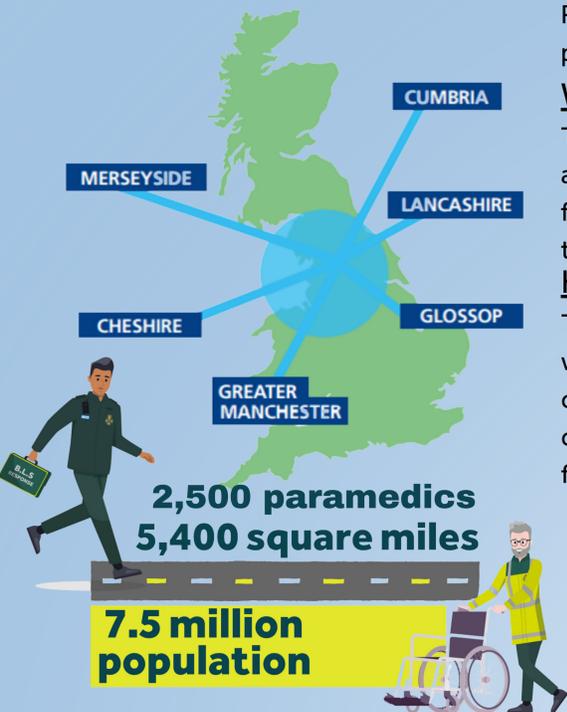
What is the problem?

Pre-hospital clinicians are constantly moving around the 5400 square miles NWAS covers. Educating 2500 individual paramedics and engaging them to be assessed and sign up to the PGD is a challenge for the Medicines Team at NWAS.
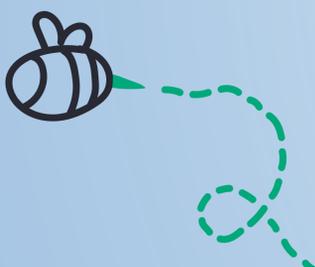
What are the hurdles?

To be PGD compliant each paramedic needs to complete the education, display competency by completing an assessment and electronically sign the PGD prior to the agreed PGD go live date. This then permits administration of the medications from the PGD go live date. Without routine desk time in a constantly moving, high pressure environment, ability to access training is a big obstacle.

How did we solve it?

The pharmacy technicians and pharmacists work closely with NWAS professional leads and the Medical Director to develop the PGDs. The "6 steps to PGD launch" have developed over time and proved to be a successful model for a technician led roll out of new and updated PGDs.

CUMBRIA
MERSEYSIDE
LANCASHIRE
CHESHIRE
GLOSSOP
GREATER MANCHESTER

2,500 paramedics
5,400 square miles
7.5 million population

6 Steps To PGD Launch

Step 6: Launch

- 85% compliance must be achieved prior to PGD go live date
- Once 85% target achieved medicines (if new to formulary) are supplied to all 700 ambulances. Medicines distributed for paramedics to administer under PGD following a technician led project plan

Step 5: Report

- Technicians generate and share high level one page weekly report for trust leadership teams
- Continue weekly reporting from ESR records for three months
- Technicians create quarterly reports oversight for governance groups
- Provide area appropriate access to all staff compliance reports, via SharePoint for local level monitoring by managers
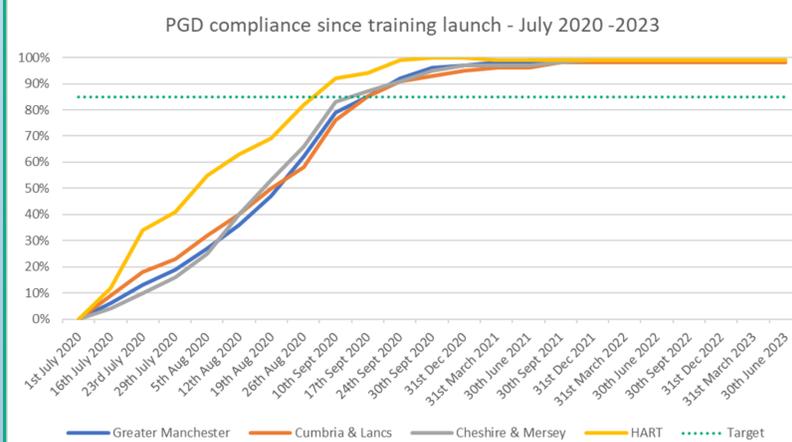
Step 4: Monitor compliance

- Following launch of e-learning packages, technicians obtain weekly update and compliance data from ESR team
- Technicians sense check and cleanse data (e.g. remove staff away from work, on external secondment)
- Account for maternity, sick leave, retirement

Step 3: Create a buzz about launch

- Cascade awareness via leadership teams and governance groups
- Include in all staff bulletins
- Technicians conduct 'must have' conversations every time they they visit sites/stations to inform and educate staff
- Online meetings
- Face to face discussions

Step 2: Create training

- Technicians develop interactive e-learning packages
- Make it inclusive and accessible (use voiceovers by technicians and education and training (E&T) team)
- Pharmacy technicians, E&T and IT co-working to create training packages & competency assessments
- Link competency requirement to electronic staff records (ESR - used nationally in the NHS)

Step 1: PGD schedule for launch

- Gain executive support
- Select a three month time period (prior to formal launch of the PGD) to educate, train, assess competency and obtain signatories to authorise to practice
- Agree on 85% target compliance target of PGD sign off before new medicines are launched (see graph)
- Negotiate time 'off the road' for the paramedics to complete their training

Maintaining success

- The graph below shows compliance with the ESR learning and electronic sign off of four PGDs for the last three years.
- Compliance continues to be reported each quarter after the go live date of the PGDs

PGD compliance since training launch - July 2020 -2023

Greater Manchester | Cumbria & Lancs | Cheshire & Mersey | HART | Target

Learning

- Schedule timing: use lower periods of demand to engage staff (for NWAS this is usually the summer time to avoid winter pressures).
- Accessible training: consider learning types and needs of learners e.g. dyslexic learners.
- Make it engaging and interactive (use check lists of key points and quizzes)
- Sufficient Time: Allow three months before the go live date of the PGD to give enough opportunity for staff to train, complete assessments and sign off.
- Good communications: Involve and update local area managers throughout the launch period.

References

1.The Human Medicines Regulations 2012: UK Statutory instruments 2012 No. 1916. Schedule 17 The Human Medicines Regulations 2012 (legislation.gov.uk)
2. Patient group directions. Medicines practice guideline (MPG2). NICE. Published: 02 Aug 2013. Last updated:27 March 2017.
Overview | Patient group directions | Guidance | NICE