

Putting NICE guidance into practice

Competency framework for health professionals using patient group directions

Implementing the NICE guideline on patient group directions (MPG2)

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| This competency framework for people authorising patient group directions (PGDs) accompanies the [NICE guideline on patient group directions](https://www.nice.org.uk/guidance/mpg2). Issue date: August 2013 [updated January 2018].Commissioners and providers are reminded that it is their responsibility to implement the guidance, in their local context, in light of their duties to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity and foster good relations. Nothing in the guidance should be interpreted in a way that would be inconsistent with compliance with those duties. NICE takes no responsibility for the competencies of individual people or for the safe and effective use of PGDs in local organisations. This competency framework for health professionals using PGDs is a tool to support the implementation of NICE guidance. It is not NICE guidance. |

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# Introduction

Patient group directions (PGDs) provide a legal framework that allows some registered health professionals to supply and/or administer a specified medicine(s) to a pre‑defined group of patients, without them having to see a prescriber.

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. For example, a PGD may be appropriate for supplying a medicine to a patient seeking treatment for a minor ailment in a community pharmacy or walk-in centre.

The current legislation for PGDs is included in [The Human Medicines Regulations 2012](http://www.legislation.gov.uk/uksi/2012/1916/contents/made). This legislation was amended in April 2013 to reflect changes to NHS organisational structures in England (see [The National Treatment Agency [Abolition] and the Health and Social Care Act 2012 [Consequential, Transitional and Saving Provisions] Order 2013](http://www.legislation.gov.uk/uksi/2013/235/schedule/2/paragraph/176/made)).

## What is a competency framework?

A competency is a quality or characteristic of a person that is related to effective performance. Competencies can be described as a combination of knowledge, skills, motives and personal traits. The aim of developing competencies is to support individual people and organisations (see [terms used in the guideline](https://www.nice.org.uk/guidance/mpg2/chapter/Recommendations#terms-used-in-the-guideline)) to continually improve their performance and to work more effectively (Whiddett and Hollyford 1999, the competencies handbook).

A competency framework is a collection of competencies considered to be central to effective performance. If acquired and maintained, the competencies in this framework should help individual people and organisations ensure that PGDs are used effectively, without compromising patient safety.

## Why has this competency framework been developed?

The [Health Service Circular (HSC 2000/026)](http://webarchive.nationalarchives.gov.uk/20130107105354/http%3A/www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/%40dh/%40en/documents/digitalasset/dh_4012260.pdf) states that ‘a senior person in each profession should be designated with the responsibility to ensure that only fully competent, qualified and trained professionals operate within directions’.

During the development of the NICE guideline, the implementation needs assessment identified that appropriate training, regular re-training and assessment of competency is important for all people involved with PGDs, to reduce variation and deliver safe and effective services in which PGDs are used (see [section 1.7 of the guideline](https://www.nice.org.uk/guidance/mpg2/chapter/Recommendations#training-and-competency)).

The NICE guideline recommends to:

‘Identify gaps in competency and establish a comprehensive and appropriate training programme for all people involved in considering the need for, developing, authorising, using and updating PGDs.’

This competency framework has been developed as a tool to support individual health professionals and organisations that are commissioning or providing public-funded services (see [terms used in the guideline](https://www.nice.org.uk/guidance/mpg2/chapter/Recommendations#terms-used-in-the-guideline)). It may also be relevant to individual health professionals and organisations delivering non-NHS healthcare services.

This framework updates and replaces the competency framework included in the National Prescribing Centre’s patient group directions – a practical guide and framework of competencies for all professionals using patient group directions (2009).

This competency framework should only be used in conjunction with the NICE guideline on patient group directions.

## Who is this competency framework for?

This competency framework has been developed as a tool to support individual health professionals who are using PGDs (see [section 1.5 of the guideline](https://www.nice.org.uk/guidance/mpg2/chapter/Recommendations#using-patient-group-directions)). Only registered health professionals who are listed in the legislation are eligible to use PGDs (see [The Human Medicines Regulations 2012 [section 16, part 4]](https://www.legislation.gov.uk/uksi/2012/1916/schedule/16/part/4/made)). Individual health professionals must be named and authorised to practice under a PGD (see [The Human Medicines Regulations 2012 [regulation 229]](http://www.legislation.gov.uk/uksi/2012/1916/regulation/229/made)).

This competency framework will also be a useful tool for the senior person in each profession who is designated with the responsibility to ensure that only fully competent, qualified and trained health professionals work under a PGD (see [section 1.7 of the guideline](https://www.nice.org.uk/guidance/mpg2/chapter/Recommendations#training-and-competency)).

Some commissioners and providers may already have an established programme for training and assessing competency. However, they may want to review whether their current governance arrangements for training and competency are consistent with this PGD competency framework (see [section 1.8 of the guideline](https://www.nice.org.uk/guidance/mpg2/chapter/Recommendations#organisational-governance)).

Separate competency frameworks (available in the [tools and resources for the guideline](https://www.nice.org.uk/guidance/mpg2/resources)) have also been developed for:

* people developing PGDs (see [section 1.3 of the guideline](https://www.nice.org.uk/guidance/mpg2/chapter/Recommendations#developing-patient-group-directions)) and/or reviewing and updating PGDs ([section 1.6 of the guideline](https://www.nice.org.uk/guidance/mpg2/chapter/Recommendations#reviewing-and-updating-patient-group-directions))
* people authorising PGDs (see [section 1.4 of the guideline](https://www.nice.org.uk/guidance/mpg2/chapter/Recommendations#authorising-patient-group-directions)).

The NICE guideline states that the [National Prescribing Centre’s local decision-making competency framework](https://www.webarchive.org.uk/wayback/archive/20140627111127/http%3A/www.npc.nhs.uk/local_decision_making/resources/LDM_comp_framework.pdf) (2012) could be used to assess the membership of the PGD approval group (see [terms used in the guideline](https://www.nice.org.uk/guidance/mpg2/chapter/Recommendations#terms-used-in-the-guideline)) and identify any gaps in competency (see [section 1.2 of the guideline](https://www.nice.org.uk/guidance/mpg2/chapter/Recommendations#obtaining-agreement-to-develop-a-patient-group-direction)).

# Using this competency framework

This competency framework is made up of 3 domains. Each domain contains 3 competency areas. Therefore, this competency framework consists of 9 competency areas in total.

Competency areas

| Domains | Competency areas |
| --- | --- |
| The patient consultation | * Knowledge
* Options
* Shared decision making
 |
| Safe and effective | * Safe
* Governance
* Always improving
 |
| PGDs in context | * Information
* The healthcare system
* Collaboration
 |

Each competency area has:

* a statement that gives a general overview of what the competency area covers
* a list of individual competencies, referenced to relevant good practice recommendations, where applicable.

This competency framework should be adapted for personal or local use. The individual competencies in this framework should be interpreted in the context in which health professionals are using PGDs, taking into account their scope of practice. Not all competencies will be equally relevant, and some are more complex than others. In addition, some competencies may not be applicable for all health professionals, or in all clinical situations and settings.

This competency framework is intended to be a developmental tool to support individual health professionals and organisations. It is not intended to be used as a grading or assessment tool. It may help to:

* identify training and competency needs
* develop educational materials
* establish a comprehensive and appropriate training programme
* facilitate continuing professional development
* inform the development of organisational systems and processes.

Individual health professionals and organisations will need to consider:

* how they will use the competency framework
* how each competency applies to their scope of practice and individual responsibilities
* what evidence can be collected and documented to demonstrate competency, for example case studies, local procedures and details of training courses attended.

## Responsibilities

It is the responsibility of commissioners and providers to use this competency framework in their own setting. NICE takes no responsibility for the competencies of individual people or for the safe and effective use of PGDs in local organisations. This competency framework does not represent a requirement from professional or regulatory bodies.

# Domain: The patient consultation

## Competency area: Knowledge

Has up-to-date clinical, pharmacological and pharmaceutical knowledge relevant to the scope of the PGD.

Competencies and evidence (knowledge)

| Competencies | Evidence/comments |
| --- | --- |
| Understands the clinical condition(s) being treated, their natural progress and how to assess their severity (recommendation 1.5.2)  |  |
| Understands different non-drug and drug approaches to modifying disease and promoting health, and identifies and assesses the desirable outcomes of treatment (recommendation 1.5.2)  |  |
| Recognises the potential for adverse events and how to avoid/minimise and manage them (recommendation 1.5.3) |  |
| Demonstrates an up-to-date knowledge about the medicine(s) included in the PGD, including its mode of action, pharmacokinetics, indication, contraindications, cautions and drug interactions (recommendation 1.5.2) |  |

## Competency area: Options

Makes or reviews a diagnosis, generates management options for the patient and follows up management within the scope of the PGD.

Competencies and evidence (options)

| Competencies | Evidence/comments |
| --- | --- |
| Knows how to take an appropriate medical history and medication history, including current and previously prescribed medicines in addition to non‑prescribed medicines, supplements and complementary remedies (recommendation 1.5.3) |  |
| Is able to undertake an appropriate clinical assessment using relevant equipment and techniques (recommendation 1.5.3) |  |
| Is able to interpret relevant investigations and patient records (recommendation 1.5.3) |  |
| Understands the effect of multiple clinical conditions, existing medication, allergies and contraindications on management options (recommendation 1.5.3) |  |
| Is able to make, or understand, the diagnosis by considering and systematically deciding between the various possibilities (recommendation 1.5.3) |  |
| Knows when to consider alternative options for treating the patient’s condition, including no treatment, non-drug and drug interventions (recommendation 1.5.3) |  |
| Is able to select the most appropriate PGD for an individual patient (recommendation 1.5.3) |  |
| Is able to select the most appropriate drug, dose and formulation for an individual patient (recommendation 1.5.3) |  |
| Understands how to assess and monitor the effectiveness of the patient’s treatment and potential adverse events (recommendation 1.5.3) |  |

## Competency area: Shared decision making

Establishes a relationship based on trust and mutual respect and recognises patients as partners in the consultation.

Competencies and evidence (shared decision making)

| Competencies | Evidence/comments |
| --- | --- |
| Takes confidentiality, dignity and respect into account when undertaking a patient consultation (recommendation 1.5.3) |  |
| Is able to adapt consultations to meet the needs of each individual patient and respects their values, beliefs and expectations (recommendation 1.5.3) |  |
| Works with the patient to make an informed choice about their treatment and respects their right to refuse or limit treatment (recommendation 1.5.3) |  |
| Is able to explain the patient’s condition and the rationale behind the treatment options, including the risk of harm and potential benefit (recommendation 1.5.3) |  |
| Knows how to assess the patient’s understanding of, and commitment to, their treatment, monitoring and follow-up (recommendation 1.5.3) |  |

# Domain: Safe and effective

## Competency area: Safe

Is aware of own limitations and does not compromise patient safety.

Competencies and evidence (safe)

| Competencies | Evidence/comments |
| --- | --- |
| Is aware of how medicines are licensed, sourced, supplied and monitored, and the implications for their own practice (recommendations 1.1.6 and 1.1.7) |  |
| Knows about the common types of medication errors and how to prevent them (recommendation 1.8.4) |  |
| Knows how to identify and report patient safety incidents relating to the PGD, such as medication errors, near misses and suspected adverse events (recommendations 1.8.4 and 1.8.6) |  |
| Knows how to keep up to date with safety concerns related to the medicine(s) included in the PGD (recommendation 1.6.9) |  |
| Understands the potential for misuse of medicines (recommendations 1.1.1 and 1.1.9) |  |
| Understands antimicrobial resistance, healthcare‑associated infections and the roles of infection prevention and control, and antimicrobial stewardship (recommendation 1.1.10) |  |
| Understands the importance of robust medicines management systems supporting the use of PGDs, such as the need for appropriately labelled packs (see [terms used in the guideline](https://www.nice.org.uk/guidance/mpg2/chapter/Recommendations#terms-used-in-the-guideline)), medicines procurement and safe storage (recommendations 1.5.3 to 1.5.6) |  |
| Is able to assess the risk of, and deal with, adverse events after administration of a medicine, including supportive measures for potentially life‑threatening adverse events (recommendation 1.5.3) |  |
| Is able to check doses and calculations to ensure accuracy and safety (recommendation 1.5.3) |  |
| Understands the need for accurate, clear and timely records and clinical notes (recommendation 1.5.7) |  |

## Competency area: Governance

Ensures practice is within the legal framework and follows local processes and governance arrangements.

Competencies and evidence (governance)

| Competencies | Evidence/comments |
| --- | --- |
| Understands and works within current medicines legislation relevant to PGDs (see the [context section of the guideline](https://www.nice.org.uk/guidance/MPG2/chapter/Context)), and understands how this applies in practice (recommendations 1.1.3, 1.1.5 to 1.1.9, 1.4.1, 1.4.3, 1.4.6, 1.5.3 to 1.5.6, and 1.8.6) |  |
| Understands and works within relevant code(s) of professional conduct and organisational governance arrangements (recommendations 1.1.1, 1.5.1 and 1.8.1) |  |
| Understands and follows the local PGD policy and/or medicines policy (recommendations 1.5.1 and 1.8.2) |  |
| Understands and accepts personal responsibility for working within PGDs and understands the legal implications of doing so (recommendations 1.1.5, 1.4.9 and 1.5.1 to 1.5.7) |  |
| Is aware of own role and responsibilities and lines of accountability (recommendations 1.1.1, 1.5.1 to 1.5.7, and 1.8.1) |  |
| Makes ethical and/or clinical decisions based on the needs of patients, not personal considerations (recommendation 1.5.3) |  |
| Knows how to record relevant information to maintain an effective audit trail of documents and actions, including version control (recommendations 1.5.7 and 1.8.6) |  |
| Understands the importance of patient confidentiality in line with regulatory standards and contractual requirements (recommendation 1.5.1) |  |
| Is familiar with patient consent (see the [Department of Health and Social Care’s reference guide to consent](https://www.gov.uk/government/publications/reference-guide-to-consent-for-examination-or-treatment-second-edition)) in the context of PGDs, including Gillick competence and Fraser guidelines (recommendation 1.5.7) |  |
| Knows how and when PGDs need to be reviewed and updated (recommendations 1.6.1 to 1.6.9) |  |

## Competency area: Always improving

Actively participates in reviewing and developing current practice to optimise patient outcomes. Is self-aware and confident in own ability to use PGDs.

Competencies and evidence (always improving)

| Competencies | Evidence/comments |
| --- | --- |
| Takes responsibility for own learning and continuing professional development (recommendation 1.5.2) |  |
| Knows the limits of their own knowledge, skills and experience and works within them (recommendation 1.5.2) |  |
| Shares and debates own and others’ practice, and acts upon feedback and discussion |  |
| Recognises and deals with pressures that may result in inappropriate use of PGDs |  |
| Develops and makes use of networks for support, reflection and learning |  |
| Understands the need to monitor and evaluate PGDs and their use in practice (recommendations 1.6.4, 1.8.5 and 1.8.6)  |  |

# Domain: PGDs in context

## Competency area: Information

Accesses relevant information and applies this in own practice.

Competencies and evidence (information)

| Competencies | Evidence/comments |
| --- | --- |
| Is able to use standard software packages and the internet to search for relevant information (recommendation 1.5.3)  |  |
| Understands and applies the principles of evidence-based medicine |  |
| Is able to interpret relevant medicines information, such as the [summary of product characteristics](http://www.medicines.org.uk/emc/) and [NICE guidance](https://www.nice.org.uk/guidance) (recommendations 1.5.2 and 1.5.3)  |  |
| Understands the advantages and limitations of different information sources |  |
| Applies information to the clinical context, linking theory to practice |  |

## Competency area: The healthcare system

Ensures practice is within national policies, systems and processes that impact current practice. Sees how own practice impacts the wider healthcare community.

Competencies and evidence (the healthcare system)

| Competencies | Evidence/comments |
| --- | --- |
| Understands the benefits and risks of alternative options for supplying and/or administering medicines, including independent prescribing, supplementary prescribing and patient-specific directions (recommendations 1.1.1 to 1.1.3)  |  |
| Understands the current service where the PGD is used and/or future service provisions for supplying and/or administering the medicine(s), including where the medicine(s) fits within the care pathway (recommendations 1.1.4 and 1.6.4)  |  |
| Understands the national frameworks for medicines use, such as [NICE](http://www.nice.org.uk/), the [Scottish Medicines Consortium](http://www.scottishmedicines.org.uk/Home), [All Wales Medicines Strategy Group](https://awttc.nhs.wales/about-us1/our-committees/#AWMSG), and local medicines optimisation strategies  |  |
| Understands and works within local frameworks for medicines use that support the PGD, as appropriate, such as local formularies (see [NICE’s guideline on developing and updating local formularies](https://www.nice.org.uk/guidance/mpg1)), care pathways, decision support tools, protocols and guidelines  |  |
| Understands and works within the NHS/organisational or other ethical code of conduct when dealing with the pharmaceutical industry |  |
| Understands the legal requirements for the collection of appropriate prescription charges (recommendation 1.5.6) |  |

## Competency area: Collaboration

Works in partnership with colleagues and collaborates with internal and external stakeholders for the benefit of patients.

Competencies and evidence (collaboration)

| Competencies | Evidence/comments |
| --- | --- |
| Understands and works within local contractual requirements relating to PGDs (recommendations 1.8.1 to 1.8.3) |  |
| Thinks and acts as part of a multidisciplinary team to ensure that continuity of care is developed and not compromised  |  |
| Establishes relationships with colleagues and all relevant stakeholders based on understanding, trust and respect for each other’s roles |  |
| Knows when to refer to, or seek advice from, another member of the team or a specialist |  |
| Provides support and advice to colleagues and all relevant stakeholders, when appropriate |  |