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**Derbyshire Community Health Services NHS Trust and Derbyshire CCGs position statement on the supply of items for administration by DCHS nursing staff**

This position statement has been agreed by Derbyshire LMC and Derbyshire prescribing group .

DCHS community nurses are routinely required to administer medicines to patients in their own homes e.g. hydroxocobalamin injections, gonadotrophin-releasing hormone injections e.g. leuprorelin injections, low molecular weight heparin, influenza and other vaccines. Queries have arisen as to the correct procedure for DCHS nursing staff to obtain the supply from the GP practice.

**Administration**

Medicines are administered in accordance with a Prescription, Patient Specific Direction, Patient Group Direction or other relevant exemption specified in the Human Medicines Regulations 2012 (Schedules 17 and 19, as amended).

*Professional Guidance on the Administration of Medicines in Healthcare Settings.* January 2019. RPharmS, RCN endorsed by ROCG. <https://www.rpharms.com/Portals/0/RPS%20document%20library/Open%20access/Professional%20standards/SSHM%20and%20Admin/Admin%20of%20Meds%20prof%20guidance.pdf?ver=2019-01-23-145026-567>

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| 1. **Prescription** | | |
| **What is it?** | eg FP10 dispensed (in pharmacy or dispensing doctors) | |
| **Labelling:** | ✓ | Labelled with drug name, dose\*, route, directions, patient name and supplied with patient information leaflet in order that DCHS nurses use this information to transcribe and administer providing the information is legible, clear unambiguous and complete.  \*exception insulin: a written record of the current dose should be in the GP patient records |
| **Patient Information Leaflet** | ✓ | In all cases the patient should be provided with the statutory patient information leaflet which accompanies the medicine |
| **Example** | Hydroxocabalamin ( B12) injection and other routine injections eg Low molecular weight heparins are best managed by this process as it allows DCHS nurses to transcribe and reduces travel time.  When prescribing hydroxycobalamin injections GP practices should prescribe an original pack of 5 injections at a time wherever possible | |
| 1. **Patient Specific Direction (PSD)** | | |
| **What is it?** | A PSD is an instruction from a doctor, dentist or other independent prescriber for a medicine to be ***supplied or administered*** to a named patient after the prescriber has assessed that patient on an individual basis e.g. ***written direction in patient’s notes***.  The prescriber must have knowledge of the patient's health, and be satisfied that the medicine to be administered serves the individual needs of each patient.  The prescriber can also produce an electronic or handwritten list of eligible patients for administration of a specific medicine. The list should be signed and dated by the prescriber. The prescriber has a duty of care and is professionally and legally accountable for the care he/she provides. | |
| **Labelling:** | **🗶** | The MHRA have confirmed that where the medicine is for administration to an individual named patient and the medicine is not being supplied to the patient but rather is administered without being stored in the patient’s home, no dispensing label is required. |
| **Patient Information Leaflet** | ✓ | In all cases the patient should be provided with the statutory patient information leaflet which accompanies the medicine. |
| **Example** | Influenza and other immunisations to housebound patients (& carers) on DCHS caseload are currently managed by PSD.  The prescriber should review the list of patients on the District Nurse’s caseload and produce a list of those that they authorize to be immunized. There is no legally valid period for a PSD for administration of a medicine, but good practice dictates that the prescriber should include a start and finish date in the direction to ensure it is acted on within a time frame appropriate to the needs of the patient.  The Community Nurse or other trained member of the healthcare team may then collect an unlabelled vaccine and the statutory patient information leaflet from the GP practice for administration in the patient’s home, whilst being mindful of appropriate cold chain storage requirements. A record (including manufacturer, batch number and expiry date) should be made in the practice clinical system of all vaccines administered by DCHS staff in case of medicine recalls.  **NOTE**  **The GP practice must retain a record of the PSD list for 2 years**  **The GP Practice can claim a personally administered fee.** | |
| 1. **Patient Group Direction** (PGD): | | |
| **What is it?** | A PGD is a written direction that allows the supply and/or administration of a specified medicine or medicines, by named authorised health professionals, to a well-defined group of patients requiring treatment of a specific condition. The individual healthcare professional must ensure the individual patient meets the eligibility criteria of the PGD. | |
| **Labelling:** | **🗶** | Where the medicine is for administration to an individual named patient and the medicine is not being supplied to the patient but rather is administered without being stored in the patient’s home, no dispensing label is required. |
| **Patient Information Leaflet** | ✓ | In all cases the patient should be provided with the statutory patient information leaflet which accompanies the medicine. |
| **Example** | Currently there are no shared PGDs between DCHS and GPs | |
| 1. **Personally Administered**:   GP practices can claim personally administered against all injections/ vaccinations which are supplied via the surgery.  Personally administered cannot be claimed against medicines including injections dispensed by a community pharmacy | | |
| **5. Gonadotrophin-releasing hormone injections** e.g. buserelin, leuprorelin, triptorelin  Can be managed by PSD or FP10. If a PSD is used the prescriber will need to supply dosing information to  allow DCHS staff to administer. This can be done either by the prescriber documenting the dose and  instruction to administer in the patient’s GP record ( ie there by providing information the nurse can use to  transcribe) or by completing DCHS administration documentation | | |