Patient Group Directions for the Supply of Medicines for Contraception and Sexual Health for Community Pharmacies within Hampshire Local Authority Area

Review Date 30th September 2019

The medicines to which this PGD suite relates are:

Medicine	Number	Issue Date & Latest Version
Levonorgestrel for Emergency Hormonal Contraception (EHC) (licensed and unlicensed indications)	PGD 03	Version 3.0 September 2017

Major amendments for individual medicines will result in the issue of a new suite with a new issue and review date.

If a practitioner is asked to supply any medicine not included within this PGD suite or supply is not covered in the inclusion criteria, a patient specific direction (PSD), i.e. a prescription, is first required from a prescriber.

Authorised Staff Characteristics

Professional qualifications of staff supplying and/or administering medicines under these PGDs.	Pharmacists registered with the General Pharmaceutical Council Completion of locally required CPPE training
Competence	 All registered practitioners are personally accountable for their practice and in the exercise of professional accountability. There is a requirement to demonstrate and maintain competence in the following before undertaking administration or supply under this PGD suite: An understanding of professional standards for the administration and supply of medicines Familiarity with the local policies and procedures relating to medicines Appropriate training to carry out the clinical assessment of a patient Basic training in the legal framework and use of PGDs for the supply and administration of medicines Understanding of pharmacology of medicines supplied and/or to be administered to patients and relevant medical condition Annual child protection updates (as applicable to young people) including a working knowledge of the Sexual Offences Act Ensure relevant CPPE courses are up to date

Clinical Situation

Client Assessment	Health details are to be recorded on the relevant patient consultation record		
	form and will include:		
	1. Reason for requesting treatment		
	2. If emergency contraception (EC) requested, details of last menstrual period (LMP) and details of normal menstrual cycle, details of unprotected sexual intercourse i.e. time and date, day of menstrual cycle and previous unprotected sexual intercourse (UPSI) and any use of EC in current cycle		
	3. Details of current and previous contraception use (where relevant)		
	 Personal medical history (including previous use of EC, ectopic pregnancy, Liver disease, Malabsorption syndromes, severe diarrhoea, suspected pregnancy, lower abdominal pain, unexpected bleeding, acute porphyria or allergic reactions to the treatment) 		
	 Other Medication - current and in the previous 8 weeks (including herbal products such as St John's Wort) 		
	6. Age		
	7. Allergies		
	 All clients under 16 years old will be assessed for Fraser competence and all clients under 18 years old should have a risk assessment for sexual exploitation 		
	9. If Weight > 70kg or BMI >26kg/m ²		
Consent	 All clients should be informed about the most common possible side effects and contraindications before verbal consent is obtained. 		
	 Manufacturers' information leaflets must be available in an appropriate language and given with all oral medication. 		
	 Young people attending for contraception deemed to be Fraser competent can give their own consent 		

Patients excluded from these PGDs and actions to be taken	 See individual product PGD No consent or consent declined Previous severe local or generalised reaction to the specific or class of Medicine Treatment contraindicated in patient or patient excluded from PGD The practitioner will arrange for the client to be referred to an appropriate clini or GP. If no doctor is available in the clinic, the client will be referred to the net appropriate sexual health clinic for Contraceptive Services, their GP, primary care out of hours service or hospital emergency department. 	
Action if client declines care under PGD	 Counsel client fully as to the risks and benefits of the treatment. Offer referral to a doctor Document advice given 	

Clinical Standards

 Each client should be given advice and information such that they can exercise their right to informed choice when receiving this treatment Clients will be seen by an accredited pharmacist with appropriate qualifications All clients should be given verbal and written information on use, associated risk factors, side effects and potentially significant symptoms of their medication All clients must have details on how to contact level 3 sexual health services, relevant opening times and the alternative sources of contraception when the clinics are not open Clients must be assured of complete confidentiality Clients will be supplied with their medication by the pharmacy, who will make appropriate records Clients will be advised when/if they should be seen again for follow up or further supplies 		
The pharmacist must be able to identify and contact a clinician at a level 3 sexual health service who can take responsibility for the patient's care.		
A suitable private consultation room that complies with all current NHS Pharmaceutical Services regulations.		
 A record of all patients supplied and/or administered with medicines will be available for audit purposes Ensure the recommended storage conditions have been observed. Complete the standard contraceptive services record for each client. Document the following inside the patient notes according to local procedures: Name of Drug Quantity and date supplied Dose Document any refusal and reasons why For medication supplied: Ensure all medication supplied is labelled with the client's name, date of supply, suitable dose and pharmacy address. The words 'Keep out of the reach 		

	 of children' and any other recommended advisory or warning labels. Ensure a manufacturers' product information leaflet is given to the client with each supply of contraceptive Severe local and general reactions: record in clients' PMR computer record where available. Consider reporting to Medicines and Healthcare products Regulatory Agency (MHRA), especially medicines under intense surveillance (▼), on a Yellow card at the back of current BNF, telephone 0800 731 6789, or online at: www.yellowcard.gov.uk Consider informing clients GP with their consent.
Additional Information	 The following information sources should be readily available on site: Current British National Formulary (see website link below) Summary of Product Characteristics and Patient Information Leaflets for the relevant products. (see website link below) A current, signed copy of this PGD
References	Faculty of Sexual and Reproductive Healthcare (FSRH) <u>http://www.fsrh.org/</u> FSRH Guideline Emergency Contraception March 2017 <u>http://www.fsrh.org/standards-and-guidance/current-clinical-guidance/emergency-contraception/</u> Drug interactions with hormonal contraception January 2017 <u>http://www.fsrh.org/documents/ceu-clinical-guidance-drug-interactions-with-hormonal/</u> British National Formulary No 73 March 2017 <u>http://www.bnf.org</u> Drug interactions with hormonal contraception (Appendix 1) and missed pill
	 guidance (section 7.3) Electronic Medicines Compendium <u>http://www.medicines.org.uk/</u> (for Summary of Product Characteristics of specific products). Centre for Pharmacy Postgraduate Education (CPPE) <u>http://www.cppe.ac.uk/</u>. Pharmaceutical company medicinal information teams – see BNF Index of Proprietary Manufacturers for up to date contacts details.

PGD authorisation

These directions have been produced for Hampshire County Council

Role	Name	Signature	Date
Reviewed for use in Hampshire County Council	Neil Hardy Associate Director, Medicines Optimisation NHS West Hampshire CCG	~->	12.9.2017
Reviewer	Dr Sally Kidsley Clinical Director Solent Sexual Health Service	Sikosley.	18.9.2017

Ratified by

Title	Name	Signature	Date
Director of Public Health Hampshire County Council	Dr Sallie Bacon	Joune Bac-	19.09.2017

This document supersedes the previous PGDs for this staff group produced

Authorisation of individuals to use this suite of PGDs

Pharmacy Name where PGD to be used			
Locatio	Location Of Pharmacy		
Name of Accredited Pharmacist	Signature	Date	Tick PGD accredited for: PGD 03CP Levonorgestrel