

In this Bulletin:

➤ Latest CQC Mythbusters:

- Carpets in GP practices
- Patient Group Directions (PGDs)/Patient Specific Directions (PSDs)
- Looking after homeless patients in General Practice
- Care of people with a learning disability in GP practices
- Speaking up and listening well

The CQC has updated several of its [GP mythbusters](#).

Nigel's surgery 5: Carpets in GP Practices has been retired

- This mythbuster is no longer published. See Gov.uk for [guidance](#) on infection control in the built environment. *Page 21 3.115*

Nigel's surgery 19: [Patient Group Directions \(PGDs\) / Patient Specific Directions \(PSDs\)](#)

- There have been no changes to the legislation relating to PGDs during the COVID-19 pandemic
- Practices will need to consider local governance arrangements and perform local risk assessments if there is any divergence from their usual PGD related processes during a pandemic to ensure that PGD use remains within the legislation and that patient safety is protected
- COVID-19 guidance has been provided by the Specialist Pharmacy Service for use of [PGDs in pandemics](#) (for example COVID-19)
- Staff groups who can supply and/or administer medicines under a PGD include registered nurses, paramedics, and pharmacists
- Staff groups who cannot work under a PGD are healthcare assistants, nurse associates and physician associates
- Where using patient group directions across primary care networks, each practice should adopt the PGD and authorise their staff to use it. Each practice is responsible for making sure their staff are trained, competent and complete necessary records. There must be an agreement in place across the network to set out responsibilities and governance arrangements. Staff can then provide care under the PGD to patients of other practices covered by the agreement
- A PSD must include the:
 - Name(s) of patient(s) and/or other individual patient identifiers including age of a child
 - Name, form, and strength of medicine
 - Route of administration
 - Dose
 - Frequency
 - Date of treatment/number of doses/frequency/date treatment ends as applicable
 - Signature of prescriber

- The following are examples that do not meet the requirements of a PSD and are not a legal authority for the administration or supply of medicines:
 - A Patient Group Direction (PGD) template renamed a "PSD" and used to instruct healthcare staff
 - A generic instruction to be applied to any patient who may be seen by a healthcare professional or who has an appointment on any particular day. For example, an instruction to administer a flu vaccine to any patient who fits the criteria attending clinics on a specific day
 - A verbal instruction

Nigel's surgery 29: [Looking after homeless patients in General Practice](#)

- This mythbuster has been updated with the latest research and guidance which now includes details from the [homeless pathway plan 2020](#)
- When caring for patients who are homeless or are at risk of becoming homeless, examples of good practice include:
 - Introducing double appointments
 - Keeping prescriptions as short a duration as possible
 - Ensuring clear boundaries for consultations are in place
 - Giving fast access to a named GP
 - Waiving any charges for housing letters or medical reports

Nigel's surgery 53: [Care of people with a learning disability in GP practices](#)

- This mythbuster has been updated to include details of [legal guidance](#) from NHS England for mental health, learning disability and autism, and specialised commissioning services supporting people of all ages during the COVID-19 pandemic
- As part of the Enhanced Service, anyone with a learning disability over the age of 14 should:
 - Be offered a specific learning disability related annual health check (AHC)
 - Have a health action plan to address health issues identified in this check
 - Have a medicines review to stop over medication of people with a learning disability, autism, or both (STOMP)
- GP practices must make reasonable adjustments under equality legislation. This is to make sure people with a learning disability can use their service on the same basis as others. See Nigel's surgery 67: [Reasonable adjustments for disabled people](#)

Nigel's surgery 87: [Speaking up and listening well](#)

- All staff should feel comfortable to raise concerns and be confident they will be acted on appropriately. After consultation with staff working in primary care, which ended in May 2016, the [Freedom to Speak up in Primary Care](#) guidance was produced. The whistleblowing in primary care guidance made recommendations on the need for culture change and improved handling of concerns, including in primary care. This mythbuster includes an example of a situation when speaking up and listening well leads to improvements in patient safety