Promoting appropriate antibiotic prescribing in Primary Care

Elizabeth Beech
Healthcare Acquired Infection and Antimicrobial Resistance Project Lead NHS England
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Promoting appropriate antibiotic prescribing in primary care

- National policy, guidance, and evidence base
- Commissioning for quality
- Antimicrobial stewardship across and within organisations
- Collaboration with AHSNs, CLAHRCs, Royal colleges, PHE
- Guidelines, education and audit
- Improving antimicrobial use within care pathways
- Drug data, Bug data and benchmarking
- Champions and clinical networks
- Sharing success and innovation
- Collaboration
National policy, guidance, and evidence base

• **UK 5 Year Antimicrobial Resistance Strategy 2013 to 2018**
• NICE Antimicrobial Stewardship: guideline consultation
• NICE Key therapeutic Topics KTT9: Antibiotic prescribing
• The Health and Social Care Act 2008: Code of Practice on the prevention and control of infections and related guidance

• Antimicrobial stewardship: Start smart - then focus
• Antimicrobial prescribing and stewardship competencies
• European Antibiotic Awareness Day: resources toolkit for healthcare professionals in England

• English surveillance programme antimicrobial utilisation and resistance (ESPAUR) report
• PHE Second Generation Surveillance System – resistance pattern data
Commissioning for quality

Quality Premium
- National and local
- Use this year's Quality Premium funding to deliver quality improvements

CQUINs
- National and local – 2015/16 Sepsis CQUIN; include sepsis pathway in primary care antimicrobial prescribing guidelines?
- Use to improve antibiotic use in other providers i.e. OOH services

Provider contracts
- NICE QS61 Infection prevention and control: support for commissioning report
- Antimicrobial stewardship: Start smart - then focus
- Last year's CQUINs become routine

Prescribing incentive schemes
- Delayed (Back Up) antibiotic prescribing strategies
- Incentivise to educate, audit move to prescribing targets
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Guidelines, education and audit
Improving antimicrobial use within care pathways

• Managing common infections: guidance for primary care PHE November 2014
• Local guidelines – maximise use across health communities
• Local expertise – primary care facing microbiologist expertise

• Education, education and education – about AMR and AMS, IPC, clinical guidelines, evidence based strategies, for commissioners, health care professionals, carers, families, patients and public
• TARGET, CPPE,
• Prescribing competencies (ARHAI)

• Black holes – OOH and Urgent Care, PGD driven services, Dental
• Audit antibacterial prescribing and use across pathways, both clinical (in growing toenails to cellulitis) and organisational (OPAT services) as well as in GP practices
Drug data, Bug data and benchmarking

- English surveillance programme antimicrobial utilisation and resistance (ESPAUR) report
- PHE Second Generation Surveillance System – resistance pattern data
- PHE portal bringing Drug and Bug data together for primary, community and secondary care

- NHS BSA Information Services Portal now has a new comparator to support the QP.
- PrescQIPP Antimicrobial Stewardship Hub – free access
- How do CCGS want to monitor QP performance?

- PHE Tailored Antimicrobial Programme (TAP) for OOH/UC services are recruiting interested CCGs/CSUs now
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Collaboration

Within CCGs and CSUs
• Build antimicrobial stewardship into commissioning programmes and contracting

Within health economies
• Infection Prevention & Control collaborative
• Provider antimicrobial stewardship expertise moving out into the community
• Guideline development groups – include Antimicrobial Stewardship
• Public Health in local authorities

Across health economies and beyond
• Sub regional groups
• Patient Safety Collaborative in AHSNs
• Clinical networks, research networks, professional networks

National
• DH, Defra, NHS and PHE
• Professional bodies and organisations, Royal Colleges, industry, voluntary sector, and patient groups

www.england.nhs.uk
Antibacterial prescribing by all GP practices in NHS Bath and North East Somerset CCG, NHS Gloucestershire CCG, NHS Swindon CCG and NHS Wiltshire CCG Q3 2014-2015

Number of antibacterial prescription items per STAR-PU (x 1000)

Percentage of all antibacterial prescription items prescribed as cephalosporins, quinolones & co-amoxiclav
What is NHS Bath and North East Somerset CCG going to do?

Low volume – delivered a 14% reduction in items in 2014-15, but inappropriate choice of antibiotics, so….

- Include Quality Premium activities within BANES IPCC, NHSE BGSW CDI collaborative and the new BGSW AMS network set up to support Quality Premium activity across 4 CCGs, and multiple organisations and professional groups
- Establish an NHS/Public Health AMS group under the Health and Wellbeing Board, led by the CCG Clinical Chair, to align local activity with National AMR strategy
- Bid for existing Quality Premium funds to resource CCG AMS activity
- CQUIN the OOH/UC provider to review antibacterial prescribing and issues
- Contracts - include SSTF in provider contracts, and incorporate this years CQUIN quality gains into the contract as routine quality reporting
- Guidelines – updating and will distribute (print and on web site) more widely to include community pharmacies and care homes, and include more pathway detail
- Educate through all clinical networks and in GP practices - TARGET and audit programme
- Use CDI events as a learning opportunity delivered within practices
- Audit E.coli bacteraemia patients pre admission care to identify avoidable harm
What is NHS Bath and North East Somerset CCG going to do?

- **Pathways**
  - Mapping cellulitis through collaborating with an AHSN GP clinical fellow, as this is driving co-amoxiclav prescribing.
  - Promote the podiatry service for ingrowing toenails – self referral, avoid GP antibiotics, reduce potential harm

- **Care Homes** – ongoing quality improvement programme to improve diagnosis and management of UTI using care home pharmacists, and SIGN guidelines, to train staff how to diagnose UTIs appropriately, avoid HCAI

- **Primary Care** rolling monthly audit programme, by antibiotic and by infection, wrapped within incentive scheme, with rapid educational feedback
- **Champions in GP practices** – started small, need to grow
- **Implement a whole community wide Back Up antibiotic prescription approach**, including OOH and Urgent Care, and promoting better self-care

- **Include community pharmacy** – PHE adaption of TARGET PIL
- **Plan EAAD 2016 earlier**, decide who to target, and use Public Health to lead
Quality Premium Aim: To reduce over use and inappropriate use of antibiotics in order to reduce the spread of antimicrobial resistance and keep people safer.