

Kernow Clinical Commissioning Group

Sharing success – Antimicrobial Resistance work in Cornwall

Kathryn Wisner – Pharmaceutical Advisor





Three Main Areas

- Formation of Cornwall Antimicrobial Resistance Group
- Inclusion of TARGET toolkit in GP Prescribing Incentive Scheme
- Community pharmacy involvement





Formation of Cornwall Antimicrobial Resistance Group (CARG)

Kernow Clinical Commissioning Group



"Success will require a wide range of public and private sector bodies to take co-ordinated action to deliver an integrated programme, which will safeguard human and animal health."

"...providing clinical leadership and improved collaborative working ..."



Starting Membership of CARG

- NHS England Medical Director DCIOS (Chair)
- Royal Cornwall Hospital (acute NHS trust) —
 Chief Pharmacist (Deputy Chair), Antimicrobial Pharmacist,
 Microbiologists, DIPC Nurse Consultant
- NHS Kernow CCG GP Clinical Lead, Pharmaceutical Advisor, DIPC Nurse Consultant
- Peninsula Community Health (includes Community Hospitals & Nurses) – Medical Lead
- Public Health England Consultant
- Academic European Centre for Environment and Human Health
- Community Pharmacist LPC Chief Officer
- Veterinary sector small animal veterinary surgeon



Purpose of CARG

- Responsible for ensuring implementation of UK 5yr AMR strategy
- Specifically supporting delivery of 3 main strategic aims
- Reports to Health and Wellbeing Board via Health Protection Committee
- Also reports into various committees within each stakeholder organisation, e.g. Medicines
 Optimisation Programme Board



First year of CARG

- Bi-monthly meetings since January 2014
- First meeting gap analysis session
- Formed a workplan for the group with 3 proposed workstreams





CARG workstreams

- Education and Engagement with the Public
- Education and Engagement with Healthcare Workers & Vets
- Comprehensive Stewardship Programme for All Sectors





What have we looked at?

- Review of primary & secondary care antibiotic prescribing every 6 months
- Data on veterinary antibiotic usage in UK
- Environmental drivers for AMR
- Coordinated activities for EAAD 2014





Environmental issues



- Studies done on water downstream from waste water treatment plants
- On-going study currently being done on surfers to look at effect on E coli colonisation



What has been achieved?

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Tangible:

- Countywide forum for implementation of AMR strategy
- Workplan
- TARGET toolkit implementation
- Coordinated EAAD activities with secured funding

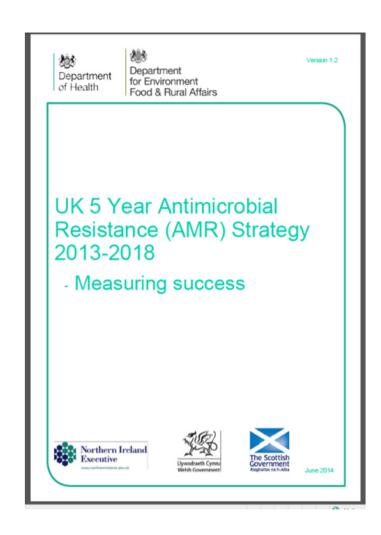
Intangible:

- Building collaborative relationships
- Increased awareness of challenges faced by each sector
- Organisational assurance that AMR strategy is being implemented



CARG moving forward

- New Chair Acting
 Director of Public Health
 (Cornwall Council)
- Monitoring of published outcome measures
- Interpretation & action on local resistance data





GP Prescribing Incentive Scheme Kernow Clinical Commissioning Group

- 'Implementing the TARGET toolkit' included as one of four audits/reviews for 2014/5
- 2 parts completion of adapted TARGET 'Primary care self-assessment checklist'
- Checklist initially completed by Oct 14 then repeated again before Mar 15 to enable reflection on strategies implemented, e.g. delayed prescribing, patient leaflets
- Monitoring of practice quarterly antibiotic data including data for individual prescribers (total ABs, cephs, quins, co-amox)
- Overall evaluation forms to be returned by end of Mar 15



Community pharmacy

- Meds Opt team recently ran two evening events for pharmacists in Cornwall
- AMR was 1 of 4 table top discussions
- 'Antibiotics Key messages & links'
- Draft PHE TARGET patient leaflet for community pharmacists
- Very positive & want to be involved!

Summary

- CARG successful in bringing key stakeholders together & raising the profile of AMR within local organisations
- Inclusion of TARGET toolkit in GP prescribing incentive scheme has kept AMR in focus throughout the year
- Community pharmacists are not aware of the UK AMR strategy but are keen to become involved with patient education



Results ...

