

EV0020

ePoster Viewing

Antimicrobials: antibiotic usage

A national approach to improving antimicrobial stewardship: evaluating the implementation of national antimicrobial stewardship guidance in primary and secondary care in England

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Introduction:

Antimicrobial stewardship (AMS) programmes are established approaches to improve antimicrobial prescribing and control antimicrobial resistance.

In England there are national AMS toolkits to improve the use of antimicrobials in both primary and secondary care. These are known as TARGET (Treat Antibiotics Responsibly, Guidance, Education, Tools) antibiotics toolkit in primary care and Start Smart then Focus; (SSTF) in secondary care.

TARGET focuses on providing guidance to help clinicians decide when and what antibiotics to prescribe and tools such as patient leaflets to share during consultations; especially when antibiotics are not indicated. SSTF recommends that for hospital initiated antibiotic prescriptions, clinicians should initiate prompt, effective antibiotic treatment in patients with life-threatening infections, document the route, indication, dose, duration (RIDD) and perform a post-prescription review at 48 hours.

Aim

To assess the implementation of national antimicrobial stewardship guidance (TARGET and SSTF) in primary and secondary care settings in England.

Methods

In 2014 two web-based surveys to assess AMS activities recommended by the SSTF and TARGET guidance were distributed nationally (in England) via email to:

- 146 acute hospitals, following pilot of 18 hospitals in a single region (secondary care)
- 10 clinical commissioning groups for pilot (primary care)

Responses were analysed using STATA (version 13) and Microsoft Excel. This was a voluntary audit activity completed by healthcare professionals; therefore ethics approval was not required.

Results and Discussion

Secondary Care:

Ninety-nine of the 146 hospitals completed the survey (response rate of 67.8%); with representation from all NHS England Area Teams. 50% of responding hospitals had 500-999 beds.

Of the responding hospitals:

- 94% had a dedicated antimicrobial stewardship (AMS) committee;
- 88% responded that the AMS committee had terms of reference,
- 97% minutes and actions list and
- 85% had the recommended governance structure recommended for AMS

A large majority (87.9%) of hospitals reported reviewing the SSTF guidance formally or informally but only 48% had implemented an action plan to embed the guidance within their organisation; 79% collated data for one or more of the suggested SSTF audits.

Primary Care

A response rate of less than 50% from primary care did not allow data analysis and consequently the survey methodology for primary care has been amended and survey recirculated.

Conclusion

Survey results demonstrated that national AMS guidance in England has focused attention on initiatives to improve AMS activity within secondary care. The poor response rate from primary care does not allow us to make conclusions for primary care initiatives at this stage; further research is under-way in this area.

Current national AMS guidance is designed for use within different health care organisational systems and action is required to develop a whole healthcare approach to AMS including both provider (secondary, community and primary care providers) and commissioning organisations

