



A care system support organisation

Medicines Optimisation Update

Antibiotic items per STAR PU

What this includes:

Number of prescriptions for antibiotics, per STAR PU (Specific Therapeutic group Age-sex Related Prescribing Units) weighted patient.

Identifying the problem:

- ePACT2, PrescQIPP & OpenPrescribing dashboards

- NECS & NCIS Quarterly Reports
- Antimicrobial audit
- EMIS Population manager searches
- [RCGP Target audit toolkit](#)

Suggested actions – In the consultation:

- **Assess the patient's clinical condition, ideally with the patient present. Use the telephone only in exceptional cases.**
- **Only prescribe an antibiotic where there are clear signs of a bacterial infection and there is likely to be a clear clinical benefit.**
- **Ask about a patient's expectation for the consultation.** Many patients expect a prescription as part of the consultation; some are just seeking re-assurance or advice.
- **Refer to and follow prescribing NICE & PHE guidelines unless clinically justified.** [NICE-PHE summary-antimicrobial-prescribing-guidance.pdf](#) [NICE/ PHE Managing-common-infections-guidance-for-primary-care](#) [PHE Diagnosis of UTI in primary care](#) & [RCGP Target/Antibiotic-and-diagnostic-quick-reference-tools](#)
- **Share the guidelines with patients and counsel them about the potential for harm from antibiotics if not required:**
 - common side effects include thrush, rashes, vomiting and diarrhoea. <https://www.nhs.uk/conditions/antibiotics/side-effects/>
 - Antibiotics prescribed in primary care may impact on bacterial resistance in a patient for up to 12 months.
- **Use Delayed or Back up prescriptions**, evidence shows they are effective in reducing antibiotic use and future consultations for respiratory tract infections. Providing self-care advice linked to a delayed script may be helpful when patients want rapid improvement; learning how to self-care can reduce future attendances in practice.
- **Ask the patient if they would like a leaflet. Have leaflets ready for patients: print paper copies, add to practice intranet or EMIS to print, personalise and discuss with patients.**HTML
- How to spot **SEPSIS** in adults : <https://sepsistrust.org/>
Slurred speech or confusion **E**xtrême shivering or muscle pain **P**assing no urine (in a day) **S**evere breathlessness **I**t feels like you're going to die **S**kin mottled or discoloured
- **Check for hypersensitivity and allergy status** to determine if genuine and the severity of reaction. Document clearly if not documented already. True Penicillin allergy is uncommon. Approximately 1 in 15 people report allergy to antibiotics, especially beta-lactams. However, the true incidence of penicillin allergy is 1 in 2,500 – 5,000: <https://www.nhs.uk/conditions/antibiotics> <https://www.ncbi.nlm.nih.gov/books/NBK459320/>
- **Keep the course length within guidelines** to help reduce risk of [Clostridium difficile](#), MRSA, resistant [UTIs](#) and antibiotic resistant **and GNBSI's** . Do not extend a standard course of an unsuccessful treatment without good reason – consider other options. Dose & Duration may need modification for age, weight, renal function, or if immunocompromised or in In severe or recurrent cases.
- **Use topical antibiotics only for localised infections within guidelines.** Take extra care with antibiotics also available for systemic use (e.g. fusidic acid) - as topical treatment can select for resistance and compromise effectiveness.
- **Counsel patients** about the importance of good hygiene to control and prevent spread of infections.
- **Always safety net** with advice on when to re-consult if symptoms do not improve or become worsen.
- **Where 'best guess' or empirical therapy has failed (including any determined through culture and sensitivity) or special circumstances exist, microbiologist advice is available:** contact North Cumbria University Hospital and ask switchboard for the duty microbiologist.



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Suggested Actions -as a Practice

- **TEAMWORK** Make sure all practice staff are involved in your antibiotic prescribing work and understand their part. Include: locums, GP trainees nurse prescribers, practice nurses and non-clinical staff.
- **ENSURE EVERYONE HAS EASY ACCESS** to the [NICE PHE antimicrobial summary guidance](#)
- **Print the [NICE antimicrobial visual summaries](#)** embedded in [NICE PHE antimicrobial summary guidance](#) which focus on bacterial infections and appropriate antibiotic use.
- **COMPLETE THE [Target Self assessment checklist](#)** and incorporate into an [AMS Action Plan](#)
- **DO REGULAR QUICK SNAPSHOT 'COMPUTER GENERATED' ANTIBIOTIC PRESCRIBING AUDIT** so you can compare individual clinician prescribing.
- **Be an "ANTIBIOTIC BUDDY" and compare your antibiotic prescribing with the rest of the team?** Audit your own or someone else's prescribing. Does it follow guidelines?
- **MEET AS A PRACTICE to share the audit results. Ensure ALL prescribers are aware of these results.** Use Protected Learning Time (PLT) and Continuing Professional Development (CPD) for training on antimicrobial resistance. Use the [Target e-learning resources](#) and other resources e.g. presentations, audits, webinars, e-learning, case studies.
- **PRACTISE CASE STUDIES AS A TEAM.** Use case studies to review indications for use of broad spectrum antibiotics. Encourage adherence to guideline recommendations. Consider whether a discussion is needed with the microbiologist.
- **FIND AN ANTIBIOTIC CHAMPION** to take responsibility for antibiotic stewardship across the practice, and support improvement within the practice when needed
- **CREATE AN ANTIMICROBIAL STEWARDSHIP ACTION PLAN** using the results of the Target checklist and your audits. Review and Update at least annually. This action plan will help with the **CQC Antibiotic prescribing CQC safety indicators**.
- **USE DATA comparing practices in your PCN/locality to FOCUS attention** on any apparent over-use or unusual patterns.
- **REVIEW ALL LONG-TERM ANTIBIOTIC PRESCRIBING** for UTI, COPD, ACNE, CELLULITIS. Prioritise patients who have not had a recent review of their condition. Take the opportunity to offer lifestyle and preventative treatments.. Ensure intended duration and stop dates are recorded and consistent with guidelines and/or specialist recommendations.
- **RESCUE PACKS for acute exacerbations of COPD** are only recommended once patients have **COMPLETED PULMONARY REHABILITATION**. More than 3 rescue packs in 12 months should prompt a respiratory review. cks.nice.org.uk/chronic-obstructive-pulmonary-disease
- **WORK TOWARDS A CONSISTENT APPROACH.** Agree practice criteria for prescribing antibiotics and share strategies/tactics for dealing with difficult consultations. Inconsistency is likely to confuse patients & undermine messages about appropriate use of antibiotics. .
- **ENCOURAGE EVERYONE TO BECOME AN ANTIBIOTIC GUARDIAN** <http://antibioticguardian.com/> and **PLAN A WINTER ANTIBIOTIC CAMPAIGN**

Resources

- Summary of antimicrobial prescribing guidance - managing common infections
<https://www.nice.org.uk/about/what-we-do/our-programmes/nice-guidance/antimicrobial-prescribing-guidelines>
- NICE Diabetic foot infection guideline October 2019:
<https://www.nice.org.uk/guidance/NG19>
- RCGP Target Antibiotics Toolkit :
<https://www.rcgp.org.uk/TARGETantibiotics>
- Sepsis Trust Toolkit: <https://sepsistrust.org/education/>
- Target Webinars: <http://target-webinars.com/>
- RCGP e-learning: <http://www.rcgp.org.uk/clinical-and-research/toolkits/target-antibiotic-toolkit.aspx>

References

1. NICE Clinical Guidelines Respiratory tract infections (self-limiting): prescribing antibiotics NICE guidelines [CG69] Published date: July 2008
<https://www.nice.org.uk/Guidance/cg69>
3. Antimicrobial stewardship: systems and Processes for effective antimicrobial medicine use published Aug 2015
<https://www.nice.org.uk/guidance/ng15>
4. ESPAUR report20UK 20-year vision for antimicrobial resistance
<https://www.gov.uk/government/publications/uk-20-year-vision-for-antimicrobial-resistance>
5. UK 5-year action plan for antimicrobial resistance 2019 to 2024 <https://www.gov.uk/government/publications/uk-5-year-action-plan-for-antimicrobial-resistance-2019-to-2024>
6. Drug allergy: diagnosis and management
<https://www.nice.org.uk/guidance/cg183>
6. CKS NICE clinical summaries <https://cks.nice.org.uk/>