

Surveillance and Quality of Antibiotic Prescribing

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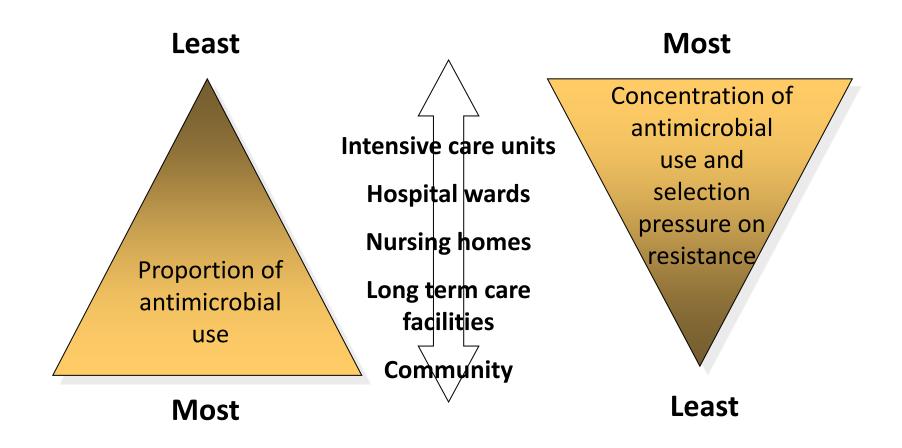
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Cambridge University Hospitals NHS Foundation Trust Cambridge, UK

November 2019

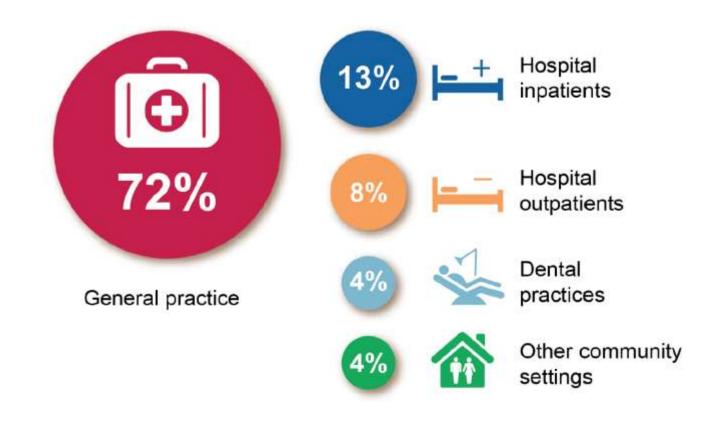


The pyramids of antibiotic use and the selection of resistance





Where antibiotics were prescribed, England 2018





Reasons for inappropriate prescribing

Community

Starting antibiotics in those who don't need them

Hospital

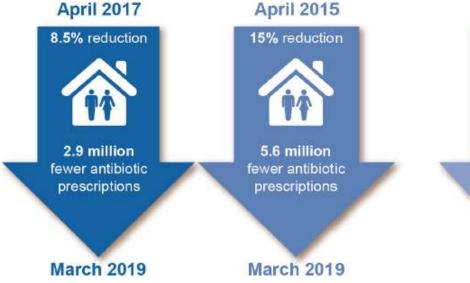
Continuing antibiotics for too long



Quality premium in community practice

Reducing inappropriate antibiotic prescribing in primary care 2015-2019

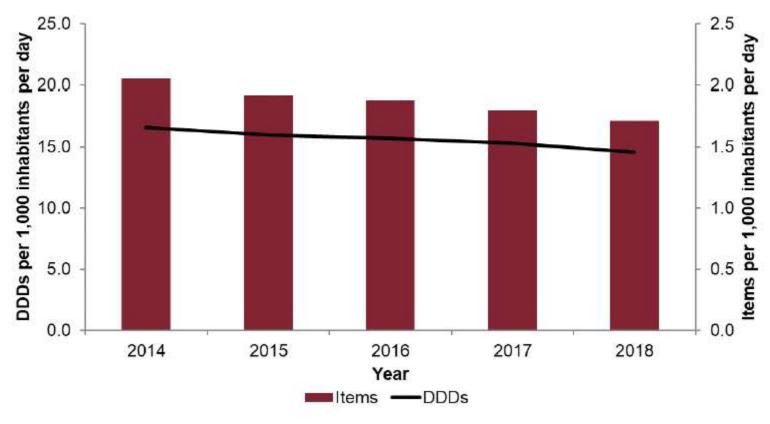
Reducing broad spectrum antibiotic prescribing in primary care 2015-2019







Antibiotic consumption in primary care



Consumption expressed as DDDs and Items per 1,000 inhabitants per day



Acute Hospital Prescribing

CQUIN (2018/19)

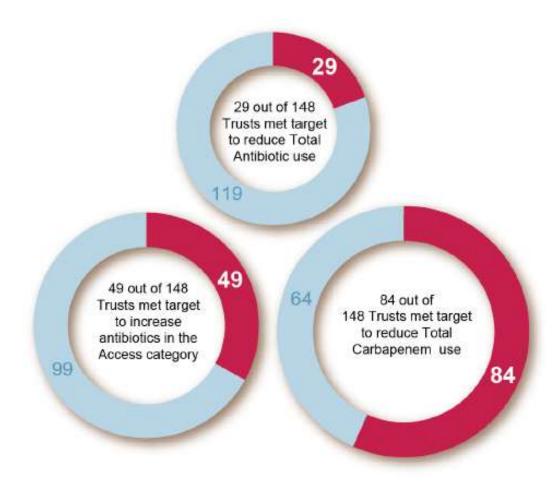
- Overall antimicrobial consumption reduced by 1-2% from 2016 baseline.
- Carbapenem consumption reduced by 1-2% reduction from 2016 baseline
- Use of WHO Access Group increased by 3%

CQUIN (2019/20)

- Improve management of lower UTIs in older patients
- Antibiotic prophylaxis in elective colorectal surgery

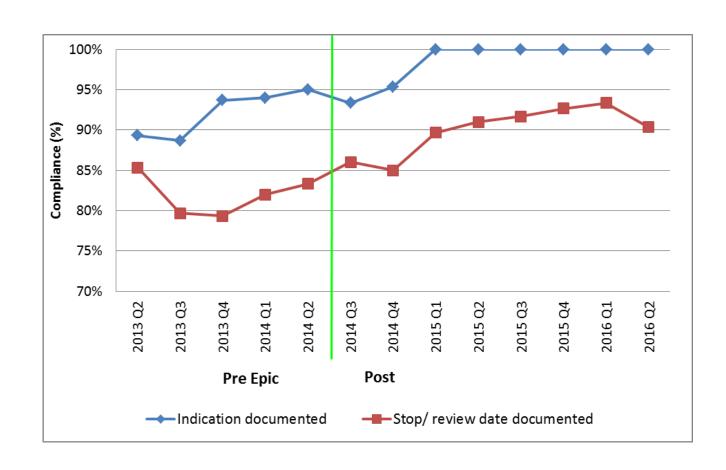


CQUIN performance in secondary care

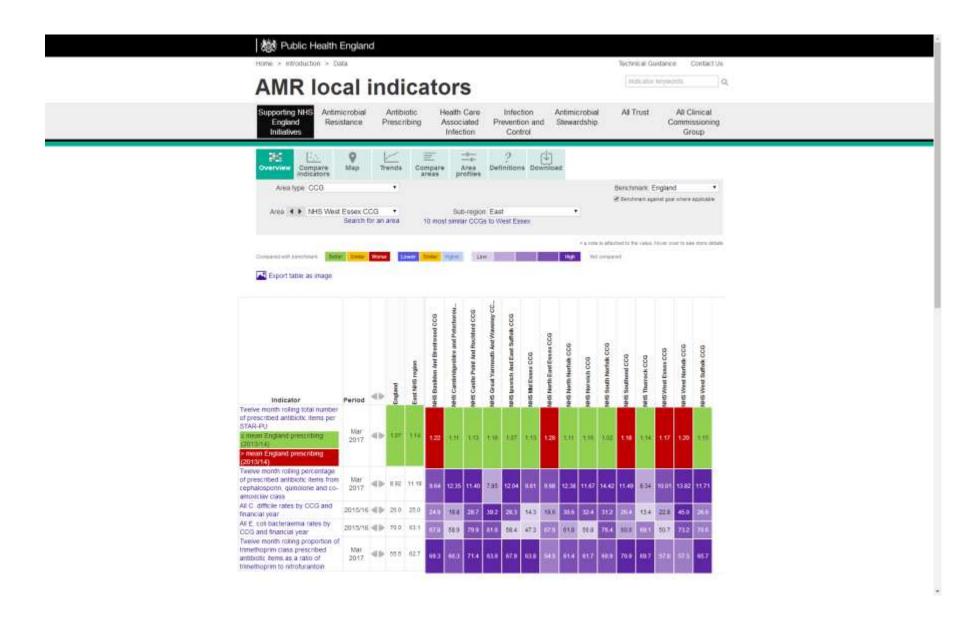




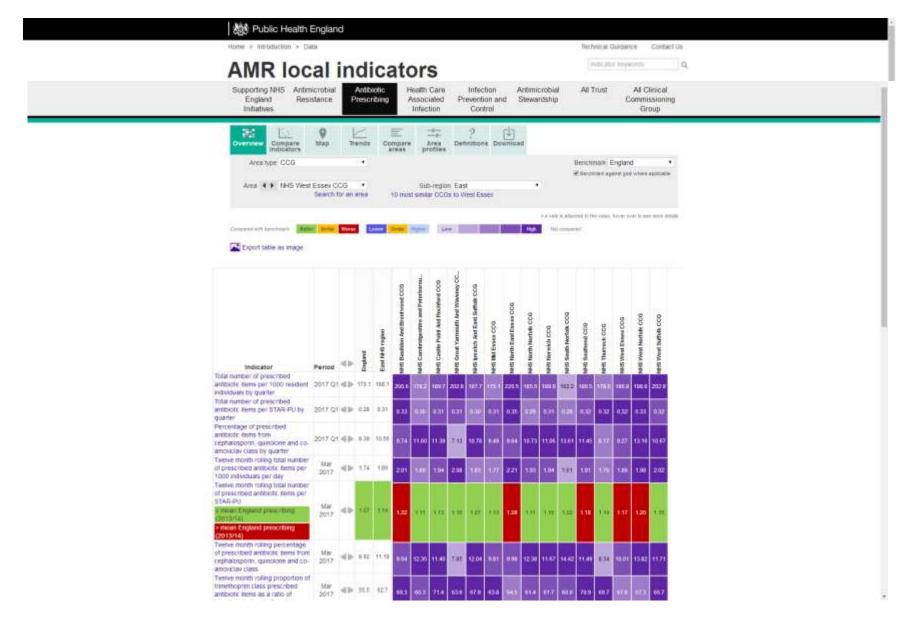
Acute Hospital Prescribing Impact of the implementation of an electronic patient record



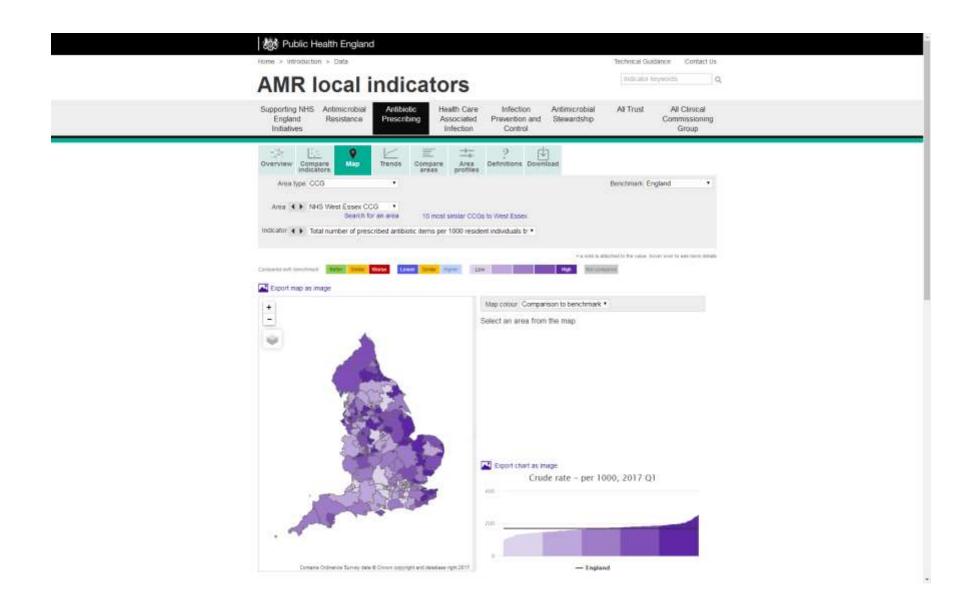






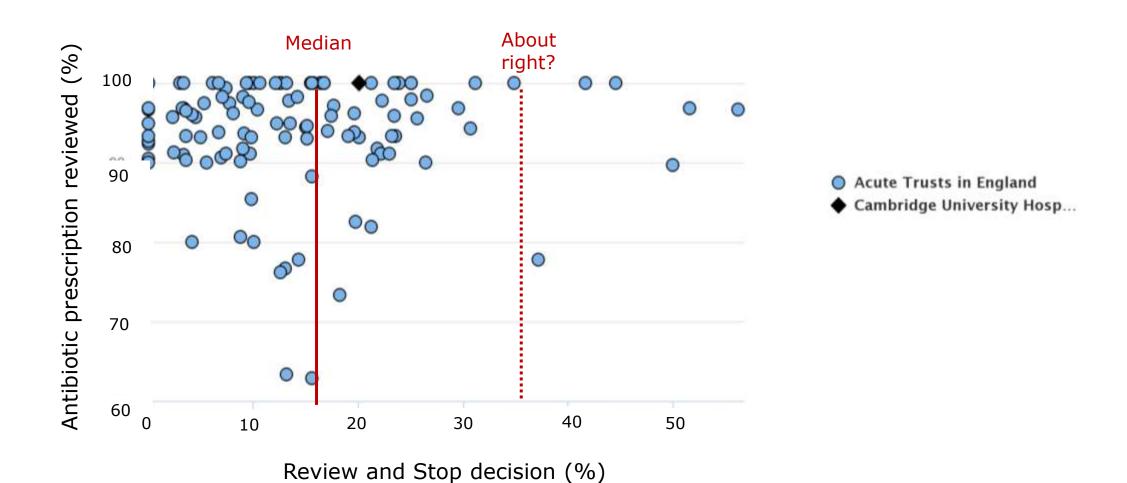








Review of antibiotic prescriptions at 48-72h and documented 'stop' decision, NHS Trusts in England, Q4 2017/18



The current review and revise mindset

Continue unless I can justify stopping



The ARK review and revise mindset

Stop unless I can justify continuing

