

RMOC (London) Antimicrobial Resistance/ Stewardship Subgroup

Strategy 2019 - 2021

Background

The Regional Medicines Optimisation Committee (London) Antimicrobial Resistance / Stewardship Subgroup has been established to create a focal point for knowledge and co-ordination of the antimicrobial resistance agenda for London.

The Subgroup reports to and provides advice to the RMOC (London), and liaises closely with RMOC (Midlands and East), which is the lead RMOC for Antimicrobial Stewardship. When the London subgroup identifies topics that are more suitable for discussion at a national level, it engages with the RMOC Medicines Optimisation Prioritisation Process. The Terms of Reference for the Subgroup can be found on the [SPS website](#).

This document is intended to set the strategic direction for the RMOC (London) Antimicrobial Resistance / Stewardship Subgroup until March 2021.

The RMOC (London) AMR / AMS Subgroup will ensure all activities are consistent with the [DH 5 year national action plan](#) for AMR.

- Reduce UK antimicrobial use in humans by 15% by 2024 including
 - 25% reduction in antibiotic use in the community from the 2013 baseline
 - 10% reduction in the use of 'reserve' and 'watch' antibiotics in hospitals from the 2017 baseline
- Reduce drug-resistant infections by 10%
- Halve healthcare associated Gram-negative bloodstream infections
- Be able to report on the percentage of prescriptions supported by a diagnostic test or decision support tool by 2024

Goals and aims of the subgroup

The Subgroup goals are consistent with those of the national AMR goals set the RMOC system by RMOC (Midlands & East). The overarching aim is to optimise the use of antimicrobials, and it seeks to do this by:

- Reduce inappropriate prescribing and unwarranted variation
- Develop RMOC approach and use of appropriate metrics to support antimicrobial stewardship
- Improve knowledge and promote awareness of appropriate antimicrobial use

The RMOC (London) AMR / AMS Subgroup will:

- Work closely with RMOC (Midlands and East) to ensure consistent AMS activities across the RMOC system, and ensure alignment with the UK 20-year vision for antimicrobial resistance and the 5-year national action plan
- Propose and co-ordinate a work plan to be delivered through the London region, focussing on supporting aspects of the current system in ways that add value
- Support the national RMOC AMS work programme as directed by RMOC (Midlands & East)
- Identify examples of current best practice and, where appropriate, adapt these for regional use. Seek to disseminate practical tools and support to reduce duplication and provide a more consistent approach to implementation of the national 5-year action plan
- Communicate the agreed work plan via the SPS AMR Network website
- Seek collaboration with relevant stakeholders across London to ensure appropriate resources are allocated to each element of the work plan. This will include roles and responsibilities being clearly defined e.g. the scope of work to be undertaken by the RMOC, subgroup members and all stakeholders involved in delivering the programme
- Support the implementation of AMR recommendations made by the RMOC system
- Work collaboratively with NHS organisations through STP/ICS footprints
- Have a clear regional engagement process and communication strategy outlined as part of the work programme
- Provide a written update to each RMOC (London) meeting

Workplan for RMOc (London) AMR / AMS Subgroup						
Work area	Rationale	Process	Output	Additional resource required (Any risks highlighted)	Date required	Lead (details)
UTI prevention, diagnosis and treatment in the elderly – sharing best practice via networks	<p>Endorsed by RMOc (London) in July 2018 as a priority for the region.</p> <p>Supports the NHS Long Term Plan to improve NHS support to community settings – Embed Clinical Elements 1-4 of the Enhanced Health in Care Homes Framework</p> <p>Supports London ambitions to reduce LAS calls and conveyances/Emergency Admissions</p>	<p>Care Homes Create a short life working group in partnership with Healthy London Partnership Enhanced Health in Care Homes Programme.</p> <p>Scoping of existing good practice to support Nutrition, Hydration and Infection Control in care homes.</p>	<p>Scoping of existing good practice to support Nutrition, Hydration and Infection Control in care homes.</p> <p>Resources linked through the network page on SPS website:</p> <p>Develop resource page on CarePulse for care home teams to access guidance</p>	<p>Scoping to be supported by EHCH Programme (currently underway). Additional resource to support review and development of recommendations aligned with work area ambitions will be needed please.</p> <p>Possible funding requirements for development of CarePulse resource page.</p>	31/3/20	HLP EHCH Lead Jane Sproat
Use of antibiotics in urgent care settings – gathering evidence, support compliance with NICE and other relevant guidance	<p>Endorsed by RMOc (London) in July 2018 as a priority for the region.</p>	<p>Create a short life working group, and work with the SPS MO Do Once programme</p>	<p>Draft PGD for sore throat that has been endorsed by MO Do Once governance</p>	<p>These will be formed by SLWG and reported back to subgroup</p>	31/3/20	Tushar Shah

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Work area	Rationale	Process	Output	Additional resource required (Any risks highlighted)	Date required	Lead (details)
Work with STPs to map their current activity	Endorsed by RMOc (London) in July 2018 as a priority for the region. The RMOc AMR/AMS Subgroup will need to work with organisations at a more local level to achieve sustainable change.	1) Identify AMS lead in each STP area. 2) Request report from STP about AMS activities	1) Leads to be reported to subgroup. 2) Compile report for RMOc (London) on local activities. Encourage AMR Networks to record details through appropriate section of SPS website	The national CSU team is surveying what AMR Network activities are going on. These findings should complement this action.	31/3/20	Richard Goodman
Develop set of AMS metrics to review	There are multiple sources of information available about antimicrobial prescribing; therefore there are large numbers of metrics and indicators. To support the Subgroup and organisations to focus attention, it would be helpful to identify a subset of indicators for review.	Identify all nationally available indicators and data sources. Agree set of indicators with Subgroup that are sensible to review. Gain support from external stakeholders.	Produce an indicator report that can be updated at regular intervals. Report to be suitable for use by RMOc Subgroup and by individual organisations to inform practice.	Work needed to gain organisational support to use this report.	30/09/19	John Minshull
Support Commissioning of Point of Care Testing (POCT)	POCT is an important aspect of antimicrobial stewardship, as it can prevent unnecessary use of antibiotics. It is not widely used in the NHS, but the government has identified it as a priority area.	Project initiation document (PID) produced by Chief Scientific Officer's Clinical Fellow	Pilot project report	These will be highlighted in the PID	31/3/20	Anna Stec

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Support implementation of NICE guidance	NICE provides guidance on clinical and cost-effective prescribing, including for a number of specific antimicrobial stewardship-related topics.	1) Identify and share NICE guidance relevant to AMR/AMS agenda 2) Encourage organisations to implement audits developed by CSU	1) Report to subgroup 2) Report on organisational uptake of CSU-developed audits	2) Collaboration with CSUs. They will design audit tools. Aim to have available by March 2020	Ongoing	Richard Goodman
Identify, explore and interpret reasons for variation in local prescribing patterns	Using available data sources (including local data pack), the RMOc Subgroup has a responsibility for providing assurance to the system that variations in use of antimicrobials are understood and either being addressed or are known to be rational variation.	Review data at each subgroup meeting, highlighting outliers, and agreeing an action plan	Minutes from subgroup meeting. Update from STP leads		Ongoing	John Minshull