

## Welcome!

Welcome to the May edition of the TARGET antibiotics newsletter. The good news is that the weather has finally changed for the better and we are delighted to share with you some of TARGET developments over the past few months. To coincide with the launch of the newly updated Quality Premium targets, this newsletter will focus on the TARGET resources designed to reduce *E.coli* bacteraemia—old and new.

## NHS England Quality Premium 2018-19

NHS England have recently published the updated Quality Premium targets 2018-19 related to reducing gram-negative bloodstream infections (GNBSIs) and inappropriate antibiotic prescribing in at risk groups.

### Purpose of the Quality Premium

The Quality Premium is intended to reward clinical commissioning groups (CCGs) for improvements in the quality of the services that they commission and for associated improvements in health outcomes and reducing inequalities.

To view the updated GNBSI QP target [click here](#).

## TARGET UTI Resource Updates

As many of you may know, we have been working hard to develop a suite of evidence based UTI resources to help facilitate the reduction of *E.coli* bacteraemia. This work is progressing well and we hope to have the suite ready to launch in **July 2018**. For an update click on the links below

- ♦ [Treating Your Infection UTI leaflet for older adults and those who care for them](#)
- ♦ [The Diagnosis of UTI quick reference guides for primary care](#)
- ♦ [Dedicated UTI section on the website](#)
- ♦ [TARGET resources currently available](#)

## TARGET Research update

The preliminary findings of the GP survey results are now available. You can read the abstract findings [here](#).

## IMPORTANT—Data Protection Regulations

You are on a mailing list held by the TARGET team at the Public Health England to receive occasional emails regarding either **the TARGET antibiotics newsletter, updates to the website, information on new studies, research findings or events.**

Due to changes in the data protection regulations that came into force on 25 May 2018, you will need to **opt in** to receive further emails from us.

If you have not already done so, please click [here](#) to opt in. You will be able to choose your mailing preferences and can unsubscribe at any time. We hope that you will stay in touch.

**If you do not opt in before Friday 1 June 2018, we will assume that you no longer wish to be on this list and will delete your details.**

To remove your name from our mailing list, please [click here](#).

## Come meet the team

We will be attending the following meetings/conferences.

- ♦ [Non-Medical Prescribing CPD event](#)  
Gloucester, 20 Jun '18
- ♦ [TARGET workshop and Train the Trainer Day](#)  
Gloucester Royal Hospital, 21 Jun '18
- ♦ [PHE Conference](#)  
Warwick University, 12-13 Sept '18
- ♦ [IPS Conference](#)  
Glasgow, 30 Sep-2 Oct '18

[Mail us](#) if you are attending any of these events and would like to have a chat about the presentations, TARGET or just to say hi.

## Your TARGET Showcase Gloucestershire CCG

We have been delighted to work with Gloucestershire CCG on a number of initiatives over the past few months.

Read all about what they are planning and how they are utilising the TARGET resources [here](#)

We would like to see how you use or are planning to use the TARGET resources to facilitate your AMS initiatives. [Send us](#) information and photographs of how and where you use the resources so that we can share your learning with others.

We will then showcase them in the newsletter for others to learn from your experiences.

## Follow us

 [Twitter](#) @TARGETabx

## What are the targets for the CCG GNBSI Quality Premium in 2018-19?

### Reducing Gram-negative Bloodstream Infections (GNBSIs) and inappropriate antibiotic prescribing in at risk groups

**Part a)** reduction in the number of gram negative blood stream infections across the whole health economy (45% weighting)

i) The reduction target in all *E.coli* BSI reported at CCG level based on 2016 performance data remains in 2018/19. A 10% reduction now attracts 20% of the weighting. Two extra milestones of 15% and 20% reductions have been added (maximum 30% weighting).

See partial payment table below:

Reduction against baseline	% QP available
20% +	30%
15 – 19.99%	25%
10 – 14.99%	20%
<10%	0%

ii) Collection and reporting of a core primary care data set by microbiology laboratories for all *E.coli* cases is desirable, however the minimum requirement is 100% of all *E.coli* BSI cases in Q2 (10% weighting) and 50% of all *E.coli* BSI cases in Q3 (5% weighting) in 2018/19.

This data should be used to identify local healthcare associated risk factors that inform local intervention strategy; data entry onto the PHE DCS is desirable but not compulsory.

**Part b)** reduction of inappropriate antibiotic prescribing for urinary tract infections (UTI) in primary care (20% weighting)

i) A 30% (or greater) reduction in the number of Trimethoprim items prescribed to patients aged 70 years or greater on baseline data (June 2015-May 2016) (20% weighting).

**Part c)** sustained reduction of inappropriate prescribing in primary care (35% weighting)

i) Items per STAR-PU must be equal to or below England 2013/14 mean performance value of 1.161 items per STAR-PU (10% weighting)

ii) Additional reduction in Items per STAR-PU equal to or below 0.965 items per STAR-PU (25% weighting)

**NB.** This threshold is additional for 2018/19

## Treating Your Infection UTI leaflet for older adults and those who care for them



### Why develop a leaflet for UTIs in older frail adults?

Rates of *E.coli* have increased by 6.1% from 2015 – 2017, and 25.6% since 2012/13. The age group with the highest rates of *E.coli* bacteraemia in England were observed amongst older adults. On-going mandatory surveillance of *E. coli* bacteraemia has identified 46.9% of cases were most likely due to urinary tract infections (UTIs). By improving knowledge on how to prevent UTIs, how UTIs develop, are diagnosed and managed, self-care advice and advice on when to re-consult, this could reduce recurrent infections, *E.coli* bacteraemia, hospital admissions and improve older adults' health and wellbeing.

### Purpose

Patient satisfaction is more related to having a careful examination and having concerns identified and addressed than to receiving a prescription for antibiotics. This provides a great opportunity to share information with patients and reassure them. We know how busy prescribers are, and how important it is to use precious consultation time efficiently. Therefore, we have developed a leaflet to share with older adults and their relatives or carers when they have urinary symptoms or with those who may be at risk of future UTIs.

### Overview of the older adult UTI leaflet

**Development:** The leaflet has been developed following extensive needs assessment with general practitioners, care home staff, care home residents and their relatives, and a variety of stakeholders. The older adult leaflet was developed based on the original TARGET TYI-UTI leaflet for uncomplicated UTIs, and underwent iterative modifications after each interview or focus group. Data collection was informed by the Theoretical Domains Framework in order to explore all behavioural determinants.

**Use:** The leaflet can be used in several ways. To provide information on UTIs to those at risk, care staff may wish to share this leaflet with older adults in their care and/or their relatives. The leaflet may also be used during primary care consultations to facilitate dialogue between a patient and their GP on specific topics like treatment or safety netting. It is important that the leaflet is used as a tool to interact with patients, rather than as a 'parting gift'.

We are happy to receive feedback about how you have used or implemented this leaflet and any constructive comments on how it can be improved. Please contact the TARGET team via email at [TARGETantibiotics@phe.gov.uk](mailto:TARGETantibiotics@phe.gov.uk).

### Diagnosis of urinary tract infections (UTIs) - Quick reference guide for primary care

The UTI diagnostic quick reference guides have been under review since August 2017. This includes the flowchart for acute uncomplicated UTI in women under the age of 65 years, children and reference tables. Based on stakeholder feedback, this review included the development of an additional flowchart for older adults. The package of resources also comes with graded references and rationales.

The development of the UTI diagnostic flowcharts occurred in collaboration with many different professionals and members of the public. This included about 100 primary care staff from randomly selected GP surgeries and care homes in Gloucestershire and Nottingham City CCGs, members of the public, care home residents, family members of older adults in care and multiple other experts

Some of the key changes include:

- ◆ The addition of a flowchart for the diagnosis of older adults with suspected UTI
- ◆ Criteria to exclude sepsis and pyelonephritis early in the flowcharts for adults
- ◆ Other common causes of urinary symptoms in both flowcharts

The reviewed drafts of the flowcharts are currently out for [public consultation](#) until the 30th of May. We appreciate thoughts and feedback.

## Dedicated UTI section on the TARGET website

We are currently in the process of developing a section of the TARGET website to support the Government's ambition to halve inappropriate prescribing of antibiotics by 2020 and to help facilitate the newly launched 2017-19 Quality Premium targets related to reducing gram-negative bloodstream infections (GNBSIs) and inappropriate antibiotic prescribing in at risk groups.

In this section of the TARGET website we plan to group all of the TARGET resources focussing on Urinary Tract Infections (UTIs) in one place to make it easier for you to find them all. You can see an outline of all our current UTI resources below however, if there is anything else you feel should be added to this section of the website e.g. links to the QP, etc., then please [let us know](#) by Friday 15th June 2018.

The new section will be added directly under the TARGET toolkit updates and News section of the website.



## TARGET Antibiotics Toolkit

### What is TARGET?

TARGET stands for: Treat Antibiotics Responsibly, Guidance, Education, Tools. The toolkit helps influence prescribers' and patients' personal attitudes, social norms and perceived barriers to optimal antibiotic prescribing. It includes a range of resources that can each be used to support prescribers' and patients' responsible antibiotic use, helping to fulfil CPD and revalidation requirements.

### Who is it for, and how can it be used?

The toolkit is designed to be used by the whole primary care team within the GP practice or out of hours setting. These resources can be used flexibly, either as standalone materials or as part of an integrated package. We do recommend that ALL resources are used if this is feasible. Using the TARGET Antibiotics Toolkit resources will enable primary care organisations to demonstrate compliance with the Health and Social Care Act 2008: Code of Practice on the prevention and control of infections and related guidance.

- ▶ [Guide for GPs on antimicrobial Resistance](#)
- ▶ [Guide to the TARGET resources](#)
- ▶ [Guide to TARGET resource development](#)

### TARGET toolkit Updates and News

### UTI Resource Suite

New Tab to be added

## TARGET resources currently available to help facilitate the reduction of *E.coli* bacteraemia.

### Patient Facing Materials

The Treating your infection - URINARY TRACT INFECTION (TYI-UTI) patient Information leaflet has been designed to be used with women, under 65 years, who are experiencing urinary symptoms suggesting non complicated UTIs. This leaflet supports implementation of recommendations in the NICE guidelines on processes for antimicrobial stewardship and behaviour change for antimicrobial stewardship.

- ♦ TARGET TYI-UTI patient leaflet – V18 [[PDF](#)] [[DOC](#)]
- ♦ [TARGET TYI-UTI fully referenced leaflet](#)
- ♦ [TARGET TYI-UTI leaflet user guide](#)
- ♦ [How to upload the TARGET TYI-UTI leaflet onto SystmOne](#)

For leaflet translation into various languages please visit the leaflets to share with patient's section of the [TARGET website](#).

### Diagnostic Flowcharts

A series of quick reference flowcharts for [diagnosis of UTIs](#) including knowing when to use the microbiology laboratory and how to understand results. These are currently being updated and are [under review](#).

### Audit templates

Templates for accurate and easy auditing, including Read codes, current guidance and action plans. Use the UTI audit template to assess your management of UTIs against current local and/or national guidelines. [[.doc](#)] [[.xls](#)]

### Training Resources

- ♦ [Managing Urinary Tract Infections \(MUTS\)](#) eModule explains the importance and appropriateness of diagnostics and offers advice on how to assess and treat patients with a range of urinary symptoms
- ♦ [This TARGETantibiotics webinar on UTIs](#) highlights simple key actions to help improve your antibiotic prescribing whilst improving the patient experience and their self-care, therefore freeing up your time.
- ♦ [The TARGET antibiotic presentation core slides](#) lasts 60 minutes and includes a clinical scenario on UTIs, slide notes and references.

## Research Update

### Infectious disease and primary care research and development – what GP staff say they need.

Lecky DM, Granier S, Jenner I, Allison R, McNulty CAM.

#### Introduction

The majority of UK antibiotics are prescribed in primary care. Whilst there have been many diagnostic advances and guidance development in recent years, this study aimed to identify where the perceived gaps in knowledge, guidance and research lie, from the prescriber perspective.

#### Methods

A questionnaire survey and covering letter was disseminated to GPs between May and August 2017.

#### Results

428 GP staff responded. Suspected infection in older adults, recurrent UTI, surveillance of antibiotic resistance in the community, leg ulcers, persistent cough and cellulitis all fell into the top six conditions ranked in order of importance, and the top six most frequently named illnesses/conditions respondents felt required further research, evidence and guidance.

Across all six conditions, primary care respondent needs were ranked as follows:

1. Need for better evidence base for antibiotic treatment (Suspected infection in older adults, surveillance of antibiotic resistance in the community , cellulitis )
2. Need for better evidence base for self-care and non-antibiotic treatment (recurrent UTI , persistent cough )
3. Need for improved treatment guidelines for staff (leg ulcers )
4. Need for better point of care prognostic tests
5. Need for better clinical scores to help inform management
6. Need for better near patient antibiotic resistance test

#### Conclusions

This survey has highlighted broad areas for future involvement with primary care although further consultation with staff and other relevant bodies is required. For some conditions, this may be writing/updating/promoting antibiotic prescribing guidance whilst for others highlighting the current evidence base for, or more research into, self-care and non-antibiotic treatment is required.



## Your TARGET Showcase: Gloucestershire CCG

### TARGET Intervention Promoting AMS (TIPAMS)

It is an imperative to promote Antimicrobial Stewardship which includes lowering the number of antibiotics prescribed. Further it is a requirement to deliver initiatives which empower and enable local practitioners. They can become active participants in driving local improvements when able to access relevant data on HCAs, vaccine uptake and antibiotic use as well as guidelines so that they drive improvements locally.

### TIPAMS Aims

This intervention, in collaboration with Public Health England, focuses on GP practices. We aim to use the TARGET toolkit from PHE to support health information for patients, carers and clinicians based on NICE guidance. It covers treatment of acute cough, sore throat, otitis media, sinusitis and UTI as well as infection prevention & control including improving vaccination uptake. Desired outcomes are a reduction in infections (HCAI, UTI, flu etc.), increased uptake of vaccines with an overall reduction in antibiotic use and when used to be prescribed in-line with guidelines.

### What are we going to do?

The improvement project commences in June 2018 with the following:

- ◆ On 21 June 2018 we will run the TARGET workshop training for 30 practice nurses from Gloucestershire GP practices specifically focusing on UTIs and sore throat. The training incorporates accessing data from sources such as Fingertips. On the day attendees will be able to take advantage of the follow on train the trainer workshop so the they can ripple the training out to their own and other GP practices. Attendees will be asked to develop an implementation plan for their practice, deliver the workshop to their peers and carry out audits so they can monitor the effectiveness of the efforts within their practice. As a CCG we will also monitor prescribing data. Attendees will receive validation certificates for attendance and any follow up work they do.
- ◆ We are planning a pilot to trial the effectiveness of combined involvement of the patient participation group and clinical staff in TARGET training as part of assisting patients to understand the interventions such as delayed scripts being used. We plan to work with two practices within Gloucestershire, engage with the practice team (which includes the Patient Participation Group for the practice) and devise a communication / health information strategy using the target literature. The exact nature of the intervention is yet to be decided however this may include messages on TV in waiting room, a specific notice board in the waiting room with information, leaflets given at consultations to patients and clinicians giving the messages to the patients and documenting the target intervention used. (NB Clinician involvement seen as critical). Target training (being led by a member of the trainer the trainer group mentioned above) offered at the practice will be open to GP practice team members including members of the patient participation group. Evaluation and acceptability of the intervention will be carried out via pre and post intervention focus group interviews with patient from each practice. The expectation is that patient involvement and support will facilitate the use of TARGET strategies and lower the use of antibiotics for self-limiting viral infections such as acute sore throat. Deliver training on reducing HCAI infections and vaccine uptake in the planning phase.
- ◆ Plans are being developed to present the results of the improvement project at the annual Antibiotic Awareness Week event planned for 14 November 2018.
- ◆ Evaluation of the effectiveness of the improvement plan will include monitoring of HCAI rates, antibiotic usage (Fingertips and EPAT data), and vaccine uptake (IMMFORM) as well as GP practice audits completed by attendees at their practices.



### Contact us

If you would like more information about the Gloucestershire CCG improvement plan above then please contact [Leslie MacLeod-Downes](#), CCG Quality Project Matron, NHS Gloucestershire Clinical Commissioning Group.

### Come meet the team: Meetings and Conferences

#### Non-Medical Prescribing CPD event arranged by Gloucestershire CCG



**Presenter:** Rosie Allison

**Presentation title:** The TARGET toolkit

**When:** Wednesday 20<sup>th</sup> June 2018

**Where:** Gloucester Farmers' Club, Sandhurst Road, Gloucester.

#### TARGET workshop and Train the Trainer Day



**Presenters:** Prof Clodna McNulty, Dr Philippa Moore, Dr Donna Lecky

**Outline:** Delivery of the TARGET workshop to Primary Care prescribing nurses with follow up with a train the trainer workshop

**When:** Thursday 21<sup>st</sup> June 2018

**Where:** Redwood Education Centre, Gloucester Royal Hospital, Gloucester.



#### Public Health England Annual Conference For full programme [click here](#)



The TARGET team will have a stand at the Public Health England conference exhibition area. Please come along and say hello to Emily and Rosie and find out about the exciting TARGET updates planned for World Antibiotic Awareness Week.

**Exhibiting:** TARGET and e-Bug resources

**Exhibitors :** Emily Cooper and Rosie Allison

**When:** Tuesday 11<sup>th</sup> – Wednesday 12<sup>th</sup> September 2018



**Stand Number:** 43, Mead Gallery.

**Where:** University of Warwick

#### Infection Prevention Conference For full programme [click here](#)



**Presenter:** Charlotte Eley

**Satellite symposium:** The TARGET toolkit—how can it help your antimicrobial stewardship initiatives

**Exhibiting:** TARGET and e-Bug resources

**Abstracts:** to be submitted by 12<sup>th</sup> June 2018

**When:** Sunday 30<sup>th</sup> September – Tuesday 2<sup>nd</sup> October 2018

**Where:** Scottish Event Campus, Glasgow



## TARGET antibiotics Newsletter

*Treat Antibiotics Responsibly: Guidance, Education, Tools.*

[www.rcgp.org.uk/TARGETantibiotics/](http://www.rcgp.org.uk/TARGETantibiotics/)

### The TARGET Team

#### Professor Clodna McNulty, TARGET Programme Lead



Clodna, a clinical microbiologist, leads the Public Health England Primary Care Unit. She has led numerous large surveys on the public's use of and attitudes to antibiotics and resistance and is an expert advisor to the ECDC Advisory Committee on AMR and HCAs.

#### Dr Donna Lecky, TARGET Programme Manager



Donna has a background in microbiology research, programme management and resource development having previously managed the development of the e-Bug educational resources for school aged children, the PHE stool collection leaflet and the TARGET Urinary Tract Infection leaflet for patients.

#### Emily Cooper, TARGET Project Manager



Emily has a background in nursing and public health. She works part time supporting resource development projects within TARGET and is currently involved in activities that focus on prevention and management of urinary tract infections in older adults.

#### Charlotte Eley, TARGET Project Support Officer



Charlotte manages and supports various projects within the TARGET Programme. Her current work includes a point-of-care C-reactive protein study in Oldham CCG and a service evaluation of the TARGET TYI-RTI leaflet. Charlotte has previously been involved in developing the TARGET TYI-RTI pictorial leaflet for patients with lower literacy levels.

#### Leah Jones, TARGET Research Assistant



Leah has a background in Psychology and is currently studying for a Professional Doctorate in Health Psychology. Leah's current work includes the development of a urinary tract infection patient leaflet for older adults, and exploratory work in community pharmacies with the view of developing resources for the pharmacy setting.

#### Rosie Allison, TARGET Research Assistant



Rosie is a TARGET Research Assistant with a background in Biology and Public Health. Rosie has previously been involved in qualitative research studies and her current work involves liaising with medicines management teams to collect data on local implementation of antimicrobial stewardship initiatives via a national questionnaire.

#### Sarah Alton, TARGET Research Assistant



Sarah has a background in psychology and is the PCU guidance support research assistant for the PHE national antibiotics management guidance. She is currently working updating the urinary tract infection diagnostic guidance for different patient groups.