

Welcome!

It's World Antibiotic Awareness Week (13th - 19th November) and what better time to share the newly updated TARGET antibiotics [website](#), newsletter and team. Through this newsletter and via our Twitter pages, we hope to keep you updated with all of the latest TARGET news and any other interesting information we think you might find useful. Below you will find the summary information but click on any of the links to see more details.

What is TARGET?

[TARGET antibiotics](#) (Treat Antibiotics Responsibly, Guidance, Education, Tools) is a toolkit that aims to help 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.

The toolkit is a collaboration between Public Health England's Primary Care Unit (PCU) and the Royal College of General Practitioners (RCGP). Although hosted on the RCGP website, the TARGET antibiotics toolkit is freely available to all health professionals; you do not need to be a member of the RCGP to access and use the TARGET resources. To find out more about the TARGET team, [click here](#).

TARGET Website Updates

Following user feedback the TARGET team has been busy developing and updating our website and resources. We hope that the website is now easier to navigate and we have updated the following resources:

- ◆ [The TARGET guide to resources](#)
- ◆ [The Treating your infection Respiratory Tract infection \(TYI-RTI\) leaflet](#)
- ◆ [The Treating your infection Urinary Tract infection \(TYI-UTI\) leaflet](#)
- ◆ [Antibiotic Prescribing Audits](#)
- ◆ [TARGET workshop presentation](#)
- ◆ [Managing Common Infection Guidance](#)
- ◆ [Included the PHE Stool Collection Leaflet](#)

Current TARGET Research—would you like to be involved?

GP Survey

A [survey](#) for GPs to identify which conditions you would like to see more evidence for management in your daily clinical practice. The survey takes 7 minutes to complete and responses will be used to determine where research is needed.

Audit Review

[Can you be an external reviewer?](#) For ease of use we have designed our audits in both MS Word and MS Excel format; please do use and give us feedback.

Development of a UTI patient information leaflet for the elderly

The Primary Care Unit have been working with partners to develop a TYI-UTI leaflet for older adults and those who care for them. The development of the leaflet has taken into account input from GPs, care home staff, nurses, care home residents, family members, and other experts. We are currently looking for wider public and professional feedback on the leaflet and would value your input. [Contact us](#) for more information.

Come meet the team

We will be attending the following meetings/conferences. Come and say hi, we'd love to hear from you

- ◆ [HSCNI World Antibiotic Week Symposium](#), (presentation), 13th Nov
- ◆ [Patient First](#), (Presentation) 21-22 Nov
- ◆ [FIS 2017](#), (TARGET stand) 30th Nov—2nd Dec

Campaign Support

TARGET supports the following antibiotic awareness and public health campaigns

- ◆ [Antibiotic Guardian](#)
- ◆ [Keep Antibiotics Working](#)

Upcoming annual campaigns

- ◆ [European Antibiotic Awareness Day](#)
- ◆ [World Antibiotic Awareness Week](#)
- ◆ [National Self Care Week](#)

Your TARGET Showcase

We would like to see how you use the TARGET resources. Please send us information and photographs of how and where you use the resources and what you think of them.

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

NICE endorsement

We are delighted to announce that the TARGET Treating Your Infection UTI and RTI leaflets have been endorsed by NICE. Click [here](#) to view the endorsement statements.

Follow us

 [Twitter](#) @TARGETabx

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

Questions or comments? E-mail us at TARGETantibiotics@phe.gov.uk

TARGET Website updates

The TARGET guide to resources

We have updated the 'Guide to Resources' document in line with all other resource updates. This guide now also highlights which resources may help you meet the 2017 QP premium.

The Treating your Infection leaflets

- ◆ We are now on V8 of the RTI leaflet, please update your leaflet if you are using an older version.
- ◆ The RTI leaflet is available as a protocol on both EMIS and SystmOne.
 - EMIS:** To the launch protocol within a consultation, hit the F12 key, select and launch button then type 'Treating' in the search area. You should then be able to select the launch PHE Treating your infection leaflet from the list.
 - SystmOne:** To the launch protocol within a consultation, hit the F12 key to open the 'Launcher' window. Select the 'Treating your Infection leaflets'. Select which version of the leaflet you want from the list.
- ◆ We developed and launched a UTI patient Information leaflet in November 2016 to be used with women who are experiencing urinary symptoms suggesting non complicated UTIs.
- ◆ We are also working with EMIS and SystmOne to have the UTI leaflet embedded in their protocols. However, in the meantime a "How to upload the UTI leaflet onto your GP system", allowing GPs to create a local protocol, is available for both systems on the TARGET website.
- ◆ Both the RTI and UTI leaflets are now available in 20 different languages:

Albanian	Cantonese	Greek	Hungarian	Portuguese	Somali	Urdu
Arabic	English	Gujarati	Mandarin	Punjabi	Spanish	Welsh
Bengali	French	Hindi	Polish	Romanian	Turkish	

Antibiotic Prescribing Audits

There are 5 antibiotic prescribing audits in the TARGET toolkit; Acute sore throat, acute sinusitis, UTI, acute otitis media, acute otitis externa and acute cough. Each of these have been reviewed and updated to in line with NICE and PHE guidelines and have also been redesigned to make them more user friendly.

TARGET workshop presentation

- ◆ The workshop presentation has been reviewed and updated based on newly available data.
- ◆ We have listened to user feedback and redesigned the workshop presentation to have a core set of information slides and a series of additional 'use as appropriate' clinical scenario and reference slides including sore throat, otitis media, skin infection and acute rhinosinusitis.

Managing Common Infection Guidance

In September 2017, PHE published updated guidance on [Management and Treatment of Common Infections](#) designed to be used by primary healthcare practitioners and those giving first-point-of-contact advice on treatment of patients with common infections.

The guidance aims to optimise the management of common infections while reducing the risk of emergence of AMR in the community. It comprises: (a) a six-page summary table of common illnesses – and their corresponding treatments – components parts of which can be adapted for different purposes in primary care settings (eg printed out for use as posters; or used for quick reference purposes); and (b) an extensive reference list (with associated rationales) designed to help trainers, trainees and microbiologists who require links to robust evidence for the statements made in the summary table.

Other Resources

- ◆ We have added the PHE stool collection leaflet to the toolkit.

TARGET Research

TARGET Audits: Could you be an external reviewer?

We have updated our audits and, for ease of use, have developed them in both MS Word and MS Excel format; these updates can be found below for external review. As an external reviewer we would ask you to:

1. Choose at least one audit and read both the Word and Excel versions
2. Carry out an audit of your prescribing using either the Word or Excel version
3. Let us know your thoughts on the audits by completing the audit evaluation form

Your feedback will help us further improve the audits.

Sore throat audit

Sore throat audit [[DOC](#)] [[XLS](#)]

STA: Evaluation form [[survey](#)]

Acute otitis media audit

Acute otitis media audit [[DOC](#)] [[XLS](#)]

AOEA: Evaluation form [[survey](#)]

Acute rhinosinusitis audit

Acute rhinosinusitis audit [[DOC](#)] [[XLS](#)]

ARA: Evaluation form [[survey](#)]

Acute cough audit

Acute cough audit [[DOC](#)] [[XLS](#)]

ACA: Evaluation form [[survey](#)]

UTI audit

Uncomplicated UTI audit [[DOC](#)] [[XLS](#)]

UTI: Evaluation form [[survey](#)]

Service Evaluation: Urinary Tract Infection leaflet

We will start the pilot phase of this research in the coming months. If you are interested in being involved in the pilot then please contact us.

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Antibiotic Awareness Campaigns

Antibiotic Guardian



The Antibiotic Guardian campaign asks you to become antibiotic guardians by choosing one simple pledge about how you'll make better use of antibiotics to help save these vital medicines from becoming obsolete.

Pre-worded pledges are available in the following categories

- ◆ Health or social care professional or leader
- ◆ Member of the public
- ◆ Student, educator or scientist

Or alternatively, you can make your own pledge.

Antibiotic Guardian supports the UK antimicrobial strategy, European Antibiotic Awareness Day (18th November) and World Antibiotic Awareness Week (13—19 November 2017).

Keep Antibiotics Working



Support the new campaign *Keep Antibiotics Working* launched in England on October 23rd to raise public awareness and understanding of the dangers antibiotic resistance.

The campaign delivers a simple messages that resonate with the public: **Taking antibiotics when you don't need them puts you and your family at risk.** Taking antibiotics encourages harmful bacteria that live inside you to become resistant. That means that antibiotics may not work when you really need them. This puts you and your family at risk of a more severe or longer illness

By increasing the public's awareness of the risks of taking antibiotics when they don't need them, the campaign supports the efforts of local doctors, nurses and other healthcare practitioners in reducing inappropriate prescribing due to patient pressure. The campaign encourages those who typically ask for antibiotics to take their doctor or nurse's advice.

If you don't already have campaign materials on display and wish to *Keep Antibiotics Working* you can order resources free of charge from the PHE Campaign Resource Centre



ECDC European Antibiotic Awareness Day (EAAD)

The European Antibiotic Awareness Day is an annual European public health initiative that takes place on 18 November to raise awareness about the threat to public health of antibiotic resistance and the importance of prudent antibiotic use.

On the 10th European Antibiotic Awareness Day (EAAD), the European Centre for Disease Prevention and Control (ECDC) is launching a social media campaign called **#KeepAntibioticsWorking**. Share a message via Twitter, Facebook or Instagram, explaining what you are doing to ensure that antibiotics remain effective. Everyone is responsible for keeping antibiotics working!

If you wish to support the campaign, share messages, pictures or videos during the week 13—19 November 2017, using the hashtag **#KeepAntibioticsWorking**. Tell the world what you do, in your professional or personal life, at individual or collective level, to use antibiotics responsibly and keep them working!

WHO World Antibiotics Awareness Week (WAAW)

The theme of this years WAAW is **Seek advice from a qualified health care professional before taking antibiotics**. Various campaign materials, including posters for practice waiting rooms are available on the WHO website.



NICE Endorsement Statements

Treating your infection – Respiratory Tract Infection (TYI-RTI) Leaflet

This leaflet supports implementation of recommendations in the NICE guidelines on [processes for antimicrobial stewardship](#), [behaviour change for antimicrobial stewardship](#) and [antibiotic prescribing for respiratory tract infections](#).

Patient Name <input type="text"/>		It is recommended that you self-care <input type="checkbox"/>	
Your infection	Most are better by	How to treat yourself better for these infections, now and next time	When should you get help:
<input type="checkbox"/> Middle-ear infection <input type="checkbox"/> Sore throat <input type="checkbox"/> Sinusitis <input type="checkbox"/> Common cold <input type="checkbox"/> Cough or bronchitis <input type="checkbox"/> Other infection: _____	8 days 7-8 days 14-21 days 14 days 21 days _____ days	<ul style="list-style-type: none"> Have plenty of rest. Drink enough fluids to avoid feeling thirsty. Ask your local pharmacist to recommend medicines to help your symptoms or pain (or both). Fever is a sign the body is fighting the infection and usually gets better by itself in most cases. You can use paracetamol if you or your child are uncomfortable as a result of a fever. Use a tissue and wash your hands well to help prevent spread of your infection to your family, friends and others you meet. Other things you can do suggested by GP or nurse: _____ 	<p>Contact your GP practice or contact NHS 111 (England), NHS 24 (Scotland and dial 111), or NHS Direct (Wales dial 0845 4647) or GP practice (NI/Ireland)</p> <p>1. to 6. are possible signs of serious illness and should be assessed urgently. Phone for advice if you are not sure how urgent the symptoms are.</p> <ol style="list-style-type: none"> If you develop a severe headache and are sick. If your skin is very cold or has a strange colour, or you develop an unusual rash. If you feel confused or have slurred speech or are very drowsy. If you have difficulty breathing. Signs that suggest breathing problems can include: <ul style="list-style-type: none"> breathing quickly turning blue around the lips and the skin below the mouth skin between or above the ribs getting sucked or pulled in with every breath. If you develop chest pain. If you have difficulty swallowing or are drooling. If you cough up blood. If you are feeling a lot worse. <p>Less serious signs that can usually wait until the next available appointment:</p> <ol style="list-style-type: none"> If you are not starting to improve a little by the time given in the 'Most are better by' column. In children with middle-ear infection: if fluid is coming out of their ears for more than 10 days or if they have new deafness. Other: _____
<p>Back-up antibiotic prescription to be collected after <input type="checkbox"/> days only if you are not starting to feel a little better or you feel worse.</p> <p>Collect from: <input type="checkbox"/> Pharmacy <input type="checkbox"/> General Practice <input type="checkbox"/> GP, nurse, other <input type="checkbox"/> Book consultation</p> <ul style="list-style-type: none"> Colds, most coughs, sinusitis, ear infections, sore throats, and other infections often get better without antibiotics, as your body can usually fight these infections on its own. If you take antibiotics when you don't need them, it allows bacteria to build up resistance. This means they're less likely to work in the future, when you really might need them. Antibiotics can cause side effects such as rashes, thrush, stomach pains, diarrhoea, reactions to sunlight, other symptoms, or being sick if you drink alcohol with metronidazole. Find out more about how you can make better use of antibiotics and help keep this vital treatment effective by visiting and pledging at www.antibioticguardian.com <p>Never share antibiotics and always return any unused antibiotics to a pharmacy for safe disposal</p>			

Managing your infection – a step-by-step guide on how to manage your infection

This leaflet supports implementation of recommendations in the NICE guidelines on [processes for antimicrobial stewardship](#), [behaviour change for antimicrobial stewardship](#) and [antibiotic prescribing for respiratory tract infections](#).



Treating your infection – Urinary Tract Infection

This leaflet supports implementation of recommendations in the NICE guidelines on [processes for antimicrobial stewardship](#) and [behaviour change for antimicrobial stewardship](#).

Urinary tract infection (UTI) information leaflet			
For women outside care homes with suspected uncomplicated urinary tract infections (UTIs) or uncomplicated recurrent UTIs			
<p>Possible urinary symptoms</p> <p>Frequency: Passing urine (wee) more often than usual</p> <p>Dysuria: Burning pain when passing urine</p> <p>Urgency: Feeling the need to pass urine immediately</p> <p>Haematuria: Blood in your urine</p> <p>Nocturia: Needing to pass urine in the night</p> <p>Suprapubic pain: Pain in your lower tummy</p> <p>Other things to consider:</p> <ul style="list-style-type: none"> Some sexually transmitted infections (STIs) can have symptoms similar to those of a UTI Inflammation due to sexual activity can feel similar to the symptoms of a UTI 	<p>The outcome</p> <p><input type="checkbox"/> Mild, or 1 to 2, symptoms or vaginal discharge (or both)</p> <ul style="list-style-type: none"> Antibiotics less likely to help. Usually lasts 5 to 7 days <p><input type="checkbox"/> Delayed or backup prescription</p> <p>Start antibiotics if symptoms:</p> <ul style="list-style-type: none"> get worse do not get a little better with self-care after 24 to 48 hours. <p><input type="checkbox"/> Severe, or 3 or more, symptoms and no vaginal discharge</p> <p>Antibiotics are likely to help, symptoms should start to improve within 48 hours</p> <ul style="list-style-type: none"> usually last 3 days. 	<p>Recommended care</p> <p>Self-care and pain relief: Symptoms are likely to get better on their own.</p> <p>Antibiotic prescription:</p> <ul style="list-style-type: none"> Immediate treatment with antibiotics, plus self-care. 	<p>Types of urinary tract infection (UTI)</p> <p>UTIs are caused by bacteria getting into your urethra or bladder, usually from your gut. Infections may occur in different parts of the urinary tract.</p> <ul style="list-style-type: none"> Kidneys (make urine) Infection in the upper urinary tract Bladder (stores urine) Infection in the lower urinary tract Urethra (takes urine out of the body) Infection or inflammation in the urethra
<p>Self-care to help yourself get better more quickly</p> <ul style="list-style-type: none"> Drink enough fluids to stop you feeling thirsty. Aim to drink 8 to 9 glasses including water, decaffeinated and sugar-free drinks. Take paracetamol or ibuprofen at regular intervals for pain relief, if you've had no previous side effects. You could try taking cranberry capsules or cranberry sachets. There are effective for some women. There is currently little evidence to support their use. Consider the risk factors in the 'Options to help prevent UTIs' column to reduce future UTIs. 	<p>When should you get help?</p> <p>Contact your GP practice or contact NHS 111 (England), NHS 24 (Scotland and dial 111) or NHS Direct (Wales dial 0845 4647)</p> <p>The following symptoms are possible signs of serious infection and should be assessed urgently.</p> <p>Phone for advice if you are not sure how urgent the symptoms are:</p> <ol style="list-style-type: none"> You have shivering, chills and muscle pain. You feel confused, or are very drowsy. You have not passed urine all day. You are vomiting. You are blood in your urine. Your temperature is above 38°C or less than 36°C. You have kidney pain in your back just under the ribs. Your symptoms get worse. Your symptoms are not starting to improve a little within 48 hours of taking antibiotics. 	<p>Options to help prevent a UTI</p> <p>It may help you to consider these risk factors:</p> <p>Stop the spread of bacteria from your gut into your bladder. Wipe from front (vagina) to back (bottom) when you go to the toilet.</p> <p>Avoid waiting to pass urine. Pass urine as soon as you need a wee.</p> <p>Go for a wee after having sex to flush out any bacteria that may be near the opening to the urethra.</p> <p>Wash the external vagina with water before and after sex to wash away any bacteria that may be near the opening to the urethra.</p> <p>Drink enough fluids to make sure you are regularly throughout the day, especially during hot weather.</p> <p>If you have a recurrent UTI, also consider the following:</p> <p>Cranberry products: Some women find these effective, but there is currently little evidence to support this.</p> <p>After the menopause: You could consider topical hormonal treatment, for example, vaginal creams.</p>	<p>Antibiotic resistance</p> <p>Antibiotics may not always be needed, only take them after advice from a health professional. This way they are more likely to work if you have a UTI in the future.</p> <p>Antibiotics taken by mouth, for any reason, affect our gut bacteria. These bacteria become resistant to antibiotics we take.</p> <p>Antibiotic resistance means that the antibiotics cannot kill that bacteria.</p> <p>The gut bacteria that cause UTIs are twice as likely to be resistant to antibiotics if you've taken 6 months' after you have taken any antibiotic.</p> <p>Common side effects to taking antibiotics include thrush, rashes, vomiting and diarrhoea.</p>

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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.

Emily Clinton, RCGP Project Manager



Emily is a Project Manager for the RCGP's Clinical Innovation and Research Centre, focussing on the College's quality improvement and clinical spotlight projects. Her current work includes the maintenance of the TARGET toolkit on the RCGP website.