

Community Infection Prevention and Control Policy for Care Home settings

Antimicrobial stewardship

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ANTIMICROBIAL STEWARDSHIP

1. Introduction

ANTIBIOTIC RESISTANCE REMAINS ONE OF THE BIGGEST THREATS FACING US TODAY.

Antibiotics are a key part of medicine and treatment. However, an increasing number of common infections are becoming resistant to the medicines designed to treat them. This is referred to as antimicrobial resistance (AMR).

AMR is a significant and growing threat to public health in the UK and around the world. AMR has been declared by the World Health Organisation to be one of the top 10 global public health threats.

Staff in General Practice are normally the first point of contact and manage the vast majority of patients with infection and infectious disease. Subsequently, their prescribing accounts for around 80% of all health service antibiotic use. Despite encouraging reductions in prescribing, this can be challenging for a number of reasons including:

- Expectations of patients and relatives
- Prescribing antibiotics for suspected infections rather than prescribing only when infection is confirmed
- A lack of information around spread of antibiotic resistant infections
- A lack of immediate access to diagnostic tests and results

2. What is antimicrobial resistance?

AMR occurs when the microorganisms, e.g. bacteria and viruses, which cause disease are no longer affected by antimicrobial medicines, such as antibiotics, antivirals, antifungals, that are used to kill them, prevent and treat the disease.

While resistance is a natural occurrence from a healthcare perspective, it is accelerated by:

- Inappropriate use of antimicrobial medicines
- Poor infection prevention and control practices, e.g. incorrect use of 'Standard infection control precautions' (SICPs)
- A lack of new antimicrobial drugs being developed

3. Antimicrobial stewardship

Antimicrobial stewardship (AMS) is part of the fight against AMR. AMS promotes 'the right antibiotic for the right person, at the right time, with the right dose, and the right route, causing the least harm'. AMS includes improving prescribing of antibiotics, raising public awareness of AMR and becoming an 'Antibiotic Guardian', <https://antibioticguardian.com/>.

Everyone is welcome and encouraged to become an Antibiotic Guardian. Simply visit the website above and make a pledge, such as one of the following or make your own:

- I will practice 'Standard infection control precautions' to protect residents from antibiotic resistant infections
- I will support residents to complete their course of antibiotics

4. How important is it that we tackle resistance?

We rely on antibiotics, antivirals, antifungals, to treat the microorganisms that cause many common diseases, such as urinary tract infection (UTI), chest infections, bloodstream infections, food poisoning and tuberculosis (TB). These microorganisms, however, can already resist a wide range of antimicrobial medicines.

There are few replacement antibiotics or alternative products in development. This is partly due to how new drug development is funded.

As resistance continues to increase, more people will suffer for longer as infections become more difficult to treat, resulting in longer hospital admissions, routine surgical procedures becoming more dangerous to perform, and higher death rates. AMR, therefore, can potentially affect anyone or everyone.

5. What is needed to tackle resistance?

- Preventing infections arising in the first place, through best possible infection prevention and control, which includes consistent use of SICPs and, when required, 'Transmission based precautions' (TBPs).
- Timely, accurate diagnosis of infection in residents when they develop symptoms, e.g. informing the GP or other healthcare professional of any signs of deterioration in the resident's condition.
- Effective management of infections ensuring residents receive their treatment on time, complete the prescribed course and are able to take the treatment via the route prescribed, e.g. supporting residents to take their antibiotics on time, completing the prescribed course and informing the GP or other healthcare professional if the resident is unable to take their prescribed treatment.

6. Infection Prevention and Control resources, education and training

The Community Infection Prevention and Control (IPC) Team have produced a wide range of innovative educational and IPC resources designed to assist your Care Home in achieving compliance with the *Health and Social Care Act 2008: code of practice on the prevention and control of infections and related resources* and CQC registration requirements.

These resources are either free to download from the website or available at a minimal cost covering administration and printing:

- 30 IPC Policy documents for Care Home settings
- Preventing Infection Workbook: Guidance for Care Homes
- IPC CQC inspection preparation Pack for Care Homes
- IPC audit tools, posters, leaflets and factsheets
- IPC Bulletin for Care Homes

In addition, we hold IPC educational training events in North Yorkshire.

Further information on these high quality evidence-based resources is available at www.infectionpreventioncontrol.co.uk.

7. References

Department of Health and Social Care (May 2024) *Confronting antimicrobial resistance 2024-2029*

Department of Health and Social Care (Updated December 2022) *Health and Social Care Act 2008: code of practice on the prevention and control of infections and related guidance*

NHS England *Antimicrobial resistance (AMR)*

www.england.nhs.uk/ourwork/prevention/antimicrobial-resistance-amr/

NHS England *Antimicrobial resistance* www.hee.nhs.uk/our-work/antimicrobial-resistance

UK Health Security Agency (November 2023) *English surveillance programme for antimicrobial utilisation and resistance (ESPAUR) Report 2022 to 2023*

UK Health Security Agency (2023) *Become an Antibiotic Guardian*

World Health Organisation *Antimicrobial resistance* www.who.int/health-topics/antimicrobial-resistance