

# Where now? What next?

## — for the antimicrobial pharmacy initiative

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**M**uch has been achieved since June 2003, when the Chief Medical and Pharmaceutical Officers announced that £12m would be allocated over a three-year period to promote prudent antibiotic prescribing through enhanced hospital clinical pharmacy activity. Many trusts have introduced, for example, guidelines on prescribing by clinical indication and for surgical prophylaxis, and are using appropriate audit results (eg, based on emerging problem organisms) to focus guidance. There is also much evidence that, throughout England, the antimicrobial pharmacist posts created with the Department of Health funding have become well established.<sup>1</sup>

The prescribing sub-group of the Specialist Advisory Committee on Antimicrobial Resistance (SACAR) has played a major role in the antimicrobial pharmacy programme. It has drawn up and promulgated a template for trusts to use as guidelines and has promoted methods for the calculation of antimicrobial use. SACAR has also encouraged collaboration between antimicrobial pharmacy staff, and others such as microbiologists, who work in the same geographical region, so that data and techniques can be shared. Two national SACAR conferences, which provided a platform for workgroups as well as presentations, have been held. In addition, SACAR has

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supported members of other organisations, such as the United Kingdom Clinical Pharmacy Association (UKCPA), whose antimicrobial specialist interest group has, among other activities, developed an electronic message board for subscribers, where daily questions and answers from pharmacy practitioners are exchanged.

With the end of the “pump priming” funding, it is important that this antimicrobial pharmacy activity is maintained and developed. Chief pharmacists, for example, should have prepared and presented business cases to secure continuing funding streams. These will need to focus on activities such as ensuring an active presence on wards and clinical areas, including attendance on consultant microbiologist ward rounds, and developing and implementing trust antimicrobial policies. Carrying out projects to review and optimise antimicrobial use across hospitals, providing feedback of audit results and leading education programmes on the rational use of antimicrobials to medical, pharmacy and nursing staff will also be key.

For its part, some of the future work plans of the prescribing sub-group of SACAR are:

- To develop a consistent national hospital database for the use of antimicrobials in secondary care, working with other agencies, such as the Health and Social Care Information Centre, the Healthcare Commission (HC) and the European Surveillance of Antimicrobial Consumption (ESAC) project group
- To promote the development and use of local and regional antimicrobial use databases, for longitudinal and point prevalence analysis
- To develop consistent international hospital patient activity databases to enable the use of common population denominators, working with agencies such as ESAC
- To address differences in local resistance patterns and relate these to antimicrobial use in both primary and secondary care, working with the Health Protection Agency (HPA) and other SACAR sub-groups
- To develop evidence-based guidelines for the appropriate use of antimicrobials in both hospital and primary care settings, working with other stakeholders such as the British Society for Antimicrobial Chemotherapy (BSAC), the HPA, the Royal Pharmaceutical Society and the UKCPA, and to encourage local development
- To promote the local use of the above guidelines
- To develop audit tools for individual organisations to assess the uptake and use of evidence-based guidelines, working with agencies such as the HC
- To develop and promote appropriate strategies to educate and train users of antimicrobials, working with other SACAR groups and external agencies such as the DoH, the BSAC, the UKCPA, and universities
- To commission and organise meetings and conferences on the appropriate use of antimicrobials
- To identify areas of research for the appropriate use of antimicrobials and to prioritise and seek funding for specific projects
- To publish a report of the impact of this programme on the use of antimicrobials in acute hospitals
- To seek areas of good practice and disseminate this information
- To continue to develop the SACAR website<sup>2</sup> and to link with other useful sites
- To work with the “Connecting for Health” team to ensure that databases and information support tools are developed to ensure the optimal use of antimicrobials

With these and other initiatives, it is hoped that the contributions of pharmacists working in the antimicrobial field will continue to be valued long into the future.

### References

1. Wickens H. Antimicrobial use in hospitals: how are we doing? From SACAR conference 2005, available at [www.advisorybodies.doh.gov.uk/sacar/HayleyWickens.pdf](http://www.advisorybodies.doh.gov.uk/sacar/HayleyWickens.pdf) (accessed 29 March 2006).
2. SACAR website. Available at [www.advisorybodies.doh.gov.uk/sacar/index.htm](http://www.advisorybodies.doh.gov.uk/sacar/index.htm) (accessed 29 March 2006).

### Also in this issue ...

This issue also contains a news story about antimicrobial resistance initiatives (p110), an article about developing a web-based pharmacy to microbiology referral system (p131-2) and a paper about using defined daily doses to study the use of antibacterials (p133-6).