

**Confirmed Minutes of the Scottish Antimicrobial Prescribing Group Meeting  
Held on Tuesday 22nd August 2017  
Healthcare Improvement Scotland, Delta House, Glasgow**

**Present:**

**SAPG Project Board**

Dr Andrew Seaton (Chair), Consultant Physician, NHS Greater Glasgow and Clyde  
Dr Gail Haddock, (Vice Chair) General Practitioner, NHS Highland (Videoconference)  
Dr Jacqueline Sneddon, Project Lead Scottish Antimicrobial Prescribing Group  
Dr Brian Cook, Medical Director, Acute Services, Royal Infirmary of Edinburgh  
Mrs Christine Gilmour, Chief Pharmacist, NHS Lanarkshire  
Professor Alistair Leanord, Senior Medical Adviser HAI, Scottish Government  
Mrs Alison Wilson, Director of Pharmacy, NHS Borders  
Professor Marion Bennie, Chief Pharmaceutical Advisor, National Medicines Utilisation Unit,  
Information Services Division

**SAPG Support Services**

Ms Andrea Patton, Information Analyst, Scottish Antimicrobial Prescribing Group  
Ms Susan Paton, Project Officer, Scottish Antimicrobial Prescribing Group

**National Services Scotland**

Dr Charis Marwick, Clinical Senior Lecturer, University of Dundee  
Mr William Malcolm, Pharmaceutical Advisor, Health Protection Scotland  
Ms Rita Nogueira, Senior Information Analyst, National Services Scotland  
Ms Julie Wilson, AMR Manager, Health Protection Scotland

**Antimicrobial Management Teams**

Dr Adam Brown, Consultant Microbiologist and Infection Control Doctor, and Mrs Alison  
Macdonald, Lead Antimicrobial Pharmacist, NHS Highland (videoconference)  
Dr Alexander Mackenzie, Consultant in Infectious Diseases, NHS Grampian  
Dr Bryan Marshall, Consultant Microbiologist, NHS Dumfries and Galloway  
Dr Carlos Varon-Lopez, Consultant Microbiologist, NHS Lanarkshire  
Dr Robbie Weir, Consultant Microbiologist, NHS Forth Valley  
Dr David Wilks, Consultant Physician, NHS Lothian  
Mr Samuel Whiting, Infection Control Manager, NHS Borders and Infection Control  
Managers Group

Professor Brian Jones, Consultant Medical Microbiologist, NHS Greater Glasgow & Clyde

**Representing professional groups and specialties**

Dr Eleanor Anderson, Consultant in Public Health Medicine, Health Protection Scotland  
(CARS programme)  
Mrs Alison Cockburn, Antimicrobial Pharmacist, NHS Lothian (Association of Scottish  
Antimicrobial Pharmacists)  
Ms Ysobel Gourlay, Lead Antimicrobial Pharmacist, NHS Greater Glasgow and Clyde  
(Professional Secretary for ScotMARAP)  
Dr John Harden, Consultant in Emergency Medicine, NHS Lanarkshire, and National Clinical  
Lead for Quality & Safety Scottish Government  
Mrs Jo McEwen, Antimicrobial Nurse, NHS Tayside (Nursing)  
Professor Andrew Smith, Professor and Consultant Microbiologist, NHS Greater Glasgow and  
Clyde (Dental)  
Ms Anne Thomson, Lead Clinical Pharmacist Prescribing, NHS Greater Glasgow and Clyde  
(Scottish Prescribing Advisers Association)  
Ms Deirdre Harris, Nurse Consultant Infection Control, NHS Fife (Infection Prevention  
Society)

Dr Mairi Macleod, Consultant Microbiologist, NHS Greater Glasgow and Clyde (Scottish Microbiology and Virology Network)

**Public partners**

Mrs Suzanne Clark, Public Partner

Mr Howard McNulty, Public Partner

**Guests:**

Mr Alistair Beith, Information Analyst in ISD will now be attending SAPG on an ongoing basis

Mr Rickie Connell, Pharmaceutical Adviser, Scottish Medicines Consortium

Ms Fiona Craig, Specialist Clinical Pharmacist (Oncology/ Haematology), NHS Tayside

Ms Lindsay McClure, Pharmaceutical Advisor, Procurement, Commissioning & Facilities, National Procurement

Dr Karen Ritchie, Acting Director of Evidence, Healthcare Improvement Scotland

Ms Fiona Robb, Antimicrobial Pharmacist Queen Elizabeth University Hospital.

Ms Jean Sneddon, Project Manager, NSS

Ms Una Taylor, Senior Pharmacist Oncology/Haematology, NHS Highland

**Apologies:**

Dr Ursula Altmeyer, Consultant Microbiologist, NHS Ayrshire and Arran

Dr David Griffith, Consultant Microbiologist, NHS Fife

Dr Simon Hurding, Medicines Management Adviser and General Practitioner, NHS Lothian

Dr Michael Lockhart, Medical Microbiologist, Health Protection Scotland

Professor Alexander Crighton, University of Glasgow Dental School

Dr Busi Mooka, Infection Diseases Consultant, NHS Tayside

Ms Rachael Dunk, Team Leader, Safe Team, Chief Nursing Officer Directorate

Mrs Abigail Mullings, HAI Professional Adviser, Scottish Government

Mrs Fiona McMillan, NHS Education for Scotland Pharmacy

Mrs Lesley Shepherd, Nurse Consultant, Infection Control, Health Protection Scotland/Healthcare Improvement Scotland

Dr Martin Connor, Consultant Microbiologist, Infection Control Doctors Group

Dr Conor Doherty, Consultant in Paediatric Infectious Diseases, NHS Greater Glasgow and Clyde

Dr Stephanie Dundas, Consultant in Infectious Diseases, NHS Lanarkshire

Dr Gill Walker, Programme Director for HAI, NHS Education for Scotland

Mrs Jill Nowell, Lead Prescribing Adviser, NHS Tayside (Scottish Prescribing Advisers Association)

	Item	Action
1.	<b>Welcome and apologies for absence</b> The Chair welcomed all present and advised of apologies and guests as noted above.	
2.	<b>Declaration of Interests</b> The Chair requested that any member declarations of interest should be highlighted in advance of relevant items.	
3.	<b>Membership changes</b> <ul style="list-style-type: none"> <li>• Dr John Harden, Consultant in Emergency Medicine, NHS Lanarkshire, and National Clinical Lead for Quality &amp; Safety, Scottish Government has joined SAPG to support improvement work</li> <li>• Alistair Beith, Information Analyst in ISD will now be attending SAPG.</li> <li>• Professor Ian Gould, Consultant Microbiologist, NHS Grampian who has been Scottish Microbiology and Virology Network representative on SAPG since its inception has retired and will be replaced by Dr Mairi Macleod. Ian was thanked for his contribution to SAPG over the last 9 years</li> <li>• Dr Gill Walker, Programme Director for HAI, NHS Education for Scotland, is leaving NES and Scotland for new life in Perth, Australia. The Chair formally thanked Gill for the huge contribution she has made to SAPG. NES will advise on a replacement for Gill on SAPG in due course.</li> </ul>	

4.	<p><b>Minutes of previous meeting (Paper 1)</b> The minutes of the meeting held on 20<sup>th</sup> June were agreed without amendment.</p>	
5.	<p><b>Matters arising:</b></p> <ul style="list-style-type: none"> <li>• <b>Hospital Quality Indicators</b> JS advised that a letter has gone to board managers about the new quality indicators and details of the audit tool function on the antimicrobial companion app have been sent to lead antimicrobial pharmacists. JS asked that any Board wishing to add additional wards or additional data collectors to the audit tool should contact JS or AP or use SAPG generic e-mail address which will be circulated. <b>Action: Circulate SAPG generic e-mail address to SAPG members.</b></li> </ul> <p>WM added that standard reports within HMUD are being developed to allow boards to monitor their progress with reductions in antibiotic use. An update on the national position will be shared at the next meeting.</p>	SP
	<b>Items for Discussion/agreement</b>	
6.	<p><b>National Procurement – medicine purchasing, shortages and pricing (Presentation)</b> Lindsay McClure presented on medicine purchasing, pricing and shortages and explained how National Procurement works with the Department of Health to manage medicines supply. The Chair thanked LM for a very informative and interesting presentation and suggested regular dialogue with NP was helpful for SAPG and AMTs.</p>	
7.	<p><b>Antibiotic Guardian Awards (Presentations)</b></p> <ul style="list-style-type: none"> <li>• <b>NHS Greater Glasgow and Clyde</b> Fiona Robb, Antimicrobial Pharmacist from NHS Greater Glasgow and Clyde (GG&amp;C), presented on their submission which had been shortlisted for the Antibiotic Guardian awards. This focused on activities for EAAD 2016 held in the Glasgow Children’s Hospital utilising ideas from the e-bug resource and FR acknowledged Kate Stock, Antimicrobial Pharmacist, the infection Control Team and SAPG Public Partners who all contributed.</li> <li>• <b>NHS Tayside</b> Jo McEwen, Antimicrobial Nurse, NHS Tayside, presented on three shortlisted abstracts for the awards from NHS Tayside; Antimicrobial Ward Rounds (Heather Kennedy), Antimicrobial Stewardship for Pharmacy Technicians (Sarah Thomson) and the Role of the Nurse in Community Hospitals (JM). The Chair thanked FR and JM for sharing their excellent work and congratulated JM on winning the Staff engagement award.</li> </ul>	
8.	<p><b>Carbapenems quality improvement programme</b></p> <ul style="list-style-type: none"> <li>• <b>Further analysis of Point Prevalence Survey (PPS) data (Paper 2)</b> AC advised that the raw data from the bespoke PPS carried out in 2015 had been received and SR had extracted all useful information which is presented in paper 2. This shows the variation in piperacillin/tazobactam use by boards and details of which specialties were using carbapenems and piperacillin/tazobactam. Noted that boards also had access to their own raw data but that now almost 2 years old and practice has changed.</li> <li>• <b>Journal article</b> JS advised that the Carbapenems study group are writing up the programme as an article for publication detailing the 3 stages of the work and the impact on prescribing rates for carbapenems and piperacillin/tazobactam.</li> </ul>	
9.	<p><b>Results of Antimicrobial Management Team survey (Paper 3)</b> JS talked to the report on the AMT survey. Further work is required to promote the Antimicrobial Companion app. to increase awareness and embed its use in clinical practice. AL commented that it would be useful to also look at download statistics for the app to see where it is and is not being used. JS agreed to request this data.</p>	

	<p><b>Action: Obtain download data for next meeting of SAPG</b></p> <p>The SAPG resources to support safe and effective use of gentamicin and vancomycin are well embedded in clinical practice and largely continue to meet the needs of health boards. Some minor improvements and updates have been suggested and these will be progressed to ensure a standard approach in all boards. There has been encouraging uptake of the revised Scottish Reduction of Antimicrobial Prescribing resource with two thirds of boards planning to utilise it and the remaining boards considering it.</p>	JS
	<b>Items for Update</b>	
10.	<p><b>Update on UK AMR Strategy</b></p> <p>AL advised that an update report for 2016 on the strategy will be available by the end of 2017 but the publication date is not yet available. There has been a change in supporting group structures to now have a High Level Steering Group then a portfolio board for implementation. There are four objectives for the remaining year of the strategy and a Senior Responsible Officer for each. One of these objectives is Reduction of inappropriate antibiotic prescribing, overseen by Keith Ridge, Chief Pharmaceutical Officer. Objectives focus on actions in NHS England but expected that devolved nations will mirror them. A new draft AMT Strategy is being prepared by the Department of Health to follow on from the current one.</p>	
11.	<p><b>Update on Controlling Antimicrobial Resistance in Scotland (CARS) programme</b></p> <p>EA advised that CARS is focusing on the SONAAR (Scottish One health AMR and AMU Report) on 2016 data which includes antibiotic use and AMR data for humans and animals. EA acknowledged that animal data on antibiotic use and resistance is not standardised and there is not much available but work is ongoing with several veterinary groups to improve this. To update on other work streams there is engagement with Orkney on a one-health stewardship group bringing together clinical professionals and animal health professionals and a similar initiative in Lanarkshire. There is also now a 'Scotland's Healthy Animals' website which SAPG members may wish to have a look at <a href="http://www.scotlandshhealthyanimals.scot/">http://www.scotlandshhealthyanimals.scot/</a> The Glasgow Caledonian University working group is meeting to finalise the next stage of work on behaviour change and various research projects on risk factors and outcomes are underway in collaboration with several academic groups around the country. JW advised that new alerts have been set up on unusual drug bug combinations and will be shared with boards in a weekly communication.</p>	
12.	<p><b>Update on new work in 2017-18</b></p> <ul style="list-style-type: none"> <li>• <b>Antifungal stewardship</b></li> </ul> <p>BJ updated on the first steering group meeting which took place in the morning before SAPG. Aims of the work are to produce national consensus guidance to reduce variation and waste, ensure cost-effective use of antifungals and optimise outcomes for patients. Three clinical areas will be covered; haematology/oncology, Intensive Care/Surgery, and Respiratory. The process will involve audits of practice and a literature review followed by consultation with stakeholders. BC suggested he could seek additional Intensive Care membership and this was welcomed.</p> <ul style="list-style-type: none"> <li>• <b>Education resource to support 3-day review</b></li> </ul> <p>JS updated that the first meeting of the steering group will take place on 5<sup>th</sup> September and the work will be led by Stephanie Dundas from NHS Lanarkshire. The new resource will mirror the format used for the revised ScRAP programme.</p> <ul style="list-style-type: none"> <li>• <b>Penicillin allergy de-labelling</b></li> </ul> <p>JS advised that the first meeting of the Penicillin allergy group is scheduled to take place on 20<sup>th</sup> September and will consider approaches to identify true allergy. HM asked about public involvement in the project. JS advised that once a clear project plan and tools to support clinicians have been developed public involvement will be sought. It was agreed that the right messages about de-labelling are required from a public perspective and important to consider how these will be communicated.</p> <ul style="list-style-type: none"> <li>• <b>National hospital antimicrobial guidance (Paper 4)</b></li> </ul>	

	<p>AS talked to the paper on a proposed framework has been developed which could be integrated within current board guidelines and within the Antimicrobial Companion app. to provide clinical decision support.</p> <p>The first priority would be FIRST LINE <u>empirical</u> management of various types of sepsis. This could follow an algorithm to inform treatment choice. The second priority would be respiratory infections and further infection types could be added following discussion with AMT Leads. Proposed this will be developed via email communication between the AMT leads with face to face meetings if required. There was support from members for this approach. Guidance on both empirical and step-down antibiotic choices could feed into Day 3 Review resource.</p> <p>Planned to also link with ongoing Scottish Patient Safety Programme work on Sepsis. JH advised he is on the SPSP Sepsis group and could facilitate collaboration. JH advised that work also ongoing on pre-hospital administration of antibiotics in patients with sepsis and this should also be considered within any national hospital guidance. The Chair confirmed that pre-hospital sepsis management had been discussed at SAPG and it was previously agreed as an area for further study. Acknowledged that SAPG ratification of national guidance for this approach would be required.</p> <ul style="list-style-type: none"> <li>• <b>Paediatric stewardship</b></li> </ul> <p>JS advised that the process of negotiating resource for CD to take up this work is currently taking place and key areas of work have yet to be agreed.</p> <ul style="list-style-type: none"> <li>• <b>Nurse stewardship</b></li> </ul> <p>JM advised that work will start in October to develop a section within the Nurse Workbook for community and care home staff. The voice over for the undergraduate training slides is now complete and will be shared with all Schools of Nursing in Scotland. The first meeting of a new nurse stewardship group has not yet been organised but antimicrobial stewardship nurses from several boards will meet at the beginning of October to agree a Terms of Reference and seek support from the Scottish Executive Nurse Directors group. JH asked how stewardship fits with excellence in care and JM advised this is already mapped. FR highlighted an issue with documenting completion of the workbook via learnPro in GG&amp;C. The Chair advised that NES will be contacted but may be a health board specific issue.</p> <p><b>Action: Seek advice from NES About issue in GG&amp;C</b></p> <p>Updates on new projects will be a standing item on future SAPG agendas and it was agreed that details of new work should be outlined on the website.</p> <p><b>Action: Update on new projects on SAPG agendas.</b></p> <p><b>Action: New work to be outlined on the SAPG website.</b></p>	<p>JS</p> <p>SP JS/SP</p>
<p>13.</p>	<p><b>C-reactive protein testing in primary care</b></p> <p>Following discussions at the last CARS meeting about securing funding for CRP testing JS and ML have made a submission to the Scottish Health Technologies Group (SHTG) for formal assessment of the cost effectiveness of CRP testing in primary care in Scotland. This was a joint submission from the Health Protection Network Microbiology Group and SAPG. JS advised the focus will be evidence and existing modelling of cost effectiveness rather than developing new modelling. JS will report on progress at the October meeting.</p>	
<p>14.</p>	<p><b>National Prescribing Safety Assessment</b></p> <p>JS advised that she and AM took part in the authors' workshop in May and 35 new questions on stewardship and infection from SAPG have been put forward for the 2018 question bank. A further letter has now been received seeking further questions by the end of 2017 for the next round of the test. JS asked anyone interested in developing questions to please get in touch for training on how to format the questions. The Chair advised that this is open to all professions so invitation could be shared with colleagues in representative groups</p>	

	<b>Action: Volunteers for questions from SAPG and groups/networks to contact JS.</b>	<b>All</b>
<b>15.</b>	<p><b>European Antibiotic Awareness Day 2017</b></p> <p>JS advised that a teleconference with Public Health England has taken place and the campaign will be very similar to last year. PHE have a campaign video which has been tested in the North West of England and will rolled-out to certain TV channels with a new strapline to 'Keep antibiotics working'. Currently PHE are trying to merge the new strapline which is aimed at the public with Antibiotic Guardian which has been mainly taken up by healthcare professionals. SAPG have drafted an updated poster using the scary bacteria from last year and the new strapline. A teleconference is planned with the antimicrobial pharmacists group to seek input and agree poster design and to share ideas on activities focused on children and young families which can be replicated. After this teleconference JS and SP will discuss with HM and SC to discuss Public Partner support for EAAD activities. SAPG will once again print and distribute resources to Boards and the community pharmacy campaign will be in place during October and November with a poster and leaflets in all community pharmacies across Scotland. SAPG will develop media messages with Scottish Government and National Services Scotland communication departments. JW advised that the SONAAR report will be published on 14<sup>th</sup> November 2017 to coincide with World Antibiotic Awareness Week.</p>	
<b>16.</b>	<p><b>Antimicrobial Management Team Event 6th November 2017</b></p> <p>Next event programme is being drafted and will include updates and discussion on new SAPG projects work.</p>	
<b>17.</b>	<p><b>NICE Guidance on Sore Throat consultation</b></p> <p>JS advised that comments had been received from a variety of people from SAPG and primary care and have now been submitted to NICE.</p>	
<b>18.</b>	<p><b>NICE survey on new evidence summaries newly licensed antimicrobial products</b></p> <p>JS advised that a new NICE product featuring an evidence summary for antimicrobials not submitted for NICE appraisal is planned and a survey has been carried out to seek views on content. Members expressed concern that this may discourage submission to SMC and NICE. It was agreed this may be the case but that the NICE summary could be beneficial for boards in reviewing Individual Patient Treatment Requests.</p>	
	<b>Items for Information</b>	
<b>19.</b>	<p><b>SMC advice on new medicines</b></p> <p>Nothing to report.</p>	
<b>20.</b>	<p><b>Federation of Infection Societies conference 2017</b></p> <p>JS advised that abstract submission is open until end of September for the Federation of Infection Societies conference in Birmingham. The Chair encouraged AMTs to submit any local work.</p>	
<b>21.</b>	<p><b>Royal Pharmaceutical Society AMR campaign</b></p> <p>JS advised that the Royal Pharmaceutical Society are launching their Antimicrobial Stewardship campaign at their annual conference on 3<sup>rd</sup> September to support the UK AMR Strategy. This will highlight the role of all pharmacists in stewardship but will focus on community pharmacy and provision of self-care advice for patients. JS also noted that a Community pharmacy representative on SAPG is currently being sought.</p>	
<b>22.</b>	<p><b>AOCB</b></p> <p>CV-L from Lanarkshire raised a query about payment of copyright fees for using CURB65 and CRB65 scoring within guidance in a local app. and asked if any other boards were aware of this. Nobody was aware and JS advised that there has been a long running discussion between Lanarkshire, NES and PHE about this which was not yet resolved. It appears that BMJ require payment as they own the publication the scoring system was first reported in and JS will pursue whether this is the case and update at the next meeting.</p>	
<b>23.</b>	<p><b>Date of next meeting – 24<sup>th</sup> October 2017</b></p> <p>Following meeting: 19<sup>th</sup> December 2017</p>	

