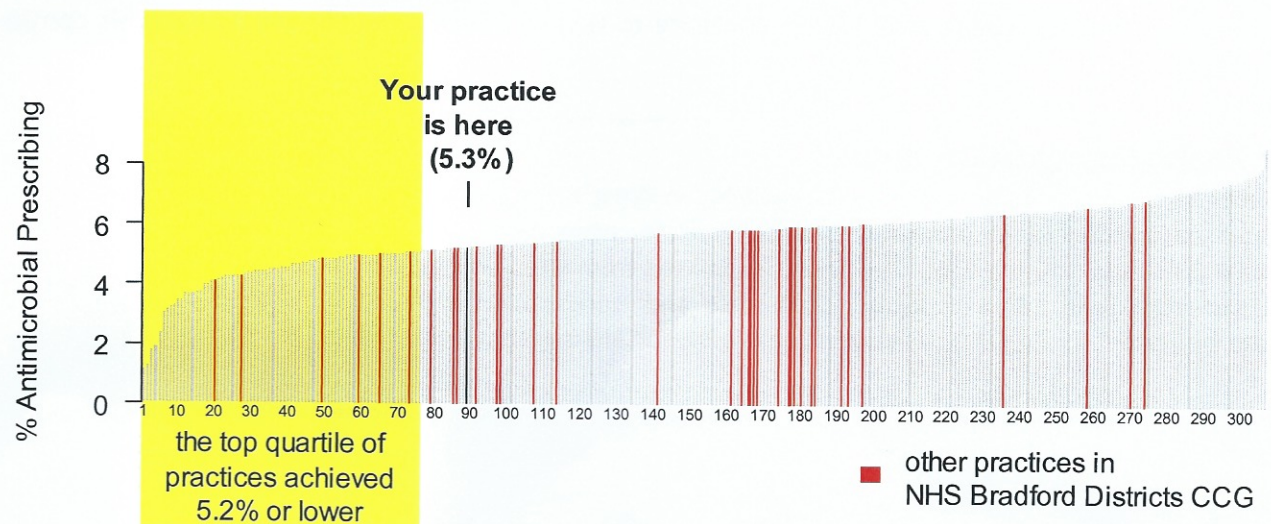


## How does your practice compare when prescribing antibiotics?

### Ashcroft Surgery - Dr Mehay and Partners

#### Achievement in participating practices across West Yorkshire

The graph below demonstrates: Your practice (black bar) and percentage of the practice population prescribed antibiotics (451) in the last 8 weeks; a lower value indicates better clinical practice.



- ◆ Achievement throughout West Yorkshire overall (range 1.2% to 8.7%)
- ◆ The best achieving practices within West Yorkshire (yellow box – achieving 5.2% or below)
- ◆ Other practices within your CCG (red bars, NHS Bradford Districts CCG)

#### Your practice achievement on individual indicators:

| Key indicators for the last 8 weeks  | Current number of patients | Change since last report |
|--|----------------------------|--------------------------|
| Prescribed an antibiotic   | 451                        | -3                       |
| Aged 70+ and prescribed Trimethoprim for urinary tract infection (UTI)                                     | 10                         | +5                       |
| 10 – 19 year olds and prescribed Phenoxymethylpenicillin (Penicillin V)                                    | 6                          | +3                       |
| Prescribed the broad spectrum antibiotic Co-amoxiclav excluding animal bites                               | 15                         | +3                       |
| COPD – rescue packs on repeat prescriptions (antibiotic & steroid)   | 33                         | 0                        |
| COPD but not prescribed either amoxicillin, clarithromycin or doxycycline when having an exacerbation      | 1                          | 0                        |
| Prescribed an antibiotic for Cellulitis and not given Flucloxacillin and having no allergy status recorded | 3                          | +3                       |
| Acne diagnosis and prescribed minocycline  | 0                          | 0                        |
| Dental abscess and a prescription of an antibiotic   | 1                          | +1                       |
| Overall number of upper respiratory tract infections with an antibiotic prescribed                         | 7                          | -1                       |



## What has changed?

Antimicrobial prescribing in your practice has decreased by

**-20%**



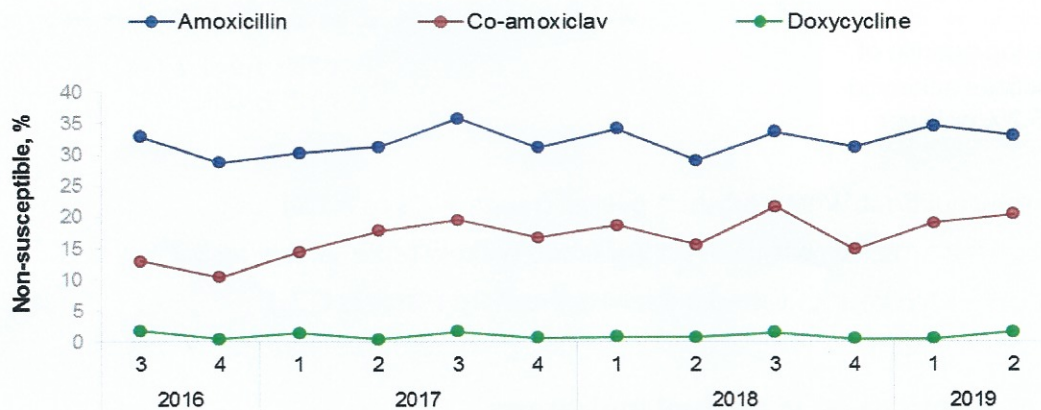
**Congratulations! Please share this result with your colleagues. Since the start of the project your team have reduced your antibiotic prescribing. Can you identify what changes have had the most impact in creating this reduction? Please continue to review your action plan to ensure this continues.**

## Public Health Susceptibility data

Community *Haemophilus influenzae* non-susceptibility in West Yorkshire and Harrogate\* to amoxicillin, co-amoxiclav and doxycycline: proportion non-susceptible, July 2016 to June 2019. Specimens submitted from GP practices only; \*Data from Leeds, Mid Yorkshire, Calderdale and Huddersfield and Harrogate laboratories only. Data not currently available for Airedale/Bradford.



Protecting and improving the nation's health



The graph(s) show data extracted from NHS diagnostic laboratories that report to Public Health England's (PHE) Second Generation Surveillance System (SGSS). In West Yorkshire & Harrogate (WYH) data is received from laboratories at the following acute trusts: Calderdale & Huddersfield, Harrogate, Leeds and Mid Yorkshire. Data is not currently received from the laboratory at Airedale Hospital.

The graph(s) show the proportion of approximately 5,000 community isolates of *Haemophilus influenzae* isolates collected from sputum samples submitted from patient with COPD that are non-susceptible to amoxicillin, co-amoxiclav and doxycycline collected between April 2016 and July 2019.

NICE guidance discourages the routine submission of sputum samples from patients with COPD. Therefore samples are generally only sent when patients have more complex problems (e.g. admission to hospital with severe exacerbations) or have failed to respond to repeated courses of antibiotics. This may skew the data towards higher rates of non-susceptibility than the true level encountered in community settings.

Current guidelines will advocate using oral amoxicillin first line for treating infective exacerbations of COPD. Around 30-35% of *H. influenzae* isolates are non-susceptible to amoxicillin. This does not necessarily imply that oral amoxicillin will fail to work on 30-35% of occasions for the reasons outlined above. In practice the clinical success rates are likely to be much higher than 65-70%.

The following inferences can be drawn from the susceptibility data:

- ◆ Use doxycycline if amoxicillin has failed or the patient is allergic to penicillin
- ◆ Don't use doxycycline if you've grown a resistant bug
- ◆ Use ciprofloxacin if the resistant bug is *P. aeruginosa*