



# Current support for reducing antimicrobial prescribing and simple collaborative approaches for research

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# Topics

Pathways to prescribing  
Opportunities to intervene  
Disruptors  
ResearchOne

# Antibiotic prescribing

Presentation  
Face to Face

On Line request

Remote  
consultation

Other  
professional  
request

Clinical  
assessment

Decision  
support

Prescription –  
now or deferred

EHR

History deterioration  
Examination  
Diagnosis  
Intervention  
Plan

Continue Configure

QOF QOF Alerts (using End of Year value)  
Blood Pressure - BP002 - Record blood pressure

Question

### General Practice Sepsis Screening & Action Tool

The General Practice Sepsis Screening & Action Tool has been triggered by information recorded in this patient's record.

Sepsis is a time critical condition. Screening, early intervention and immediate treatment saves lives.

This tool should help you follow the clinical algorithm designed by The UK Sepsis Trust to screen non-pregnant adults for features suggestive of sepsis. It is intended to support but not replace clinical judgement.

For more information & supporting documents:  
<http://sepsistrust.org/info-for-professionals/clinical-toolkits/>

Exit Continue Pause

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Clinical

Administrative

Patient Home

Major Active Problems

Minor Active Problems

Inactive Problems

Summary & Family History

Quick Glance

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Read Code Journal (4)

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Questionnaires

Record Attachments

Online Services

Video Consultation

General Practice Sepsis Screening & Action Tool

Other Details...

Exact date & time

Mon 23 Jan 2017

07:35

Assessment

Sepsis Screening

The patient is showing signs of possible Sepsis.

Sepsis is a time critical condition. Screening, early intervention and immediate treatment saves lives. You should consider performing the full set of observations below.

Initial Observations:

O/E - temperature

degC

O/E - rate of respiration

Resp/min

Pulse rate

bpm

This assessment is based on the General Practice Sepsis Screening and Action Tool developed by The UK Sepsis Trust.

For more information & supporting documents:

[The UK Sepsis Trust - Clinical Toolkits](#)

Is the patient presenting with any of the following:

Reduced conscious level

Disorientation

Acute confusion

Consider blood glucose test for non-diabetics:

Blood glucose level

mmol/L

Are any 2 of the following present?

- Temperature > 38.3 0C or < 36 0C

- Respiratory rate > 20 per minute

- Heart rate > 90 per minute

- Acute confusion, disorientation, reduced conscious level

- Consider blood glucose: > 7.7 relevant in non-diabetics

These features may indicate severe (Red Flag) Sepsis:

- Systolic BP < 90 mmHg

- Respiratory rate > 25 per minute

- Heart rate > 130 per minute

- Responds only to voice or pain/unresponsive

- Purpuric Rash

- Oxygen Saturations < 91%

(may be appropriate to accept < 91% in patients with known COPD)

\*Values are guides. Interpret observations in the context of the normal physiology for the patient.

Is any red flag present?

If 2 or more features suggest Sepsis look for other features of severe (Red Flag) Sepsis.

Systolic BP

mmHg

Oxygen saturation at periphery

%

Purpuric rash

Information

Print

Suspend

Ok

Cancel

Show Incomplete Fields

O/E - temperature

Date

degC

No previous values

Jan

Feb

Mar

Apr

May

Jun

Jul

Aug

Sep

Oct

Nov

Dec

Jan

Show recordings from other templates

Show empty recordings

Search features

0 115 6 157 278 59 1 0 0 0 0 0 0 0 7 193 192

07:37

SystemOne Demo

SystemOne GP: Dr Jo...

Presentation1 - Pow...

ENG

07:37

23/01/2017

About

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## The Protocol has identified that 2 or more clinical observations are outside of normal limits.

The Protocol will now check to see if any of the below Red Flags are present.

- Systolic BP < 90 mmHg
- Respiratory rate > 25 per minute
- Heart rate > 130 per minute
- Responds only to voice or pain/unresponsive
  - Purpuric Rash
- Oxygen Saturations < 91%

(may be appropriate to accept SpO2 < 91% in patients with known)



Pause

About

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## RED FLAG SEPSIS

The Protocol has identified one or more Sepsis Red Flags are present. However, this Protocol is only intended to aid and supplement, not substitute for, the expertise and judgement of physicians, pharmacists or other healthcare professionals.

**Sepsis is a time critical condition, and if suspected the following immediate actions are required:**

- Dial 999
- Arrange a blue light transfer.
- Write a brief clear handover including observations and antibiotic allergies where present.

**Administer Oxygen and other appropriate immediate care as available.**



Pause



## Treating your infection



Patient Name

Jean Brown

Your doctor or nurse recommends that you self-care ☐

| Your infection                                     | Usually lasts | How to treat yourself better for these infections, now and next time  | When should you get help:<br>Contact your GP practice or contact NHS 111 (England), NHS 24 (Scotland dial 111), or NHS Direct (Wales dial 0845 4647)  |
|--|---------------|---|---|
| <input type="checkbox"/> Middle-ear infection      | 4 days        | <ul style="list-style-type: none"> <li>Have plenty of rest.</li> <li>Drink enough fluids to avoid feeling thirsty.</li> </ul>   | <p><b>1. to 8. are possible signs of serious illness and should be assessed urgently. Phone for advice if you are not sure how urgent the symptoms are.</b></p> <ol style="list-style-type: none"> <li>If you develop a severe headache and are sick.</li> <li>If your skin is very cold or has a strange colour, or you develop an unusual rash.</li> <li>If you feel confused or have slurred speech or are very drowsy.</li> <li>If you have difficulty breathing. Signs that suggest breathing problems can include: <ul style="list-style-type: none"> <li>breathing quickly</li> <li>turning blue around the lips and the skin below the mouth</li> <li>skin between or above the ribs getting sucked or pulled in with every breath.</li> </ul> </li> <li>If you develop chest pain.</li> <li>If you have difficulty swallowing or are drooling.</li> <li>If you cough up blood.</li> <li>If you are feeling a lot worse.</li> </ol> <p><b>Less serious signs that can usually wait until the next available GP appointment:</b></p> <ol style="list-style-type: none"> <li>If you are not improving by the time given in the 'Usually lasts' column.</li> <li>In children with middle-ear infection: if fluid is coming out of their ears or if they have new deafness.</li> <li>Other .....</li> </ol> |
| <input type="checkbox"/> Sore throat               | 7 days        | <ul style="list-style-type: none"> <li>Ask your local pharmacist to recommend medicines to help your symptoms or pain (or both).</li> </ul>   |   |
| <input type="checkbox"/> Common cold               | 10 days       |   |   |
| <input type="checkbox"/> Sinusitis                 | 18 days       | <ul style="list-style-type: none"> <li>Fever is a sign the body is fighting the infection and usually gets better by itself in most cases. You can use paracetamol (or ibuprofen) if you or your child are uncomfortable as a result of a fever.</li> </ul> |   |
| <input type="checkbox"/> Cough or bronchitis       | 3 weeks       | <ul style="list-style-type: none"> <li>Use a tissue and wash your hands well to help prevent spread of your infection to your family, friends and others you meet.</li> </ul>   |   |
| <input type="checkbox"/> Other infection:<br>..... | ..... days    | <ul style="list-style-type: none"> <li>Other things you can do suggested by GP or nurse:<br/>.....<br/>.....</li> </ul>   |   |

Back-up antibiotic prescription to be collected after  days only if you do not feel better or you feel worse.

- 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.

Never share antibiotics and always return any unused antibiotics to a pharmacy for safe disposal

# Interventions

IoT

Algorithms

Disruptors

Point of care  
diagnostics

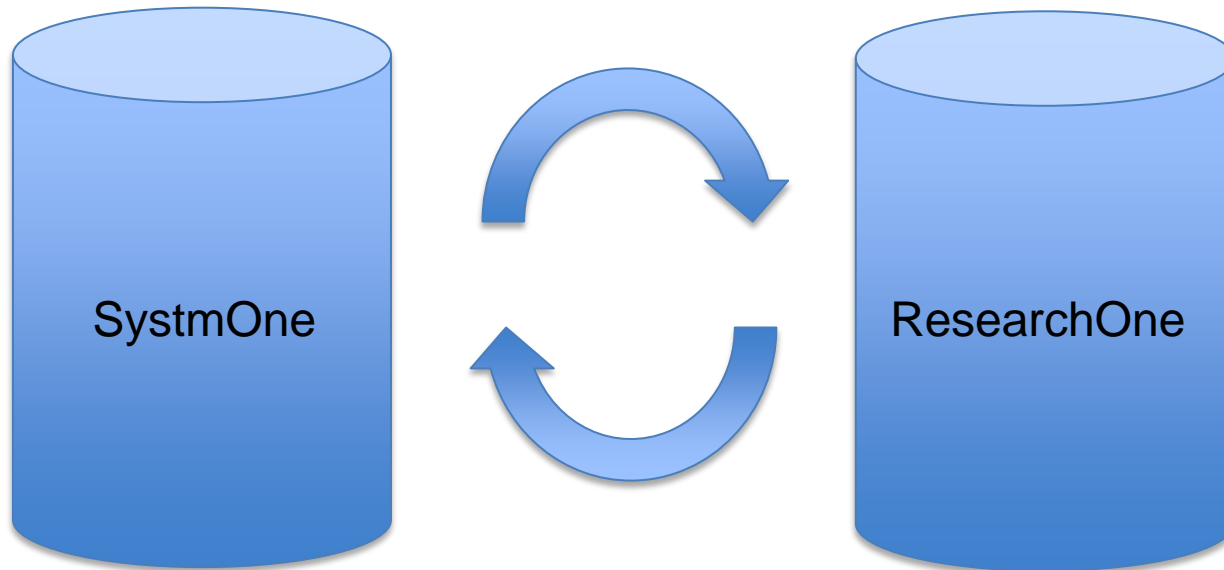
EHR

Outcomes

Remote GP



# ResearchOne



Weekly extraction, anonymised