# Appendix B: stakeholder consultation comments table

## 2018 surveillance – Antimicrobial stewardship: systems and processes for effective antimicrobial medicine use (2015)
### NICE guideline NG15

Consultation dates: 7 to 20 November 2017

| **Do you agree with the proposal not to update the guideline?** | | | |
|---|---|---|---|
| **Stakeholder** | **Overall response** | **Comments** | **NICE response** |
| NHS Leeds North Clinical Commissioning Group | Yes | No comments provided | Thank you for your answer. |
| Scottish Antimicrobial Prescribing Group | Yes | No comments provided | Thank you for your answer. |
| Royal College of Paediatrics and Child Health | Yes | No comments provided | Thank you for your answer. |
| South Eastern Health and Social Care Trust | Yes | The NG 15 tool has been useful for assessment and benchmarking of progress in Antimicrobial Stewardship across different trusts | Thank you for your comment. We are pleased to hear that the tool has been useful for assessment and benchmarking. |
| British Society for Antimicrobial Chemotherapy (BSAC) | No answer | Members of the British Society for Antimicrobial Chemotherapy (BSAC) have no further comments to make with regard to updating this consultation. | Thank you for your feedback. |
| British Association of Oral Surgeons (BAOS) | Yes | This is a review of existing 2015 guidance by NICE on antimicrobial stewardship. It's a system and process guideline and BDA (British Dental Association)/FGDP (Faculty of General Dental Practice) provided feedback for the original consultation in 2015. It's for all healthcare prescribers so we ensured the specific differences for | Thank you for your answer. |

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| | | dentistry e.g. delayed prescribing, repeat prescriptions were addressed. The guideline is good and I don't think there's been any research or shift in thought on how to deliver better antimicrobial stewardship in healthcare. | |
| Public Health England (PHE) | No | 1) Under 'Antimicrobial stewardship interventions', education is mentioned but not behavioural science.

2) There is currently no information about patient facing interventions under the general header of anti-microbial stewardship, such as providing patients with guidance about self-care, or information on correct use of antibiotics, though this is included later in the document under 'Information for prescribers'. PHE recommend that the guidelines should be updated to include the above mentioned patient facing interventions in antimicrobial stewardship.

3) The TARGET toolkit is mentioned as a resource for Commissioners and then in the "Further Resources" section, but not presented as a resource for prescribers and for Managers and Leads of Services to support a change in prescribing practices, while TARGET is designed as an integrated package of resources for use by the whole primary care system. PHE recommends the guideline is edited to include the toolkit in the "resources for prescribers" section.

4) The list of randomised controlled trials (RCTs) under research recommendations in Section 3 does not include information on RCTs to reduce unnecessary antibiotic prescribing, nor RCTs that reduce the number of patients who expect antibiotics/go to the general practitioner with self-limited infections.

5) In the existing document there is no alignment between infection prevention and stewardship. It is important to promote infection prevention and control (IPC) alongside antimicrobial stewardship, as the two are complementary.

There is no direct reference to IPC in the document, thus it is suggested that references to other IPC NICE guidelines should be added to the existing document. | Thank you for your comments.

1) The scope of NG15 (p.8) notes that areas that will be covered includes 'Reducing the use of antimicrobials without increasing harm through changing behaviour of health and social care practitioners and patients or their carers.' Changing the behaviour of prescribers is a key aspect of the guideline. Although behavioural science is not specifically mentioned in the guideline recommendations, it underpins many of the recommendations which are intended to achieve changes in behaviour among prescribers, including:

- providing regular feedback and updates to individual prescribers about prescribing including benchmarking against local and national prescribing rates and trends

- reviewing prescribing and resistance data and feeding information back to prescribers

- promoting education for prescribers and exploring reasons for very high, increasing or very low volumes of prescribing, or use of antimicrobials not recommended

- education‑based programmes, peer review of prescribing, and encouraging an open and transparent culture to allow questioning of prescribing practices of colleagues.

2) As you note, there are some recommendations about self-care, and information on correct use of antibiotics, in NG15. However this issue is covered in greater detail in NICE guideline NG63 Antimicrobial stewardship: changing risk-related behaviours in the general population. A link to NG63 will be added to NG15.

Additionally, NICE is now producing antimicrobial prescribing guidelines for managing common infections. These will include patient facing interventions such as self-care. See the first of these guidelines on Sinusitis (acute) for an example. Further guidelines for other |

| | | | respiratory tract infections, and urinary tract infections, are in development. |
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| | | | 3) The 'Managers and leads of services' section states 'Managers and leads of services could support a change in prescribing practice by […] signposting prescribers to relevant resources (see further resources for details of resources you may wish to include).' There is a link within this statement to the list of further resources, which notes that 'For primary care, the TARGET antibiotics toolkit designed to support CPD, audit, training and self-assessment for the whole primary care team within a GP practice or out-of-hours setting.' We believe that the TARGET toolkit is suitably signposted within the guideline. |
| | | | 4) Several RCTs based on reducing unnecessary antibiotic prescribing were examined by the guideline (see pp.58–59), although these were of low quality. The Guideline Development Group did not feel it necessary to make a specific research recommendation in this area. However, NICE is aware of and are monitoring a number of trials on antimicrobial resistance which includes trials examining reduction of unnecessary antibiotic prescribing. |
| | | | Regarding RCTs that reduce the number of patients who expect antibiotics/go to the general practitioner with self-limited infections. This issue is of greater relevance to NICE guideline NG63 Antimicrobial stewardship: changing risk-related behaviours in the general population (which includes some research recommendations relevant to the issues you raise). The current surveillance review focuses only on NG15. |
| | | | 5) The scope of NG15 (p.8) notes that areas that will not be covered includes 'Hand-hygiene, decolonisation and infection prevention and control measures.' Infection prevention and control is covered by the following NICE guidance and quality standards: |
| | | | • NICE guideline CG139 Healthcare-associated infections: prevention and control in primary and community care |
| | | | • NICE guideline PH36 Healthcare-associated infections: prevention and control |
| | | | • NICE quality standard 61 Infection prevention and control |

| Stakeholder | Overall response | Comments | NICE response |
|---|---|---|---|
| | | | The above documents are linked to from NG15 section 4.2 [Related NICE guidance and quality standards](#). Additionally the NICE Pathway on [Prevention and control of healthcare-associated infections](#) brings together all the relevant guidance in an interactive flowchart. |
| MSD (Merck Sharp & Dohme) Ltd | Yes | No comments provided | Thank you for your answer. |
| Royal College of Nursing | No answer | This is to inform you that the Royal College of Nursing has no comments to submit to inform on the above consultation at this present time. | Thank you for your feedback. |
| UKCPA (UK Clinical Pharmacy Association): Pharmacy Infection Network | Yes | No comments provided | Thank you for your answer. |

## Do you have any comments on areas excluded from the scope of the guideline?

| Stakeholder | Overall response | Comments | NICE response |
|---|---|---|---|
| NHS Leeds North Clinical Commissioning Group | No answer | Having read the intention of NICE not to update this guideline (apart from adding a the local antimicrobial data as a tool on the guideline tools section on the website), I have no comment to make other than when further evidence around course lengths and whether to finish courses of antibiotics is available NG15 should be looked at again. | Thank you for your comment. NICE has a process which will allow the guideline to react, if deemed appropriate, to new evidence on antimicrobial course length and completing the course if and when it is published. All relevant new evidence will also be examined at the next surveillance review. |
| Scottish Antimicrobial Prescribing Group | No | No comments provided | Thank you for your answer. |
| Royal College of Paediatrics and Child Health | No | No comments provided | Thank you for your answer. |

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| South Eastern Health and Social Care Trust | No | No comments provided | Thank you for your answer. |
| British Association of Oral Surgeons (BAOS) | No | No comments provided | Thank you for your answer. |
| Public Health England (PHE) | No | No comments provided | Thank you for your answer. |
| MSD Ltd | No | No comments provided | Thank you for your answer. |
| UKCPA (UK Clinical Pharmacy Association): Pharmacy Infection Network | No | No comments provided | Thank you for your answer. |

## Do you have any comments on equalities issues?

| Stakeholder | Overall response | Comments | NICE response |
|---|---|---|---|
| Scottish Antimicrobial Prescribing Group | No | No comments provided | Thank you for your answer. |
| Royal College of Paediatrics and Child Health | No | No comments provided | Thank you for your answer. |
| South Eastern Health and Social Care Trust | No | No comments provided | Thank you for your answer. |
| British Association of Oral Surgeons (BAOS) | No | No comments provided | Thank you for your answer. |
| Public Health England (PHE) | No | No comments provided | Thank you for your answer. |
| MSD Ltd | No | No comments provided | Thank you for your answer. |

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|---|---|---|---|
| UKCPA (UK Clinical Pharmacy Association): Pharmacy Infection Network | No | No comments provided | Thank you for your answer. |

Appendix B: stakeholder consultation comments table for 2-year surveillance of – Antimicrobial stewardship: systems and processes for effective antimicrobial medicine use (2015) NICE guideline NG15

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