

Thames Valley and Wessex antimicrobial prescribing audit – quick guide

1. Aim of the audit:

- To enable dentists to improve their prescribing practise for acute dental conditions by undertaking an audit

2. Objectives

- To undertake an audit for 10 patients who have been prescribed antimicrobial drugs for acute dental conditions
- To received feedback from this audit on compliance with national guidelines
- To implement changes as a result of learning from the audit
- To undertake a second audit on 10 patients
- To receive feedback on improvement (or not) in prescribing practise as a result of the changes implemented
- To receive feedback on practise in comparison with peers

3. Background

Antimicrobial resistance is a major threat to human health. Dentists prescribe approximately 9% of all antimicrobials prescribed in primary care so dentists potentially contribute to the problem of increasing antimicrobial resistance.

Recent guidance from NICE on antimicrobial stewardship recommends that national or local guidelines are followed and when prescribing antimicrobials prescribers should take account the risk of AMR for individual patients and the population as a whole. The Health and Social Care Act 2008 Code of Practice 2015, which applies to all health care providers, sets out in compliance criterion 3 the need to demonstrate “appropriate antimicrobial use to optimise patient outcomes, reduce the risk of adverse events and antimicrobial resistance”. Specifically dentists are required to have systems in place to monitor the use of antimicrobials to ensure inappropriate and harmful use is minimised.

Clinical audit is a quality improvement process that aims to improve patient care through a systematic review of care against explicit criteria. It is a cyclic and multidisciplinary process which involves a series of steps from planning the audit through measuring the performance to implementing and sustaining the change.

In 2016 a national AMR (antimicrobial resistance) toolkit was developed for dentists. The toolkit includes resources such as posters and leaflets as well as an audit tool. Health Education England has provided funding for a project to support dentists in Thames Valley to use this toolkit and undertake an audit.

4. Project details

Dentists who sign up to take part in this audit project will given:

- An A3 poster to put in the practice waiting room
- A leaflet explaining how to become an antibiotic guardian
- 20 patient leaflets explaining why antibiotics may not be the best treatment for toothache
- Guidelines on best practice for managing pain relief for toothache
- Access to an online audit tool
- 2 hours CPD for completion of 2 audit cycles (10 patients per cycle)
- Payment for the dentist and practice on completion of 2 audits

5. Payment information

Each dentist who completes 2 audit cycles will be given a one off payment of £75 on completion of the 2nd cycle.

Each practice (contract holder) where one or more dentists complete 2 audit cycles will be given a one off payment of £50.

On completion of the 2nd audit the online provider will confirm completion and send dentists and practice details to Health Education England who will administer the payment.

As funding is limited a maximum of 200 dentists will be paid for completion of the 2 audit cycles. Sign up to the audit will be on a first come first served basis and closed once 200 dentists have submitted data for 3 patients.

6. Audit details

To enable dentists to complete the audits as easily as possible an online tool has been commissioned. **The online tool can be accessed by going to the dental referrals website, selecting Thames Valley from the dentist's section, and the scroll down to AMR audit.** You can access the website at www.dental-referrals.org You can also directly access the audit by clicking [here](#).

The online tool is based on the national Prescribing and Management of Dental Infection Audit spreadsheet developed by the BDA, FDGP and NHS amongst others.

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You will need to sign up to the audit to ensure that we capture the required information to provide you with your CPD certificate and audit report. Once submitted data is anonymised.

Dentists have the option to submit data for each patient one at a time as the patients are seen or in one go by completing the form 10 times.

This audit project is designed to be relevant to prescribing for acute dental conditions only. It is not relevant to antibiotic prescriptions for other reasons e.g. prophylaxis.

Data requested by the online tool will not be patient identifiable. Information about a dentist's individual prescribing **practise will not be available to anyone but the dentist** themselves.

Only aggregated and anonymised data will be made available to HEE and PHE.

6.1 First audit

For the first audit each dentist should submit data (via the online tool) for 10 consecutive patient for whom anti biotics are prescribed for acute dental conditions. The data used can be retrospective i.e. can be for the last 10 patients who were seen in the past and prescribed antibiotics.

Following submission of 10 entries the dentist will receive feedback on how their prescribing compares to national prescribing guidelines (<http://www.fgdp.org.uk/OSI/open-standards-initiative.ashx>). The compliance report will be sent with 24 – 48 hours of the completion of the 10th audit form. The feedback will look at whether prescribing complies with guidelines. Feedback will not contain information on the rate of prescribing compared with peers as it is recognised that this will vary depending on the demographics of the practice population.

The dentist should use this feedback to develop an action plan which will enable them to implement changes to their practise.

Once all 200 dentists have completed the audit a peer compliance report will be emailed to you demonstrating a comparison of your reports to the area average.

6.2 Second audit

Dentists must complete the data submission (via the online tool) for the second audit by 5pm on 31st December 2017.

For the second audit each dentist should submit data (via the online tool) for 10 consecutive patient for whom anti biotics are prescribed for acute dental conditions after the changes to prescribing practise have been made. The data used for this second audit must be prospective i.e. for patients seen once the audit action plan has been developed and implemented.

6.3 Completion of the audits

Following completion of both audits (within the required timescales) dentists will receive:

- Feedback on how their prescribing practise has changed between the 2 audits
- How their prescribing practise compares with that of peers (peer data will be aggregated and anonymous)
- A CPD certificate for 2 hours verifiable CPD
- Payment of £75 for each dentist completing the 2 audit cycles
- Payment of £50 for each practice (contact holder) where one or more dentists complete 2 audits