Wales UTI QI: Review of documented indication 2019/20

People prescribed an antimicrobial have the clinical indication … documented in their clinical record**.**
[NICE QS121, WHC 18/20, UK plan[1]]

Measure: Proportion of prescriptions for UTI antimicrobial with a coded clinical indication (1 month). At least 2 data cycles

OR

Proportion of broad spectrum antibiotic prescriptions with a coded clinical indication in the clinical record (co-amoxiclav, cephalosporins, fluoroquinolones and clindamycin[2]). (1 month) At least 2 data cycles

Recording in patients' records the clinical indication (that is, the results of clinical assessment, symptoms and diagnosis) for an antimicrobial, and the prescribed dose and duration of treatment, allows better management during follow-up of care and transfer of care to another setting. [NICE QS121]

All prescribers should document indications for all antimicrobial prescriptions, facilitating effective audit and review of antimicrobial prescribing [WHC 18/20]

Compared with narrow-spectrum antibiotics, clindamycin, cephalosporins, fluoroquinolones and co-amoxiclav are more likely to significantly change the gut flora, potentially allowing other bacteria, such as C. difficile, to become established. They have a very useful role in specific clinical situations and should be reserved for use, as per guidelines

Resources: Diagnosis – flow charts [3]
A UTI template is in development which can assist coding

Method

This audit is suitable for a run chart, i.e. several data collections at monthly intervals. It is expected that initial levels of appropriate contemporaneous coding may be low.

Measure 1
1. Identify number of patients prescribed UTI antibiotics in the month prior to the search date i.e. trimethoprim, nitrofurantoin, fosfomycin & pivmecillinam[4]

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[1] Tackling antimicrobial resistance 2019–2024 The UK's five-year national action plan, "Require all infection consultations to record an appropriate diagnostic code, and be subject to audit

[2] AWMSG National Prescribing Indicator 2019/20: *Number of 4C antimicrobial (co-amoxiclav, cephalosporins, fluoroquinolones and clindamycin) items per 1,000 patients*

[3] Preventing UTI, Infection Prevention and Control: Toolkits and Resources PHW Preventing UTI Toolkit and resources
RCGP TARGET toolkit UTI

[4] E.g. EMIS: Include **Patients** with **medication issues** where: The **Drug** us Urinary-Tract infections [nitrofurantoin, fosfomycin & pivmecillinam] or sulphonamides or Trimethoprim and the **Date of Issue** is after 1 month before the search date.

2. From this search, identify the number with a coded clinical indication (entered at time of consultation) during the same period:
Cystitis [K15], Recurrent UTI [1AG], Suspected UTI [1J4], Acute pyelonephritis [K101], Urinary tract infection, site not specified [K190],
The coded indication may be found within the consultation or 'linked' with the medication on the prescribing screen. This search may be automated in some GP software systems.
Where this is not possible, a case-by-case search may be necessary for each patient prescribed a UTI antibiotic over the 1month period, in which case use of a sample can be considered.

Measure 2
1. Identify patients prescribed co-amoxiclav, cephalosporins, fluoroquinolones and clindamycin
2. From this search, identify a random sample. Identify the number with a linked infection code (as for Measure1) during the same period and collate the infections identified.

Sample Size Guide

If the number of patients falls between the ranges, then round to the nearest whole number

No. of Patients prescribed antibiotics	Sample Size Needed	Percentage Sampled
0-5	all	100
10	7	70
20	11	55
30	14	47
40	15	37
50	16	32
60	17	28
70	18	26
80	19	24
90	19	21
100	20	20
>100	20 (maximum)	

Results- Search 1 UTI antibiotics with linked indication

Practice total population	
Number of patients prescribed UTI antibiotics /1 month (% practice population) Sample number	**N = % =**
Number patients prescribed UTI antibiotics with a coded clinical indication (entered on day of consultation), during the same period	
% patients prescribed UTI antibiotics with a coded clinical indication, during the same period	**For cluster report**

Results - Search 2 Broad spectrum antibiotics with linked infection indication

Practice total population	
Number of patients prescribed co-amoxiclav, cephalosporins, fluoroquinolones and clindamycin /1 month (% practice population) (*interpret alongside national prescribing indicator/1000STAR PUs) /month*	**N= %**
Sample number	
Number patients prescribed co-amoxiclav, cephalosporins, fluoroquinolones and clindamycin with a linked problem code, during the same period	
% patients prescribed co-amoxiclav, cephalosporins, fluoroquinolones and clindamycin with a linked problem code, during the same period	**For cluster report**
Include a summary of the indications identified *Are these in accordance with guidelines? Health Board / PHW or* NICE.PHE Summary prescribing guidelines	*For practice discussion*

Practice actions & other notes

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