



## Knowledge and Library Services (KLS)

### Impact stories

#### Title:

Evidence from a Knowledge and Library Service (KLS) literature search in July 2018, supported the publication of three peer-reviewed manuscripts to assess local implementation of national antimicrobial stewardship (AMS) interventions

#### User testimonial:

*"KLS were so helpful in conducting the literature review which informed write up of our research. We included literature identified by the KLS team in the introduction and discussion of all three published papers. They even provided me with the endnote library for all literature identified, which was so helpful and saved so much time".* **Rosie Allison**  
**e-Bug Project Manager, Primary Care and Interventions Unit, HCAI & AMR Division**  
**National Infection Service**

#### Challenge:

Antimicrobial stewardship is a specialist subject which could have proved a challenge to ask an "outsider" to conduct a literature review without full understanding of terms and context.

#### Solution:

Our team provided some ideas for key search terms, using the form provided by KLS, and following up by email with the KLS to explain the context and what the evidence would be used for. This was a surprisingly easy process.

#### Impact:

We published three manuscripts, which included the data identified by the KLS. Their expertise with literature reviews was invaluable and the speed that it was conducted was incredible. The published manuscripts are available:

Allison, R., Lecky, D.M., Beech, E., Ashiru-Oredope, D., Costelloe, C., Owens, R. and McNulty, C.A., 2020. [What Resources do NHS Commissioning Organisations Use to Support Antimicrobial Stewardship in Primary Care in England?](#) *Antibiotics*, 9(4), p.158.

Allison, R., Lecky, D.M., Beech, E., Ashiru-Oredope, D., Costelloe, C., Owens, R. and McNulty, C.A., 2020. [Local implementation of national guidance on management of common infections in primary care in England: findings of a mixed-methods national questionnaire.](#) The Pharmaceutical Journal.

Allison, R., Lecky, D.M., Beech, E., Ashiru-Oredope, D., Costelloe, C., Owens, R. and McNulty, C.A., 2020. [What antimicrobial stewardship strategies do NHS commissioning organizations implement in primary care in England?](#) JAC-Antimicrobial Resistance, Volume 2, Issue 2.

These publications provide benchmark data of what antimicrobial stewardship strategies and initiatives are promoted around England. There are implications for: the development of resources to support AMS activity in primary care settings; NHS commissioning organisations; and primary care practitioners.

For example, our research concluded that national antimicrobial resistance improvement schemes, in particular the NHS England Quality Premium, have influenced CCG improvement priorities. Most CCGs now report successful improvement strategies including the use of both local and national antibiotic prescribing data to motivate improvements; these should be continued and extended to out-of-hours providers. As local audit data have helped to identify reasons for inappropriate prescribing and inform improvement planning, all organisations should adopt this strategy and include it in local quality improvement schemes, ensuring performance reporting to organisational board level.

Additionally, our research showed that promotion of AMS resources to general practices is currently excellent, but as evaluation of uptake or effect is poor, this should be encouraged by resource providers and through quality improvement programmes. Medicines management teams should be informed when national guidance is updated, and changes should be highlighted, so that the medicines management teams can review local guidance in a timely manner. Trainers should be encouraged to promote and highlight the importance of action planning within their AMS training. AMS resources, such as leaflets and education, should be promoted across the whole health economy, including Out of Hours and care homes.

**Success factors:**

The willingness of the KLS team to help with the literature search. It helped that we had already thought about search terms and appropriate databases etc, so could share this with the team, rather than starting from scratch. Many thanks to Barbara Norrey in the KLS, who conducted the literature review.

**Lessons:**

I have already recommended the KLS team to other colleagues, and will continue to do so.

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