

# pAMS network vision empowering district general hospitals

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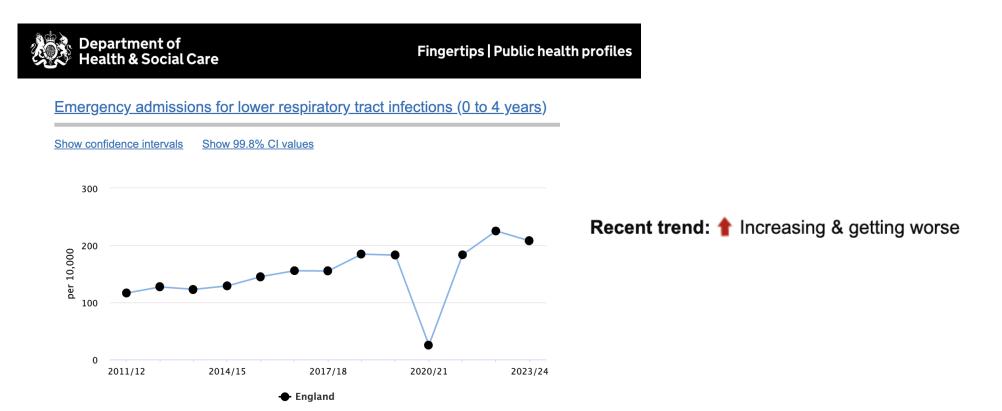
### Declarations

The educational arm of this project is co-funded by an unrestricted grant provided by GSK and in-kind funding from BSAC

# Antimicrobial use rising in hospitals



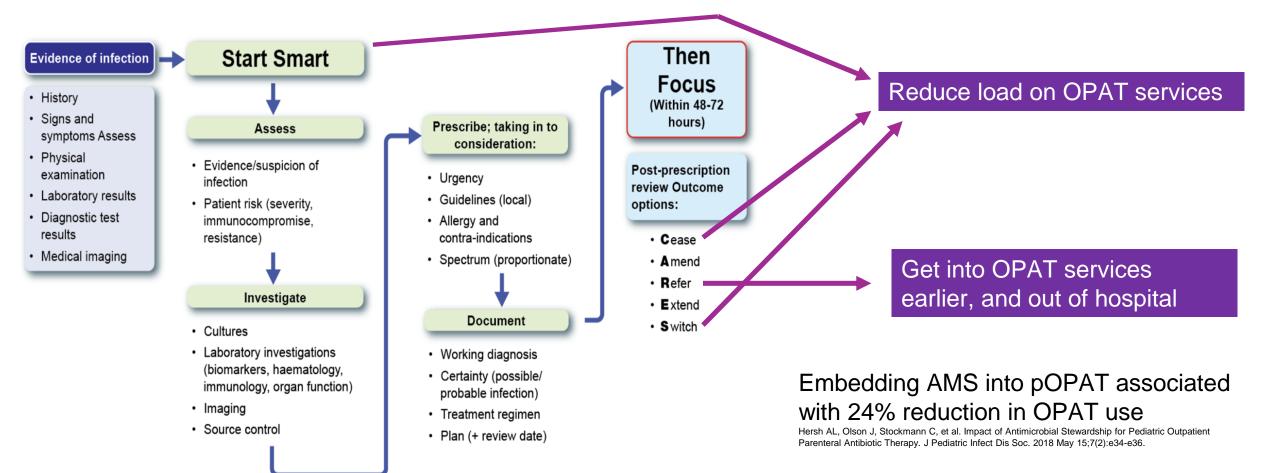
52.3% of children (1 to 9 years) in hospital receive antibiotics (UKHSA PPS, 2023)



# AMS needed to support OPAT

#### OPAT not indicated in 40% (US study)

Knackstedt ED, Stockmann C, Davis CR et al.. Outpatient parenteral antimicrobial therapy in pediatrics: an opportunity to expand antimicrobial stewardship. Infect Control Hosp Epidemiol. 2015 Feb;36(2):222-4..



## **Barriers to pAMS**

South Yorkshire Service Evaluation

Notable difference in what is offered re: AMS to children compared to adults (inequality)

- Staff shortages in microbiologists in all DGHs
- No staff capacity to provide routine AMS team contact with ward areas (adults or paediatrics)
- Minimal paediatric representation for trust AMS committee





#### Journal of Hospital Infection



journal homepage: www.elsevier.com/locate/jhin

Short report

#### Paediatric antimicrobial stewardship programmes in the UK's regional children's hospitals

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#### Funding of PAS services

Most UK children's hospitals delivered their PAS services with little or no formal funding, using pre-existing staff. Pharmacists and microbiologists were funded as part of core Trust activity with the bulk of their work within adult services.



# Improving AMS programmes for paediatric services via a shared post working collaboratively across five hospital trusts

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South Yorkshire Integrated Care System

1. Sheffield Children's NHS Foundation Trust, Sheffield. 2. Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust, Doncaster



Aim to embed AMS principles and practices into the routine care of children accessing paediatric services in South Yorkshire

### Service evaluation

Benchmarking against AMS quality indicators

### Regional AMS network created

Microbiologists
Paediatricians
Pharmacists

- Met bi-monthly
- Co-designed regional interventions

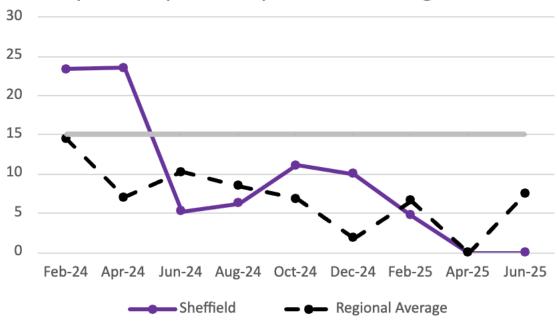


### Impact of South Yorkshire pAMS pilot network

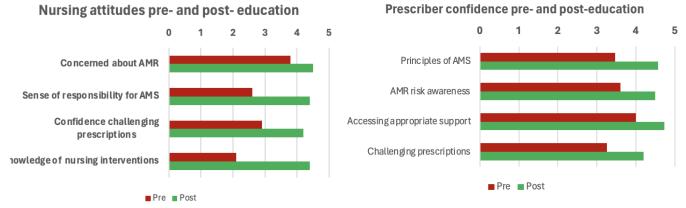
### **Quantitative** (IVOS)

Inappropriate IV Abs reduced from 14.5% to 7.5% over 12 months.

% of patients still receiving IV antibiotics past the point they meet switching criteria

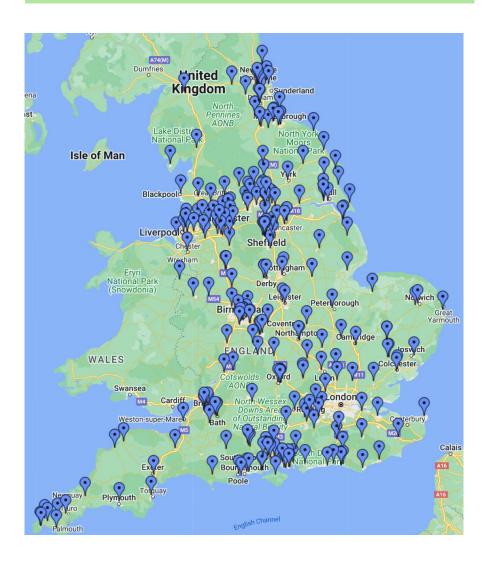


### **Qualitative** (confidence & quality)



Quality Indicator	December	June	
Quality Indicator	2023	2025	
Indication documented	77.4%	94%	<b>↑</b>
Duration or review date documented	35.5%	43%	<b>↑</b>
Appropriate cultures prior to antibiotics	43.5%	79.7%	<b>↑</b>
Adherence to guidelines	87.1%	88%	<b>↑</b>

#### Local hospitals (paediatric inpatients)



#### Tertiary children's hospitals



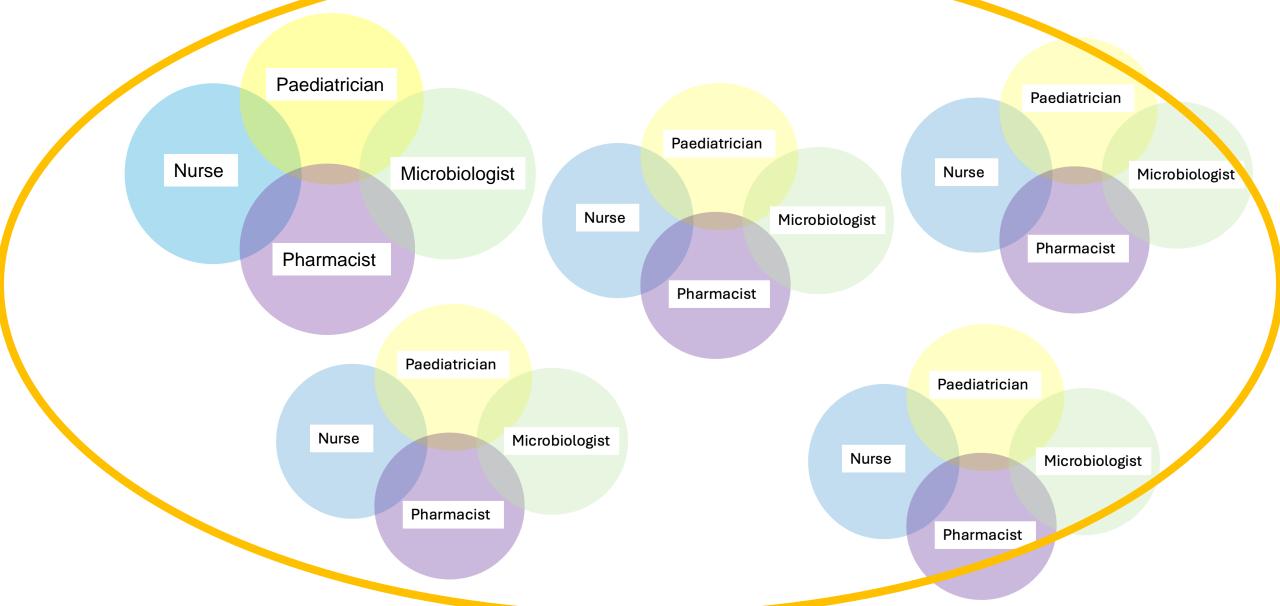
#### **NHSE** funding

0.1 FTE
Consultant (half a day/week)
0.2 FTE
Pharmacist (1 day/week)

TIME LIMITED (8 months)

## Paediatric Infection Teams

## pAMS Network



## pAMS Network

**Community** of practice

Shared resources

Shared learning

Celebrating

Regional benchmarking

Regional QI planning

# Paediatric antimicrobial stewardship (pAMS) education

Development and delivery of paediatric antimicrobial stewardship (pAMS) education to local leaders in district general hospitals

AMR in paediatrics

Bugs and Drugs basics

Paediatric antimicrobial prescribing

**Webinars** 

Diagnostic Stewardship IPC: Paediatric considerations

Securing funding to support local pAMS activities

Face-to-face

workshops

Human factors and behaviour change

Measurement and feedback

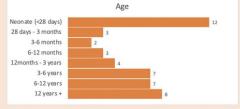
Guidelines, education and QI design Regional shared learning events

### For month Oct-24 Total patients 46 Total antibiotics 62

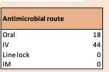
#### **South Yorkshire Regional Report**

#### CHARACTERISTICS

Hospital Trust	Patients	Prescriptions	Total patients on wards	% patients on antimirobials	
District Hospital A	0	0	0	#DIV/0!	
District Hospital B	7	12	29	24.1%	
District Hospital C	4	5	16	25.0%	
District Hospital D	10	14	21	47.6%	
Sheffield Children's	25	31	88	28.4%	

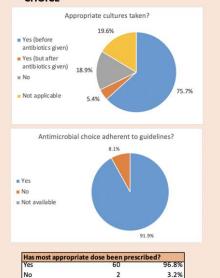


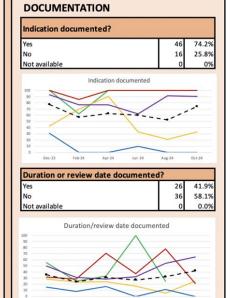
Specialty			
General Paediatrics	23		
Neonatal	11		
Surgery	10		
Orthopaedics ENT	1		
Other	1		



#### CHOICE DOCUMENTAT

0.0%





24 38.7%

1 1.6%

4 20.0%

40 90.9%

16.7%

15 83.3%

3 6.8% 1 33.3%



Not available

#### **Monitoring & Feedback**

Local pharmacy-led data collection on paediatric and neonatal wards

Centralised regional reporting with benchmarking

Pressure off each trust to analyse and report.

### Vision

All DGHs in the UK to be part of collaborative regional pAMS networks and benefit from:

- Shared learning within community of practice
- Prescription quality monitoring and regional benchmarking service
- Access to educational resources for local use
- Greater team collaboration between and within hospitals

Scope for national connections between regions and expansion into primary care

Raising the profile of AMS and ultimately improve antimicrobial use for children



## Experiences in South Yorkshire

"The network has cultivated a more collaborative and proactive culture, encouraging open dialogue across departments around antibiotic prescribing practices across site for neonate and children....strengthened communication and fostered closer working relationships not only between microbiology, pharmacy, and clinical teams within our trust, but also with neighbouring trusts and Sheffield Children's Hospital... has helped drive clinical engagement and encourage a cultural shift towards stewardship as a collective responsibility... fostering a sense of community, shared purpose, and continuous improvement."

- Dr Yee Pang. Consultant Microbiology Barnsley Hospital NHS Foundation Trust.

Thank you for your time

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