

An evaluation of a multifaceted intervention to reduce antimicrobial prescribing in care home residents [REducing Antimicrobials in Care Homes (REACH)]: a non-randomised pilot study and process evaluation

Anne Montgomery, Catherine Shaw and Carmel Hughes (on behalf of the REACH team)
School of Pharmacy, Queen's University Belfast

Introduction

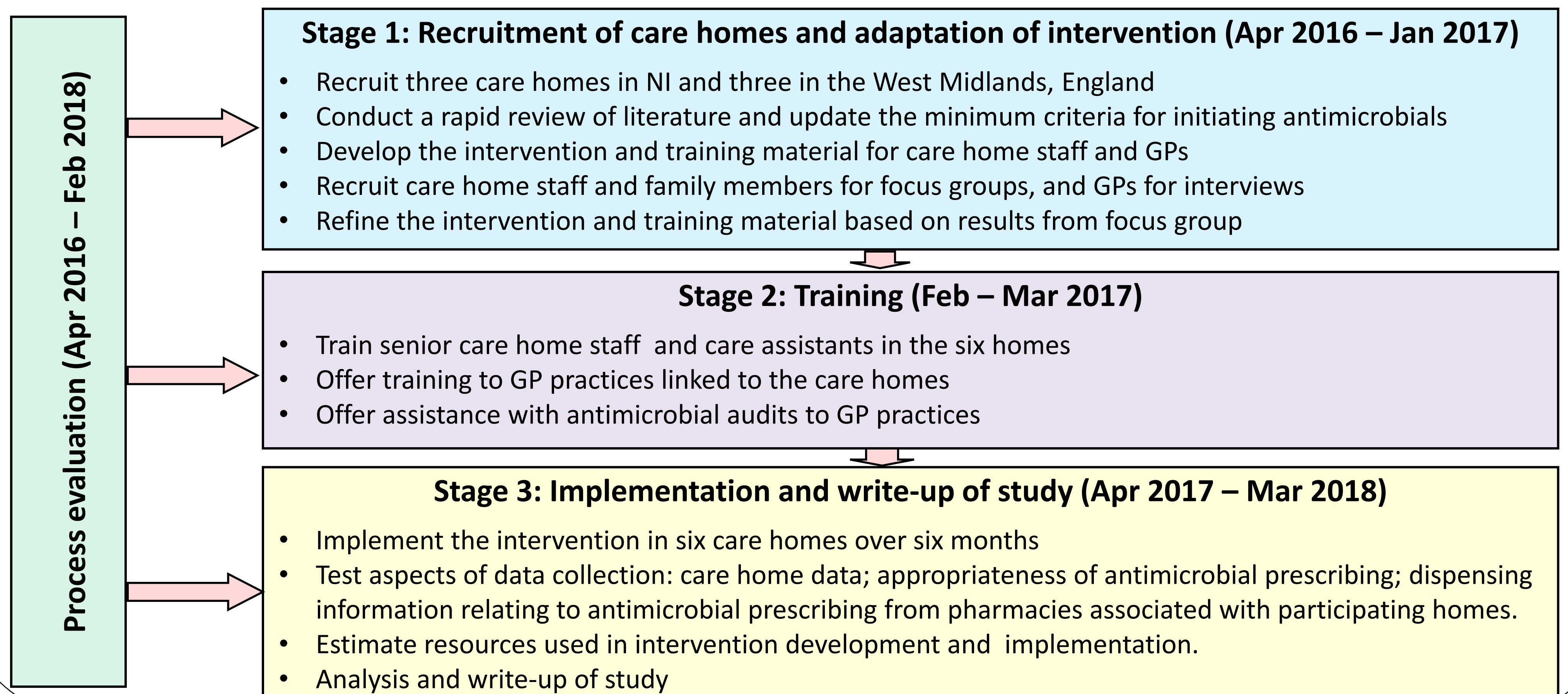
There have been concerns about the level of prescribing of antimicrobials (antibiotic, antifungal and antiviral medicines) in care homes for older people¹. The Chief Medical Officer (CMO) of England highlighted that high use of antimicrobials can lead to resistance². The CMO's report also suggested that older people, especially those living in care homes, may be at higher risk of infection². The report noted that education and training of doctors and nurses about infections and antimicrobials was very important to ensure that antimicrobials are used properly². A Canadian study found that an education and training intervention was useful in reducing the use of antimicrobials in Canadian care homes³.

Aim

Our aim is to evaluate the feasibility and acceptability of a multifaceted education and training intervention on rational prescribing for infections in a non-randomised feasibility study in care homes. The objectives are to:

- Recruit care homes in NI and England
- Adapt the Canadian intervention for use in care homes in the UK
- Deliver training in care homes and associated GP practices
- Implement the intervention in the care homes
- Undertake a process evaluation

Project overview (1 April 2016 – 31 March 2018)



References

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3. Loeb M, Brazil K, Lohfeld L, et al. Effect of a multifaceted intervention on number of antimicrobial prescriptions for suspected urinary tract infections in residents of nursing homes: Cluster randomised controlled trial. *BMJ.* 2005;331(7518):669. doi: bmj.38602.586343.55 [pii].

The REACH team

Carmel Hughes¹; Michael Tunney¹; Dermot O'Reilly¹; Anne Montgomery¹; Catherine Shaw¹; David Ellard²; Martin Underwood²; Rachel Potter²; Evie Gardner³; Ashley Agus³; Lynn Murphy³; Mark Loeb⁴; Bob Stafford⁵.
(¹Queen's University, Belfast; ²University of Warwick; ³Northern Ireland Clinical Trials Unit; ⁴McMaster University; ⁵Orchard Care Homes.)

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