



Role of locum GPs in antimicrobial stewardship: a mixed methods study

PROJECT SUMMARY

Key findings

The study found that between 2013 and 2015 locum GPs (locums) prescribed antibiotics more often for acute cough, sore throat, acute bronchitis, and asthma and COPD exacerbations, compared to other GPs and nurse prescribers.

Interviews with locums identified perceived challenges to more optimal antibiotic prescribing and engagement with antibiotic stewardship (AMS) by locums. For example, they perceived: difficulties following the correct guidelines and processes which vary across areas and practices; consulting unfamiliar patients and more patients with acute infections; time pressure to consult more patients; patient expectations for locums to prescribe antibiotics; lack of communication with practices and feedback related to antibiotic prescribing; lack of support for no-antibiotic decisions; limited/no communication from commissioners; limited training and peer learning opportunities.

Locums also described factors that may contribute to good-quality prescribing and AMS. For example, they perceived opportunities to: negotiate more time within appointments to ensure sufficient time to discuss no-antibiotic approaches; use a lack of pre-existing relationship with patients to suggest a “new”, no-antibiotic approach; use the experience of working in different practices to suggest potential improvements; and the need for locums to take initiative and be proactive about engaging with professional training and networks.

Implications – What can locums do?

Locums need to ensure appropriate antibiotic prescribing and engagement with AMS. They could, for example:

- Ensure access to and familiarity with the local antibiotic prescribing guidelines and processes
- Ask new practices about their approach to antibiotic prescribing, AMS initiatives, and support for minimising unnecessary antibiotic prescribing
- Encourage (new/unfamiliar) patients to try a no-antibiotic prescribing (where appropriate)
- Ask for feedback from practices, also related to antibiotic prescribing
- Engage in professional training, also related to optimising antibiotic prescribing and AMS
- Organise and engage with peer groups/networks to enable peer learning and support

Implications – What can practices do when employing locums?

Practices need to support locums in prudent antibiotic prescribing and enable/encourage their engagement with AMS. They could, for example:

- Improve inductions for new locums, including information on/links to local antibiotic prescribing guidelines and processes, AMS initiatives, and prudent antibiotic prescribing
- Encourage and support locums to ensure a consistently prudent approach to antibiotic prescribing

Authors: Aleksandra Borek, Koen Pouwels, Oliver van Hecke, Julie Robotham, Chris Butler, Sarah Tonkin-Crine

Funding: Royal College of General Practitioners Scientific Foundation Board (ref. SFB 2018-12).

Contact: Aleksandra.borek@phc.ox.ac.uk



- Audit locums' antibiotic prescribing and provide feedback to locums
- Share information about training opportunities and provide access to AMS training for locums

Implications – What can the NHS, commissioners and clinical system providers do?

- Ensure that prescriptions issued by locums can be identified (e.g. with unique prescriber numbers/IDs) so that they be monitored more consistently/reliably
- Ensure that diagnoses/symptoms are recorded in patient records whenever patients are prescribed antibiotics, and ideally whenever patients are consulting with infections, to enable a better assessment of variation in antibiotic prescribing propensity and necessity of antibiotic prescriptions
- Reduce a variation in antibiotic prescribing guidelines between areas and enable easy access to local prescribing guidelines
- Implement IT solutions (e.g. clinical system prompts) to ensure appropriate and prudent antibiotic prescribing
- Require antibiotic prescribing audit and AMS-related training as part of GP appraisals
- Promote and implement interventions/training for practices and locums to promote more consistent and prudent antibiotic prescribing
- Include locums in local communications (e.g. CCG mailing lists) and communicate information, resources and training opportunities to them
- Provide AMS-related training and invite/encourage locums to attend it.