

Date published: 11 March, 2024 Date last updated: 11 March, 2024

Pharmacy undergraduate antimicrobial resistance/antimicrobial stewardship practice-based assessment framework for use by designated supervisors

NHS England Antimicrobial Resistance (AMR) Prevention Programme – Antimicrobial Prescribing and Medicines Optimisation (APMO) Workstream.

Publication (/publication)

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The indicative curriculum for antimicrobial resistance (AMR) has been developed by NHS England – Workforce, Education and Training (WT&E) Directorate, NHS England – Antimicrobial Prescribing and Medicines Optimisation (APMO) team, the national antimicrobial pharmacy education group (NAPEG) and the Pharmacy Schools Council.

The revised General Pharmaceutical Council (GPhC) standards for the Initial Education and Training of Pharmacists (IETP) integrate learning outcomes that demonstrate competency as an Independent Prescriber at the point of registration. They span the entire initial five years of training. Independent prescribing will not be incorporated into foundation training until the 2025/26 training year. The learning outcomes for training years 2021/22 – 2024/25 have been modified by the GPhC to reflect this.

To support the implementation of the IETPs, a number of priority subjects were identified by NHS England WT&E and Pharmacy Schools Council for the development of indicative curricula. Antimicrobial resistance was identified as one of these subjects. Indicative curricula are designed in the interest of an effective continuum of learning and training in practice across the 5 years of initial education and training.

These are additional resources to support the indicative curriculum in AMR to help guide the teaching content in both the MPharm and the Foundation Training Year to support effective initial education and training in England. This will support undergraduate pharmacy students and trainee pharmacists to successfully demonstrate the learning outcomes of the IETPs and RPS Prescribing Competencies that link to AMR. It is not compulsory to use but is there as a guide to support educators.

This assessment framework can be used by assessors for students on clinical placements in any setting and is to be used in association with the Antimicrobial Resistance (AMR) and Antimicrobial Stewardship (AMS) Pharmacy Undergraduate Indicative Curriculum for the Initial Education and Training Reform Programme.

NHS England Workforce Training and Education – Initial Education and Training Reform Programme (https://www.hee.nhs.uk/our-work/pharmacy/transforming-pharmacy-education-training/initial-education-training-pharmacists-reform-programme).

Development process

The following practice-based assessment recommendations were developed by the education and training portfolio leads of the NHS England Antimicrobial Prescribing and Medicines Optimisation (APMO) workstream and presented to the National AMS Pharmacy Education Group (NAPEG). The group refined these recommendations and added extra recommendations to produce the final assessment recommendations.

This group includes educators of antimicrobial stewardship for undergraduate pharmacy students and trainee pharmacists in the United Kingdom (UK) including representation from:

- Academics at Schools of Pharmacy (SOPs)
- British Pharmaceutical Students Association (BPSA)
- British Society for Antimicrobial Chemotherapy (BSAC)
- NHS England (AMS and Infection Prevention and Control representatives)
- NHS Scotland

- Royal Pharmaceutical Society Expert Advisory Group on AMS (RPSEAG)
- United Kingdom Health Security Agency (UKHSA)
- Specialist antimicrobial pharmacists
- United Kingdom Clinical Pharmacy Association (UKCPA)

Pharmacy undergraduate AMR/AMS practice-based assessment

framework for use by designated supervisors

Domain	Theoretical assessment	Practical assessment
Infection prevention and control Competency statement All newly qualified pharmacists must understand the core knowledge underpinning infection prevention and control and use this knowledge appropriately to prevent the spread of infection by applying the principles of the national infection prevention and control manual. Key themes: Microorganisms Colonisation vs infection Infection Infection Infection Infection Transmission Screening Standard PPE	Describe the chain of infection and how this can be broken with different IPC interventions Describe the routes of transmission for infections and what precautions can prevent these.	 Use the correct hand washing technique for healthcare environments Use appropriate standard precautions when handling specimens e.g. urine for pregnancy testing Demonstrate the ability to handle sterile products in an aseptic manner Discuss the risk of C. difficile infection with a patient prescribed a broadspectrum antibiotic Carry out an IPC risk assessment of their working environment, with reference to the national IPC manual for England, and escalate any concerns appropriately Conduct an IPC audit, intervention and re-audit using quality improvement methodology.

Domain	Theoretical assessment	Practical assessment
 Healthcare associated infections IPC policies and procedures 		

Theoretical Domain Practical assessment assessment **Antimicrobials and** Describe the For 5 different antibiotic antimicrobial factors that prescriptions, discuss resistance contribute to · the antibiotic class and emergence of spectrum of activity, Competency resistance · what infection they are statement Describe why likely to be treating a One Health according to local antibiotic All newly qualified approach to guidance (or national NICE pharmacists need to AMR is guidance where local not understand the core important available), knowledge Describe how whether this is first or underpinning the vou would ask second line on guidance action of antibiotics and why second line patients to and the concept of antibiotics might be needed dispose of any antimicrobial left-over for this infection. resistance; and use antimicrobials Discuss resistance this knowledge to mechanisms for this e.g. liquid help prevent antibiotic and resistance once they antimicrobial risk factors for this have resistance. infection. completed the prescribed **Key themes:** course. · Classes of antimicrobials Spectrum of activity Broad vs narrow spectrum Intrinsic vs acquired resistance Consequences of resistance to population and individual One Health

concept

Domain	Theoretical assessment	Practical assessment

Theoretical Domain **Practical assessment** assessment **Antimicrobial** • Be able to prescribing and score an For 5 different antibiotic stewardship example case prescriptions identify and for NEWS2 Competency discuss possible Be able to statement interactions and side describe a effects with patients and/or clinical All newly qualified carers. decision tool pharmacists need to For 5 different antibiotic for demonstrate prescriptions discuss with antimicrobial knowledge of how the patient/carer why it is prescribing infections are important to take the and correctly diagnosed and antimicrobial as directed use it in a managed and use and complete the case study of this knowledge prescribed course. their design. appropriately to Discuss penicillin allergy · Be able to manage patients with with a patient/carer that describe the infections including has this documented to principles of the appropriate use determine if this is an therapeutic of antimicrobial accurate diagnosis, if not drug agents. discuss de-labelling with monitoring the patient's doctor. and identify 2 Key themes: antibiotics that require TDM Appropriate use of antimicrobials and why. Describe how Sepsis to review a Clinical decision patient on tools antibiotics Diagnostic using the criteria START Antimicrobial SMART then prescribing focus guidance algorithm and national vs local Antimicrobial when it would be appropriate prescribing

to choose

Domain	Theoretical assessment	Practical assessment
empirical vs targeted Antimicrobial prescribing and patient factors Antibiotic post- prescription review Antibiotic side effects Antibiotic interactions Antibiotic allergies PK-PD principles of antibiotics and TDM IV to oral switch Prescribing for surgical prophylaxis Prescribing for common infections.	each of the 5 post-prescription review decisions and where this should be documented. • Discuss the difference between empirical and targeted antibiotic therapy, (based on microbiology results) explaining when each is preferred and why. • Discuss the difference between prophylactic and treatment course of antimicrobials and when prophylaxis is needed. • Describe the principle and significance of infection source control,	

Domain	Theoretical assessment	Practical assessment
	providing an example. • Access the National Antimicrobial Prescribing and Stewardship competency framework and discuss similarities and differences with the pharmacy undergraduate curricula.	

Theoretical Domain **Practical assessment** assessment Vaccine uptake Explain the Participate in the delivery general of vaccine programmes Competency principles of including seasonal flu. statement Discuss the benefits and immunisation including the risks of appropriate All newly qualified need for vaccinations with patients pharmacists need boosters and in at least 3 different to demonstrate observing clinical risk groups. knowledge of the Promote a vaccination intervals importance of between programme using national vaccines for doses. and /or local resources for reducing Discuss staff or service users ea antimicrobial national and flu, COVID-19, zoster, resistance and use local MMR etc addressing this knowledge immunisation misconceptions with an appropriately to awareness of cultural programmes promote and the sensitivity in that setting. vaccination. diseases for which Key themes: vaccines are currently National and available. local immunisation programmes Clinical risk groups Staff vaccination requirements General principles of immunisation Risks and benefits of vaccination Controversies or

Domain	Theoretical assessment	Practical assessment
misconceptions and how to 'myth bust' • Awareness of cultural sensitivities		

Theoretical Domain Practical assessment assessment Discuss with at least 5 Person-centred Explain care principle of different patients self-care delayed (backadvice and safety netting Competency up) for common infections statement prescribing including the use of and appropriate patient leaflets All newly qualified (e.g. TARGET) and/or circumstances pharmacists must when this patient decision-making seek out, integrate strategy can guides (e.g. NICE). and value as a be considered. Actively participate in partner the input and promoting AMS messaging engagement of the during World AMR patient /carer in Awareness Week and designing and actively support sign up to implementing care. Antibiotic Guardian pledge amongst patients and co-Key themes: workers. · Shared care Identify any inequity in access to infection decision making Delayed management services or antibiotic unmet need for patient educational materials for prescribing your local patient Safety netting population showing how advice you have engaged with Education and patients/public/stakeholder support using s and public health appropriate information on health resources inequalities. Counselling on antimicrobial use and antimicrobial resistance Public health campaigns Health inequalities

Domain	Theoretical assessment	Practical assessment

Theoretical Domain Practical assessment assessment Interprofessional Outline the Actively contribute to national/local action plan in collaborative advantages of practice a multiplace to improve quality of disciplinary care for patients with Competency infection e.g. CQUIN, QOF, team statement approach to PQS, local incentive management schemes All newly qualified of infection Access AMS benchmarking pharmacists need to Describe data for your organisation understand how prescribing or ICB and identify areas different professions etiquette and for improvement. · collaborate in relation Undertake a Quality how it impacts to how they on AMS and Improvement project in one contribute to patient safety. of these areas for AMS antimicrobial with other healthcare stewardship and professionals, patients and quality improvement. identified stakeholders including audit, intervention **Key themes:** and re-audit. Attend local and system Awareness of roles in different wide AMS meetings to feed back Quality Improvement teams across project results. systems Collaborative effective communication Trusting relationships Prescribing etiquette Governance Benchmarking Quality improvement National initiatives

Domain	Theoretical assessment	Practical assessment

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Publications reference: PRN00969ii

Date published: 11 March, 2024 Date last updated: 11 March, 2024

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