

### Purpose

This document sets out the standard operating procedures (SOP), including local governance processes, for publishing guidance / policies onto the NHS Dumfries & Galloway Antimicrobial Handbook, which is hosted by the national Right Decision Service (RDS). These are based on the RDS standard operating procedures, which can be accessed here:

<https://rightdecisions.scot.nhs.uk/right-decision-service-standard-operating-procedures/?collection=right-decision-service-resources>

The overall responsibility for adhering to the standards within this document is that of the individual updating the antimicrobial handbook, and is usually the AMT Clinical Lead and/or Antimicrobial Pharmacist. It is the responsibility of the Antimicrobial Management Team (AMT) to maintain oversight of this process.

### Antimicrobial Stewardship Team & Antimicrobial Management Team

The NHS D&G Antimicrobial Stewardship Team (AMST) comprises:

- Antimicrobial Stewardship Clinical Lead
- Primary Care Antimicrobial Pharmacist
- Secondary Care Antimicrobial Pharmacist
- Allied healthcare professionals with dedicated antimicrobial stewardship roles, e.g. Antimicrobial Pharmacy Technician, Antimicrobial Stewardship Nurse

The NHS D&G Antimicrobial Management Team (AMT) is comprised of all AMST members in addition to representatives from all areas in NHS DG involved in prescribing/administration, including Primary Care, Secondary Care, Community Hospitals, Dentistry and Pharmacy. Further details are available within the AMT terms of reference document.

### Approval of documents/policies/pathways

The NHS D&G AMST holds responsibility for maintaining and ongoing development of the Antimicrobial NHS D&G Antimicrobial Handbook, including authoring, uploading, editing and archiving of content. Those involved must have completed the basic training provided by the RDS team and must be aware of the governance processes and follow the local and national RDS standard operating procedures.

All documents/policies/pathways uploaded to the Antimicrobial Handbook should be submitted to the AMT for review and approval. In most instances, after AMT approval, documents should then be submitted for approval to the ADTC, followed by submission to and for noting by the ICC.

If a significant time delay is anticipated, and there is an urgent clinical need to update content (e.g. safety, updated national guidance, etc...), then retrospective review/approval can be obtained on the proviso that the update has been approved by both the Clinical Lead and an antimicrobial pharmacist.

<b>Author:</b>	Dr Jon van Aartsen (AMS Clinical Lead)	<b>Version:</b> 1.0
<b>Document Title:</b>	NHS Dumfries & Galloway Antimicrobial Handbook – Standard Operating Procedures	
<b>Document reference:</b>	AMT_Handbook_SOP	
<b>Authorised by, date:</b>	Antimicrobial Management Team, 23.02.2024 Area Drug and Therapeutics Committee, 28.02.2024 Infection Control Committee, awaited	<b>Review date:</b> 23.02.2027

*Printed copies must not be considered the definitive version*

## NHS Dumfries & Galloway Antimicrobial Handbook Standard Operating Procedures

All proposed changes should be requested through a Change Request Form. Final sign off can only be undertaken by either the AMT Clinical Lead or Antimicrobial Pharmacist. Completed forms should be archived (with a date included within its name) on the intranet shared drive in the AMT folder:

<S:\Infection Control Team Shared Area\AMT\RightDecisions>

### Processes and key responsibilities for:

- a) *Review and sign-off of content at time of initial publication*  
**Processes:** as detailed above  
**Sign off:** Clinical Lead, with cross-check by antimicrobial pharmacist
  
- b) *Review and sign-off of initial delivery of the content*  
**Processes:** as detailed above  
**Sign off:** Clinical Lead, with cross-check by antimicrobial pharmacist
  
- c) *Proposing updates and signing off proposals for updates to the content after initial publication, outwith the scheduled review dates*  
**Processes:** as detailed above. Change request form required.  
**Sign off:** Clinical Lead, with cross-check by antimicrobial pharmacist
  
- d) *Determining the review date(s) for content*  
**Processes:** Determined by the AMT at time of review/approval, which must be inputted into the RDS "Editorial" tab. It is anticipated most documents will be reviewed every 2-3 years, depending on the nature. The maximum allowable review date is 3 years from approval.
  
- e) *Receiving the automated alerts from RDS when the content is due for review, and ensuring that the review takes place in a timely manner?*  
**Processes:** All automated alerts will be sent to [dg.antimicrobialstewardship@nhs.scot](mailto:dg.antimicrobialstewardship@nhs.scot), which must be inputted into the RDS "Editorial" tab of all Antimicrobial Handbook documents. This generic shared inbox is monitored by the AMST, designed to ensure continuity of service if role changes occur.

Where appropriate, additional alerts will also be added for antimicrobial pharmacists and/or other authors involved in writing the initial content.

### Content withdrawal / archiving

Should be managed as per national RDS SOP, and requested via a change request form.

This requires approval by both the Clinical Lead and an antimicrobial pharmacist, and should be risk assessed. If a significant impact on patient care/safety is anticipated, this risk should be brought to the attention of the ADTC and/or ICC.

**Media files:** should be archived into the corresponding "archive" folder within each sub-folder. They must not be deleted. Links to the media file must be manually removed from content pages (can be identified under "Info... References by the following items". The latter heading only appears if there are ongoing links.

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**Content pages:** should be managed as per national RDS SOP.

### Editorial information

All content added should be assigned the following editorial information within the “Editorial” tab.

- **Author (s)**
- **Author email addresses**
- **Approver name**
- **Named reviewer(s)**
- **Reviewer email address(es).** *At a minimum, this must include [dg.antimicrobialstewardship@nhs.scot](mailto:dg.antimicrobialstewardship@nhs.scot)*
- **Version number**
- **Date of last review** – i.e. date of approval by AMT
- **Date of next scheduled review**

### Media files

Should be managed as per national RDS SOP.


Additionally:

- Icons/Images that are used across multiple sections should be uploaded to the icons folder
- Media files for each section should be organised into sub-folders named according to the section to which they apply
  - File names: should be descriptive of its content or, ideally, closely resemble the document title. An approval/published/upload date (month/year) should also be included. The latter is in addition to the mandatory “Editorial” tab information that is inputted on content pages.

### Communicating content changes to users

The “Latest updates” sub-section must be updated with a brief description of changes, as described within the change Request form (“Handbook Update”). The description should be dated, and the name of the updated sub-section included. For example:

#### Latest Updates

 NHS Dumfries and Galloway

- ✓ **07/02/2024: Primary Care Antimicrobial Guidance**  
Full update to UTI guidance.
- ✓ **05/02/2024: Hospital Antimicrobial Guidance: Paediatrics**  
Update to urosepsis guidance.
- ✓ **01/02/2024: Additional Antimicrobial Resources**  
MHRA quinolone alert PILS uploaded.

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Depending on the nature of the change, additional methods of communication should be considered by the AMST, including e-mails (targeted / Board-wide), safety alerts or verbal.

### **Acting on feedback / complaints**

Feedback/complaints regarding the Antimicrobial Handbook should be e-mailed to [dg.antimicrobialstewardship@nhs.scot](mailto:dg.antimicrobialstewardship@nhs.scot), as per "About this toolkit section". These should be dealt with within a timely manner by the Clinical Lead, and reported to the AMT for monitoring.

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