Antimicrobial Stewardship (AMS) guidance for England was launched in November 2011 on European Antimicrobial Awareness Day.

The aim of this survey was to identify the extent of their implementation, whether they had improved AMS, and to collect examples of good practice.

A web-based survey was developed, piloted and distributed through the microbiology, infectious diseases and pharmacy networks in July 2012.

There were 74 (44%) responses to the Start Smart then Focus (SSTF) guidance by September. 65% rated SSTF as excellent or good for making AMS a Trust priority; 57% for improving their AMS infrastructure; 51% for improving prescribing practice; 57% for improving audit & 31% for improved usage reporting. Only 12% to 22% thought it was poor or less than satisfactory for the same criteria.

A formal review of SSTF has been done by 41%, with 17% planning to do so. 86% had done an informal review. 52% had developed an action plan.

The main barriers to implementation were a lack of microbiology / infectious diseases time, then pharmacist time. Whereas an established AMS group, an enthusiastic pharmacist or microbiologist, or adequate time were the main facilitators.

Putting indication and duration or review date on in-patient antimicrobial prescriptions were in place prior to SSTF in 67% & 73% respectively. Since SSTF a further 9% have started & another 13% & 10% plan to by April 2013.

Additional antimicrobial ward rounds have started or are planned since SSTF in medicine by 20%, surgery 19% & paediatrics 10% of centres.

The Start Smart then Focus guidance has helped to further implement Antimicrobial Stewardship in England.

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