

Supplementary material 1: Guidance-specific questions from the antimicrobial stewardship implementation questionnaire

Page 6 – Antimicrobial guidance/formulary

The following page will ask about your primary care antimicrobial guidance and any of PHE's quick reference diagnostic guides that you promote

ASK ALL:

Question 39. Does your CCG/CSU have an antimicrobial committee or equivalent process that develops and reviews local antimicrobial guidelines for primary care? Please tick one

- No
- Yes
- Don't know

ASK ALL:

Question 40. How frequently are your local primary care antimicrobial guidelines reviewed? Please tick one

- Currently being updated
- Annually
- Every 2 years
- Every 3 years
- Don't know
- Other, please specify

ASK ALL:

Question 41. What antimicrobial guidelines do you promote for your primary care clinicians to use? Tick all that apply

- Signpost to Public Health England (PHE) managing common infections guidance
- Modified/localised guidance based on PHE managing common infections guidance
- Develop localised guidance from scratch
- Modified local secondary care guidelines
- Don't know
- Other, please specify

If tick 'Modified/localised guidance based on PHE managing common infections guidance' in Q41., ask:
Question 42. When last updated, what changes did the development group make to the PHE managing common infections guidance in the development of your local primary care antimicrobial prescribing guidance? Tick all that apply

-Added local telephone numbers but change very little else

-Added extra conditions / sections

-What conditions/sections have you added?

-Removed conditions / sections

-What conditions/sections have you removed?

-Changed diagnostic advice

-What diagnostic advice have you changed?

-Reformat layout

-Don't know

-Other, please specify

If tick 'Modified/localised guidance based on PHE managing common infections guidance' in Q41., ask:
Question 46. How useful is the PHE managing common infections guidance in facilitating the creation of your guidance?

-Not at all useful

-Not useful

-Neutral

-Useful

-Very useful

-Don't know

If tick 'Modified/localised guidance based on PHE managing common infections guidance' or 'Signpost to Public Health England (PHE) managing common infections guidance' in Q41., ask:

Question 47. Please state two strengths of the PHE managing common infections guidance

If tick 'Modified/localised guidance based on PHE managing common infections guidance' or 'Signpost to Public Health England (PHE) managing common infections guidance' in Q41., ask:

Question 48. Please state two weaknesses of the PHE managing common infections guidance

If tick 'Modified/localised guidance based on PHE managing common infections guidance' or 'Signpost to Public Health England (PHE) managing common infections guidance' in Q41., ask:

Question 49. Are there any significant clinical areas that you think should be included in the PHE managing common infections guidance? (PHE recently added: scarlet fever; genital herpes; gonorrhoea; recurrent vaginal candidiasis; acne; erysipelas; tick bites (Lyme disease); mastitis; blepharitis)

ASK ALL:

Question 50. Over the last 2 years (2015–2017), in which format has the primary care antimicrobial prescribing guidance been presented to primary care practitioners?

- Electronic format on intranet
- Electronic format on internet
- Included in local area formulary
- Provide paper copy
- Integrated into the clinical system
- App
 - Please provide the name of the app or a link to where it can be downloaded from
- Don't know
- Other, please specify

ASK ALL:

Question 51. Since it was last updated, approximately what percentage of primary care practitioners have accessed the primary care antimicrobial guidance you promote? Please tick one

- <5%
- 25%
- 50%
- 75%
- >90%
- Don't know

ASK ALL:

Question 51a. How do you monitor this?

ASK ALL:

Question 52. Over the last 2 years (2015–2017), which of PHE's quick reference diagnostic guides have you promoted for your primary care clinicians to use?

- None
- Urinary tract infections
- Abnormal vaginal discharge
- Chlamydia trachomatis
- Fungal skin and nail infections
- Infectious diarrhoea
- Helicobacter pylori*

-Venous leg ulcers

-Methicillin-resistant *Staphylococcus aureus* (MRSA)

-Panton-Valentine-leukocidin *Staphylococcus aureus* (PVL-SA)

-Don't know

ASK ALL:

Question 53. Are there any additional significant clinical areas that you think should have individual quick reference diagnostic guides that could benefit primary care practitioners?

ASK ALL:

Question 54. Any further comments on antimicrobial guidance/formulary

ASK ALL:

Question 153. Over the last 2 years (2015–2017), have you promoted back-up/ delayed antibiotic prescribing locally?

- No, we do NOT promote back-up/delayed antibiotic prescribing locally
- Yes, but we do not specify for which conditions
- Yes, for ALL uncomplicated upper respiratory tract infections
- Yes, for acute sore throat
- Yes, for acute otitis media
- Yes, for acute rhinosinusitis
- Yes, for acute cough & bronchitis
- Yes, for uncomplicated lower UTI in adults
- Don't know
- Other, please specify

If tick any options that begin with 'yes' in Q153, ask:

Question 153a. How do you promote back-up/delayed antibiotic prescribing for these conditions?