**Antibiotic Reduction Plan** **(ARP)**

This template can be used when a producer’s latest eMB report highlights issues of concern such as a ‘top 5% Persistently High User (PHU)’ or top 10% warnings. The template should be completed by the producer, in conjunction with the unit vet.

Further guidance for vets on completing an ARP is available in *Guidance Notes for Veterinarians on Antibiotic Reduction Plans*, available to PVS members on the PVS website: pigvetsoc.org.uk

This plan relates to:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Unit name** | **Red Tractor membership no.** | **Date formulated** | **Vet name** | **Farmer name** |
|  |  |  |  |  |

The following table can be used to record usage at the start of the plan, the target use and progress over the following quarters.

|  |  |  |  |
| --- | --- | --- | --- |
| **Rolling annual use at the start of the plan (mg/kg)** |  | **Target use** |  |
| **Quarterly review: Year\_\_\_\_** | **Q1** | **Q2** | **Q3** | **Q4** |
|  |  |  |  |  |

**Key drivers of unit antibiotic use**

Identify the reasons for significant individual antibiotic use on the unit and list them below. It is not necessary to record every product used (this can be reviewed on eMB) but do list the significant elements contributing to overall use. Consider disease diagnoses, reasons for treatment, eMB data and annual antibiotic collation.

|  |  |  |
| --- | --- | --- |
| **Product/class** | **Reason for use** | **Comments** |
| *e.g. TMPS in grower feed* | *Strep suis meningitis metaphylaxis* | *Currently contributes 45mg/kg PCU to total as grower feed goes to whole grower section* |
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|  |  |  |

**Actions**

Identify actions to be taken to reduce antibiotic use. Suitable actions should be unit specific and have agreed timescales noted. Further guidance is available in *Guidance Notes for Veterinarians on Antibiotic Reduction Plans*.

**Example:**

|  |
| --- |
|  **ACTION NUMBER *1*** |
| **Action:** | *Installation of Dosatron and medicated water line in grower section* |
| **Desired outcome (key measurables):** | *Satisfactory meningitis control via targeted water medication of pigs for 5 days at week 7 of age, rather than feed medication* |
| **Who is responsible?** | *Unit manager (with support from vet)* |
| **Date added:** | *e.g. 01/10/21* | **Deadline for completion:** | *e.g. 01/02/22* |
| **Progress update****Date:** *e.g.10/11/21* | *System installed, response to be evaluated over next 3 months* | **TICK IF ACTION IS COMPLETED** |  |
| **Progress update****Date:**  |  | *Checkmark* |
| **Progress update****Date:** |  |  |
| **Progress update****Date:** |  |  |
| **CONTINUE ON A SEPARATE SHEET IF NEEDED** |

|  |
| --- |
| **ACTION NUMBER ……** |
| **Action:** |  |
| **Desired outcome (key measurables):** |  |
| **Who is responsible?** |  |
| **Date added:** |  | **Deadline for completion:** |  |
| **Progress update****Date:**  |  | **TICK IF ACTION IS COMPLETED** |  |
| **Progress update****Date:**  |  |  |
| **Progress update****Date:** |  |  |
| **Progress update****Date:** |  |  |
| **CONTINUE ON A SEPARATE SHEET IF NEEDED** |

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| --- |
| **ACTION NUMBER ……** |
| **Action:** |  |
| **Desired outcome (key measurables):** |  |
| **Who is responsible?** |  |
| **Date added:** |  | **Deadline for completion:** |  |
| **Progress update****Date:**  |  | **TICK IF ACTION IS COMPLETED** |  |
| **Progress update****Date:**  |  |  |
| **Progress update****Date:** |  |  |
| **Progress update****Date:** |  |  |
| **CONTINUE ON A SEPARATE SHEET IF NEEDED** |