

CONNECTICUT VALLEY HOSPITAL OPERATIONAL PROCEDURE MANUAL

SECTION I:	PATIENT FOCUSED FUNCTIONS
CHAPTER 3:	Medication Management
PROCEDURE: 3.4	Antimicrobial Stewardship
REVISED:	<i>(New)</i> 7/23/18; 10/26/18
Governing Body Approval:	08/09/18; 10/30/18 <i>(electronic vote)</i>

PURPOSE: To ensure that antimicrobial agents are properly utilized in both therapeutic treatment and the maintenance of the environment of care.

SCOPE: Medical Staff, Pharmacy Staff, Nursing

POLICY:

The development of antimicrobial resistance (AR) represents a growing threat to the health of the public. The World Health Organization, Centers for Disease Control and Prevention (CDC), and the White House have identified AR as a serious threat and called for urgent, coordinated action across all sectors of the healthcare delivery system to address the issue. Connecticut Valley Hospital is an active partner in this initiative and the Governing Body supports a wide variety of educational and monitoring activities (described below) designed to improve hospital use of antibiotics.

PROCEDURE:

1. The Director of Ambulatory Care Services will serve as the Governing Body's designated senior leader for the Antimicrobial Stewardship Program.

The Antimicrobial Stewardship Program will be managed by the Antimicrobial Stewardship Team which is a subcommittee of the Infection Prevention Committee. The Infection Prevention Committee reports to the Executive Committee of the Medical Staff. It will provide quarterly reports to the Governing Body within the Infection Prevention report. The committee will be composed of the following representatives:

Co-chairs are an Infection Preventionist and the Medical Staff Chair of the Infection Prevention Committee along with the following other members:

- a. Director of Ambulatory Care Services
- b. Physician Leader (Co-Chair)
- c. Pharmacists (2)
- d. Dental Department Staff member
- e. Health Clinic Staff member
- f. Building Superintendent 3
- g. Infection Prevention Nurses (One serves as Co-Chair)

The team will provide oversight of a series of functions, as described in the remainder of this policy, designed to ensure that antimicrobial agents are properly utilized in both therapeutic treatment and the maintenance of the environment of care.

2. Antibiotic Medication Utilization Monitoring

The Pharmacy and Infection Prevention nurses will monitor the use of antibiotic medications to ensure that use is consistent with the procedures approved by the Pharmacy and Medical Staff. Information will be gathered from the antibiotic order forms which physician's must use whenever ordering antibiotics.

- a. For known causative organism practitioners may therapeutically prescribe the indicated antibiotic for seven (7) to fourteen (14) days unless reordered.
- b. For unknown causative organisms practitioners may treat the condition empirically for three (3) to five (5) days, or until lab results confirm the treatment is appropriate at which time treatment can continue per the known organism standards.
- c. Prophylactic antibiotic use carries a 48 hour maximum expiration. Exceptions to this are prophylactic TB, and chronic UTI antibiotic treatment, where the medication is renewed on a monthly basis.

Prescribing practices falling outside these parameters will be subject to review and justification on a case by case basis. As part of the monitoring process the Antimicrobial Stewardship Team will compile statistics on the facility use of antibiotics. These statistics will minimally include the number of antibiotics prescribed, rate of use (per 1,000 patient days), the percentage of cases verified as appropriate choices per lab testing, the number of case exemptions granted, the number/rate of MRO cases, the number/rate of *Clostridium difficile* diarrhea cases, and number/rate of adverse reactions or interactions related to antibiotic use.

3. Education

An important component of an effective antimicrobial stewardship is the ongoing education of all individuals involved in the chain of therapy and the team administering the program. It also needs to include members of the environmental services staff so they understand the importance of their role in effectively eliminating environmental sources of infection. The facility education program will therefore break down into the following areas:

- a. Antimicrobial Stewardship Team Education
 - i. Initial Education
 - ii. On-going literature search and review.
 - b. Therapeutic Staff Education-initial and on-going as determined by committee and program results.
 - i. Physicians
 - ii. Nurses
 - iii. Pharmacy Staff
 - c. Patient Education-Provide patient information in an individually appropriate format on the risk/benefits of therapy and the importance of medication compliance.
 - d. Environmental Services Education
 - i. Proper use of PPE
 - ii. Proper choice of cleaning agent
 - iii. Proper Cleaning Procedure-including the importance of appropriate contact time
4. Inform health-care professionals in the practice setting about the objectives and expected benefits of the DUE/MUE process.
 5. Establish criteria, guidelines, treatment protocols, and standards of care for specific medications and medication-use processes.