

# THE QUARTERLY CONNECTION

Quarterly Report from Pharma-Care, Inc., Health Care Consultation Specialists

Second Quarter 2017

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## ANTIBIOTIC STEWARDSHIP FOR NURSING HOMES

**T**he Center for Disease Control and Prevention (CDC) recommends that all nursing homes implement an antibiotic stewardship program (ASP). Antibiotic stewardship refers to a set of commitments and actions designed to "optimize the treatment of infections while reducing the adverse events associated with antibiotic use".

The CDC has outlined seven core elements as practical ways to initiate or expand successful ASPs. Nursing homes are encouraged to select one or two activities from the seven core elements to start with and over time, as improvements are implemented, expand efforts to add new strategies to continue improving antibiotic use.

*Antibiotics are among the most frequently prescribed medications in nursing homes.*

*Up to 70% of residents receive one or more courses of systemic antibiotics over a year.*

*40-75% of antibiotics prescribed in nursing homes may be unnecessary or inappropriate.*

### Summary of Seven Core Elements for Antibiotic Stewardship in Nursing Homes:

#### 1. Leadership commitment

Demonstrate support and commitment to safe and appropriate antibiotic use in your facility.

- Write statements in support of improving antibiotic use to be shared with staff, residents, and families.
- Include stewardship-related duties in position descriptions for the medical director, clinical nurse leads, and consultant pharmacists in the facility.
- Communicate with nursing staff and prescribing clinicians regarding facility's expectations about antibiotics and the monitoring and enforcement of stewardship policies.
- Create a culture and promote antibiotic stewardship through messaging, education, and celebrating improvement.

#### 2. Accountability

Identify individuals accountable for promoting and overseeing antibiotic stewardship activities in your facility.

**Medical Director** - Reviews antibiotic use data and ensures best practices are followed in the medical care.

**Director of Nursing** - Sets practice standards for assessing,

monitoring, and communicating changes in resident's condition by front-line nursing staff. Importance of antibiotic stewardship is conveyed by the expectations set by nursing leadership.

#### Consultant Pharmacist -

Supports oversight through quality assurance activities such as medication regimen review and reporting of antibiotic use data.

#### Infection Prevention Program Coordinator -

Monitor and support ASP activities such as tracking antibiotic starts; monitoring adherence to evidence-based published criteria during the evaluation and management of treated infections; reviewing antibiotic resistance patterns to understand which infections are caused by resistant organisms.

#### Consultant Laboratory -

Provide reports and services such as a process for alerting the facility if antibiotics-resistant organisms are identified; provide staff education on the differences in diagnostic tests for detecting various infectious pathogens; create a summary report of antibiotic susceptibility patterns from organisms isolated in cultures.

#### State and Local Health

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**Departments** – Receive educational support and resources on ASP and infection prevention provided by the Healthcare-Associated Infection (HAI) Prevention programs at state and local health departments.

### 3. Drug expertise

Establish access to consultant pharmacists and infectious disease consultants with training in ASP activities.

- Work with a consultant pharmacist who has received specialized ASP training
- Partner with ASP leads at the hospitals within your referral network.
- Develop relationships with infectious disease consultants in your community.

### 4. Action

Introduce new policies and procedures in a step-wise fashion so staff become familiar with and not overwhelmed by changes in practice. Prioritize interventions and share outcomes with staff and clinicians. Identify clinical situations which may be driving inappropriate courses of antibiotics. Ensure that current medication safety policies, including med review are being applied to antibiotic use.

- Standardize practices which should be applied during care of resident suspected of infection or started on antibiotics.
- Integrate dispensing and consultant pharmacists into the

clinical care team as key partners. They provide help in ensuring antibiotics are ordered appropriately, review culture data, develop antibiotic monitoring, and infection management guidance.

- Identify clinical situations where inappropriate course of antibiotics may be used and implement specific interventions.

### 5. Tracking

Monitor at least one process measure of antibiotic use and at least one outcome from antibiotic use in your facility.

### 6. Reporting

Provide regular feedback on antibiotic use and resistance to prescribing clinicians, nursing staff, and other relevant staff.

### 7. Education

Provide resources to clinicians, nursing staff, residents, and families about antibiotic resistance and opportunities for improving antibiotic use.

- Provide education to staff, residents, and families via flyers, pocket guides, newsletters, electronic communications, face-to-face interactive workshops.
- Provide both education and feedback to providers.
- Work with residents and families to ensure clinicians have their support to make appropriate decisions.

## Mega-Rule Reminder

### Location & Notification of Medication Regimen Review Findings

“The pharmacist’s findings are considered part of each resident’s clinical record. If documentation of the findings is not in the active record, it is maintained within the facility and is readily available for review....Establishing a consistent location for the pharmacist’s findings and recommendations can facilitate communication with the attending physician, the director of nursing, the remainder of the interdisciplinary team, the medical director, the resident and his or her legal representative.”

*Ask to see the Pharma-Care, Inc. Policy and Procedure*

## EPIC Corner

ELECTRONIC PHARMACIST INFORMATION CONSULTANT  
(MEDICATION REVIEWS WITHIN 48 BUSINESS HOURS)

**EPIC Phone: 732-943-3573**

**EPIC Fax: 732-574-3469 or 3926**

In 2017, EPIC looks forward to continue providing facilities with information to help maintain the pharmaceutical care of residents. To maintain a timely flow of information, please ensure the following is present in your transmission:

1. The CSID number (the little numbers at the top of a fax) must be accurate and turned on. The computer scans for this number and places it into the proper folder for processing. If the CSID number is missing or only prints 000-000-0000, the review may be delayed.
2. Remember to use an EPIC cover sheet for each resident's transmission. Sending multiple residents with only one cover sheet may cause loss of the additional residents in the transmission.
3. Clearly print the resident's name on the cover sheet.

EPIC welcomes Green Acres Manor and New Community Extended Care.

And welcome to new staff member Ron Campos, RPh, CCP. Ron brings experience in oncologic pharmaceuticals to EPIC.

*Reminder: If you do not receive a review after two days, call EPIC Monday to Friday at 732-943-3573 or email: [epic@pharmacareinc.com](mailto:epic@pharmacareinc.com).*



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