

DEVELOPMENTAL DISABILITIES ADMINISTRATION
Olympia, Washington

TITLE: ANTIBIOTICS STEWARDSHIP PROGRAM 17.05.01

AUTHORITY 42 C.F.R. Appendix J *State Operations Manual*
42 C.F.R. Appendix PP *State Operations Manual*
Title 71A RCW *Developmental Disabilities*

DEFINITIONS

Antibiogram means a periodic summary of culture results and antibiotic resistance of bacterial strains for a select population.

Medication Regimen Review means medication monitoring performed by a pharmacist, which includes monitoring of appropriate medication and antibiotic use, review of culture results, and coordination of care with medical providers.

Antibiotic-Use Protocols means reviewing and integrating best practices into a facility based on continuous review of the facility's outcomes and current practices.

Infection Preventionist means a person qualified to monitor and investigate infections and develop programs to reduce infection.

Infection Monitoring means tools used to report incidence of infection, and the treatments and outcomes an RHC reviews on a periodic basis.

Direct Care Manager means any person in a management position that supports direct care of a client.

Clinical Staff means the nurses, medical providers, and others evaluating and caring for an RHC client.

PURPOSE

As part of their Infection Prevention and Control Programs, each facility must develop an Antibiotic Stewardship Program that promotes the appropriate use of antibiotics and includes a system of monitoring to improve resident outcomes and reduce antibiotic resistance. This means

that the antibiotic is prescribed for the correct indication, dose, and duration to appropriately treat the resident while also attempting to reduce the development of antibiotic-resistant organisms.

SCOPE

This policy applies to Residential Habilitation Centers (RHCs) with a nursing facility, an intermediate care facility (ICF), or both.

POLICY

Each RHC must develop and implement an Antibiotic Stewardship Program. The program must include:

- A. Antibiotic-Use Protocols;
- B. Leadership support and accountability via the participation of the medical directors, pharmacists, nursing and administrative leadership, and individuals with designated responsibility for the infection control program;
- C. Infection Monitoring through management of visitors, vaccination programs, reduction in infectious risks, and appropriate testing and care;
- D. Medication Regimen Reviews;
- E. Periodic review of data related to infections and outcomes;
- F. Quarterly Infection Control meetings, or more frequently as needed; and
- G. Protocol for responding to developing situations.

PROCEDURES

- A. DDA will establish a statewide Antibiotic Stewardship Committee. The Antibiotic Stewardship Committee must:
 - 1. Include Medical Directors, Infection Control Nurses, Pharmacy Directors, Nurse Managers, and support staff or other designees;
 - 2. Help develop reporting programs and monitor results; and
 - 3. Establish and monitor a data collection system for infections, and support reporting programs.

- B. Each RHC must establish an Infection Control Committee. The committee must:
1. Include Medical Director, a Nursing Manager, Infection Control Nurse, Pharmacy Director, Direct Care Manager, Housekeeping Supervisor, Safety Officer, and support staff or designees;
 2. Review reports, trends, and Quality Assurance reports;
 3. Produce minutes and action plans;
 4. Respond to developing situations;
 5. Support plans for improving care and outcomes; and
 6. Meet at least once every three months.
- C. Staff Responsibility
1. The Infection Control RN must:
 - a. Serve as the RHC's infection preventionist;
 - b. Maintain the infection control program, manage procedures and monitor programs at the RHC to fulfill the requirements outlined in policies, guidelines, and regulations;
 - c. Maintain databases and generate reports for the infection control committee;
 - d. Monitor and respond to patterns of infection or spread of communicable disease;
 - e. Consult with RHC and community resources when necessary; and
 - f. Develop monitoring tools and methods to collect data from clinical staff.

2. The Medical Director must:
 - a. Participate in the Statewide Antibiotic Stewardship Committee, the RHC Infection Control Program, and participate in development of practice guidelines;
 - b. Work with the Infection Control RN to monitor infections, patterns, and outcomes to reduce adverse outcomes and improve quality of care;
 - c. Work with the Pharmacy Director and pharmacy or medical staff to monitor care and ensure proper recordkeeping; and
 - d. Ensure prescribers provide documentation of dosage, duration, indications, symptoms, and a plan for follow-up for all antibiotics prescriptions.


3. The Pharmacy Director must:
 - a. Ensure Medication Regimen Reviews are completed;
 - b. Participate in the Statewide Antibiotic Stewardship Committee, the RHC Infection Control Program, and participate in development of practice guidelines;
 - c. Work with the Infection Control RN to monitor infections, patterns, and outcomes to reduce adverse outcomes and improve quality of care; and
 - d. Ensure timely and accurate reporting of Antibiograms, antibiotic usage patterns, and other reports needed by the Infection Control Committee.

4. The Nursing Manager must:
 - a. Participate in the Statewide Antibiotic Stewardship Committee, the RHC Infection Control Program, and participate in development of practice guidelines;
 - b. Ensure backup and coordination with the Infection Control RN to monitor infections, patterns, and outcomes to reduce adverse outcomes and improve quality of care; and
 - c. Work with the pharmacy or medical staff to monitor care and ensure proper recordkeeping.

5. The Clinical Staff must:
- a. Help develop best practices and improve quality of care;
 - b. Ensure adequate care, documentation, monitoring, and follow-up of any client illness or infection; and
 - c. Provide necessary information to the Infection Control Nurse to ensure adequate monitoring of infections.
- D. Each RHC must provide adequate supports for implementing, monitoring, and enforcing the Antibiotic Stewardship Program.

SUPERSESSION

RHC Standard Operating Procedure 105.2, *Antibiotics Stewardship Program*
Issued December 1, 2017

Approved: 
Deputy Assistant Secretary
Developmental Disabilities Administration

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¹ This document was a standard operating procedure that was reissued as a DDA policy without substantive changes.