

# Proposed Revisions Related to Antibiotic Stewardship Hospital (HAP) Accreditation Program

# **Medication Management (MM) Chapter**

#### Standard MM.09.01.01

The hospital establishes antibiotic stewardship as an organizational priority through support of its antibiotic stewardship program.

## MM.09.01.01, EP 1

The hospital allocates staffing, financial, and information technology resources to support the antibiotic stewardship program. (See also LD.01.03.01, EP 5)

#### MM.09.01.01, EP 2

The governing body appoints a physician and/or pharmacist who is qualified through education, training, or experience in infectious diseases and/or antibiotic stewardship as the leader or coleaders of the antibiotic stewardship program.

Note: The appointment(s) is based on recommendations of medical staff leadership and pharmacy leadership.

#### MM.09.01.01, EP 3

The leader(s) of the antibiotic stewardship program is responsible for the following:

- Developing and implementing an organizationwide antibiotic stewardship program that is based on nationally recognized guidelines to monitor and improve the use of antibiotics
- Documenting antibiotic stewardship activities
- Communicating and collaborating with the medical staff, nursing leadership, and pharmacy leadership, as well as with the hospital's infection prevention and control and quality assessment and performance improvement programs on antibiotic use issues
- Training and educating staff, including medical staff, on the practical applications of antibiotic stewardship quidelines, policies, and procedures

## MM.09.01.01, EP 4

The hospital has a multidisciplinary antibiotic stewardship program team composed of the following members:

- Physician with infectious disease or antibiotic stewardship experience
- Infection preventionist(s)
- Pharmacist(s)
- Microbiology laboratory staff
- Health care practitioner with antibiotic stewardship experience

Note: The multidisciplinary antibiotic stewardship program team may include part-time or consultant staff. Participation may occur on-site or remotely.

### MM.09.01.01, EP 5

The antibiotic stewardship program coordinates all components of the hospital responsible for antibiotic use and resistance, including, but not limited to, the infection prevention and control program, quality assessment and performance improvement program, medical staff, nursing services, and pharmacy services.

## MM.09.01.01, EP 6

The antibiotic stewardship program documents the evidence-based use of antibiotics in all departments and services of the hospital.

## Hospital (HAP) Accreditation Program

# MM.09.01.01, EP 7

The antibiotic stewardship program implements evidence-based guidelines that address the following:

- Diagnosis and treatment of community-acquired pneumonia
- Diagnosis and treatment of urinary tract infections
- Diagnosis and treatment of skin and soft tissue infections
- Inappropriate use of urine testing for patients without symptoms of urinary tract infections

### MM.09.01.01, EP 8

The antibiotic stewardship program implements strategies to optimize antibiotic prescribing. Note: Examples of strategies to optimize antibiotic prescribing include:

- Preauthorization requirements for specific antibiotics that entails an internal review and approval process prior to the use of specific antibiotics. To avoid treatment delays, antibiotics that require preauthorization are identified based on the expertise and resources available on the antibiotic stewardship team.
- Prospective review and feedback regarding antibiotic prescribing practices, including the treatment of positive blood cultures, by a member of the antibiotic stewardship team

#### MM.09.01.01, EP 9

The antibiotic stewardship program evaluates adherence (including antibiotic selection and duration of therapy, where applicable) to at least one of the following evidence-based guidelines:

- Diagnosis and treatment of community-acquired pneumonia
- Diagnosis and treatment of urinary tract infections
- Diagnosis and treatment of skin and soft tissue infections
- Inappropriate use of urine testing for patients without symptoms of urinary tract infections

Note 1: The hospital may measure adherence at the group level (that is, departmental, unit, clinician subgroup) or at the individual prescriber level.

Note 2: The hospital may obtain adherence data for a sample of patients from relevant clinical areas by analyzing electronic health records or by conducting chart reviews.

## MM.09.01.01, EP 10

The hospital reports data about the antibiotic stewardship program to hospital leadership.

Note: Examples of antibiotic stewardship program data include antibiotic resistance patterns, antibiotic prescribing practices, or an evaluation of antibiotic stewardship activities.

## MM.09.01.01, EP 11

The antibiotic stewardship program monitors the hospital's antibiotic use by analyzing data on days of therapy per 1000 days present or 1000 patient-days, or by reporting antibiotic use data to the National Healthcare Safety Network's Antimicrobial Use Option of the Antimicrobial Use and Resistance Module.

#### MM.09.01.01, EP 12

The hospital takes action on improvement opportunities identified by the antibiotic stewardship program.