ANTIBIOTIC STEWARDSHIP IMPLEMENTATION JOURNEY

GREAT PLAINS HEALTH NORTH PLATTE, NE



Process of Identifying Need

- CDC has identified antibiotic overuse as one of the most serious and growing threats to public health today
 - Estimated 20-50% antibiotics prescribed unnecessary or inappropriate
 - 23,000 deaths annually
- Great Plains Health
 - High C.diff rate (hospital acquired infection)
 - Concern for antibiotic overuse/misuse



Process Improvement Methods

- Joint Commission Standard
 - MM.09.01.01 Requirement for Antibiotic
 Stewardship Program effective Jan 1, 2017
- CMS proposed antibiotic stewardship program requirement for Medicare participants CoP June 2016
 - Could effect 6200 hospitals
 - Anticipate reduction in morbidity and mortality
 - \$284 million in net savings



Process Improvement Methods

- PDSA
 - Plan: Team formed, charter, problem statement
 - Do: Technology development, policies/procedures and daily processes for ABS Team
 - Study: Review data and results, report creation for efficiency
 - Act: Daily review of patients, ongoing review of process
- Lean
 - Current and Future process mapping of ABS Team
 - Map processes of antibiotic ordering through delivery at GPH



Results

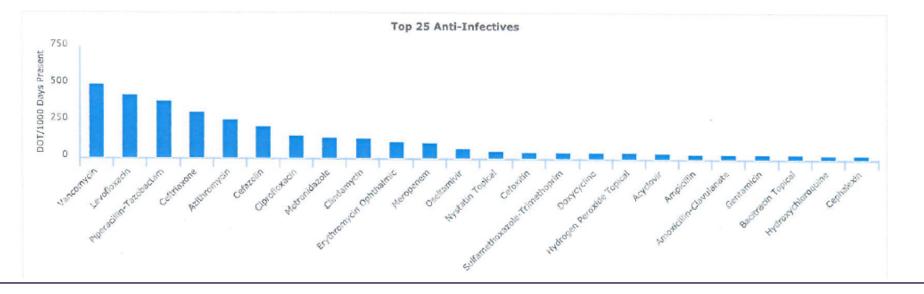
- Daily Review (Monday-Friday 8:15 am)
- Utilizing Software Reports
 - 48-hour review antibiotics with culture results comparison
 - Bug-drug mismatch
 - Therapeutic duplication
 - Reportable infections
 - Resistant cultures



Results Top 25 Anti-Infectives



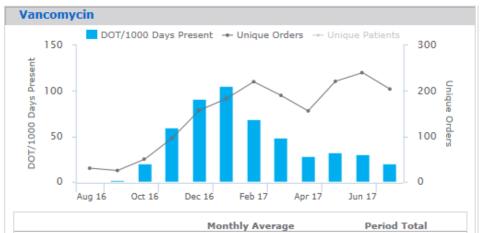
Parameters:		Medication Utilization Analysis – Order
Time Period:	Aug 2016 - Jul 2017	Medication Offiziation Analysis – Office
Aggregation:	Month	Run Date/Time: 08/04/17 14:07 CDT
Denominator:	Days Present	
Institution(s):		
Location(s):	Facility Wide Inpatients	
Medication(s):	Top 25 Anti-Infectives	
Route(s):	All Routes	
Secondary Axis:	Unique Orders	
Sort Order:	DOT/1000 (Descending)	





Results

- Review of Days of Therapy (DOT) compared with orders
- Decreased DOT
 - Vancomycin= 183
 orders/105 DOT January ↓
 to 204 orders/203 DOT July
 - Levofloxacin= 114 orders/ 87 DOT January ↓ 80 orders/12.7 DOT
- IV to PO Conversion
 - \$47,043 1st Quarter savings



507.72
3090.00
1772.00
788.00



Lessons Learned

- Required all staff education assists with effective implementation
- Physician leadership mandatory for successful implementation to providers
- C-suite support essential to drive initiatives
- Software tool vital to ensure continuity with monitoring, tracking and reporting
- Establish problem statement and monitor frequently for scope creep

