

Tips for Using the AHRQ *Toolkit to Improve Antibiotic Use in Long-Term Care*

Antibiotic stewardship continues to be a priority in nursing homes and other post-acute and long-term care settings. The *Toolkit to Improve Antibiotic Use in Long-Term Care*, released by the Agency for Healthcare Research and Quality (AHRQ), is designed to help long-term care facilities effectively tackle antibiotic stewardship. Here are suggestions on areas and issues on which various team members can focus using the AHRQ toolkit.

Nursing Home Administrator & Leadership

- ✓ Create a timeline for a step-by-step approach to develop and sustain the stewardship program.
- ✓ Use the kit's introductory presentation in the section "Developing Your Stewardship Program."
- ✓ Post in public areas signable Commitment Posters indicating to residents, their families and friends, and staff that your facility is dedicated to using antibiotics judiciously.
- ✓ Champion and support a culture of safety around antibiotic prescribing. Help people to understand that
 antibiotic use is a patient safety issue and engage team members to optimize antibiotic usage and improve
 communication as a team.

Infection Preventionist & Other Members of the Antibiotic Stewardship Team

- ✓ Work with clinician leaders/teams to develop/update guidelines using the Four Moments framework, including diagnostic criteria to:
 - Determine if a resident has an infection.
 - Cite common causative organisms and cultures that should be obtained.
 - Make recommendations for empiric therapy, duration of therapy, and narrowing or stopping therapy.
- ✓ Help practitioners and nursing staff understand the purpose of the Four Moments and how they can be operationalized daily, such as during a morning meeting. Meet with frontline teams and providers to review residents receiving antibiotics.
- ✓ Work with the clinical and administrative teams to change the system. Establish a framework for developing and implementing solutions to problems that are known to lead to antibiotic-associated harm.
- ✓ Identify targets to improve antibiotic use to address the difference between technical and behavioral problems that lead to antibiotic-associated adverse events, as well as first- and second-order problem-solving approaches.
- ✓ Work with the team to encourage a culture of appropriate antibiotic usage:
 - Engage frontline teams to optimize antibiotic prescribing and maximize team communication.
 - Encourage them to ask questions, seek guidance or additional training they need, and identify opportunities for improvements.
- ✓ Ensure that clinicians and frontline staff know how to have conversations with family members about antibiotic stewardship and infections, including prevention and safety efforts.

- ✓ Present material regarding "Best Practices for Common Infectious Syndromes to frontline staff."
 - Standing monthly meetings and conferences.
 - Distribution of materials on websites and workstations, break rooms, etc.
 - Follow-up regularly and seek feedback, questions, and comments.
- ✓ Use resources in the toolkit to sustain your antibiotic stewardship program over time, including continuing stewardship efforts, tracking progress, and sharing successes.

Clinicians & Nursing Staff

- ✓ Understand and follow the Four Moments of Antibiotic Decision-Making
 - 1. Does the resident have symptoms that suggest an infection?
 - 2. What type of infection is it? Have we collected appropriate cultures before starting an antibiotic?
 - 3. What duration of antibiotic therapy is needed for the resident's diagnosis?
 - 4. After antibiotic started (2-3 days): Re-evaluate the resident and review results of diagnostic tests.
 - Can we stop antibiotics?
 - Can we narrow therapy?
 - · Can we change to oral antibiotics?
- ✓ Learn general principles of developing a stewardship program, including:
 - Which team members should be involved and how?
 - Interventions relevant to long-term care settings.
 - Ways to measure and share outcomes of these interventions.
 - Understand how/when to collect high-quality samples for microbiological cultures, which will lead to better decisions about antibiotic prescriptions.
- ✓ Work with the infection preventionist and other team leaders/members to create and sustain a culture of appropriate antibiotic usage:
 - Understand & practice protocols.
 - Improving communication.
 - Identify opportunities for improvement/change.
- ✓ Understand how to identify and address problems that lead to antibiotic-associated harm:
 - Use a "Learning from Antibiotic-Associated Adverse Event" form, similar to a root cause analysis.
 - This can be completed during structured meetings to guide strategies to prevent future antibiotic-associated adverse events.
- ✓ Review materials regarding "Best Practices for Common Infectious Syndromes," including how to:
 - Collect cultures.
 - Assessment and management of residents with suspected urinary tract infection.
- ✓ Understand how to discuss infection concerns about residents with family members and caregivers and how to have difficult conversations.

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