Policy Directive: compliance is mandatory

Antimicrobial Stewardship Policy Directive

Objective file number: eA981254 || 2014-04870
Policy developed by: Infection Control Service, Public Health and Clinical Systems
Approved at Portfolio Executive on: 4 December 2014
Next review due: 1 August 2020

Summary
The purpose of the Antimicrobial Stewardship Policy Directive and accompanying Antimicrobial Prescribing Clinical Guideline is to describe the processes for Antimicrobial Stewardship and roles and responsibilities of employees of SA Health hospitals in its implementation.

Keywords

Policy history
Is this a new policy? N
Does this policy amend or update an existing policy? Y v1.0
Does this policy replace an existing policy? N
If so, which policies?

Applies to
CALHN, SALHN, NALHN, WCHN, CHSALHN

Staff impact
All Clinical, Medical, Nursing, Allied Health, Emergency, Dental, Mental Health, Pathology

PDS reference
D0357

Version control and change history

<table>
<thead>
<tr>
<th>Version</th>
<th>Date from</th>
<th>Date to</th>
<th>Amendment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>04/12/2014</td>
<td>1/08/2017</td>
<td>Original version</td>
</tr>
<tr>
<td>1.1</td>
<td>1/08/2017</td>
<td>current</td>
<td>Revision and minor changes approved by Policy Committee</td>
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1. Objective

The purpose of this policy is to establish the basis for antimicrobial stewardship (AMS) within SA Health facilities by:

- promoting the safe, responsible and appropriate prescribing of antimicrobials as a key element of preventing emergence of antimicrobial resistance and appropriately treating healthcare associated infections
- establishing the principles for effective implementation of systems to support the governance, implementation and monitoring of AMS in SA Health facilities
- describing the roles and responsibilities of employees of health service organisations in ensuring the safe, effective and appropriate use of antimicrobials.

This policy directive is to be read in conjunction with the SA Health Antimicrobial Prescribing Clinical Guideline.

2. Scope

All SA Health employees or persons who contribute to the provision of health services on behalf of SA Health must adhere to this policy. This includes contracted staff and services, such as general practitioners, pharmacy services and locum nursing staff. The principles of this policy are strongly recommended to all non-public health care providers who interact with SA Health.

3. Principles

AMS is a clinical strategy to optimise patient outcomes and minimise adverse consequences of antimicrobial use, including the development of antimicrobial resistance. AMS strategies should maintain a patient-centred approach, a focus on improving antimicrobial prescribing, and be structured to meet the National Safety and Quality Health Service Standards.

All SA Health LHNs should have an AMS Program in place. Effective programs require robust governance arrangements with clear lines of communication and accountability to hospital and LHN management. This facilitates the appropriate provision of leadership and resources to optimise the effectiveness of the program.
4. **Detail**

4.1 **Clinical guidelines**

The current version of the Australian Therapeutic Guidelines: Antibiotic (TG: Antibiotics) is endorsed by SA Health as the primary reference for antimicrobial prescribing, and should be available to prescribers in all clinical settings. Where additional detail to that found in TG:A is needed or where differences in antimicrobial resistance patterns occur at a state or LHN level, locally developed (statewide) clinical guidelines should be utilised. These must be endorsed by LHN AMS and Drug and Therapeutics Committees for local use, and should be in line with the **SA Health Antimicrobial Prescribing Clinical Guideline**.

4.2 **Antimicrobial surveillance**

Effective systems of monitoring of antimicrobial usage and resistance should be adopted by all SA Health LHNs. All SA Health acute care adult hospitals of size >100 beds will contribute antimicrobial surveillance data to the National Antimicrobial Utilisation Surveillance Program (NAUSP). In addition, a select group of large rural health sites will contribute surveillance data to NAUSP.

4.3 **Access to specialist information for prescribers**

SA Health LHNs should ensure that appropriate arrangements and resources are available to improve the effectiveness of AMS. Adequate access to specialist Infectious Diseases, Clinical Microbiology and Clinical Pharmacist services, to enable timely clinical consultation, as well as feedback and education, to prescribers, pharmacists and relevant clinical staff is necessary.

4.4 **Directed Therapy**

Guidance for directed therapy will be provided by the SA Pathology microbiology laboratory, or other contracted laboratory as appropriate. Where appropriate, these laboratories will utilise systems of cascade susceptibility reporting to direct prescribing of the narrowest spectrum suitable agent.

4.5 **Antimicrobial Formulary**

SA Health acknowledges that antimicrobial formulary management and restriction is a fundamental component of an AMS Program. SA Health has established the South Australian Medicines Formulary which provides a consistent approach to implementing antimicrobial formulary management across all SA Health acute care facilities.

4.6 **Information for patients / carers**

Patients receiving antimicrobial therapy, their family and carers, have a right to be informed regarding their disease state, medication use and therapeutic options, so as to optimise outcomes and minimise the risk of harm from antimicrobial therapy. Clinical staff with appropriate knowledge and skills should be available within SA Health facilities to provide timely and appropriate counselling and written information to patients and those caring for them.
5. Roles and Responsibilities

5.1 Chief Executive SA Health is responsible for:

- ensuring that the delivery of services to consumers across SA Health is done in a manner which is in accordance with this policy.

5.2 Executive Director Public Health and Clinical Systems through the Director of Communicable Disease Control Branch will:

- establish, maintain and periodically review the effectiveness of this policy
- disseminate learning from the management of any issues raised through implementation of this policy directive.

5.3 Local Health Network (LHN) Chief Executive Officers will:

- assign responsibility for AMS to an appropriate delegate of the LHN management team
- ensure responsibility for leadership and governance of antimicrobial stewardship is delegated to the relevant committee within the LHN clinical governance structure
- ensure adequate resources and training are available for the implementation of this policy throughout the LHN
- maintain an effective mechanism for review of antimicrobial stewardship within the LHN
- ensure the LHN meets standards for accreditation in relation to antimicrobial stewardship.

5.4 LHN AMS Committees are responsible for:

- providing governance over the use of antimicrobial agents as per their Terms of Reference
- providing leadership for addressing requirements of the LHN relating to meeting the national standards for accreditation
- working collaboratively with other LHN committees, such as Drug and Therapeutics Advisory Committees and Infection Prevention and Control Committees, regarding formulary management and antimicrobial stewardship issues as necessary
- reviewing, approving and promoting the development of local health network guidelines on antimicrobial use where required, or endorsing statewide guidelines for use at LHN level
- coordinating actions in response to results of surveillance of antimicrobial use
- providing leadership for the training of clinical staff throughout the LHN in relation to AMS
- providing representation for the LHN on the SA expert Advisory Group for Antimicrobial Resistance (SAAGAR) and other relevant statewide committees.
5.5 **Prescribers (including contracted staff) are responsible for:**

- safe and appropriate prescribing and therapeutic monitoring of antimicrobials
- ordering timely and relevant pathology tests and reviewing results to promote safe and appropriate prescribing
- accessing relevant locally developed and approved guidelines and using the latest version of Therapeutic Guidelines: Antibiotic as part of their practice
- documenting the reason for antimicrobial therapy and its expected duration or point of review on the medication chart or case notes
- maintaining a work ethic that is in keeping with the principles of antimicrobial stewardship and the controls introduced by their LHN as part of the local AMS Program. Where relevant, this involves seeking and documenting of expert advice on the management of infection, and approval for the use of restricted antimicrobials as required
- provision of information to patients and their carers regarding their antimicrobial therapy and the systems to promote antimicrobial stewardship within SA Health.

5.6 **Pharmacists (including contracted staff) are responsible for:**

- timely and accountable supply of antimicrobials in accordance with systems introduced by the LHN AMS Program, including mechanisms to control access to restricted antimicrobials where restrictions exist
- safe, appropriate and timely advice to prescribers and nurses with regard to the selection, dose, route, duration and monitoring of antimicrobials
- provision of information to patients and their carers regarding their antimicrobial therapy and the systems to promote antimicrobial stewardship within SA Health.

5.7 **Nurses are responsible for:**

- working collaboratively with prescribers to support AMS principles
- ensuring safe and timely administration of prescribed antimicrobials
- supporting timely collection and review of pathology specimens
- being familiar with the principles of AMS and related systems within their LHN and supporting antimicrobial stewardship within SA Health
- where it is within their scope of practice, checking that restricted antimicrobials are accompanied by the appropriate approval documentation prior to their administration and seeking advice from relevant prescribers and pharmacists if the appropriate documentation is missing
- assisting patients and carers to obtain information and understanding of their antimicrobial therapy.

6. **Reporting**

All SA Health acute care adult hospitals of size >100 beds are required to contribute antimicrobial surveillance data to the National Antimicrobial Utilisation Surveillance Program (NAUSP).

AMS activities at LHN level will be reported to SAAGAR at quarterly meetings.
7. **EPAS Considerations**

EPAS order sets were constructed with acknowledgement of AMS principles.

Relevant documentation must be recorded by prescribers, pharmacists and nurses in the EPAS system (where available) as detailed in Section 5 Roles and Responsibilities.

SAAGAR will be consulted, and will be required to endorse, any additions or alterations to EPAS order sets for antimicrobial agents.

8. **Exemptions**

No exemption allowed for this policy directive (with the exception of antimicrobial surveillance in SA Health acute care adult hospitals of size < 100 beds – refer to Section 4.2).

9. **Associated Policy Directives / Policy Guidelines**


10. **References, Resources and Related Documents**

- SA Health Antimicrobial Stewardship Action Plan 2013-14

11. **Other**

Not applicable
12. National Safety and Quality Health Service Standards

The Australian Commission on Safety and Quality in Health Care has developed 10 National Safety and Quality Health Service Standards (the Standards).

This policy directive contributes to the following listed standards:

<table>
<thead>
<tr>
<th>National Standard 1: Governance for Safety and Quality in Health Service Organisations.</th>
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<tbody>
<tr>
<td>Criterion 1.1 - Implementing a governance system that sets out the policies, procedures and/or protocols for managing patient safety and quality risks.</td>
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<tr>
<td>Criterion 3.14 - Developing, implementing and regularly reviewing the effectiveness of the antimicrobial stewardship system.</td>
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<tr>
<td>3.14.1 - an Antimicrobial Stewardship program is in place</td>
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<td>3.14.2 - the clinical workforce prescribing antimicrobials have access to current endorsed therapeutic guidelines on antibiotic usage</td>
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<td>3.14.3 - monitoring of antimicrobial usage and resistance is undertaken</td>
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<td>3.14.4 - action is taken to improve the effectiveness of antimicrobial stewardship.</td>
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<tr>
<th>National Standard 4: Medication Safety</th>
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<tr>
<td>Criterion 4.13 - The clinical workforce informing patients and carers about medication treatment options, benefits and associated risks.</td>
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13. Risk Management

Administration of medicines including antimicrobials carries inherent risks to both patients and staff. Risk is managed by quality use of medicines (QUM) initiatives at both a state and LHN level. Policies, procedures and clinical guidelines are aimed to mitigate risk. Adopting the principles of AMS is a key strategy in minimising the risk of increased development of healthcare associated infections.
14. Evaluation

Evaluation of compliance with this policy directive will be included in the remit of AMS committees within each LHN. Compliance with this policy directive will be measured through:

- monthly monitoring of antibiotic usage in SA Health hospitals (>100 beds) through the National Antimicrobial Utilisation Surveillance Program (NAUSP)
- ongoing monitoring of key antibiotics associated with the emergence of resistance to ensure appropriate usage in accordance with local guidelines
- use of the SA Health AMS self-evaluation toolkit.

15. Attachments

N/A

16. Definitions

In the context of this document:

- **AMS** means: Antimicrobial Stewardship, an effective approach to improving antimicrobial use in hospitals with a view to optimising patient outcomes and minimising adverse consequences of their use (including antimicrobial resistance, toxicity and unnecessary costs).
- **AMS Committee** means: Antimicrobial Stewardship Committee; the committee responsible for governance of antimicrobial use and implementation of antimicrobial stewardship in their respective Local Health Network.
- **Antimicrobial** means: a chemical (medication) used for the management of human disease which has an action to kill or stop the replication/growth of microbiological organisms. This includes medications which are being used for a non-infectious reason if they are known to also possess antimicrobial activity.
- **Clinical governance** means: a framework for ensuring ‘organisations are accountable for continuously improving the quality of their services and safeguarding high standards of care. This is achieved by creating an environment in which there is transparent responsibility and accountability for maintaining standards and by allowing excellence in clinical care to flourish’.
- **Clinical staff** means: all medical officers and registered allied health professionals including pharmacists, enrolled and registered nurses / midwives.
- **Formulary** means: a list of medications approved for use within SA Health facilities, such that use of a medication not on the list requires special application by the prescriber and consideration by an appropriate authority within the relevant clinical governance structure.
• **LHN** means: Local Health Network. The corporate structures established to link hospitals and health services based on geographical location or provision of specialist services, and to provide decentralised governance arrangements for SA Health facilities. The Local Health Networks for South Australia are: Central Adelaide Local Health Network (CALHN), Northern Adelaide Local Health Network (NALHN), Southern Adelaide Local Health Network (SALHN), Country Health SA Local Health Network (CHSALHN) and Women’s and Children’s Health Network (WCHN).

• **NAUSP** means: National Antimicrobial Utilisation Surveillance Program.

• **NSQHSS** means: National Safety and Quality Health Service Standards.

• **Prescriber** means: a registered health professional qualified to prescribe therapeutic substances (e.g. medical officer, dentist or nurse practitioner).

• **TG: Antibiotics** means: Australian Therapeutic Guidelines: Antibiotic