

Accreditation: Patient Safety Bulletin of the Week

November 2021: **Antimicrobial Stewardship**

What is Antimicrobial Stewardship?

Antimicrobial stewardship is an activity that includes *appropriate selection, dosing, route, and duration* of antimicrobial therapy.

What is the Antimicrobial Stewardship Sub-committee?

- A multidisciplinary group responsible for development of stewardship documents and policies for the NTHSSA
- Reports to the NTHSSA Pharmacy and Therapeutics Committee

How do we improve the effectiveness of antimicrobial prescribing?

Antibiogram Reporting:

- Allows treatment to be tailored to local resistances
- Reported yearly

Antimicrobial De-escalation:

- IV antimicrobials reviewed every 72 hours for cultures and sensitivities

Dose Optimization:

- Dosing antimicrobials appropriately for patient renal function
- Provide information and context for changing guidelines (e.g. vancomycin trough targets)

Treatment Guidelines:

- NWT specific guidelines developed for CAP, UTI and SSTI

What are the goals of Antimicrobial Stewardship?

Achieve the best patient outcomes, while reducing resistance, adverse effects and costs associated with antimicrobials.

How do we determine if changes we make are having an effect?

Antimicrobial Usage Tracking:

- Using less or more antimicrobials may be an indication that an intervention is or isn't working as intended

IV to Oral De-escalation Audits:

- Determines if antimicrobials are being de-escalated per policy
- **Quarterly reports** generated for NTHSSA inpatient units
- **Annual reports** created and shared with practitioners as an indicator to monitor antimicrobial usage in NWT.

Change in Susceptibility - Antibiogram

- As the amount of antimicrobials used changes, susceptibility to them may shift as well

Read the policies at our NTHSSA:

- ❖ <https://ournthssa.ca/wp-content/uploads/2020/01/15-63-V1-Antimicrobial-Usage-Tracking.pdf>
- ❖ <https://ournthssa.ca/wp-content/uploads/2019/12/15-65-V1-NTHSSA-Antimicrobial-De-escalation.pdf>