

Care Transitions: One Community's Journey in Coalition Building

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Background

The Detroit Lakes health care community accepted the invitation to partner with the Minnesota Department of Health (MDH) to advance antibiotic stewardship (AS) from a community perspective.

The Local Collaborative for Antibiotic Stewardship – Detroit Lakes held its inaugural meeting September 25th, 2017. Eight facilities and 22 individuals participated.

Currently participating facilities:

- Essentia – St. Mary's Hospital Detroit Lakes
- Essentia Detroit Lakes Clinic
- Essentia Oak Crossing
- Ecumen Detroit Lakes
- Sunnyside Care Center (Lake Park)
- Indian Health Services Clinics
 - White Earth
 - Naytahwaush
 - Pine Point
- Sanford Health Detroit Lakes Clinic
- Sanford Dialysis Detroit Lakes
- Perham Hospital
- Perham Long-term Care Facility
- PioneerCare Fergus Falls

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Collaborative Development

Where to Begin?

Define objectives:

- Enhance communication among facilities sharing patient populations
- Improve AS in individual facilities and across care transitions
- Prevent transmission of multi-drug resistant organisms (MDRO) within and among facilities

Assess needs and interests:

- Collaborative member needs and interests assessment:
- Individual facility gap analysis
- Prioritization Survey

Execute using work groups:

- Patient/resident and Public Education Work Group
- Care Transitions Work Group

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Work Group #1

Patient/resident and Public Education Work Group



Where to start providing education on such a large but important topic?

Goal:

1. Develop a poster that all areas can utilize
2. Develop a handout to provide patients when antibiotics are prescribed

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OUR PROMISE TO YOU ABOUT ANTIBIOTICS

Antibiotics can be both helpful and harmful

We are committed to prescribing antibiotics **ONLY** when necessary

The Facts:

- When you need an antibiotic, the benefits are greater than the risks of side effects or antibiotic resistance. When antibiotics aren't needed, they won't help you, and the side effects could still hurt you.
- Common side effects of antibiotics can include rash, dizziness, nausea, diarrhea, or yeast infections. More serious side effects include Clostridium difficile infection (also called C. difficile or C. diff), which causes diarrhea that can lead to severe colon damage and death, and severe and life-threatening allergic reactions.
- Antibiotics do not work on viruses, such as colds and flu, or runny noses, even if the mucus is thick, yellow, or green.
- Antibiotics are only needed for treating certain infections caused by bacteria. Antibiotics also won't help for some common bacterial infections including most cases of bronchitis, many sinus infections, and some ear infections.
- Taking antibiotics creates resistant bacteria. Antibiotic resistance occurs when bacteria no longer respond to the drugs designed to kill them. Each year in the United States, at least 2 million people get infected with antibiotic-resistant bacteria. At least 23,000 people die as a result.
- If you need antibiotics, take them exactly as prescribed. Talk with your doctor if you have any questions about your antibiotics, or if you develop any side effects, especially diarrhea, since that could be a C. difficile (C. diff) infection which needs to be treated.

Sample Poster

Shows Integration of the Healthcare Systems! We are a partnership!

COLLABORATION!

COLLABORATION!

COLLABORATION!

OUR PROMISE TO YOU ABOUT ANTIBIOTICS

We are committed to prescribing antibiotics only when necessary

Antibiotics can be both helpful and harmful

COLLABORATION!

COLLABORATION!

COLLABORATION!

Three Questions to Ask Before You Take Antibiotics

1

Do I really need antibiotics?

Antibiotics treat bacterial infections, like strep throat, whooping cough, and bladder infections with symptoms. They don't work against viruses, like colds, coughs, and most sinus infections. Ask your doctor whether you have a bacterial infection.

2

What are the risks?

Antibiotics can cause side effects like diarrhea, vomiting, rash, and more. They can also lead to **antibiotic resistance**. If you use antibiotics when you don't need them, they might not work when they are needed.

3

Are there other options to help me feel better?

Rest and plenty of fluids are important. You can also ask your doctor about over-the-counter medicines that might help relieve your symptoms.



Workgroup #2

Care Transitions Work Group

- 1) Electronic Medical Record—what can you do to work smarter and not harder?
- 2) Antibiotic Time-Outs
 - Case Reviews
 - Medical Director/Education to Provider
 - System Education to Providers

INFECTION CONTROL TRANSFER FORM			
Last Name	First Name	Date of Birth	Transferring Facility/Phone
Isolation Is patient currently in isolation? <input type="checkbox"/> YES If YES: <input type="checkbox"/> Contact <input type="checkbox"/> Droplet <input type="checkbox"/> Airborne <input type="checkbox"/> Other: _____		<input type="checkbox"/> NO Isolation	
Cultures Are cultures pending or recent cultures taken? <input type="checkbox"/> YES → include result if available. If YES: <input type="checkbox"/> Urine <input type="checkbox"/> Blood <input type="checkbox"/> Wound <input type="checkbox"/> Other: _____		<input type="checkbox"/> NO Cultures	
Symptoms Is patient currently experiencing: <input type="checkbox"/> Fever <input type="checkbox"/> Vomiting <input type="checkbox"/> Incontinence of urine or stool <input type="checkbox"/> Cough <input type="checkbox"/> Diarrhea <input type="checkbox"/> Open or draining wounds		<input type="checkbox"/> NO Noted Symptoms	
Risk Factors Does patient have any of the following: <input type="checkbox"/> Central line/PICC (date inserted: _____) <input type="checkbox"/> Hemodialysis catheter <input type="checkbox"/> Urinary catheter (date inserted: _____) <input type="checkbox"/> Suprapubic catheter <input type="checkbox"/> Hospital admission within past 90 days <input type="checkbox"/> PEG tube		<input type="checkbox"/> NO Noted Risk Factors	
Antibiotics Is the patient currently on antibiotics? <input type="checkbox"/> YES			<input type="checkbox"/> NO Antibiotics
Antibiotic(s), Dose, & Directions	Indication	Duration	
Organisms Did or does patient have:		Infection History	
<input type="checkbox"/> MRSA		<input type="checkbox"/> Current <input type="checkbox"/> Ruling Out <input type="checkbox"/> History	
<input type="checkbox"/> VRE		<input type="checkbox"/> Current <input type="checkbox"/> Ruling Out <input type="checkbox"/> History	
<input type="checkbox"/> Acinetobacter		<input type="checkbox"/> Current <input type="checkbox"/> Ruling Out <input type="checkbox"/> History	
<input type="checkbox"/> Extended-Spectrum Beta Lactamase		<input type="checkbox"/> Current <input type="checkbox"/> Ruling Out <input type="checkbox"/> History	
<input type="checkbox"/> Clostridium difficile		<input type="checkbox"/> Current <input type="checkbox"/> Ruling Out <input type="checkbox"/> History	
<input type="checkbox"/> Other: _____		<input type="checkbox"/> Current <input type="checkbox"/> Ruling Out <input type="checkbox"/> History	
<input type="checkbox"/> NO Known Multi-Drug Resistant Organisms			
Vaccines Vaccine History		Date Received	
<input type="checkbox"/> Influenza (seasonal)		<input type="checkbox"/> Patient <input type="checkbox"/> Chart	
<input type="checkbox"/> Pneumococcal		<input type="checkbox"/> Patient <input type="checkbox"/> Chart	
<input type="checkbox"/> Zoster		<input type="checkbox"/> Patient <input type="checkbox"/> Chart	
<input type="checkbox"/> Other: _____		<input type="checkbox"/> Patient <input type="checkbox"/> Chart	
		<input type="checkbox"/> NO Vaccines	

Sample Infection Gathering Form—completed upon admission and with hospital transfer

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Keeping Momentum

Evaluating Effectiveness

- Antibiotic Timeout Success
- Antibiotic Information Tool

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Questions?

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