



# The Antimicrobial Stewardship and Resistance Update

Quarterly newsletter providing updates on news, reports, research, policies, and events related to antimicrobial stewardship and resistance in California.

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  Designation Spotlight



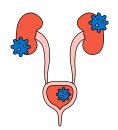
## U.S. Antibiotic Awareness Week

This year's Centers for Disease Control and Prevention (CDC) theme for the U.S. Antibiotic Awareness Week (AAW) is One Health. The One Health approach to antimicrobial stewardship is a comprehensive, multi-disciplinary strategy aimed at addressing the global challenge of antimicrobial resistance (AMR). Recognizing that the health of humans, animals, and the environment are deeply interconnected, this approach promotes collaboration across diverse sectors to reduce the misuse and overuse of antimicrobial agents. Antimicrobial stewardship, in the One Health context, promotes responsible use of antimicrobials across all sectors. In human healthcare, it involves establishing best practices for prescribing antimicrobials, such as using narrow



-spectrum drugs if appropriate, adjusting treatments based on culture results, and encouraging the prevention of infections through vaccination and hygiene. In this issue, we offer strategies and interventions that also promote collaboration to prevent antimicrobial resistance.

## Strategies to Address Asymptomatic Bacteriuria and Suspected Urinary Tract Infection



Asymptomatic bacteriuria (ASB) refers to the presence of bacteria in the urine without the typical signs or symptoms of a urinary tract infection (UTI). Although common, particularly in older adults, pregnant women, and individuals with certain medical conditions, ASB usually does not require treatment unless in specific cases like pregnancy or prior to certain urological procedures.

Inappropriate treatment of ASB, often with unnecessary antimicrobials, can contribute to antimicrobial resistance, underscoring the importance of antimicrobial stewardship. Stewardship strategies focus on educating healthcare providers to distinguish between ASB and symptomatic infections, reducing unnecessary antimicrobial prescriptions, and promoting evidence-based guidelines to avoid contributing to resistance. By ensuring antimicrobials are only used when absolutely necessary, these strategies help preserve the effectiveness of antimicrobials and protect public health.

#### **Skilled Nursing Facilities**

The following are strategies and resources for suspected UTIs.

- **Assess** your residents using resources for the <u>Assessment and Management of the Resident with a Suspected Urinary Tract Infection</u> (www.ahrq.gov/antibiotic-use/long-term-care/best-practices/uti-assess.html)
- **Use** best practices such as <u>Loeb Minimum Criteria for Ordering Urine Cultures in Nursing Home</u> <u>Residents</u> (www.ncbi.nlm.nih.gov/pmc/articles/PMC9879885/#r11)
- **Promote** diagnostic stewardship with <u>The Culture of Culturing The Importance of Knowing When to Order Urine Cultures</u> (www.ahrq.gov/hai/quality/tools/cauti-ltc/modules/implementation/education-bundles/urine-culturing/when-to-order/cultures-slides.html)
- **Educate** on the <u>Common Myths in the Diagnosis of Urinary Tract Infections</u> (www.hsag.com/contentas sets/4479a7555fa5469a8fc676176b11a24f/mythsdiagnosingutis\_final.pdf)

#### **Hospital Emergency Departments**

- **Review** existing order sets that include urine cultures. Are they needed? Can urine cultures be reflexed instead if a urinalysis is positive?
- Encourage "Watchful Waiting" or a "Wait-and-See" approach
  - May be used used for low-risk patients with ASB to avoid unnecessary antimicrobial use.
  - Bacteremia From a Presumed Urinary Source in Hospitalized Adults With Asymptomatic Bacteriuria (pubmed.ncbi.nlm.nih.gov/38477915/)



### Penicillin Allergy Delabeling

Less than 1% of the U.S. population is truly allergic to penicillin, despite 10% of the population reporting the allergy. Many penicillin allergies are documented in childhood but have not been evaluated as adults. Many



(blogs.cdc.gov/safehealthcare/antibiotic-stewardship-and-allergy-labels/)

patients who report the allergy will not have a true IgE-medicated reaction and up to 80% of people no longer have the allergy after 10 years. Delabeling penicillin allergies can decrease the unnecessary use and risks of broad-spectrum antimicrobials.

- CDC Clinical Features of Penicillin Allergy (www.cdc.gov/antibiotic-use/hcp/clinical-signs/index.html)
- CDC Flyer: <u>Is it Really a Penicillin Allergy? Evaluation and Diagnosis of Penicillin Allergy for Healthcare Professionals</u> (www.cdc.gov/antibiotic-use/media/pdfs/penicillin-factsheet-508.pdf)

**Los Angeles County** recently created an easy-to-follow, low-risk penicillin allergy delabeling toolkit for hospitals. The guide includes an overview of penicillin allergies, benefits of delabeling, current recommendations for drug allergies, amoxicillin challenge and delabeling procedure, and more.

- <u>LA County Adult Low-Risk Penicillin Allergy Delabeling Toolkit for Hospitals</u> (publichealth.lacounty.g ov/acd/docs/PenicillinAllergyDelabelingToolkitforHospitals.pdf)
- LA County Webinar: <u>Penicillin Allergy Delabeling: An Antibiotic Stewardship Initiative</u> (publichealth. lacounty.gov/cme/penallergywebinar/)

## **CDPH HAI Antimicrobial Stewardship Consultations**

The CDPH HAI AS team offers consultations to facilities interested in strengthening their stewardship program or CDPH HAI ASP Honor Roll application. Facilities are able to book 30-minute consultations through the <u>Bookings Page</u> (outlook.office365.com/owa/calendar/CDPHHAIASPHonorRollMentorshipan dConsultations-CDPH-Bookings@cdph.onmicrosoft.com/bookings/) to find a time that works best with their schedule.

#### Potential topics include:

- Technical assistance for CDPH HAI ASP Honor Roll application
- ASP Core Element implementation
- Development/adjustment of an intervention or quality improvement project
- Metrics and tracking

Open to all facility types!





### **Local Health Departments and Support for Stewardship**



Local Health Departments (LHDs) are in a unique position to support antimicrobial stewardship programs and initiatives. CDPH encourages LHDs to promote judicious use of antimicrobials to prevent the spread of resistance in their region.

- **Provide** direct technical assistance and facilitate implementation of Core Elements of AS in designated settings. Core Elements should be applied to the setting for which they were designed.
- **Participate** each year in <u>CDC's U.S. Antibiotic Awareness Week</u> (www.cdc.gov/antimicrobial-resistance /communication-resources/usaaw.html) observance, annually during November 18th-24th.
- **Distribute** CDC and CDPH resources, including CDC's Core Elements and materials from <u>Be Antibiotics</u> Aware: Smart Use, <u>Best Care</u> (www.cdc.gov/antibiotic-use/php/usaaw-partnertoolkit/index.html) to local partners, providers, healthcare systems, and the general public year-round.
- **Provide** access to antimicrobial stewardship education and expertise across the spectrum of healthcare, particularly to settings and populations with limited access to AS expertise or where stewardship or antimicrobial use inequities exist (lower resourced facilities, rural regions, etc.).
- **Facilitate** relationships and collaboration between facility types and institutions to support stewardship initiatives across the region.
- **Promote** facilities with strong AS programs to connect with lower-resourced facilities, or facilities with stewardship barriers, for mentorship and regional support.
- **Encourage** the use of the comprehensive interfacility transfer form during the transfer-of-care process which includes multidrug-resistant organism (MDRO) and antimicrobial use information.
- **Refer** facilities to the CDPH HAI Antimicrobial Stewardship team (<u>HAI\_AS@cdph.ca.gov</u>) for individual consultations as needed.

## **Regional MDRO Prevention Activities**

#### Sacramento MDRO Prevention Collaborative



Kudos to the Sacramento Public Health team as well as Sacramento hospitals and SNFs for their ongoing participation in the Sacramento Multidrug Resistant Organism (MDRO) Prevention Collaborative. Over the last 18 months, Sacramento Public Health has hosted their facilities for a variety of training and networking events, with the goal of preventing the emergence and transmission of emerging MDROs within and between healthcare facilities in

the region. Hospitals and SNFs worked together on interfacility transfers and communication, the admission and care of patients and residents with MDROs, antimicrobial stewardship, and MDRO surveillance.

The focus of the most recent meeting was a workshop about responding to a new case of *Candida auris*. Public health and facilities worked together to learn the protocols of response, including screening, infection prevention and control guidance and cohorting recommendations. Participants found the training valuable, saying, "the topics were relevant to everyday practice and provided an opportunity for hands-on learning."



#### **Upcoming Workshops**

Butte County is working with CDPH to host a workshop for local health departments of the <u>Greater Sierra Sacramento Region</u> (www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/HAI\_LiaisonIP.aspx) on November 6th. The focus of this workshop will be responding to a new carbapenemase-producing organism case. Following the workshop for local health departments, a similar workshop will be offered to hospitals and SNFs in the region.

Over the next year, CDPH will plan similar workshops for the Rural North region, the Central California region and the Southern California region. Stay tuned!

## **Antimicrobial Stewardship Project Updates**

#### Pediatric Emergency Department (ED) Project



The pediatric AS project was designed to support non-pediatric hospitals and EDs that typically do not have the support of an infectious diseases pediatric specialist onsite when treating pediatric patients. The project included bi-weekly education webinars and workshops and 1-on-1 meetings. We held 8 education webinars reaching 37 facilities and 69 healthcare professionals throughout California.

## San Diego Local Health Department (LHD) Ventilator-equipped Skilled Nursing Facility (vSNF) Project



The San Diego LHD AS vSNF project was a part of the broader MDRO/AR regional prevention collaborative in San Diego. With the LHD, we engaged with 8 vSNFs that sustained CPO outbreaks. We conducted 53 educational sessions, with various topics on prescribing for UTIs, vSNF antimicrobial resistance, antibiogram interpretation, and ASP initiatives.

#### Long-Term Acute Care (LTACH) AS Workgroup



The CDPH HAI LTACH AS Workgroup aimed to improve and strengthen LTACH ASPs throughout the state through two phases. The first phase of the project included webinars and workshops. During the second phase, facilities will develop quality improvement projects focused on duration of therapy and adult low-risk penicillin-allergy delabeling. We are currently engaging with 14 LTACH facilities and 11 local health departments.

#### Stanislaus Regional Collaborative



The AS component of the larger Stanislaus MDRO/AR regional prevention collaborative included 5 ACHs, 9 SNFs, and 1 LTACH. We primarily focused on stewardship during the transfer of care process, between ACH EDs and SNFs, as this was identified during focus group discussions to be the issue most in need of assistance. After 13 months of sustained engagement, we held 13 group meetings, including one in-person meeting, reaching 35 healthcare professionals throughout the county.



#### **Outpatient Community Centers AS Project**



The Outpatient Community Centers Project began in August 2023 with 4 outpatient healthcare centers serving lower-resourced populations. We worked with facilities to develop and implement AS interventions at each facility and support facilities tracking their antimicrobial use over time at baseline, during intervention, and post-intervention. We held 5 joint meetings, 2 educational webinars, and 19 1-on-1 meetings with the 4 participating healthcare centers, representing 24 sites.

## CDPH HAI ASP Honor Roll Gold Designations



In each newsletter, we highlight <u>CDPH ASP Honor Roll Members</u> (www.cdph.ca.gov/Pro grams/CHCQ/HAI/Pages/HonorRollMembers.aspx) that have achieved gold designation. The facilities listed below achieved, or renewed, gold status during the March 2024 deadline.

#### Supporting Less Resourced Facilities

- · Adventist Health Lodi Memorial
- California Pacific Medical Center Davies Campus, Van Ness Campus and Mission Bernal Campus and Orthopedic Institute
- French Hospital Medical Center
- LAC/Harbor UCLA Medical Center
- Sharp Coronado Hospital and Healthcare Center

## Direct Engagement with Outpatient Partners in the Community

- City of Hope Helford Clinical Research Hospital
- Kaiser Foundation Hospital Fremont
- Kaiser Foundation Hospital San Diego and Zion
- Mercy Medical Center Mt. Shasta
- Pomona Valley Hospital Medical Center
- Santa Barbara Cottage Hospital

#### **Collaborations to Improve AS**

- Kindred Hospital Brea
- Sutter Medical Center, Sacramento
- UCSF Medical Center Adult Campuses Mission Bay & Zion

#### **CDPH ASP Honor Roll Map**



(www.cdph.ca.gov/Programs/CHCQ/HAI/Page s/HonorRoll\_InteractiveMap.aspx)

#### **Reminders:**

- CDPH HAI ASP Honor Roll deadlines are March 1st and September 1st.
- All designations are valid for 3 years.



### **Upcoming**



#### **CDPH ASP Honor Roll**

- Deadlines: March 1st and September 1; as a reminder, designations are for 3 years.
- Visit the <u>ASP Honor Roll webpage</u> (www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/Honor\_Roll. aspx) for more information about application requirements.

#### **Project Firstline Training Toolkits and Implementation Guides**



The <u>Project Firstline training toolkits and implementation guides</u> (www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ProjectFirstlineToolkit.aspx) include recommendations and tools for SNFs and LHDs interested in implementing an infection prevention and control training program tailored to Certified Nursing Assistants or Environmental Services staff in their facilities.

- <u>Certified Nursing Assistant Toolkit</u> (www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/Project FirstlineCNAToolkit.aspx) and <u>orientation webinar</u> (reg.learningstream.com/reg/event\_page.aspx?ek=0076-0013-51f1d387461943d8bd967617eab04f0c).
- <u>Environmental Services Toolkit</u> (www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ProjectFi rstlineEVSToolkit.aspx) and <u>orientation webinar</u> (reg.learningstream.com/reg/event\_page. aspx?ek=0076-0013-9d4c3713af2648a391998b620b077c61).



## Stay Connected with CDPH

#### **CDPH HAI Websites**

Visit the CDPH webpages for more information and resources.

- CDPH HAI Program Page (www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/HAI/ProgramHome.aspx)
- CDPH <u>Antimicrobial Stewardship</u> Page (www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/AntimicrobialSt ewardshipLandingPage.aspx)
- CDPH <u>Antimicrobial Resistance</u> Page (www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/AntimicrobialResi stanceLandingPage.aspx)

#### CDPH HAI Newsletters

Subscribe to our <u>HAI Program quarterly newsletters</u> (cdph-marketing.powerappsportals.com/HAI/HAI-Registration/) to receive updates on our initiatives and education opportunities.

#### **CDPH Listserv**

To stay connected with all things AS at CDPH, join the <u>California Antimicrobial Stewardship</u> <u>Collaborative Network (ASCN)</u> (www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ASCN.aspx).



#### **HAI Program LinkedIn**

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