Emergency Department Antibiotic Stewardship Collaborative
October 9, 2019
## Agenda

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<td>Emergency Department and Antibiotic Stewardship Program Partnerships</td>
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<td>1:40-2:05PM</td>
<td>ED Quality Improvement Project Updates</td>
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<td>Antibiotic Stewardship Resources and Updates</td>
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WELCOME
EMERGENCY DEPARTMENT AND ANTIBIOTIC STEWARDSHIP PROGRAM PARTNERSHIPS
What do ED-ASP partnerships look like?
Discussion

• Speak to the ED/ASP partnership in your institution
• Does an ED representative attend ASP meetings? Did the ED invite themselves or did the ASP invite the ED?
• What role does the ED representative play in the ASP?
• What ED-specific ASP activities have you worked on together?
• How is antimicrobial stewardship implementation different in the ED versus the rest of the hospital?
• How are AS initiatives received in the ED versus the rest of the hospital?
ED QUALITY IMPROVEMENT PROJECT UPDATES
Quality Improvement Project Updates

• Where are you at in your quality improvement project?
  - Decided on a project focus.
  - Developed a plan for implementation.
  - Obtained stakeholder buy-in and approvals.
  - Obtained baseline data.
  - Implemented an intervention component.

• What barriers have you met during the planning and implementation phases of your project?

• What do you need to help facilitate your project?
ANTIBIOTIC STEWARDSHIP RESOURCES AND UPDATES
U.S. Antibiotics Awareness Week!

U.S. Antibiotic Awareness Week (USAAW) is an annual observance highlighting the importance of improving antibiotic prescribing and use, also known as antibiotic stewardship. Improving the way healthcare professionals prescribe antibiotics, and the way we take antibiotics, helps keep us healthy now, helps fight antibiotic resistance, and ensures that these life-saving drugs will be available for future generations. CDC encourages healthcare professionals, patients, and families to learn more about antibiotic prescribing and use.

When antibiotics aren’t needed, they won’t help you, and the side effects could still cause harm. Here are seven facts you should know to Be Antibiotics Aware:

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Infographic – What is Antibiotic-Resistant Bacteria?

Antibiotic resistance occurs when bacteria no longer respond to the drugs designed to kill them. Anytime antibiotics are used, they can cause antibiotic resistance.

To learn more about antibiotic prescribing, visit www.cdc.gov/antibiotic-use.
Infographic – Do Antibiotics Have Side Effects?

Do antibiotics have side effects?

Anytime antibiotics are used, they can cause side effects. 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
- Yeast Infections
- Diarrhea

More serious side effects include Clostridium difficile infection (also called C. difficile or C. dif), which causes diarrhea that can lead to severe colon damage and death. People can also have severe and life-threatening allergic reactions.

Antibiotics save lives. When a patient needs antibiotics, the benefits outweigh the risks of side effects.

To learn more about antibiotic prescribing and use, visit www.cdc.gov/antibiotic-use.
Video – Antibiotics Aren’t Always the Answer

English https://www.youtube.com/watch?v=oVjMMEBjfxU
Spanish https://www.youtube.com/watch?v=NVv1fsM9jPQ
YOUR HEALTH IS IMPORTANT TO ME.

I GUARANTEE I WILL DO MY BEST TO PRESCRIBE ANTIBIOTICS ONLY WHEN YOU NEED THEM.

Antibiotics can be life-saving, but certain germs are becoming more resistant. If we’re not careful about how we prescribe and use the antibiotics we’ve relied on for years, they might not work for us in the future.

Signed, __________________________

Insert Health Care Provider Name Here

insert health care provider photo here

SU SALUD ES IMPORTANTE PARA MI.

LE GARANTIZO QUE HARE LO MEJOR PARA PRESCRIBIRLE ANTIBIÓTICOS SOLO CUANDO USTED LO NECESITE.

Los antibióticos pueden salvar vidas, pero ciertos gérmenes se están haciendo resistentes. Si no tenemos cuidado como recetamos y usamos los en los antibióticos que confiamos durante años, es posible que no funcionen para nosotros en el futuro.

Firma, __________________________

Inserte logotipo de la instalacion aqui
YOUR HEALTH IS IMPORTANT TO US.

Antibiotics don’t work for certain infections like the common cold, most coughs, and most sore throats. Taking antibiotics when they don’t work can do more harm than good and lead to allergic reactions or serious diarrhea infections.

WE GUARANTEE WE WILL DO OUR BEST TO PRESCRIBE ANTIBIOTICS ONLY WHEN YOU NEED THEM.

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insert health care provider photo here
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Insert health care provider photo here

Insert facility logo here

CDPH California Department of Public Health
Prescription Pad – Symptom Relief for Viral Illness

**DIAGNOSIS**
- Cold or cough
- Flu
- Middle ear fluid
- Viral sore throat
- Bronchitis
- Other:

**GENERAL INSTRUCTIONS**
- Drink extra water and fluids.
- Use a cool mist vaporizer or saline nasal spray to relieve congestion.
- For sore throats in older children and adults, use ice chips, sore throat spray, or lozenges.
- Use honey to relieve cough. Do not give honey to an infant younger than 1.

**SPECIFIC MEDICINES**
- Fever or aches:
- Ear pain:
- Sore throat and congestion:

**FOLLOW UP**
- If not improved in ___ days/hours, if new symptoms occur, or if you have other concerns, please call or return to the office for a recheck.
- Phone:
- Other:

Signed: ____________________________

Notes:

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**DIAGNÓSTICO**
- Resfriado o tos
- Líquido en el oído medio
- Influenza (gripe)
- Dolor de garganta de origen viral
- Bronquitis
- Otro:

**INSTRUCCIONES GENERALES**
- Beba más agua y otros líquidos de lo habitual.
- Use un humidificador de vapor frío o una solución salina nasal en aerosol para aliviar la congestión.
- Para el dolor de garganta en los niños mayores y adultos, use trocitos de hielo, aerosol para garganta irritada o pastillas para la garganta.
- Use miel para aliviar la tos. No le dé miel a un bebé de menos de un año de edad.

**MEDICAMENTOS ESPECÍFICOS**
- Fiebre o dolores:
- Dolor de oído:
- Dolor de garganta y congestión:

**SEGUIMIENTO**
- Si no se ha mejorado en ___ días/horas, si tiene nuevos síntomas o si tiene otras inquietudes, llame o vuelva al consultorio para hacerse un nuevo chequeo.
- Teléfono:
- Otro:

Firmado: ____________________________

Notas:
Good News!

Your healthcare professional believes your illness will likely go away on its own.

You should watch and wait for ___ days/hours before deciding whether to take an antibiotic.

In the meantime, follow your healthcare professional’s recommendations to help you feel better and continue to monitor your own symptoms over the next few days.

- Rest.
- Drink extra water and fluids.
- Use a cool mist vaporizer or saline nasal spray to relieve congestion.
- For sore throats in adults and older children, try ice chips, sore throat spray, or lozenges.
- Use honey to relieve cough. Do not give honey to an infant younger than 1.

If you feel better, no further action is necessary.

If you do not feel better, experience new symptoms, or have other concerns, call your healthcare professional _______________. Discuss whether you need a recheck or antibiotics.

Signed: ________________________________

Notes: ________________________________

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Esperar atentamente

Buena noticia!

El profesional de atención médica cree que es probable que su enfermedad desaparezca sola.

Debe estar atento y esperar _____ días/horas antes de decidir si toma o no un antibiótico.

Mientras tanto, siga las recomendaciones del profesional de atención médica para ayudarlo a sentirse mejor y continúe monitoreando sus síntomas en los días siguientes.

- Descanse.
- Beba más agua y otros líquidos de lo habitual.
- Use un humidificador de vapor frío o una solución salina nasal en aerosol para aliviar la congestión.
- Para el dolor de garganta en los adultos y niños mayores, pruebe con trocitos de hielo, aerosol para garganta irritada o pastillas para la garganta.
- Use miel para aliviar la tos. No le dé miel a un bebe de menos de un año de edad.

Si usted se siente mejor, no tiene que tomar ninguna otra medida.

Si usted no se siente mejor, tiene nuevos síntomas, o tiene otras inquietudes, consulte al profesional de atención médica _______________.

Pregúntele si debe hacerse un nuevo chequeo o tomar antibióticos.

Firmado: ________________________________

Notas: ________________________________
Regional Collaborative Webpage

Regional Prevention Collaboratives

Antimicrobial resistance (AR), including *Clostridioides difficile* infection (CDI), is a growing threat to public health and can spread across the healthcare continuum when patients move between facilities. Healthcare facilities can address AR in their region by working in conjunction with local public health and other facilities in their local healthcare network. The CDPH Healthcare-Associated Infections (HAI) Program works with healthcare facilities and local health departments (LHD) to convene regionally-based projects to improve AR prevention measures across the continuum of care.

What is a regional prevention collaborative?

Regional AR prevention collaboratives are partnerships between LHD and networks of healthcare facilities (including hospitals, long-term acute care hospitals, skilled nursing facilities, and outpatient clinics) with a shared patient population. Collaborative participants work together to implement AR prevention best practices both within individual facilities and during transitions of care. Regional AR prevention collaboratives provide opportunities for healthcare facilities and LHD to build relationships, coordinate and share best practices in an in-person and interactive setting. When developing a regional collaborative, we consider the needs, interests, and resources of each region to align project goals and to ensure program sustainability.

Project List

The HAI Program has convened regional AR prevention collaboratives since 2015. Regions were selected based on high incidence of AR/CDI or risk for emergence of AR.

- Emergency Department Antibiotic Resistance Prevention Collaborative (Statewide)
- Imperial County Antibiotic Stewardship Collaborative*
- Long Beach CRE Prevention Collaborative*
- Orange County CDI Prevention Collaborative*
- Riverside County / Desert Health Care District CDI Prevention Collaborative*
- Sacramento Metropolitan Area CDI Prevention Collaborative*
- San Francisco Bay Area CRE Prevention Collaborative*

*Completed project.

https://www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/Regional_AR_Collaboratives.aspx
Questions for All

1. What materials/tools can you use in your ED to observe U.S. Antibiotics Awareness Week?
2. How might you partner with your institution’s ASP?
COLLABORATIVE NEXT STEPS
Next Steps

- Last meeting
- ID Week presentation recap
- Goals for moving forward
- Publication opportunities
ED Collaborative Participants

Kaiser Permanente
UC San Diego Health System
Sutter Delta Medical Center
Olive View-UCLA Medical Center
UC Davis Medical Center
Highland Hospital
LAC+USC Healthcare Network
Torrance Memorial Medical Center
UCSF Medical Center
Harbor-UCLA Medical Center
Riverside University Health System Medical Center
San Gorgonio Memorial Hospital
Barton Health
Hoag
Eisenhower Health

California Department of Public Health
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