

## Implementing Leading Practices in Antimicrobial Stewardship

Each year, **2 million** people become infected with bacteria that are resistant to antibiotics in the United States.

Approximately **23,000** people die annually as a direct result of infections that cannot be treated effectively with available antibiotics.



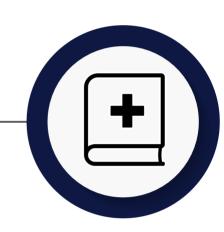
1977

Concept of antimicrobial stewardship (AS) begins. AS aims to improve antibiotic prescribing through structured, multidisciplinary programs.

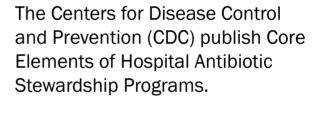


2007

Infectious Diseases Society of America (IDSA) and the Society of Healthcare Epidemiology of America (SHEA) publish first AS guidelines.



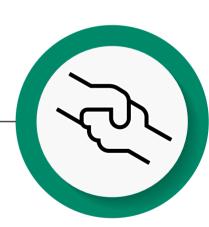
2014



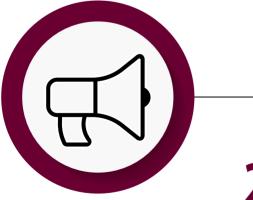


2016-2017

The Joint Commission publishes standards, effective January 2017, requiring hospitals and skilled nursing facilities to implement AS programs.



2018



2019

The Joint Commission places greater emphasis on efforts to improve AS and the CDC is updating the Core Elements of Hospital Antibiotic Stewardship Programs.

To learn more, read the full article
"Leading Practices in Antimicrobial
Stewardship: Conference Summary"
from the July 2019 issue of *The Joint*Commission Journal on Quality and
Patient Safety at https://bit.ly/2WM6yV9.

Pew Charitable Trusts and The Joint Commission convene "The Leading Practices in Antimicrobial Stewardship" meeting.

- Two interventions identified during meeting as leading practices that go beyond current guidelines and established practices:
  - **Diagnostic stewardship.**Addresses errors in diagnostic decision making that lead to inappropriate antibiotic prescribing.
  - Handshake stewardship.

    Method of engaging frontline providers on a regular basis for education and discussing AS barriers from clinician's perspective.
- Days of therapy (or defined daily dose when days of therapy is not possible), Clostridioides difficile rates and adherence to facilityspecific guidelines identified as preferred measures for assessing AS activities.