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ANTIMICROBIAL STEWARDSHIP POLICY

TABLE OF CONTENTS

1	Purpose	1
2	Scope and Applicability.....	1
3	Definitions.....	1
4	Policy.....	2
4.1	Objectives.....	2
4.2	Principles	2
4.3	Governance of Antimicrobial Stewardship.....	3
5	Consequences of Policy Breach.....	3
6	Roles and Responsibilities.....	3
7	Committees and Working Groups	5
8	Related Documents.....	5
9	Document Control.....	5

1 Purpose

The purpose of the Antimicrobial Stewardship Policy is to ensure that a customer with a microbial infection receives optimal treatment with antimicrobials. This means that customers are offered the right antimicrobial to treat their condition, the right dose, the right route, at the right time and for the right duration. This should be based on accurate assessment and timely review as to lessen the risk of adverse effects and reduce the emergence of antimicrobial resistance

2 Scope and Applicability

This policy applies to all Bethanie Residential Care services and to all Community Care services where medication services are in place.

3 Definitions

Term	Definition
Infection prevention and control program	The plan and processes an organisation uses to prevent and manage the spread of infection. For example, hand washing is the most effective means of preventing infection transmission. The scope and complexity of a program will depend on the nature of the care the organisation provides, the context and risk.



Antimicrobial	A medicine that kills microorganisms like bacteria or stops them growing. Antibiotics and antifungals are antimicrobials.
Antimicrobial resistance	Failure of an antimicrobial to work against microorganisms, such as bacteria, viruses, and some parasites. This can mean treatments no longer work and infections continue and can spread to other people.
Antimicrobial stewardship	Efforts by an organisation to reduce the risks related to increasing antimicrobial resistance and to extend the effectiveness of antimicrobial treatments. It can include a broad range of strategies, such as monitoring and reviewing how antimicrobials are used.

4 Policy

4.1 Objectives

This policy relates to the following:

- Aged Care Quality Standard 8.3 (e) (i) Antimicrobial Stewardship:
- In Australia, the increasing number of antibiotic-resistant infections appearing in the community represents a looming public health issue.
- This means aged care organisations need to do their part to change those practices that have contributed to the development of resistance and implement new initiatives to reduce inappropriate antibiotic usage and resistance.
- Effective organisation wide systems are required for preventing, managing and controlling infections and antimicrobial resistance.

This contributes to the broader national effort and improves outcomes for consumers.

- Consumer Outcomes:
 - o I am confident the organisation is well run. I can partner in improving the delivery of care and services.
- Organisational Statement:
 - o The organisation's governing body is accountable for the delivery of safe and quality care and services.

4.2 Principles

Bethanie is committed to their part to change those practices that have contributed to the development of resistance and implement new initiatives to reduce inappropriate antibiotic usage and resistance.

Bethanie will ensure effective organisation wide systems are in place for preventing, managing and controlling infections and antimicrobial resistance.

In this way, Bethanie contributes to the broader national effort and improves outcomes for consumers.

This policy has been developed in accordance with the following principles:

- Australian Commission on Safety and Quality in Health Care. Antimicrobial Stewardship Clinical Care Standard (2018)



4.3 Governance of Antimicrobial Stewardship

- As part of the Antimicrobial Stewardship Program, Bethanie has an Organisational Medication Advisory Committee (OMAC) to oversee antimicrobial stewardship functions.
- Each care facility will have an appointed Infection Control Lead (or Champion) who will incorporate antibiotic stewardship into their activities, and who will be allocated dedicated time for antimicrobial stewardship activities.
- The Facility Manager or Support Manager (as applicable) is responsible for ensuring that adequate staffing and resources are allocated to support the functions and efforts of the IPC Lead Nurse to include antimicrobial stewardship.

5 Consequences of Policy Breach

- This policy is binding on Bethanie staff, as per Section 2: Scope and Applicability.
- Roles and Responsibilities in relation to this policy are set out in Section 6 below.
- Failure to comply with the policy may constitute a breach of the Bethanie Code of Conduct and business practices.

6 Roles and Responsibilities

Our Commitment	How to achieve this
Facility and Support Managers	
<p>Will ensure an effective program to prevent and control infections is implemented, thereby minimising the need for antimicrobial use.</p>	<p>Delegate role of Infection Prevention Control Leads/Champions. Allocate appropriate resources to support the IPC Lead/Champions role. Support the Influenza vaccination program of both staff and customers. Support and maintain the site’s environmental cleaning program. Ensure that equipment and stock, such as PPE, hand hygiene, is readily available, accessible and in working order.</p>
<p>Will ensure that clinical staff are educated about the recognition of signs and symptoms of infection and can escalate concerns in a timely way.</p>	<p>Staff IPC and antimicrobial stewardship training is supported via toolboxes, Learning hub modules, post outbreak debriefs.</p>
<p>Management will ensure that mechanisms are in place to access antimicrobials in a timely way for customers with acute infections.</p>	<p>Maintain Imprest medication stock as approved by OMAC and within the requirements of the Poison’s permit. NP/GP and Pharmacy arrangements for after-hours service.</p>



Will ensure a system is in place that enables diagnostic test results to be reviewed in a timely way.	Ensure that pathology reports are made available to the NP/GP and are filed systematically in the customers health record.
Participate yearly in the Antibiotic Awareness week each November.	Participate in the Antibiotic Awareness Week to support opportunities for improvement relevant to antibiotic stewardship.
Infection Prevention and Control Lead/Champions	
Develop and maintain a system to monitor antibiotic use.	Monthly Pharmacy reports- analyse and action antimicrobial history report a monthly basis.
Will ensure that all clinical staff are informed about the importance of safe antimicrobial use.	Ensure that resources to raise awareness are available (e.g., posters, pamphlets) for staff, residents and families.
Participate and conduct audits.	Hand hygiene - access to hand hygiene facilities and products. Hand hygiene audit on an ad hoc basis.
Participate in the Aged Care National Antimicrobial Prescribing Survey (ACNAPS) annually.	Contribute to the data collection for the survey and present the results and experience of the ACNAPS survey to staff and prescribers.
All clinical staff	
Nursing staff know how to access individuals and resources for antimicrobial prescribing expertise.	Refer to Pharmacist and/or NP/GP to discuss concerns about medication. Refer to external pharmacists, public health authorities as indicated, access to eTG.
Nursing staff will ensure a customer with a suspected infection, and/or their representative, receives information on their health condition and treatment options in a format and language that they can understand.	The customer/representative is notified of the need for antimicrobial treatment, and clinical staff provide clear information on the plan and anticipated outcome in a way that the customer/representative can understand.
Support and promote best practice antibiotic use protocols for appropriate antibiotic use.	Ensure that clinical care pathways for UTI and IAD are readily available Bethanie Health Practice subscription to eTG.
Will require all prolonged (long-term) antimicrobial prescriptions to be reviewed at least half yearly to determine if ongoing use is still appropriate.	As part of the six monthly care plan evaluation process, the need for the long term antimicrobial will be reviewed. The prescriber will document details for the ongoing requirement for prophylactic antimicrobials in the progress notes.
The Prescribers	
Recommended best practice is that where an antimicrobial is prescribed, all key prescribing elements are clearly documented to facilitate good communication.	Medication profiles are a complete and accurate record of the antimicrobial prescribed, including where topical antimicrobials are prescribed, the exact body location and application instructions are recorded on the medication profile.
Recommended best practice is that if an antimicrobial is prescribed, the resident should be clinically assessed by the prescriber within 48 -72 hours.	Clinical staff use internal systems- e.g. <i>Clinical Manager</i> task function to alert the need for prescriber review 48-72 hours post commencement of an antimicrobial.
Recommended best practice is that all new antimicrobial prescriptions should have a clear treatment plan documented within seven days.	The prescriber will document the details for the requirement for antimicrobials in the progress notes within seven days of the initial prescription.



7 Committees and Working Groups

Committee / Working Group	Contribution
n/a	•

8 Related Documents

Legislation
<i>Australian Commission on Safety and Quality in Health Care. understood to implement the policy></i>
<i>Antimicrobial Stewardship Clinical Care Standard (2018)</i>
Governance frameworks & policies
<i>Clinical Governance Framework</i>
<i>Standard and Transmission Based Precautions Procedure</i>
<i>Role of IPC Lead</i>
<i>Hand Hygiene Procedure</i>
Standards
n/a
References
<i>Australian Commission on Safety and Quality in Health Care. Antimicrobial Stewardship in Australian Health Care (2018). Sydney: ACSQHC; 2018</i>
<i>Adapted from the National Centre for Antimicrobial Stewardship - Aged Care AMS Policy v1.0 (2018). Retrieved from: www.ncas-australia.org/aged-care-resources</i>
<i>Adapted from Antimicrobial Policy and Procedure (May 2019). Retrieved from: https://pmconsulting.com.au/medication-management/policy-and-procedures</i>

9 Document Control

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