New and Revised Antibiotic Stewardship Requirements
Critical Access Hospital (CAH) Accreditation Program

Medication Management (MM) Chapter

MM.09.01.01

Current Requirement Text: **Revision Type:** Revised

The critical access hospital has an antimicrobial stewardship program based on current scientific literature.

MM.09.01.01

New Requirement Text:

The critical access hospital establishes antibiotic stewardship as an organizational priority through support of its antibiotic stewardship program.

MM.09.01.01   **EP:** 1

Current EP Text: **Revision Type:** Moved and Revised

Leaders establish antimicrobial stewardship as an organizational priority.
Note: Examples of leadership commitment to an antimicrobial stewardship program are as follows:
- Accountability documents
- Budget plans
- Infection prevention plans
- Performance improvement plans
- Strategic plans
- Using the electronic health record to collect antimicrobial stewardship data
(See also LD.01.03.01, EP 5)

MM.09.01.01   **EP:** 10

New EP Text:

The critical access hospital allocates financial resources for staffing and information technology to support the antibiotic stewardship program.
(See also LD.01.03.01, EP 5)

MM.09.01.01   **EP:** 2

Current EP Text: **Revision Type:** Deleted

The critical access hospital educates staff and licensed independent practitioners involved in antimicrobial ordering, dispensing, administration, and monitoring about antimicrobial resistance and antimicrobial stewardship practices. Education occurs upon hire or granting of initial privileges and periodically thereafter, based on organizational need.

MM.09.01.01   **EP:** 4

Current EP Text: **Revision Type:** Moved and Revised

The critical access hospital has an antimicrobial stewardship multidisciplinary team that includes the following members, when available in the setting:
- Infectious disease physician
- Infection preventionist(s)
- Pharmacist(s)
- Practitioner
Note 1: Part-time or consultant staff are acceptable as members of the antimicrobial stewardship multidisciplinary team.
Note 2: Telehealth staff are acceptable as members of the antimicrobial stewardship multidisciplinary team.

MM.09.01.01   **EP:** 13

New EP Text:

The critical access hospital has a multidisciplinary committee that oversees the antibiotic stewardship program.
Note 1: The committee may be composed of representation from the medical staff, pharmacy services, the infection prevention and control program, nursing services, microbiology, information technology, and the quality assessment and performance improvement program.
Note 2: The committee may include part-time or consultant staff. Participation may occur on site or remotely.

MM.09.01.01   **EP:** 5

Current EP Text: **Revision Type:** Deleted

The critical access hospital's antimicrobial stewardship program includes the following core elements:
- Leadership commitment: Dedicating necessary human, financial, and information technology resources.
- Accountability: Appointing a single leader responsible for program outcomes. Experience with successful programs show that a physician leader is effective.
- Drug expertise: Appointing a single pharmacist leader responsible for working to improve antibiotic use.
- Action: Implementing recommended actions, such as systemic evaluation of ongoing treatment need, after a set period of initial treatment (for example, "antibiotic time out" after 48 hours).
- Tracking: Monitoring the antimicrobial stewardship program, which may include information on antibiotic prescribing and resistance patterns.
- Reporting: Regularly reporting information on the antimicrobial stewardship program, which may include information on antibiotic use and resistance, to doctors, nurses, and relevant staff.
- Education: Educating practitioners, staff, and patients on the antimicrobial program, which may include information about resistance and optimal prescribing.
Note: These core elements were cited from the Centers for Disease Control and Prevention's Core Elements of Hospital Antibiotic Stewardship Programs (https://www.cdc.gov/antibiotic-use/healthcare/pdfs/core-elements.pdf). The Joint Commission recommends that organizations use this document when designing their antimicrobial stewardship program.
(See also IC.02.01.01, EP 1; IC.02.05.01, EP 3)

MM.09.01.01	**EP:** 6	MM.09.01.01	**EP:** 18

MM.09.01.01 **EP:** 6

Current EP Text: **Revision Type:** Moved and Revised

The critical access hospital's antimicrobial stewardship program uses organization-approved multidisciplinary protocols (for example, policies and procedures).
Note: Examples of protocols are as follows:
- Antibiotic Formulary Restrictions
- Assessment of Appropriateness of Antibiotics for Community-Acquired Pneumonia
- Assessment of Appropriateness of Antibiotics for Skin and Soft Tissue Infections
- Assessment of Appropriateness of Antibiotics for Urinary Tract Infections
- Care of the Patient with Clostridium difficile (C. diff)
- Guidelines for Antimicrobial Use in Adults
- Guidelines for Antimicrobial Use in Pediatrics
- Plan for Parenteral to Oral Antibiotic Conversion
- Preauthorization Requirements for Specific Antimicrobials
- Use of Prophylactic Antibiotics

MM.09.01.01 **EP:** 18

New EP Text:

The antibiotic stewardship program implements at least two evidence-based guidelines to improve antibiotic use for the most common indications.
Note 1: Examples include, but are not limited to, the following:
- Community-acquired pneumonia
- Urinary tract infections
- Skin and soft tissue infections
- Clostridioides difficile colitis
- Asymptomatic bacteriuria
- Plan for parenteral to oral antibiotic conversion
- Use of surgical prophylactic antibiotics
Note 2: Evidence-based guidelines must be based on national guidelines and also reflect local susceptibilities, formulary options, and the patients served, as needed.

MM.09.01.01 **EP:** 7

Current EP Text: **Revision Type:** Split

The critical access hospital collects, analyzes, and reports data on its antimicrobial stewardship program.
Note 1: Examples of topics on which to collect and analyze data may include evaluation of the antimicrobial stewardship program, antimicrobial prescribing patterns, and antimicrobial resistance patterns.
Note 2: The antibiotic stewardship program documents the evidence-based use of antibiotics in all departments and services of the critical access hospital.

MM.09.01.01 **EP:** 15

New EP Text:

The antibiotic stewardship program documents the evidence-based use of antibiotics in all departments and services of the critical access hospital.

MM.09.01.01 **EP:** 7

Current EP Text: **Revision Type:** Split

The critical access hospital collects, analyzes, and reports data on its antimicrobial stewardship program.
Note 1: Examples of topics on which to collect and analyze data may include evaluation of the antimicrobial stewardship program, antimicrobial prescribing patterns, and antimicrobial resistance patterns.
Note 2: The antibiotic stewardship program documents the evidence-based use of antibiotics in all departments and services of the critical access hospital.

MM.09.01.01 **EP:** 20

New EP Text:

The antibiotic stewardship program collects, analyzes, and reports data to critical access hospital leadership and prescribers.
Note: Examples of antibiotic stewardship program data include antibiotic resistance patterns, antibiotic prescribing practices, or an evaluation of antibiotic stewardship activities.

MM.09.01.01   **EP:** 8

Current EP Text: **Revision Type:** Moved and Revised

The critical access hospital takes action on improvement opportunities identified in its antimicrobial stewardship program. (See also MM.08.01.01, EP 6)

MM.09.01.01   **EP:** 21

New EP Text:

The critical access hospital takes action on improvement opportunities identified by the antibiotic stewardship program.

MM.09.01.01   **EP:** 9

Current EP Text: **Revision Type:** Moved and Revised

An individual(s) who is qualified through education, training, or experience in infectious diseases and/or antibiotic stewardship, is appointed by the governing body as the leader(s) of the antibiotic stewardship program. The appointment is based on recommendations of medical staff leadership and pharmacy leadership.

MM.09.01.01   **EP:** 11

New EP Text:

The governing body appoints a physician and/or pharmacist who is qualified through education, training, or experience in infectious diseases and/or antibiotic stewardship as the leader(s) of the antibiotic stewardship program.
Note: The appointment(s) is based on recommendations of medical staff leadership and pharmacy leadership.

MM.09.01.01   **EP:** 10

Current EP Text: **Revision Type:** Moved and Revised

The antibiotic stewardship program demonstrates coordination among all components of the critical access hospital responsible for antibiotic use and resistance, including, but not limited to, the infection prevention and control program, the quality assessment and performance improvement program, the medical staff, nursing services, and pharmacy services.

MM.09.01.01   **EP:** 14

New EP Text:

The antibiotic stewardship program demonstrates coordination among all components of the critical access hospital responsible for antibiotic use and resistance, including, but not limited to, the infection prevention and control program, the quality assessment and performance improvement program, the medical staff, nursing services, and pharmacy services.

MM.09.01.01   **EP:** 11

Current EP Text: **Revision Type:** Moved and Revised

The leader of the antibiotic stewardship program is responsible for the following:

- Developing and implementing a hospitalwide antibiotic stewardship program, based on nationally recognized guidelines, to monitor and improve the use of antibiotics
- Documenting antibiotic stewardship activities
- Communicating and collaborating with the medical staff, nursing, and pharmacy leadership, as well as with the critical access hospital's infection prevention and control and quality assessment and performance improvement programs on antibiotic use issues
- Training and educating staff, including medical staff, on the practical applications of antibiotic stewardship guidelines, policies, and procedures

MM.09.01.01   **EP:** 12

New EP Text:

The leader(s) of the antibiotic stewardship program is responsible for the following:

Developing and implementing a hospitalwide antibiotic stewardship program that is based on nationally recognized guidelines to monitor and improve the use of antibiotics
- Documenting antibiotic stewardship activities, including any new or sustained improvements
- Communicating and collaborating with the medical staff, nursing leadership, and pharmacy leadership, as well as with the critical access hospital's infection prevention and control and quality assessment and performance improvement programs on antibiotic use issues
- Providing competency-based training and education for staff, including medical staff, on the practical applications of antibiotic stewardship guidelines, policies, and procedures

MM.09.01.01	EP:	MM.09.01.01	EP: 16
Current EP Text:	**Revision Type:** New	**New EP Text:**	
N/A		The antibiotic stewardship program monitors the critical access hospital's antibiotic use by analyzing data on days of therapy per 1000 days present or 1000 patient days, or by reporting antibiotic use data to the National Healthcare Safety Network's Antimicrobial Use Option of the Antimicrobial Use and Resistance Module.	

MM.09.01.01	EP:	MM.09.01.01	EP: 17
Current EP Text:	**Revision Type:** New	**New EP Text:**	
N/A		The antibiotic stewardship program implements one or both of the following strategies to optimize antibiotic prescribing: - Preauthorization for specific antibiotics that includes an internal review and approval process prior to use - Prospective review and feedback regarding antibiotic prescribing practices, including the treatment of positive blood cultures, by a member of the antibiotic stewardship program	

MM.09.01.01	EP:	MM.09.01.01	EP: 19
Current EP Text:	**Revision Type:** New	**New EP Text:**	
N/A		The antibiotic stewardship program evaluates adherence (including antibiotic selection and duration of therapy, where applicable) to at least one of the evidence-based guidelines the critical access hospital implements. Note 1: The critical access hospital may measure adherence at the group level (that is, departmental, unit, clinician subgroup) or at the individual prescriber level. Note 2: The critical access hospital may obtain adherence data for a sample of patients from relevant clinical areas by analyzing electronic health records or by conducting chart reviews.	