Antimicrobial Stewardship Requirements for Hospitals

Standard MM.09.01.01
The hospital has an antimicrobial stewardship program based on current scientific literature.

Element(s) of Performance for MM.09.01.01

1. Leaders establish antimicrobial stewardship as an organizational priority. (See also LD.01.03.01, EP 5)
   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

2. The 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.

3. The hospital educates patients, and their families as needed, regarding the appropriate use of antimicrobial medications, including antibiotics. (For more information on patient education, refer to Standard PC.02.03.01)

4. The 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.
5. The 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.

   (See also IC.02.01.01, EP 1 and NPSG.07.03.01, EP 5)

   Note: These core elements were cited from the Centers for Disease Control and Prevention’s Core Elements of Hospital Antibiotic Stewardship Programs (http://www.cdc.gov/getsmart/healthcare/pdfs/core-elements.pdf). The Joint Commission recommends that organizations use this document when designing their antimicrobial stewardship program.

6. The 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

7. The hospital collects, analyzes, and reports data on its antimicrobial stewardship program.

   Note: Examples of topics to collect and analyze data on may include evaluation of the antimicrobial stewardship program, antimicrobial prescribing patterns, and antimicrobial resistance patterns.

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