Engaging IPC Nurses in antimicrobial stewardship and antimicrobial resistance work

# **AMR Action Plan**



### **Members Agencies/Organisations**

Royal New Zealand College of GPs	Annie Judkins
New Zealand Hospital Pharmacists Association	Chris Little
New Zealand Microbiology Network	Joshua Freeman
Infection Prevention and Control Nurses College	Carolyn Clissold, Jo Stodart
Australasian Society Infectious Diseases	David Holland
Te Ora (Māori Medical Practitioners Association)	Te Oriaiti Reedy
Best Practice Advisory Council	Murray Tilyard
Independent	Siouxsie Wiles
Independent	Mark Thomas
Pharmacist Society New Zealand	Chloe Campbell
Consumer Advisor	Sheldon Ngatai
Society of Medical Officers of Health	Marion Poore
Paediatric Infectious Diseases	Lesley Voss
ESR	Virginia Hope
PHARMAC	John Wyeth
Health Quality & Safety Commission	Sally Roberts

Wider group of stakeholder (examples): NZ Nurses Organisation, NZ College of Midwives, Academics, Chief Medical Officers, Chief Nursing Officers, Aged Residential Care, Dentists.

## **AMR Objectives**

- 1. Awareness and understanding: Improve awareness and understanding of antimicrobial resistance through effective communication, education and training.
- 2. Surveillance and research: Strengthen the knowledge and evidence base about antimicrobial resistance through surveillance and research.
- **3.** Infection prevention and control: Improve infection prevention and control measures across human health and animal care settings to prevent infection and the transmission of micro-organisms.
- 4. Antimicrobial stewardship: Optimise the use of antimicrobial medicines in human health, animal health and agriculture, including by maintaining and enhancing the regulation of animal and agriculture antimicrobials.
- **5. Governance, collaboration and investment:** Establish and support clear governance, collaboration and investment arrangements for a sustainable approach to countering antimicrobial resistance.

#### Engagement

#### Objective 1 Education

- Objective 2Surveillance
- Objective 3 IPC
- Objective 4Stewardship

- Education (Health and consumers)
- Appropriate sampling
- Review microbiology results
- Alert/communicating results
- Active participation in national HQSC IPC improvement programmes
- Engagement in review of national response plan for management of CPE
- Engagement in consultation on H&D standards (part 3 IPC)
- Management of Medicines
- Prescribing in line with hospital based guidelines (non –prescribers)
- Appropriate route of administration (IV to PO)
- Timing of and duration of antimicrobials
- Monitor effectiveness of prescribed antimicrobials
- Allergies and side effects

#### Table 1. Overlap of nursing activities with function attribution in current antimicrobial stewardship models

antimicrobial stewardship models										
	Nursing	Microbiology	Case management	Pharmacy	Infectious Diseases	Infection Control	Inpatient Physician	Administration		
Patient admission										
Triage and appropriate isolation	•					•				
Accurate allergy history	•			•	•		•			
Early and appropriate cultures	•				•		•			
Timely antibiotic initiation	•				•		•	•		
Medication reconciliation	•			•			•			
Daily(24h) clinical progress monitoring										
Progress monitor and report	•		•		•		•			
Preliminary micro results and antibiotic adjustment	•	•		•	•		•			
Antibiotic dosing and de-escalation	•			•	•		•			
Patient safety and quality monitoring										
Adverse events	•			•	•		•			
Change in patient condition	•				•		•			
Final culture report and antibiotic adjustment	•	•		•	•	•	•			
Antibiotic resistance identification	•	•			•	•	•			
Clinical progress/patient education/discharge										
IV to PO antibiotic, outpatient antibiotic therapy	•		•	•	•		•			
Patient education	•				•	•	•			
Length of stay	•		•		•		•	•		
Outpatient management, long term care, readmission	•		•		•	•		•		

#### Importance of Nursing/Midwifery role

- Largest professional workforce within Healthcare
- Regular clinical review and engagement with patients
- Consistent role at point of care for patients and families
- Primary role to administer medications safely and effectively
  - Code of Conduct NZ "Administer medicines and health care interventions in accordance with legislation, your scope of practice and established standards or guidelines"
- Supporting pharmacists in regular review of medication charts



- Nurses can play multiple roles in halting the impending antimicrobial resistance problem as practitioners of best practices, system surveyors and detectors of early warning signs, public educators and policy partners.
- The central role of nurses in patient care across the continuum, research, education and policy makes it clear that they perform numerous functions critical to the successful operation of antimicrobial stewardship programmes.
- Nurse leaders and relevant organized groups such as associations, unions, and nurse executive groups need to be a voice guaranteeing that pertinent knowledge, experience and practice is incorporated in funding, policy decisions and implementation.
- Nurses are vital players in the battle against antimicrobial resistance and as such recognition within their own ranks and by traditional stakeholders and the public is key in reducing antimicrobial resistance.







Antimicrobial Resistance Team/MOH@MOH

https://www.health.govt.nz/search/results/antimicrobial%20resistance