

JANUARY 2018

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## PADONA ENews

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Dear PADONA Members:

I hope each of you had a wonderful holiday filled with great memories of family and friends and 2018 is a healthy and prosperous year for each of you. It is amazing that our 30<sup>th</sup> annual convention is only a few months away. The registration fee increases the 15<sup>th</sup> of January so if you have not already done so, you may want to register before that date to take advantage of the reduced rate. Don't forget to make your hotel reservations by calling the Hotel Hershey directly at 717-533-2171 and identify yourself as part of the PADONA group to receive the discounted rate. If you are staying at the Hershey Lodge, we will again be providing shuttle service.

On our website the forum is where members can post questions and fellow members can respond. It is a little disappointing that this requested venue is not being fully utilized. I would encourage all of you to check out the questions your fellow members are posting and share your thoughts.

Additionally, until January 30<sup>th</sup> PADONA is accepting applications for the Professional Development Specialist. If you or someone you know would like more information regarding the position, please feel free to contact me directly. There are also more details regarding the occupational requirements in this issue of the eNews.

In the next few weeks, all primary members will receive a link to vote on the nominees for the board and selected bylaw changes. I sincerely appreciate your response on these items.

I am looking forward to seeing all of you in Hershey, April 4-6, 2018 as we celebrate our 30<sup>th</sup> Annual Convention.

Chair, Board of Directors / Executive Director PADONA

**PADONA seeks a part-time Nursing Professional Development Specialist.** The primary functions of this position include serving as an educator both internally and externally to the association; being a servant leader and mentor for the PADONA membership; working with and serving on the PADONA Board of Directors; and advancing the organization through educational programming that supports the nursing management and leadership positions in long term care, resource development and networking to meet the needs of members. Candidate must have knowledge and experience in adult learning and be able and willing to travel within the state.

Candidates applying for the position must have a minimum of five years' experience in a nursing management position in long term care, (Director of Nursing and/or NHA position) and possess a minimum of a bachelor's degree in nursing. A master's in nursing or education is preferred. This position is an independent contractor of the organization. Application deadline is January 30, 2018. Interested candidates should submit resume to:



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## Optimal Use of Antibiotics for Urinary Tract Infections in Long-Term Care Facilities: Successful Strategies Prevent Resident Harm

Article Provided by Patient Safety Authority

#### **Abstract**

Antibiotics are one of the most commonly prescribed medications in long-term care facilities (LTCFs), but up to 75% are incorrectly prescribed. The intensity of antibiotic use to treat urinary tract infections (UTIs) in LTCFs increases the risk for life-threatening adverse effects. Overuse and misuse of these lifesaving medications has contributed to the rapid emergence of antibiotic-resistant bacteria and *Clostridium difficile* infection. The Pennsylvania Patient Safety Authority analyzed UTI events reported from Pennsylvania LTCFs during the 30-month period from April 1, 2014, through September 30, 2016, to study (1) triggers for prescribing antibiotics for UTIs, and (2) the frequency of prescriptions for broad-spectrum antibiotics specifically associated with antibiotic-resistant bacteria and *C. difficile*. The analysis reveals deviance from national practice guidelines for treating UTIs and the suboptimal use of antibiotics for mixed growth and contaminated specimens. This crisis of incorrect antibiotic use and the downstream effects of antibiotic-resistant bacteria and *C. difficile* demonstrate an urgent need for immediate adoption of best practices for accurate identification and optimal treatment of UTIs in the elderly including: (1) integrating strategies to overcome barriers to antibiotic stewardship, and (2) improving communication between nursing, prescribing staff, and healthcare facilities in the continuum of care. A Pennsylvania LTCF shares its success story demonstrating the effectiveness of these strategies in reducing suboptimal antibiotic use.

#### Introduction

Since the discovery of penicillin in 1928 to treat serious infections, antibiotics have saved millions of lives. <sup>1,2</sup> However, like all medications, antibiotic use includes the risk for mild to life-threatening adverse reactions. Antibiotic use is generally considered as a possible source when a patient develops a rash, but may not be recognized as the culprit in other adverse effects such as nausea, vomiting, diarrhea, stomach pain, fungal infections, or drug fever. People older than 65 years, who are the most common residents of long-term care facilities (LTCFs), are more susceptible to severe adverse effects of antibiotics, including anaphylaxis, central nervous system and kidney toxicity, abnormal liver function, diarrhea from *Clostridium difficile*, and consequences of antibiotic-resistant bacteria. Adverse effects are often difficult to treat and can lead to hospitalization and death. <sup>3</sup> A recent study by the Centers for Disease Control and Prevention (CDC) demonstrates that antibiotic overuse may predispose individuals to sepsis due to disturbance of the normal gastrointestinal (GI) bacteria microbiome. <sup>4</sup>

Because of escalating bacterial resistance to antibiotics, bacterial infections impact the community at large and are once again a worldwide threat. Overuse and misuse of lifesaving antibiotics has resulted in dwindling or unavailable treatment options and contributed to the rapid emergence of antibiotic-resistant bacteria. In LTCF, up to 75% of antibiotics are misused and incorrectly prescribed. The largest percentage of misused or incorrectly prescribed antibiotics in LTCFs are used to treat misdiagnosed urinary tract infections (UTIs), the most common bacterial infection in LTCFs. 5,6

Common misperceptions about UTI diagnosis, testing, and interpretation of laboratory tests may result in inappropriate treatment of asymptomatic bacteriuria, overuse of broad-spectrum antibiotics, and failure to review or change empiric antibiotics based on culture results. Authority analysts queried the Pennsylvania Patient Safety Reporting System (PA-PSRS) database to obtain a snapshot of antibiotic prescribing practices in Pennsylvania LTCFs.

For a UTI to be reportable through PA-PSRS, the event must meet nationally accepted criteria for clinical symptoms and diagnostic tests. The diagnostic gold standard for UTI is qualitative urine culture in the presence of evidence-based symptoms. The frequent use of antibiotics for UTIs in LTCFs merits adoption of best practices for (1) identifying and treating urinary tract infections in the elderly, and (2) improving communication between nursing, prescribing staff, and facilities in the continuum of care. Transfer of residents between the hospital and LTCF as their level of care changes increases the opportunity for transmission of antibiotic-resistant bacteria and continuation of inappropriate antibiotic prescriptions.



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#### Methods

The Pennsylvania Patient Safety Authority examined all UTIs reported by LTCFs through PA-PSRS during the 30-month period reported from April 1, 2014 (when the revised McGeer reporting criteria were implemented), through September 30, 2016. The 2014 revision of PA-PSRS criteria for LTCFs reporting infections includes new data fields to list organisms identified by laboratory tests and antibiotics prescribed. This new information provides valuable information on Pennsylvania LTCFs application of UTI criteria and antibiotic treatment decisions. <sup>10</sup>

Key search terms included the following: symptomatic urinary tract infections (SUTI), catheter-associated urinary tract infection (CAUTI), urine cultures, treatment, antibiotics, organisms, voided urine, and positive culture. UTI events were analyzed by subcategory (e.g., SUTI or CAUTI), information about organisms and antibiotics (e.g., events listing organism and antibiotic ordered, events missing either a qualified organism or antibiotic ordered, events with antibiotics prescribed without culture results, and events with antibiotics ordered for contaminated specimens), and voluntary free-text comments regarding diagnostic and treatment decisions. A drug class was assigned to each antibiotic.

Click here to read more

### Regulatory Spotlight: "Q and A"

#### **Question #1 submitted to PADONA:**

Could you please forward me information or a contact where I can find the information related to the Infection Control Stewardship and/or training/certification for the infection control person in my facility?

#### Answer #1

Listed below are toolkits and the links to assist in developing an antibiotic stewardship program.

- Agency for Healthcare Research and Quality (AHRQ). AHRQ Nursing Home Antimicrobial Stewardship Guide <a href="https://www.ahrq.gov/nhguide/index.html">https://www.ahrq.gov/nhguide/index.html</a>
- Centers for Disease Control and Prevention. The core elements of antibiotic stewardship for nursing homes. http://www.cdc.gov/longtermcare/prevention/antibiotic-stewardship.html
- Institute for Healthcare Improvement. Antibiotic stewardship driver diagram and change package. <a href="http://www.cdc.gov/getsmart/healthcare/pdfs/Antibiotic Stewardship Change Package 10 30 12.pdf">http://www.cdc.gov/getsmart/healthcare/pdfs/Antibiotic Stewardship Change Package 10 30 12.pdf</a>
- Infection Prevention education and information on certification is available on the APIC website, <a href="https://apic.org/Education-and-Events/Overview">https://apic.org/Education-and-Events/Overview</a>. They offer a comprehensive online educational program for all levels of infection prevention.

Phone: 1-717-756-0696

E-mail: joaadkins@pa.gov

Fax: 717-365-1090

#### Contact information:

JoAnn Adkins, RN, BSN, CIC, FAPIC Senior Infection Prevention Analyst Pennsylvania Patient Safety Authority 333 Market Street, Lobby Level Harrisburg, PA 17101

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### Regulatory Spotlight: "Q and A"

#### **Question #2 submitted to PADONA:**

A facility signed an agreement to allow PN students in for clinical rotations, starting 11 Jan. They have looked without success for regulations to address this. They know they need the criminal checks, TB screens and flu verifications, along with facility education to abuse policy, etc.

Is there any other regs/requirements for student nurses?

#### Answer #2

There are none that we are aware of. Check your policy addressing address supervision of the PN students.

#### **Ouestion #3 submitted to PADONA:**

A medical records employee is starting and she has had 1 PPD. Can she start working before she has the second test done since she will not be in a patient care area? She will get the second one at that required interval.

#### Answer #3:

Attached is the CDC guidance that NCF uses incase the facility asks for an exception to the State reg that says a 2 step. If there is an exception, the survey team will review the facility policy on full health to assure they are following it. It all depends on the facility policy.

## **Safety Reminder**

To ensure the safety of your residents and/or patients - we are reminding you that when using a staffing agency, you must check a valid picture ID of the staff assigned and they meet the requirements of your regulations.

It has been brought to our attention that some staff going into the facilities/ agencies in certain parts of the State are not the actual staff assigned by the staffing agencies.





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## Sign Up Today for the PADONA 30th Annual Convention in Hershey April 4 - 6, 2018

Register early to receive our early bird discount. Please be sure to <u>PAY by January 15, 2018</u> (not just register by that date) to receive the discounted rate and check the appropriate amount based on your membership status.

<u>Convention Schedule</u> <u>Convention Brochure</u>

PMDA Associate Membership Invitation

PMDA Pre-Convention Lecture Invitation

Only A Few Break Exhibitor Spaces Left at the April 4 to 6, 2018 PADONA 30th Annual Convention - Today's Decision/Tomorrow's Vision Convention held at Hotel Hershey from April 4 through 6, 2018

**2018 Break Exhibitor Space Contract 2018 Exhibitor Space Contract** (ask to be on waiting list)

