



**Northeast Branch of the
American Society for Microbiology**

The Role of the
Nurse:
Effective
Communication

Being Good Stewards: Preserving Antibiotics into the Next Decade

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I have nothing to disclose



Objectives for this Presentation

- * Address disparities in stewardship education in nursing as compared to other healthcare professionals
- * Discuss common barriers to nurse involvement in stewardship programs and propose one or more solutions
- * Define collaborative approaches to improve the quality of patient care by promoting judicious antimicrobial use



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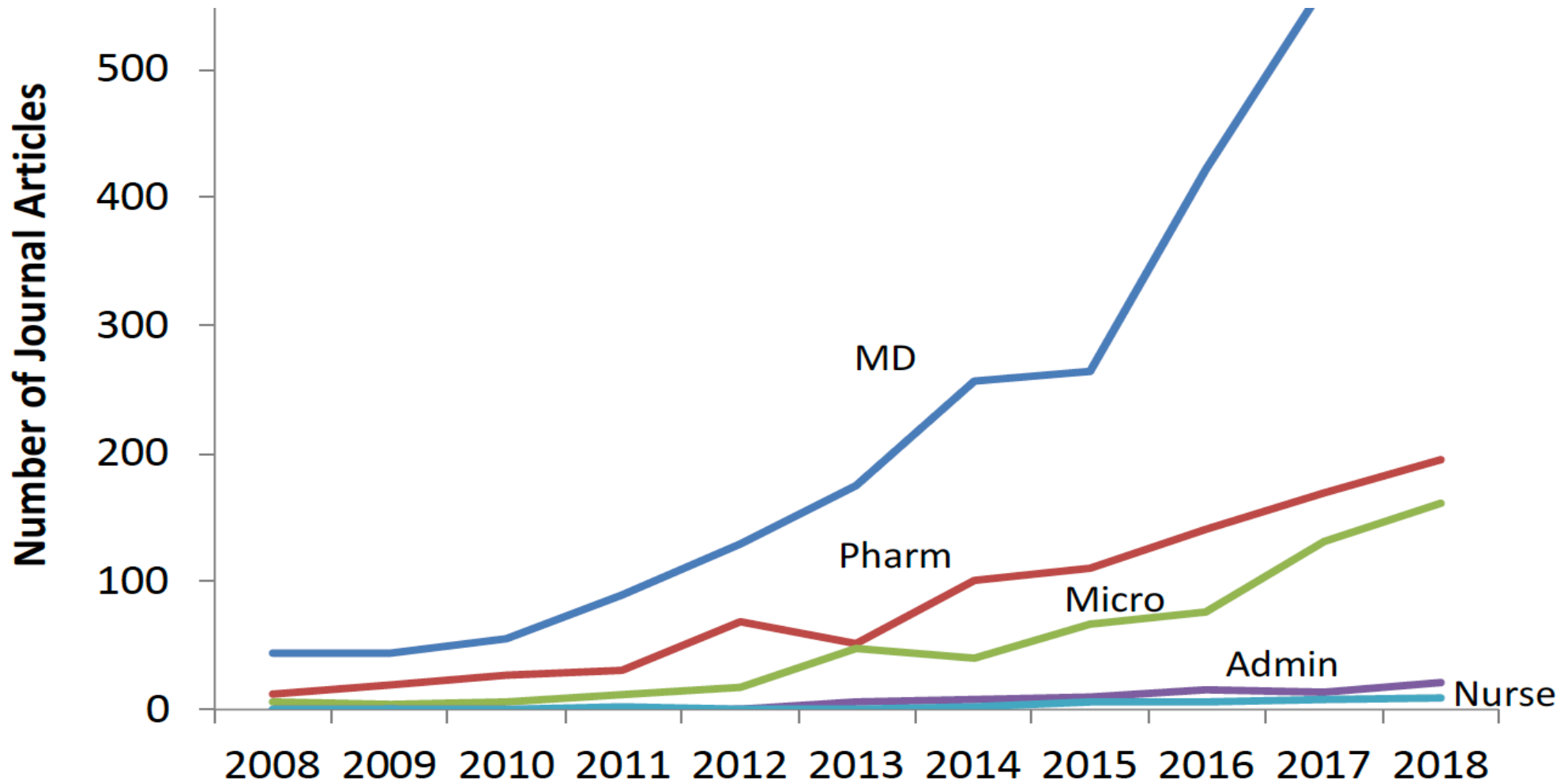
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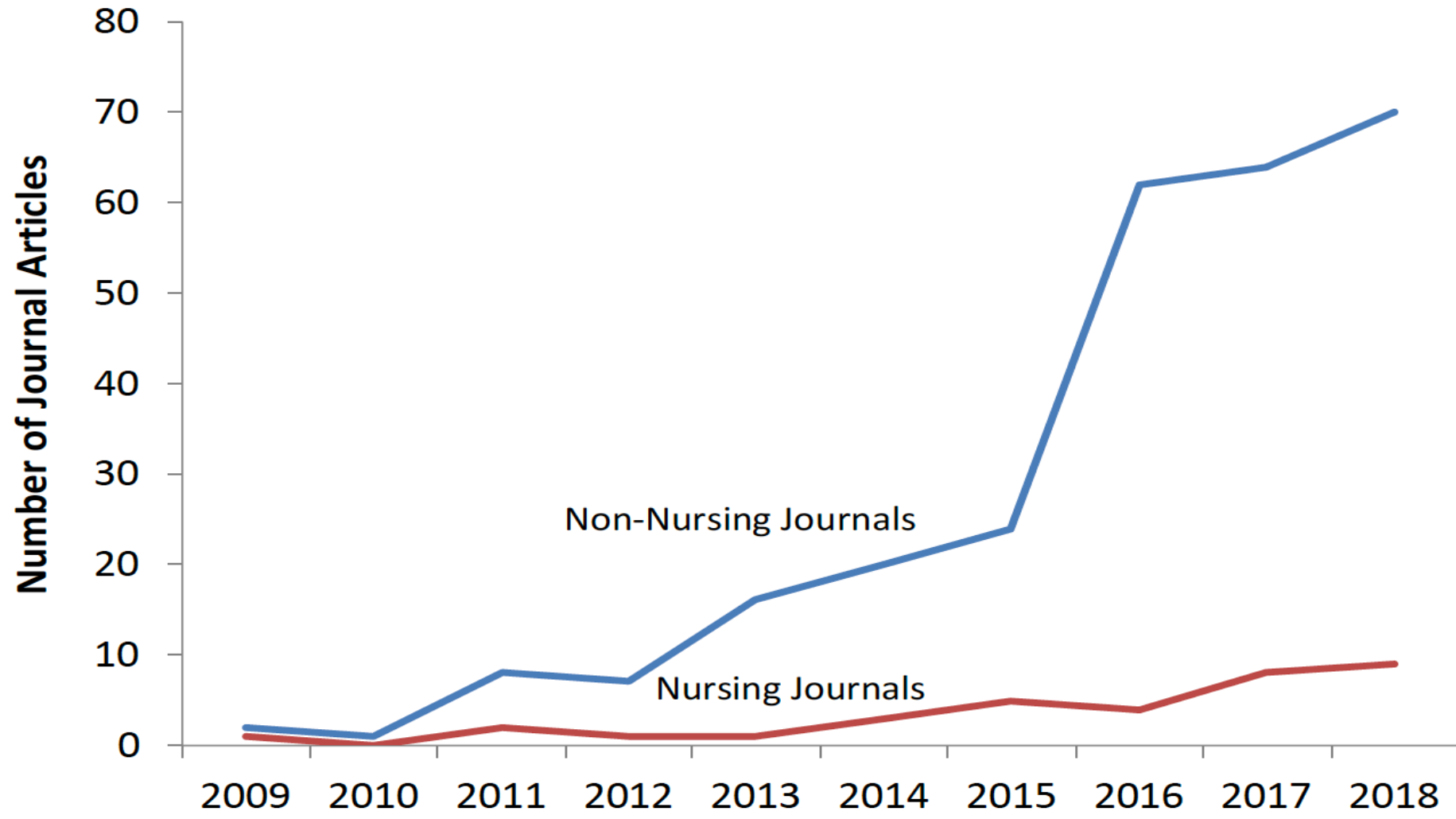
* Define collaborative approaches to improve the quality of patient care by promoting judicious antimicrobial use

Article in Press

Development of consensus based international antimicrobial stewardship competencies for undergraduate nurse education

[Molly Courtenay](#)^{1,*},  , [Enrique Castro-Sánchez](#)², [Rose Gallagher](#)³, [Jo McEwen](#)⁴, [Andre N.H. Bulabula](#)^{5,6}, [Yolene Carre](#)⁷, [Briëtte Du Toit](#)⁸, [Rosely Moralez Figueiredo](#)⁹, [Merete Elisabeth Gjerde](#)¹⁰, [Nykoma Hamilton](#)¹¹, [Linda Jorgoni](#)¹², [Valerie Ness](#)¹³, [Rita Olans](#)¹⁴, [Maria Clara Padoveze](#)¹⁵, [Joan Rout](#)¹⁶, [Nantanit van Gulik](#)¹⁷, [Yolanda Van Zyl](#)¹⁸



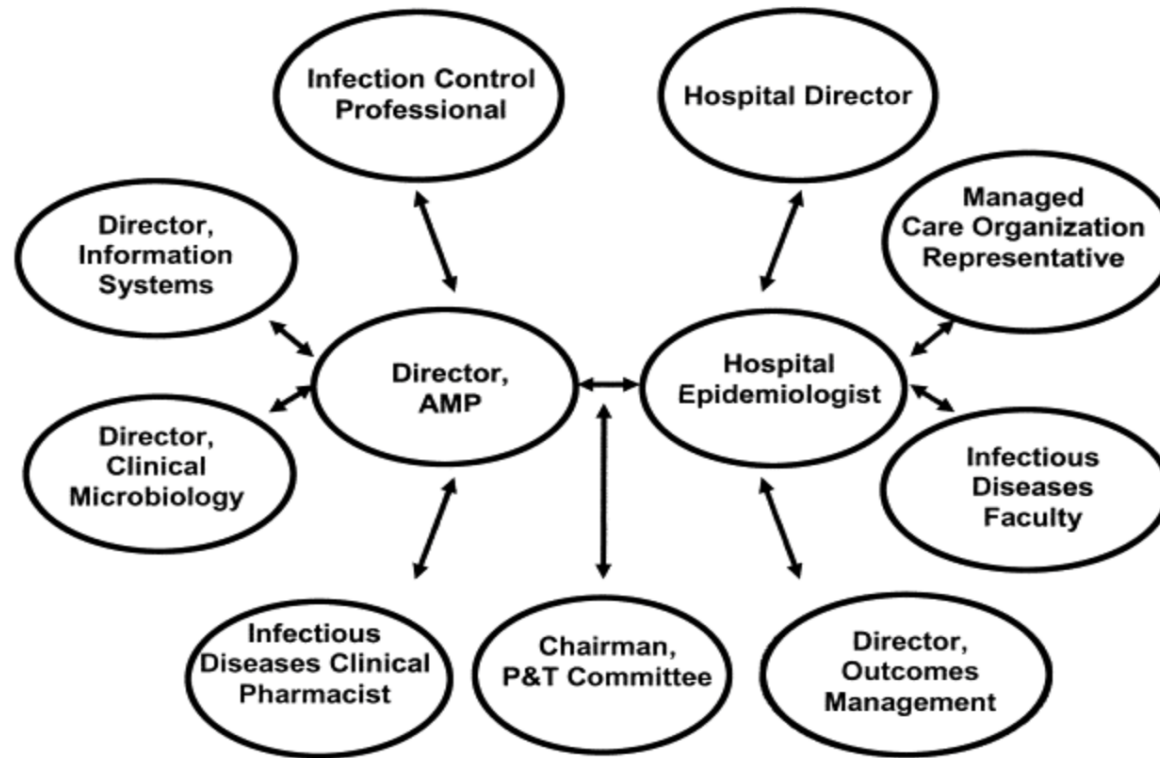


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Fig 4. Members of the comprehensive **multidisciplinary** antibiotic management program (AMP) team at the Hospital of the University of Pennsylvania (Philadelphia, PA). P&T, Pharmacy and Therapeutics.



WHO was MISSING ?

Nurses already perform activities of stewardship, but current models of stewardship programs in hospitals do not integrate their contributions in the stewardship paradigm

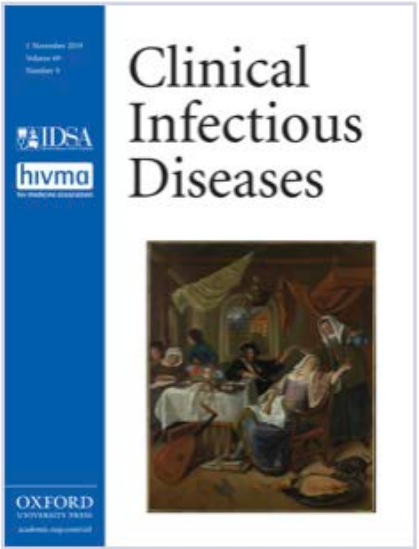
Table 1. Overlap of nursing activities with function attribution in current antimicrobial stewardship models								
	Nursing	Microbiology	Case Management	Pharmacy	Infectious Diseases	Infection Preventionist	Hospitalist	Administration
Patient admission								
Triage and appropriate isolation	•					•		
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 & quality monitoring								
Adverse events	•			•	•		•	
Change in patient condition	•				•		•	
Final culture report and antibiotic adjustment	•	•		•	•	•	•	
Antibiotic resistance identification	•	•			•	•	•	
Communication & patient education								
Device and antibiotic time-outs	•			•	•		•	
Interdisciplinary communication	•		•	•	•		•	•
Patient/family communication and education	•		•				•	
Clinical progress/discharge								
IV to PO antibiotic, outpatient antibiotic therapy	•		•	•	•		•	
Medication reconciliation	•			•			•	
Length of stay	•		•		•		•	•
Outpatient management, long-term care, readmission	•		•		•	•		•



If nurses are not recognized,
how can you leverage their
contributions?

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The Story of Pomona Valley Hospital



Problem solving 1.0 (Ha et al., 2019)

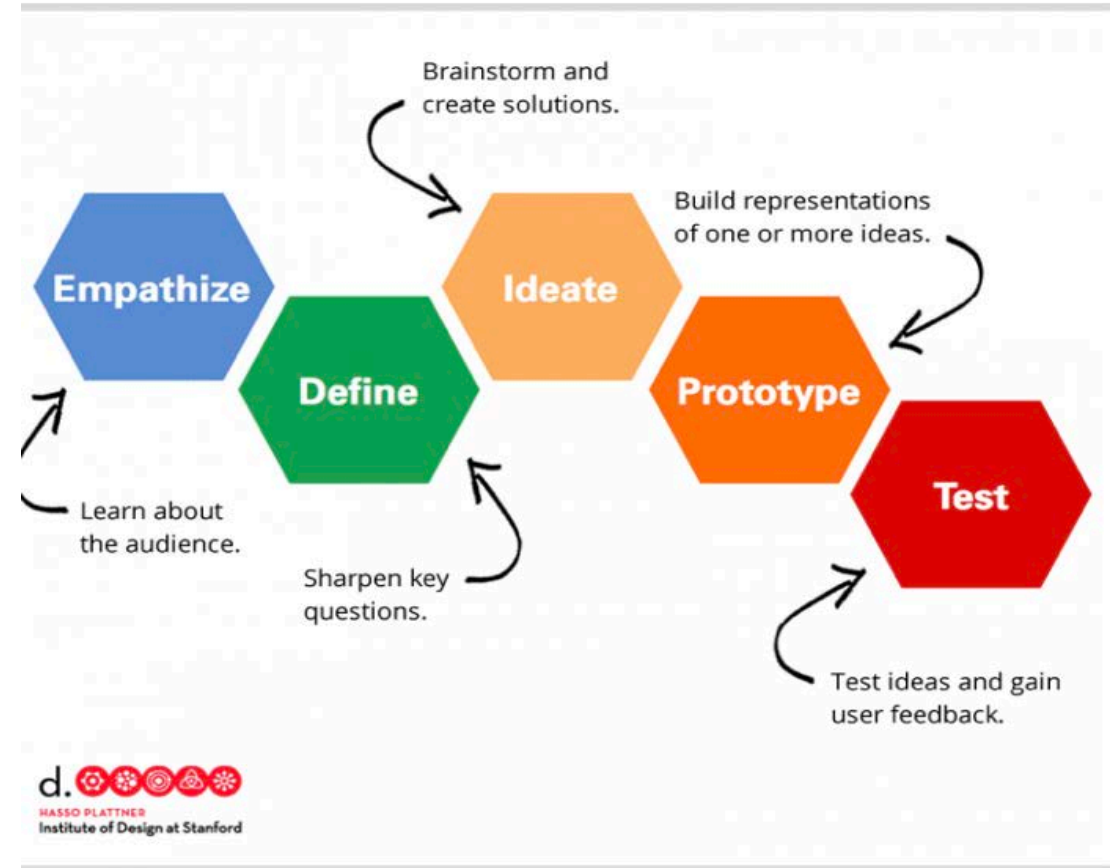
The pharmacist **empathized** with the ‘change-e’ (read: nurse)

He and nursing co-**defined** the problem

Together they **ideated** how this intervention could work

As a team they built a **prototype**

They **tested** this on one unit





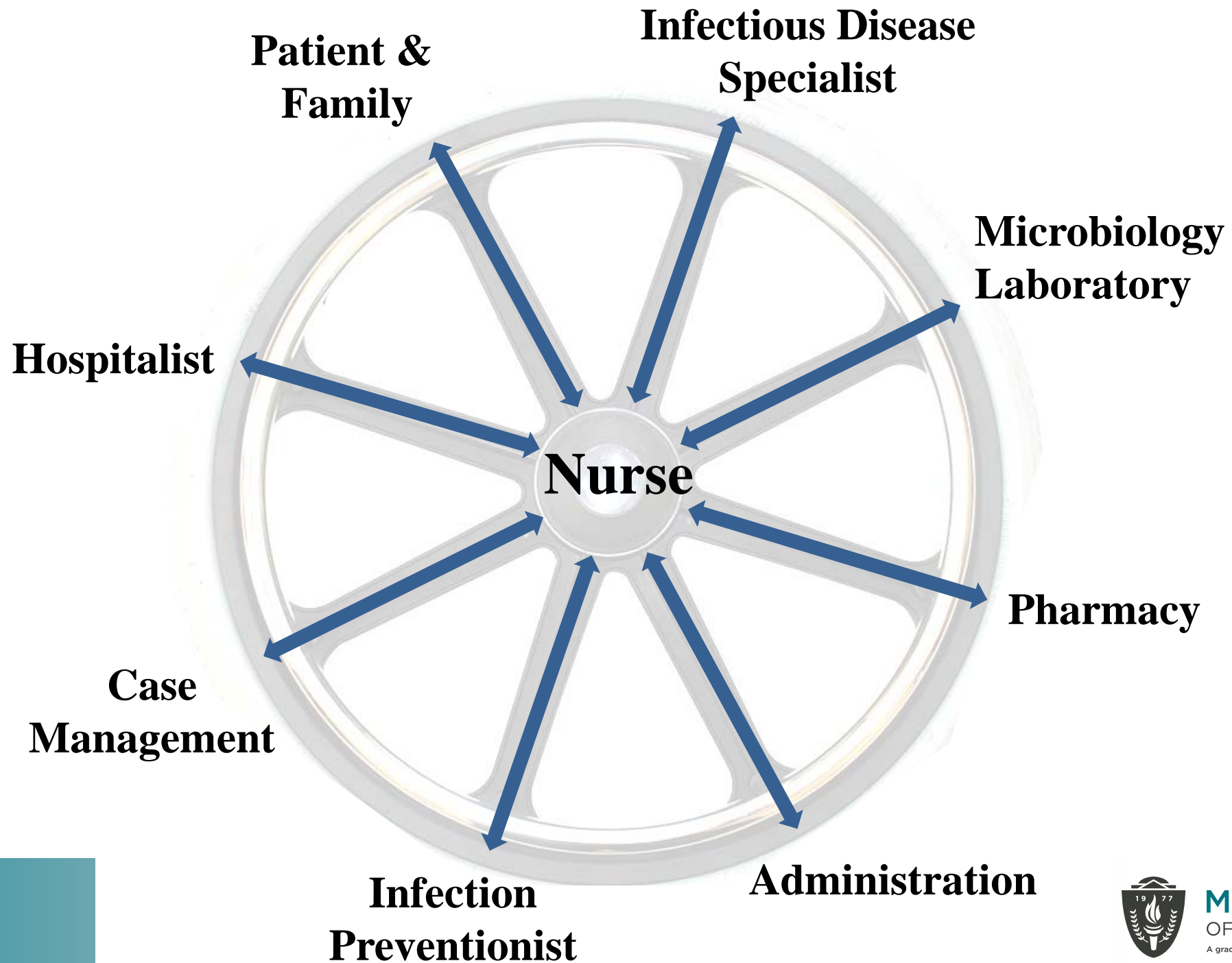
Asked nurses to think about the problem

Nurses co-created activities that integrated stewardship into workflow

Decreased use of PPIs
Decreased days of Abx therapy
Increased nurses' AS
understanding and functional
contributions
Improved ASP operations
Increased both AS & ID consults
Increased ASP acceptance
hospital-wide
Increased number of units asking
for nursing stewardship rounds







Communication Techniques Utilized by Nurses

Allowing silences to invite reflection
and questions

Appropriate touch

Hi/ Lo-fidelity Simulation

Identification of Maslow's Hierarchy
of Needs & honoring patient's
circumstance

Identify patient's register of language
& speak in a vocabulary that is
of comfort to the patient

Motivational Interviewing

Muddle Questions

Observation of/ use of body language

Peer-2-peer

Reflection

Role-playing

SBAR

SBIRT

Sensitive communication within
patient's cultural
understandings and beliefs

Teach Back

Think-Pair-Share

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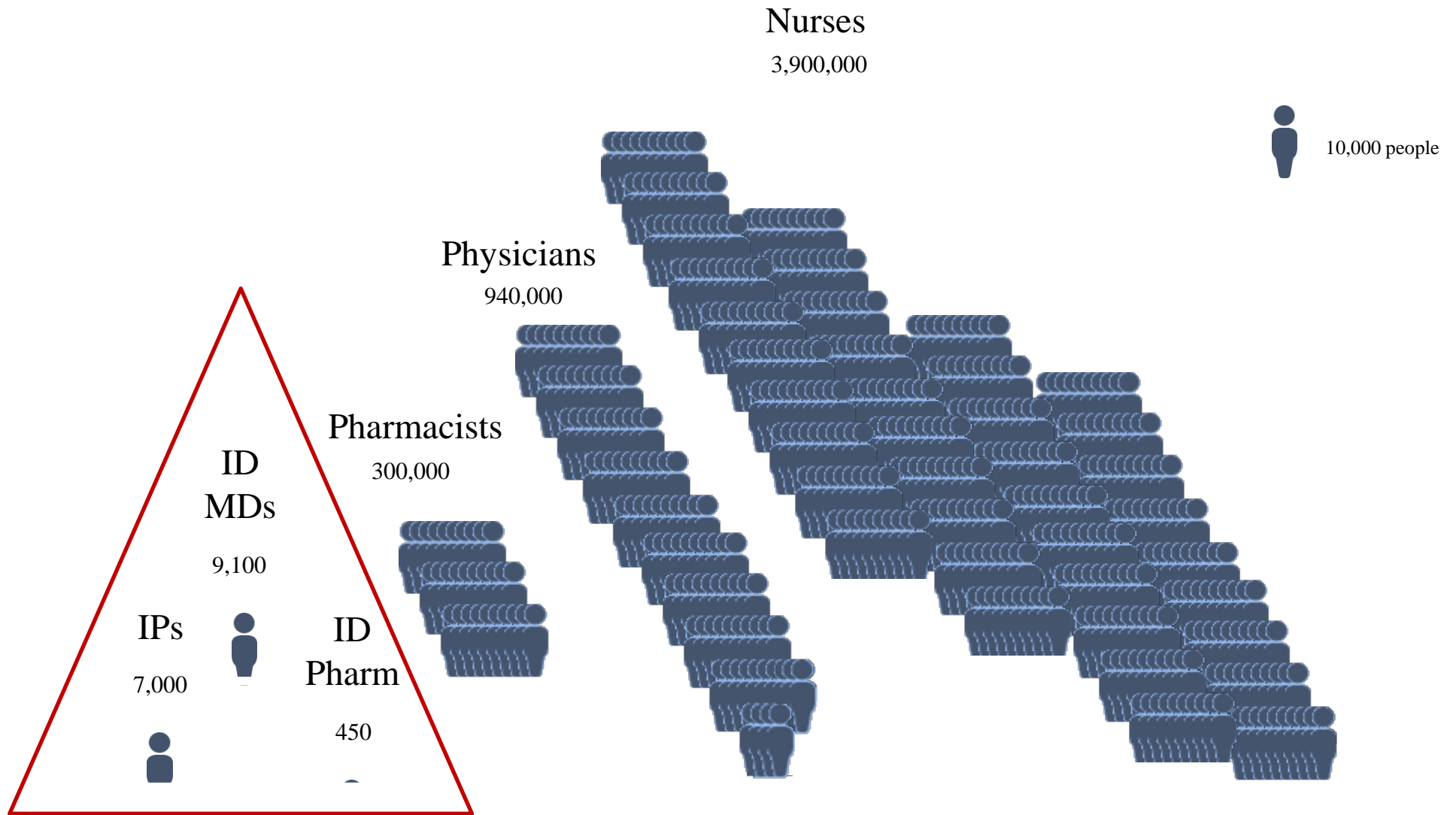
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Teach Back

Think-Pair-Share



Improving Antibiotic Use: Roles for Nurses

- ✓ History taking to include recent antibiotic use
- ✓ Careful, probing antibiotic allergy history taking
- ✓ Timely, & yet appropriate, culture taking & transport
- ✓ CLABSI & CAUTI
- ✓ Monitoring patient responses
- ✓ Both monitoring/tracking, & appropriately collecting *C. diff* cultures
- ✓ Interdisciplinary communication
- ✓ Strengthening cross-disciplinary liaisons between microbiologists, pharmacists, prescribing clinicians & infection preventionists

References

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