



Infection Management and Antibiotic Stewardship

Hot Topic Session #3

Health IT Tools

September 27, 2023

Conflict of interest Disclosures

- ▶ The views and opinions expressed in this series are those of the speakers and do not reflect the official policy or position of any agency of the U.S. or NC government or UNC.
- ▶ Our speakers have NO financial relationships with manufacturers and/or providers of commercial services discussed in this activity.
 - ▶ Dr. Kistler served as a consultant for Base10, Inc on their UTI embedded clinical support tool and received funding from Pfizer to study pneumococcal carriage.
- ▶ The speakers do not intend to discuss an unapproved/investigative use of a commercial product/device in this series, and all COI have been mitigated.
- ▶ These slides contain materials from a variety of colleagues including CDC, WHO, AHRQ, etc.

Today's Team

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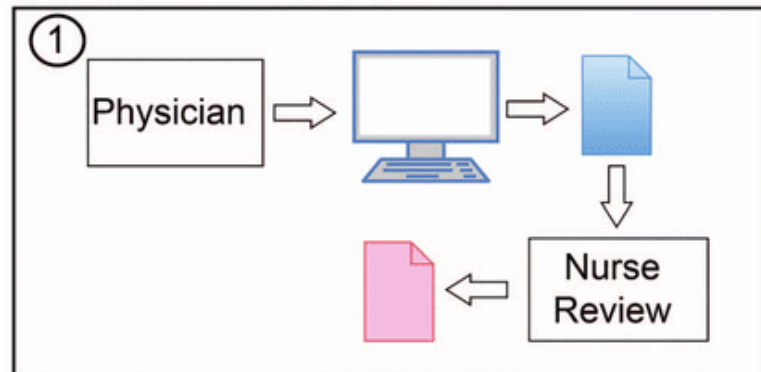
Session Objectives

1. Identify a practical, evidence-based definition of fever for nursing home residents.
2. Identify practical suggestions for monitoring residents for sepsis risk.
3. Provide a one-pager for QI and staff education



Example

- ▶ A nursing home patient presents with signs and symptoms of a urinary tract infection (UTI)
- ▶ Hospital laboratory tests the culture sample and identifies E. coli as the causative organism
- ▶ Hospital laboratory enters the results of the culture test into the EHR system.
- ▶ Using the information in the EHR, the nurse is able to prescribe the appropriate antibiotic for the patient.



Background

- ▶ Nursing home patients are at increased risk for developing infections, including those caused by multidrug-resistant (MDR) organisms.
- ▶ Hospital laboratory tests the culture sample to identify the organism causing the infection and to determine which antibiotics are effective against that organism.

Problem

- In the past, communication between nursing homes and hospitals was often inefficient and time-consuming
 - Leads to delays in the diagnosis and treatment of infections, which could have serious consequences for nursing home patients

Solution

- One way to improve communication between nursing homes and hospitals is to provide nurses with read-only access to the hospital's electronic health record (EHR) system.
- This allows nurses to view the results of culture tests and other relevant clinical information in real time.

Benefits

- ▶ There are several benefits to providing nurses with read-only access to the hospital's EHR system:
- **Improved communication:** Nurses would be able to access the results of culture tests and other relevant clinical information in real-time
- **Reduced risk of delays:** Nurses would no longer have to wait for the hospital to call them with the results of culture tests
- **Improved patient care:** Nurses would be able to use the information in the EHR to make better informed decisions about patient care

Benefits

- ▶ There are several benefits to providing nurses with read-only access to the hospital's EHR system:
 - Read-only access to hospital electronic health records (EHRs)
 - Critical function during patient transfer
 - Independent assessment upon admission
 - Collaboration with physicians and other healthcare providers
 - Integration with other healthcare systems

Recommendation

- ▶ Providing nurses with read-only access to the hospital's EHR system can improve communication between nursing homes and hospitals, reduce the risk of delays in diagnosis and treatment, and improve patient care.

Questions and Discussion



- ▶ Find session slides at <https://spice.unc.edu> → ncclasp
→ nursing homes



Antibiotic Stewardship Conference



11.15.23 | 9 am - 4 pm
The Friday Conference Center
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More information at spice.unc.edu/ncclasp/