ANTIBIOTIC STEWARDSHIP PROGRAMS						
	Self-Assessment Questions	YES	NO	N/A	Date/Initials	Comments
ls t	he CAH infection prevention and control					
pro	ogram and antibiotic stewardship program:					
a.	active, facility -wide, program-specific and					
b.	include off-site settings? do the program components include					
υ.	surveillance, prevention and control of HAI					
	and other infectious diseases?					
c.	does the program focus on the optimization of					
	antibiotic use through stewardship?	_				
d.	based on individual CAH assessment and					
	conducted in accordance with nationally					
	recognized infection prevention and control standards of practice or guidelines and focus					
	on reducing development and transmission of					
	HAI?					
e.	based upon best practices for improving					
	antibiotic usage and for reducing the					
	development and transmission of antibiotic-					
f.	resistant organisms? integrated into the CAH-wide QAPI program?					
1.	Is there evidence the CAH is working					
	collaboratively between the infection					
	prevention program and QAPI when issues are					
	identified?					
g.	is there evident antibiotic use issues are					
	addressed in coordination with QAPI					
0	program? P §485.640					
	es the hospital have:					
a.	an individual appointed by the governing					
	body as the infection preventionist/infection					
	control professional who has the					
	responsibility for the infection prevention and					
	control program?					
b.	was the appointment based upon recommendations of medical staff leadership					
	and nursing leadership?					
c.	is the appointed individual qualified through					
	education, training, experience or					
	certification in infection prevention and					
	control?					
C12	204 COP §485.640(a)(1)					

ANTIBIOTIC STEWARDSHIP PROGRAMS						
Self-Assessment Questions	YES	NO	N/A	Date/Initials	Comments	
Does the infection prevention and control						
program:						
<ul> <li>a. have documented policies and procedures?</li> <li>b. employ methods for prevention and control of infection transmission both within the CAH and between the CAH and other healthcare settings?</li> </ul>						
C1206 COP §485.640(a)(2)						
Does the CAH infection prevention and control						
program: a. include surveillance, prevention and control of HAI?						
<ul> <li>address any of infection control issues identified by public health authorities?</li> </ul>						
c. include a system for preventing, identifying,						
reporting, investigating, and controlling infections and communicable disease for all						
<ul> <li>patients, staff, and visitors?</li> <li>d. ensure a clean and sanitary environment by monitoring housekeeping, maintenance repairs, renovation and construction activities to avoid sources and transmission of</li> </ul>						
infection?						
C1208 COP §485.640(a)(3)						
Does the infection prevention and control program reflect the scope and complexity of the services provide by the CAH, including all departments, service lines, inpatient/outpatient services, locations? C1210 COP §485.640(a)(4)						
Has the CAH governing body ensured the						
<ul><li>following systems are in place and operational:</li><li>a. for the tracking of all infection surveillance, prevention and control?</li></ul>						
<ul> <li>b. for antibiotic use activities?</li> <li>c. is there documentation in place to demonstrate the implementation, success and sustainability of above activities?</li> <li>C1225 COP §485.640(c)(1)(i)</li> </ul>						

ANTIBIOTIC STEWARDSHIP PROGRAMS							
Self-Assessment Questions	YES	NO	N/A	Date/Initials	Comments		
Has the CAH governing body ensured that: a. all HAI and other identified infectious diseases are addressed in collaboration with QAPI							
program leadership? b. all antibiotic use issues identified by the antibiotic stewardship program are addressed in collaboration with QAPI program leadership? C1229 COP §485.640(c)(1)(ii)							
Is the infection prevention and control professional responsible for: Development and implementation of facility wide infection surveillance, prevention and control policies and procedures that adhere to nationally recognized guidelines? C1231 COP §485.640(c)(2)(i)							
Is the infection prevention and control professional responsible for:							
<ul> <li>all documentation, written or electronic, of the infection prevention and control program</li> </ul>							
<ul> <li>all infection prevention and control program surveillance, prevention and control activities?</li> </ul>							
<ul> <li>c. communication and collaboration with the QAPI program on any infection prevention and control issues?</li> </ul>							
<ul> <li>d. prevention and control of HAI including auditing for compliance with applicable policies and procedures by staff.</li> <li>C1235, C1237, 1240 - COP §485.640(c)(2)(ii)(iii)(v)</li> </ul>	<b>a</b> .						
Infection preventionist is responsible for competency-based training and education of the following CAH personnel and staff on the practical							
<ul> <li>applications of infection prevention and control guidelines, policies and procedures:</li> <li>a. medical staff</li> <li>b. contracted staff</li> <li>c. all employees</li> <li>C1239- COP §485.640(c)(2)(iv)</li> </ul>	□ □ □ b.						
The infection preventionist is responsible for communication and collaboration with the antibiotic stewardship program C1242- COP §485.640(c)(2)(vi)							

ANTIBIOTIC STEWARDSHIP PROGRAMS							
Self-Assessment Questions	YES	NO	N/A	Date/Initials	Comments		
ANTIBOTIC STEWARDSHIP PROGRAM							
The antibiotic stewardship program leaders is responsible for:							
<ul> <li>a. development and implementation of CAH- wide antibiotic stewardship program which is to monitor and improve antibiotic usage.</li> </ul>							
b. the antibiotic stewardship program is based							
upon nationally recognized standards c. all program documentation, whether written							
(paper) or electronic							
<ul> <li>communication and collaboration with medical staff, nursing and pharmacy leadership</li> </ul>							
e. communication with infection preventionist and QAPI program staff on antibiotic use							
issues C1244-1248- COP §485.640(c)(3)(i)(ii)(iii)							
Antibiotic stewardship leader (s) is responsible for							
competency-based training and education of the following CAH personnel and staff on the practical							
applications of antibiotic stewardship guidelines,							
policies and procedures:							
a. medical staff b. contracted staff							
c. all employees							
C1250 COP §485.640(c)(3)(iv)							
The CAH may choose a unified and integrated							
infection prevention and control and antibiotic							
stewardship program for separately certified multi-hospital, CAH systems. Does the system							
governing body ensure each separately certified							
CAH (s):							
<ul> <li>has an infection prevention and control and antibiotics stewardship program for the entire CAH?</li> </ul>							
b. programs consider the unique properties of							
the population and services the CAH serves.							
<ul> <li>programs consider the needs and concerns of CAH separately?</li> </ul>							
d. identify QAPI issues specifically impacting							
their CAH and integrates those issues into the							
overall QAPI program? COP §485.640(g)(1)-(4)							

### INFECTION PREVENTION/CONTROL and ANTIBIOTIC STEWARDSHIP PROGRAMS

Self-Assessment Questions	YES	NO	N/A	Date/Initials	Comments
If the CAH is part of an unified and integrated					
system:					
a. is there a designated individual with expertise in infection prevention and control and					
antibiotic stewardship who is responsible for					
communicating with implementing, and					
maintaining the policies and procedures of					
the unified program?					
b. is there documentation that the designated					
individual communicates with the unified					
leadership related to issues?					
c. is there documentation of staff training on					
infection prevention and control and					
antibiotic stewardship?					
COP §485.640(g)(1)-(4)					

#### **Helpful Hints**

• <u>CMS Hospital Infection Control Worksheet Guide to Infection Prevention in Outpatient Settings (CDC)HHS</u> <u>Action Plan to Prevent Healthcare-Associated Infections</u>

#### **Key Resources and Links**

- <u>29 CFR 1910.1030</u>
- <u>42 CFR 485.640</u>
- <u>CDC Core Elements of Antibiotic Stewardship</u>
- <u>Missouri Healthcare-Associated Infection Reporting Data</u>
- Updated Acute Hospital Guidelines Note: These guidelines were written for acute hospitals; however CAH regulations nearly identical