

State-wide Collaborative Works to Prevent Transmission of Multidrug-resistant Organisms in Vermont.

Healthcare-Associated Infections (HAIs) are caused by a wide variety of common and unusual bacteria, fungi and viruses that patients are exposed to while receiving medical care [1]. An analysis of data from U.S. hospitals estimated 1.7 million HAIs in 2002 [2]. The overall annual direct medical costs of HAI to U.S. hospitals ranges from \$28 to \$45 billion [3]. Because of the associated morbidity, mortality and cost, HAI prevention has become a priority target - a "Winnable Battle" - of the Centers for Disease Control and Prevention (CDC) and the Department of Health and Human Services (DHHS).

For the past year, the Vermont Department of Health (VDH) has coordinated a state-wide HAI collaborative focused on preventing the transmission of multidrug-resistant organisms (MDROs) in and between acute and long-term care facilities. The MDRO Collaborative includes every acute care facility in Vermont, 31 long-term care facilities that have a skilled nursing component, and the Dartmouth-Hitchcock Medical Center. Collaborative facilities are grouped into "healthcare clusters," each containing at least one acute care facility and the nearby long-term care facilities that use the hospital's clinical laboratory.

During year one, the collaborative facilities implemented a variety of interventions to prevent MDROs, including enhanced communication between facilities at the time of patient/resident transfer, chlorhexidine bathing, active and/or selective surveillance culturing, decolonization, enhanced contact precautions and environmental cleaning. Several clusters developed or reviewed protocols for treating suspected urinary tract infections - one component of which is addressing antibiotic use and prescribing practices.

As we enter the second year of the MDRO Collaborative, VDH will encourage facilities to create Antimicrobial Stewardship Programs (ASPs) to reduce the burden of MDROs and improve patient outcomes. Antibiotics are the most important and effective tool we can use to combat life-threatening bacterial diseases, but their overuse increases the development of drug-resistant organisms, one of the world's most pressing public health threats. These ASP efforts will involve multidisciplinary teams with representatives from infection control, the medical and nursing staffs, pharmacy, microbiology, and administrative leadership. Facilities will have flexibility to determine their level of involvement based on available resources.

VDH will take this initiative beyond the MDRO Collaborative to prescribing providers and the general public through a variety of outreach methods, including pharmacy bag inserts, educational programs, and media advertising. Some messages will feature the Centers for Disease Control and Prevention's "Get Smart: Know When Antibiotics Work" (<http://www.cdc.gov/getsmart>) and "Get Smart in Healthcare" (<http://www.cdc.gov/getsmart/healthcare>) campaigns. This is an exciting opportunity to empower healthcare providers and pharmacists to communicate with patients and their families about appropriate antibiotic use.

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