

BACKGROUND/AIM

- Frontline nurses are poised to significantly contribute to antibiotic stewardship (AS) activities but lack a “non-prescriber” frame of reference.
- Our aim was to develop a globally applicable unifying framework to guide AS nursing practice.

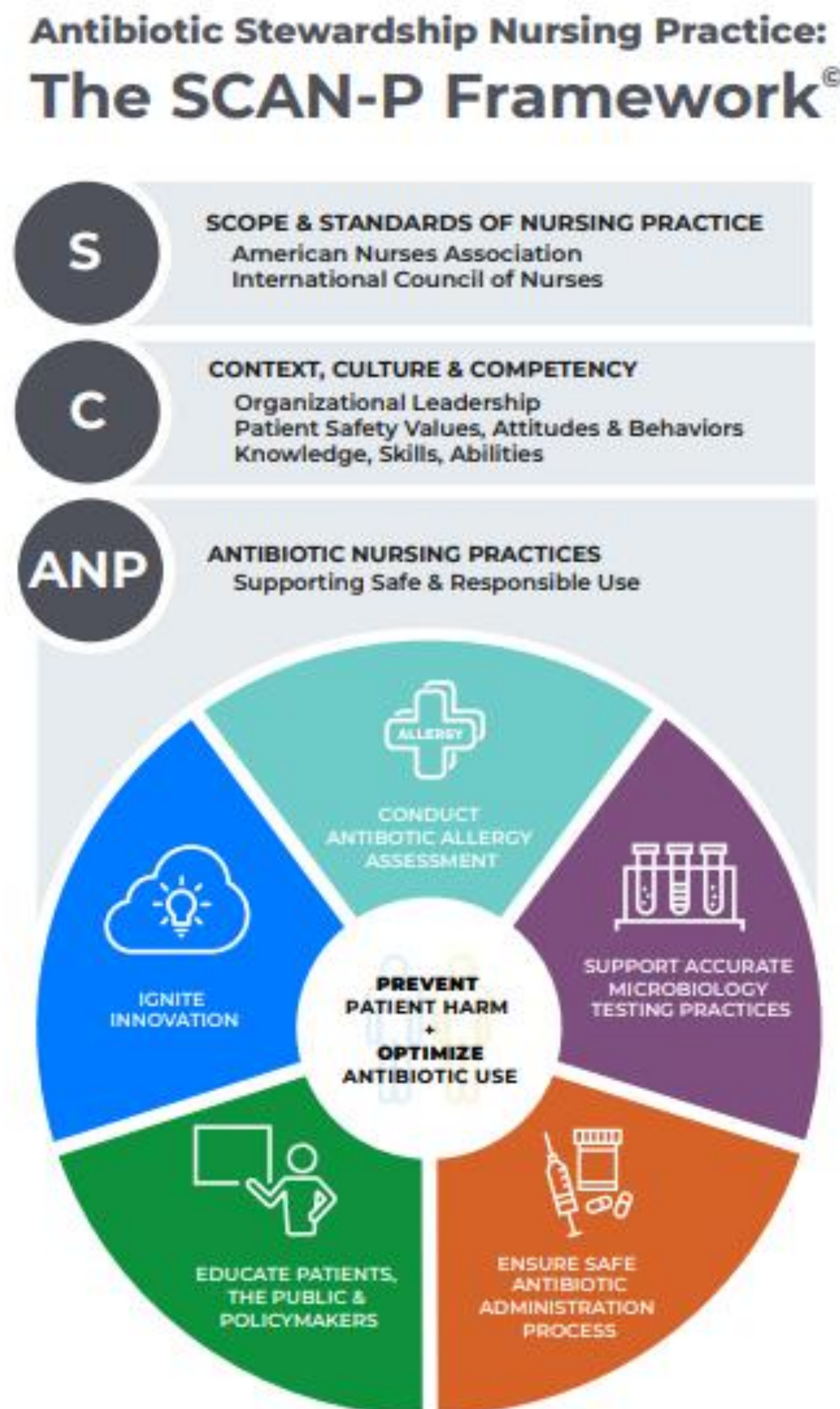
METHODS

1. Develop AS definition to guide framework development: *Local actions taken by the healthcare team to protect, care for & responsibly use antibiotics to prevent patient harm and optimize antibiotic use in diverse socio-behavioral contexts.*
2. Identify the framework underpinnings based on the AS nursing literature. These include:
 - highlight the national & international scope and standards of nursing practice;
 - emphasize the impact of organizational context & culture, & nurses' AS practice confidence on their stewarding behaviors;
 - identify local-level AS nursing practices that can be integrated into current nursing workflow;
 - build upon the Nursing Interventions Classification intervention of surveillance (scanning), which is, ‘the purposeful and ongoing acquisition, interpretation, and synthesis of patient data for clinical decision making’ – in the course of a patient encounter.

RESULTS

Over the course of a year, the framework went through many iterations. It was vetted with practicing nurses, nurse educators, physicians, and AS subject matter experts, resulting in the SCAN-P Framework (shown in Figure).

THE SCAN-P FRAMEWORK



Purpose: guide AS nursing practice. It emphasizes the act of “scanning,” affirms the core goals of AS to prevent patient harm & optimize antibiotic use, considers the crucial factors that influence and support success, & identifies several AS practices.

SCAN-P ACRONYM

S – Scope & Standards of Nursing Practice

Nursing practice is guided by individual country's standards. Preventing patient harm & optimize antibiotic use is a patient safety issue, & clearly within the scope of nursing practice.

C – Culture, Context & Competency

The extent to which nurses can successfully implement AS nursing practices is highly dependent on the clinical context, organizational culture, and how competent & confident nurses feel in their applied surveillance and AS knowledge, skills and abilities. Understanding local culture & context is essential to supporting practice change.

ANP – Antibiotic Nursing Practices

Once nurses assess the “C’s” they next want to select nursing related practices for improvement. Ideally, this should be done in partnership with pharmacist and physician colleagues,

CONCLUSIONS

The nursing intervention of surveillance or “scanning” is key in early recognition & prevention of patient harm – including harm from antibiotics. Our SCAN-P framework is designed to guide in selection of AS nursing practice/s.

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