The aim of this study was to develop quality indicators (QIs) for OPAT care that can be used as metrics for quality assessment and improvement” Berrevoets et al (2019).

Abstract:

BACKGROUND: The aim of this study was to develop quality indicators (QIs) for OPAT care that can be used as metrics for quality assessment and improvement.

METHODS: A RAND-modified Delphi procedure was used to develop a set of QIs. Recommendations on appropriate OPAT care in adults were retrieved from literature using a systematic review and translated into potential QIs. These QIs were appraised and prioritized by a multidisciplinary panel of international OPAT experts in two questionnaire rounds combined with a meeting between rounds.

RESULTS: The procedure resulted in 33 OPAT-specific recommendations. The following QIs describing recommended OPAT care were prioritized by the expert panel: the presence of 1) a structured OPAT program, 2) a formal OPAT care team, 3) a policy on patient selection criteria, and 4) a treatment and monitoring plan; 5) assessment for OPAT should be performed by the OPAT team; 6) patients and family should be informed about OPAT; there should be 7) a mechanism in place for urgent discussion and review of emergent clinical problems, 8) a system in place for rapid communication; 9) laboratory results should be delivered to physicians within 24 hours; the OPAT team should 10) document clinical response to antimicrobial management, 11) document adverse events, and 12) monitor QIs for OPAT care and make these data available.

CONCLUSION: We systematically developed a set of 33 QIs for optimal OPAT care of which 12 were prioritized by the expert panel. These QIs can be used to assess and improve the quality of care provided by OPAT teams.

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