Introduction

CVS MinuteClinic®, headquartered in Rhode Island, is the largest retail clinic provider, with over 1,135 clinics in 33 states and more than 29 million visits since its inception in 2006. It offers high quality, accessible, and affordable care, primarily focused on minor illnesses like coughs and colds as well as vaccines and, recently, travel medicine. CVS MinuteClinic serves patients from 18 months onward. Located in the retail environments of CVS pharmacies and Target stores, over 50% of the US population lives within 10 miles of a MinuteClinic.

Project Topic

While antibiotics are one of the greatest medical advances of the 20th century, their overuse leads to the problem of antibiotic-resistant bacteria, negating their life-saving effects. Antibiotic resistance is a major public health issue, causing 2 million antibiotic-resistant infections that lead to 23,000 deaths per year. The most effective way to curb resistance at the clinical level is to prescribe antibiotics only when they are appropriate.

To support these efforts to curb resistance, CVS MinuteClinic is leading the way in ensuring that its MinuteClinic providers are not inappropriately prescribing antibiotics. To this end, they have strict clinical guidelines their providers follow. Antimicrobial stewardship (AMS) is important to the MinuteClinic® mission, and their HEDIS performance reflects this priority (Figure 1).

Problem Statement

While CVS MinuteClinic is very successful at ensuring that their NPs are not inappropriately prescribing antibiotics, patients may end up unsatisfied with their MinuteClinic experience as a result. Patients will come in expecting an antibiotic and either they do not have the condition that they think they have for which an antibiotic would be appropriate or they misunderstand when it is appropriate to use an antibiotic (for example, thinking that viral infections are treated with antibiotics). CVS MinuteClinic wanted us to research the issue and create interventions to use in better managing these interactions.

Methods

We took an integrated approach to understanding AMS at CVS MinuteClinic®, which included performing CVS MinuteClinic corporate stakeholder interviews, field visits to four different CVS MinuteClinics as well as participation in monthly meetings, and case studies in relevant literature.

Intervention & Next Steps

All of our research pointed to interventions that would help empower CVS MinuteClinic providers in the patient-provider interaction to better manage these difficult conversations. By using tips accumulated from years of experience across many of CVS MinuteClinic’s providers, current training initiatives, best practices from the team’s prior work experience, and relevant literature, we were able to create an authentic script/guide for CVS MinuteClinic providers.

Going forward, CVS MinuteClinic can use this working document in many ways to facilitate training and conversations to empower its providers in these challenging conversations, improve patient satisfaction, reduce the incidence of escalated situations, and continue to lead the way in antimicrobial stewardship.