

ASP Project 2: ASP Implementation Collaborative

Objective: To provide ongoing education and support to hospital-based multi-disciplinary teams working to implement and/or advance their antimicrobial stewardship programs.

Background:

Antimicrobial stewardship refers to a set of coordinated interventions designed to improve and measure the appropriate use of antimicrobial agents by promoting the selection of the optimal drug regimen, including dosing, duration of therapy, and route of administration. Antimicrobial stewardship programs (ASPs) vary widely from hospital-to-hospital. To provide California general acute care hospitals guidance in developing institution-specific ASPs, the California Healthcare Associated Infections (HAI) Advisory Committee developed a 3-tier classification of the elements that constitute ASP progress and advancement. Hospitals can work toward a basic program, or strive to implement additional strategies of an intermediate and/or advanced program. The 3-tiers of a hospital ASP are defined as follows:

Basic Tier:

- Institution-specific antimicrobial stewardship policy/procedure
- Physician-supervised multidisciplinary antimicrobial stewardship committee, subcommittee, or workgroup
- ASP support from a physician or pharmacist who has attended specific training on antimicrobial stewardship (e.g. continuing education training program offered by the Centers for Disease Control and Prevention, Society for Healthcare Epidemiology of America or other recognized professional organization, or post-graduate training with concentration in antimicrobial stewardship)
- ASP activities routinely reported to hospital committees involved in quality improvement activities

Intermediate Tier:

- Annual antibiogram developed using Clinical Laboratory Standards Institute guidelines with distribution to/education of the medical staff
- Institutional guidelines for the management of common infection syndromes (e.g., order sets, clinical pathways, empiric antimicrobial therapy guide, etc.)
- Monitor usage patterns of antibiotics determined to be of importance to the resistance ecology of the facility, using Defined Daily Dosing (DDD) or Days of Therapy (DOT)
- Regular education to hospital staff/committees about antimicrobial stewardship

Advanced Tier:

- Antimicrobial formulary reviewed annually with changes made based on local antibiogram
- Prospective audits of antimicrobial prescriptions with intervention/feedback
- Formulary restriction with preauthorization

Project Description:

To assist hospitals in evaluating their progress and further advancing their ASP using this 3-tier approach, the CDPH HAI Program is recruiting a diverse group of hospitals to join an ASP Collaborative. Hospitals will be expected to have their ASP teams participate in monthly learning and discussion teleconferences to begin January 2014 and continue for approximately 6-12 months. Through the collaborative, hospital ASP teams will have the opportunity to discuss strategies and barriers of ASP implementation with their peers. Decisions about how to share lessons learned will be made with the ASP collaborative participating hospitals, and may include posting progress on the California ASP Initiative webpage.

Please email _____ by December 1, 2013 if you are interested in participating in this collaborative.

DRAFT