



California Department of Public Health
MEMORANDUM

DATE: February 28, 2014

TO: Pharmacy, Infectious Disease, Hospital Epidemiology, and Infection Prevention Colleagues

FROM: Lynn Janssen, Chief
Healthcare-Associated Infections (HAI) Program
California Department of Public Health

SUBJECT: Invitation to Participate in “Spotlight on Antimicrobial Stewardship Programs” Project

We are pleased to invite you to participate in a new project, “Spotlight on Antimicrobial Stewardship Programs (ASP)” being offered by the CDPH Healthcare-Associated Infections (HAI) Program, a non-regulatory public health program charged with making California healthcare safer through the prevention of HAI. We are seeking volunteer hospitals to showcase their stewardship programs on our Antimicrobial Stewardship Program Initiative web page, and are willing to serve as mentor hospitals to others that may need advice or assistance with ASP implementation.

Antimicrobial Stewardship refers to a set of interventions that improve the appropriate use of antimicrobial agents, including optimal drug selection, dosing, duration of therapy, and route of administration. The primary objective is to achieve the best clinical outcomes for patients while minimizing toxicity and other adverse events associated with antimicrobial use, thereby limiting selective pressure on bacterial populations that drives the emergence of antimicrobial resistant strains. ASP implementation has also been shown to reduce costs due to suboptimal antimicrobial use.

To provide guidance to hospitals as they work to improve their ASPs, the California HAI Advisory Committee recently developed a list of activities to define what constitutes an ASP. These activities are grouped into three tiers.

Basic Program

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

Intermediate Program

- Annual antibiogram developed using Clinical Laboratory Standards Institute guidelines with distribution to and 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.)
- Monitoring of 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 Program

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

The Spotlight on ASP project will allow volunteer hospitals to demonstrate progress in ASP development by reporting which of these activities have been successfully implemented to date. We believe highlighting hospitals that have achieved at least a basic program will help motivate others who may be struggling with getting an ASP going. Highlighting hospitals with more advanced programs may help those whose ASP efforts have stalled. Regardless of where your hospital currently falls on the spectrum, the Spotlight project will update your hospital's progress as you implement additional ASP activities in the coming months and years.

If you are interested in participating, please ensure you have leadership support, which must include the physician and/or pharmacist lead(s) of your antimicrobial stewardship efforts. To enroll in the project, complete the online questionnaire at https://www.surveymonkey.com/s/Spotlight_on_ASP. A copy of the questionnaire is attached to this invitation.

Hospitals that respond by **Friday, March 28, 2014**, will be highlighted on our Antimicrobial Stewardship Program Initiative web page beginning in April. We will send a prototype of your hospital's information, as it will appear on the web page, to seek your final approval prior to posting. You may withdraw from the project at any time.

If you have any questions, please do not hesitate to contact me at lynn.janssen@cdph.ca.gov, Dr. Jon Rosenberg at jon.rosenberg@cdph.ca.gov, or by calling 510-412-6060. We appreciate your consideration of this important patient safety endeavor and look forward to your participation.

Spotlight on Antimicrobial Stewardship Programs

The following hospitals have agreed to share progress on the implementation of their **Antimicrobial Stewardship Programs (ASP)**. Activities listed were defined by the California HAI Advisory Committee as those that comprise varying levels of Program implementation. An "✓" indicates the hospital is currently performing the activity. Key staff members from each hospital have also volunteered to serve as mentors to others seeking guidance on implementing specific ASP strategies. Hospital information will be updated as new ASP activities are initiated. To enroll **YOUR** hospital in this project, please complete the questionnaire at https://www.surveymonkey.com/s/Spotlight_on_ASP.

	Basic Program				Intermediate Program				Advanced Program		
	1. Institution-specific antimicrobial stewardship policy and/or procedures adopted	2. Physician-supervised multidisciplinary ASP committee or work group convened	3. ASP support provided by a physician or pharmacist with antimicrobial stewardship training from a recognized professional organization or post graduate education	4. ASP activities routinely reported to hospital quality improvement committees	5. Annual antibiogram developed (using CLSI guidelines), distributed to medical staff, and follow-up education provided.	6. Institutional guidelines for the management of common infection syndromes adopted (e.g., order sets, clinical pathways, empiric antimicrobial therapy guides, etc.)	7. Usage patterns of antibiotics (determined to be important to the local resistance ecology) monitored using Defined Daily Dosing (DDD) or Days of Therapy (DOT)	8. Regular antimicrobial stewardship education provided to hospital staff and committees	9. Antimicrobial formulary reviewed annually and changes made based on local antibiogram	10. Prospective audits of antimicrobial prescriptions performed and intervention/feedback provided	11. Formulary restriction with preauthorization implemented
Example Hospital 1 San Francisco, Major Teaching, 600 beds ASP lead physician: Jane Doe, MD Jane.Doe@Hospital1.org	✓	✓	✓	✓	✓		✓	✓			
Example Hospital 2 Alameda, Community, 120 beds ASP lead pharmacist: John Doe 510-999-9999 ext. 510 ASP member/lead IP: Mary Smith MSmith@Hospital2.org	✓	✓		✓	✓	✓	✓				