



(Facility Name)

Antimicrobial Stewardship Plan (ASP)

Background and Purpose

Antibiotic resistance is a major and worsening problem confronting healthcare providers and residents. Over the past several years, there has been an increase in drug-resistant organisms across the country coupled with a decrease in new antimicrobials on the market so it is imperative to protect the agents currently available by judicious antimicrobial management. Antimicrobial Stewardship has been shown to improve resident outcomes significantly by increasing infection cures, improving pathogen susceptibility profiles, optimizing dosing for individual residents, reducing the adverse effects of antibiotics, reducing potential development of resistant infections, and decreasing medication costs, while increasing appropriate, cost effective prescribing for therapy and prophylaxis and potentially preserving the therapeutic effectiveness of antimicrobials.

(Facility name) commits to implementing a stewardship program to improve appropriate and judicious use of antibiotics. This plan provides an initial framework for our strategic approach to this aim and establishes accountability for the ASP's activities and outcomes.

Guiding Principles

The ASP's strategic, guiding principles include:

1. Ensuring timely and appropriate initiation of antibiotics for residents according to current, evidenced-based, best practices
2. Ensuring appropriate administration and de-escalation of therapy for residents according to current, evidenced-based, best practices
3. Monitoring data for ASP effectiveness, ASP evaluation, and ASP-associated resident outcomes
4. Promoting a culture of transparency, reporting, and open communication

Current best practice guidelines will be from various sources including Centers for Disease Control (CDC), Infectious Disease Society of America (IDSA), Society of Healthcare Epidemiology of America (SHEA), and the Agency for Healthcare Research and Quality (AHRQ).

Activities

To achieve the ASP aim, the following specific actions, activity, or interventions will be implemented. Additional interventions will be implemented in time as quantitative and qualitative data support such changes.

(Implementation Date)

1. Annual prescriber and staff education about the need for stewardship and the state of the stewardship program at (facility name)
2. Review and monitoring antibiotic use.
3. Report opportunities for improvement to prescribers
4. Institute antibiotic time-out
5. Develop and/or update polices, procedures, treatment guidelines, and antibiogram
6. Develop short-term and long-term goals with annual review and revision as needed

ASP Team members

1. Team Lead: (name and title)
2. Administrative Champion: (name and title)
3. Data Coordinator: (name and title)
4. Nursing Champion: (name and title)
5. Physician Champion: (name and title)
6. Infection Prevention Designee: (name and title)
7. Laboratory liaison: (name and title)
8. Pharmacy liaison: (name and title)

Oversight Committee

The Antibiotic Stewardship Committee (ASC) is a sub-committee of the Quality Assurance Process Improvement Committee (QAPI). The ASC will report all data tracked or monitored, operations, routine management issues, policy approvals and progress to QAPI at each meeting.

Reviewed and Approved

Administrator

Date

Medical Director

Date