

Virginia Antimicrobial Stewardship Honor Roll for Acute Care Hospitals Application

Please fill this form out in its entirety. Applications will be deemed incomplete if any of the below information is omitted.

Applicant Name:

Applicant Title:

Applicant Email Address:

Facility Name:

The Virginia Antimicrobial Stewardship Honor Roll for Acute Care Hospitals is a three-tiered system in which facilities have the opportunity to meet Bronze, Silver, or Gold status based on the CDC Core Elements. Facilities are also recognized for collaboration on the state and/or local level. Participating facilities will be awarded a star for each of the below initiatives in the recognition process.

Status Level	Collaboration Recognition
<p>Please indicate the status for which your facility is applying (see page 2 for more details):</p> <p><input type="checkbox"/> Bronze: Must meet at least one criteria per core element</p> <p><input type="checkbox"/> Silver: Must meet at least one criteria per core element and at least 4 intermediate criteria</p> <p><input type="checkbox"/> Gold: Must meet at least one criteria per core element and at least 4 advanced criteria</p>	<p>Please indicate if your facility/ASP Program:</p> <p><input type="checkbox"/> Annually submits the facility-antibiogram to VDH* for inclusion in the Virginia State and Regional Cumulative Antibiogram</p> <p><input type="checkbox"/> Shares antimicrobial consumption data with VDH* (confer NHSN AU data rights or other mechanism)</p> <p><input type="checkbox"/> Shares best practices with others (e.g. submits abstract for SIGoVA Research Symposium or mentorship among other non-affiliated facilities). If yes, describe:</p>

*For more information, contact the VDH HAI/AR Program at hai@vdh.virginia.gov

Please email completed form along with the following supporting documents to hai@vdh.virginia.gov

Supporting Documents

- ❖ Statement of commitment from leadership for the Antimicrobial Stewardship Program
- ❖ Antimicrobial stewardship policy outlining purpose and at least two program policies and interventions to improve antibiotic use
- ❖ Agenda from most recent antimicrobial stewardship committee meeting

Abbreviations:

ASP – Antimicrobial Stewardship Program
 AU – Antimicrobial Use

ID – Infectious Diseases
 MAD-ID – Making a Difference in Infectious Diseases

NHSN – National Healthcare Safety Network
 SIDP – Society of Infectious Diseases Pharmacists

SIGoVA – Stewardship Interest Group of Virginia
 SHEA – Society for Healthcare Epidemiology of America

Adapted with permission from the Georgia State Antimicrobial Stewardship Honor Roll



Please check all of the activities that your facility's antimicrobial stewardship program engages in using the table below. Example forms can be found in the Antimicrobial Stewardship Honor Roll Program Details document.

	Advanced	Intermediate	Basic
Hospital Leadership Commitment	<p>Program has a senior executive that serves as a point of contact or "champion" to help ensure the program has resources and support to accomplish its mission.</p> <input type="checkbox"/> <p>Program leader(s) have regularly scheduled meetings with facility leadership and/or the hospital board to report and discuss stewardship activities, resources and outcomes.</p> <input type="checkbox"/>	<p>Facility leadership provides stewardship program leader(s) with resources (e.g, IT support, and training) to effectively operate the program.</p> <input type="checkbox"/> <p>Facility leadership ensures that antibiotic stewardship activities are integrated into other quality improvement and patient safety efforts, such as sepsis management and diagnostic stewardship.</p> <input type="checkbox"/>	<p>Facility leadership provides stewardship program leader(s) dedicated time to manage the program and conduct daily stewardship interventions.</p> <input type="checkbox"/>
Accountability & Pharmacy Expertise	<p>ASP physician lead and pharmacist lead have obtained antimicrobial stewardship training from a recognized professional organization (MAD-ID, SHEA, SIDP etc.) or have completed post-graduate education in infectious diseases.</p> <input type="checkbox"/>	<p>A physician supervised multidisciplinary ASP committee has been convened and access to ID clinician, pharmacist, infection preventionist, and practitioner has been established when available.</p> <input type="checkbox"/>	<p>ASP has designated physician and pharmacist leads.</p> <input type="checkbox"/>
Action	<p>Stewardship team conducts stewardship rounds (e.g., "handshake rounds")</p> <input type="checkbox"/> <p>Facility has a formal procedure for all prescribers to conduct daily reviews of antibiotic selection until a definitive diagnosis and treatment duration are established (i.e. time out).</p> <input type="checkbox"/> <p>Protocol for automatic stop orders for specified antibiotic prescriptions or indications.</p> <input type="checkbox"/>	<p>Facility-wide prospective audit and feedback is conducted.</p> <input type="checkbox"/> <p>Facility performs preauthorization for specific antibiotic agents.</p> <input type="checkbox"/> <p>Protocol requiring indications for all antimicrobial prescriptions.</p> <input type="checkbox"/>	<p>Facility has specific interventions to ensure optimal use of antibiotics for treating community-acquired pneumonia (e.g., treatment duration of 5 days).</p> <input type="checkbox"/> <p>Facility has specific interventions to ensure optimal use of antibiotics for treating urinary tract infections (e.g., avoiding antibiotic therapy for asymptomatic bacteria).</p> <input type="checkbox"/> <p>Facility has specific interventions in place to ensure optimal use of antibiotics in patients with sepsis.</p> <input type="checkbox"/>
Tracking	<p>Program tracks antibiotic use by submitting to the National Healthcare Safety Network (NHSN) Antimicrobial Use (AU) Option.</p> <input type="checkbox"/>	<p>Program monitors prospective audit and feedback interventions by tracking the types of interventions and acceptance of recommendations.</p> <input type="checkbox"/> <p>Program monitors preauthorization interventions by tracking which agents are being requested for which conditions.</p> <input type="checkbox"/>	<p>Antibiotic use is tracked on a monthly basis.</p> <input type="checkbox"/> <p>Adherence to facility-specific treatment recommendations have been evaluated for at least two infectious disease states in the past three years.</p> <input type="checkbox"/>
Reporting	<p>Monthly antibiotic use data is reported on a dashboard for individual units.</p> <input type="checkbox"/>	<p>Program reports adherence to treatment recommendations to prescribers (e.g., aggregate results such as medication use evaluations, etc).</p> <input type="checkbox"/>	<p>Local antibiogram disseminated to medical staff at least annually.</p> <input type="checkbox"/> <p>Antibiotic use data is shared with hospital staff through presentations, committees etc.</p> <input type="checkbox"/>
Education	<p>Education for all healthcare providers involved in antimicrobial ordering, dispensing, administration and monitoring occurs upon hire and recurs periodically thereafter; AND Patient and family education regarding antimicrobial use is integrated in discharge process for all patients leaving on antibiotics.</p> <input type="checkbox"/>	<p>Education for all healthcare providers involved in antimicrobial ordering, dispensing, administration and monitoring occurs upon hire and recurs periodically thereafter; AND Patient and family education regarding antimicrobial resistance and use is available for all patients admitted to the facility (i.e. informational posters).</p> <input type="checkbox"/>	<p>Education for all healthcare providers involved in antimicrobial ordering, dispensing, administration and monitoring occurs upon hire and recurs periodically thereafter; AND Patient and family education regarding antimicrobial use is provided as needed to patients.</p> <input type="checkbox"/>

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