**ASP Project 1: “Spotlight” on Antimicrobial Stewardship**

**Objective:** To solicit volunteer hospitals willing to share their antimicrobial stewardship program strategies and progress for posting on the California ASP Initiative website and serve as mentors to other hospitals in various stages of ASP implementation.

**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:
The CDPH HAI Program is seeking hospitals willing to evaluate their ASP activities using the 3-tier classification, and to share their progress via the California ASP Initiative webpage. Volunteer hospitals, individual physicians and pharmacists may offer to serve as mentors to hospitals, by offering guidance on ASP implementation or the successful implementation of specific ASP strategies. “Spotlight” hospitals may also be called upon to serve on educational panels or facilitate discussions with hospitals participating in an ASP Implementation Collaborative, set to begin in January 2014.

If interested in participating, please email _________ by November 30, 2013. We would like to develop and post the “Spotlight on ASP” by the end of December 2013. (Additional volunteer hospitals who wish to share their ASP progress will be accepted in the future.)