



Minnesota Antibiotic Stewardship Acute Care and Critical Access Honor Roll Application

This document provides an offline space where you can gather information prior to completing your online application for the Minnesota Antibiotic Stewardship (AS) Acute Care and Critical Access Honor Roll. Refer to this table to understand the recognition-level requirements for your application.

Application Requirements	Bronze Level (Commitment)	Silver Level (Action)	Gold Level (Collaboration)
Multidisciplinary AS Team	X	X	X
Letter of AS Commitment from Hospital Leadership	X	X	X
Copy of Hospital AS Policy	X	X	X
Provider Education at Least Annually	X	X	X
Antibiotic Use Tracking		X	X
Antibiotic Use Reporting		X	X
Hospital-Specific Clinical Guidelines		X	X
Use of Hospital-Specific Antibiogram		X	X
Submission of Annual Hospital Antibiogram to MDH for Compilation in State-level Antibiogram			X
Ongoing, Formal AS Collaboration (beyond your hospital)			X

Hospital Information

Are you applying to the Honor Roll for the first time, or are you renewing your commitment to antibiotic stewardship?

- First-time Applicant
- Renewing Commitment

For which Honor Roll level are you applying?

- Bronze
- Silver
- Gold

Hospital Name: _____

Is your hospital affiliated with a health system? Yes/No

Address: _____

Name of Person Filling out Application: _____

Applicant Job Title: _____

Applicant Email Address: _____

Applicant Phone Number: _____

Part One: Facility-wide commitment to antibiotic stewardship

This section is required of all Honor Roll facilities. Hospitals applying for Bronze Level (Commitment) recognition are required to meet the criteria outlined in this section. In addition, they must upload a copy of the hospital's AS policy and upload a letter of commitment from hospital leadership.

Hospitals applying for Silver Level or Gold Level recognition are required to meet the criteria outlined in this section and in Part Two and Part Three, which follow.

Structure of Your Antibiotic Stewardship Program (ASP)

1. Which of the following positions are represented on the hospital's ASP team *and/or* ASP advisory committee (by full-time, part-time, contract staff; onsite or tele-based)?

- Physician with infectious disease or antibiotic stewardship experience (required)
- Pharmacist (required)
- Infection preventionist (required)
- Microbiology laboratory staff (required of hospitals with onsite laboratories)
- Prescriber other than the AS physician
- Nursing staff
- Information technology staff
- Quality improvement staff
- Patient safety staff
- Hospital administration
- Other: _____

2. Names of ASP team leaders

- Name of physician leader: _____
- Does the physician leader have formal AS training? Yes/No
 - If yes, what type of training?
- Name of pharmacist leader: _____
- Does the pharmacist leader have formal AS training? Yes/No
 - If yes, what type of training?
 - PGY2 ID residency
 - MAD-ID certification course
 - SIDP certification course
 - BCIDP
 - CDC AS training?

- Are either of these roles fulfilled through means of tele-stewardship? Yes/No

Leadership Commitment Verification

1. Upload a letter of commitment from the hospital CEO/COO or other relevant executive.

- A new letter must be submitted for each year of Honor Roll application.
- The letter must include a description of how the hospital has established antibiotic stewardship as an organizational priority through support of its ASP, including provision of staffing, financial, and information technology resources.

2. Upload a copy of the hospital antibiotic stewardship policy.

Education Verification

Honor Roll recognition requires that antibiotic stewardship education or training is provided to health care providers. You must select one or more of the education activity types (i.e., didactic, pharmacy-driven, case-based) below to describe. Selection of more than one activity type is encouraged.

1. Didactic Education.

Provide information describing didactic education sessions targeted to providers and clinical caregivers. You will be able to enter information for up to three didactic education sessions that were held in the last year.

a. Education session 1

- Date of education session: _____
- Targeted staff: _____
- Description of education event or series: _____

b. Education session 2

- Date of education session: _____
- Targeted staff: _____
- Description of education event or series: _____

c. Education session 3

- Date of education session: _____
- Targeted staff: _____
- Description of education event or series: _____

2. Pharmacy-driven Education.

Select the pharmacy-driven approach(es) that involve education of prescribers used in your hospital. Prospective audit and feedback are required for hospitals applying for Silver or Gold Level recognition.

- Prospective audit with feedback (external review of antibiotic therapy by an expert in antibiotic use, accompanied by suggestions to optimize use, after the agent has been prescribed)
- Preauthorization
- Other pharmacy-driven approach
 - Description of approach: _____

3. Case-based Education

- Retrospective review of de-identified cases with providers to identify opportunities to improve antibiotic therapy
 - Method used to provide education (e.g., in person, email): _____
 - Who is involved in case review (e.g., providers, clinical caregivers): _____
 - Are outcomes of these interventions measured? Yes/No
- Other case-based approach
 - Description of approach: _____
 - Are outcomes of these interventions measured? Yes/No

Part Two: Antibiotic stewardship actions

Completion of this section is required of facilities applying for Silver and Gold Honor Roll levels. There are required and optional actions for Silver and Gold-level facilities. If not currently a part of your ASP, it is recommended that the optional activities be considered for your facility.

Hospitals looking to achieve Gold-level status must also complete Part Three.

Required Actions

1. **Antibiotic use tracking.** Tracking can be accomplished through multiple methodologies. Tell us about your approach here. You can tell us about optional reporting of antibiotic use to CDC in the optional actions section below.
 - a. Which metric(s) is used?
 - Days of therapy (DOT)
 - Defined daily dose (DDD)
 - Purchasing data
 - Other (describe below)
 - b. Which antibiotics are tracked? _____
 - c. Is tracking conducted facility-wide or only in some units or wards? _____
 - d. How does the ASP use antibiotic-use data to guide action or intervention? Briefly describe your approach to data analysis and use of data to inform strategies. _____
2. **Antibiotic use reporting.**
 - a. Who receives reports or can access a dashboard summarizing antibiotic use?
 - Pharmacy and therapeutics committee (required)
 - Hospital leadership (required)
 - Quality assurance and performance improvement (QAPI, required)
 - Prescribers
 - ASP advisory committee
 - Infection prevention team
 - Infectious disease team/department

b. How are reports delivered (e.g., directly during meetings, dashboard, email)? _____

3. Use of hospital-specific evidence-based treatment and prescribing guidelines.

- For which conditions do you have guidelines? _____
- Are outcomes of this intervention measured? Yes/No

4. Use of a hospital-specific antibiogram (required for hospitals without onsite laboratory and susceptibility testing).

- Does your hospital have an onsite laboratory with susceptibility testing? Yes/No
- Does your hospital use a hospital-specific antibiogram? Yes/No

5. Additional AS intervention(s). Information provided about your additional action(s) might be included in your hospital's summary on the Honor Roll webpage. This allows others to learn about the great work happening in Minnesota hospitals. _____

Optional Actions

Which of the following actions or strategies are in place at your hospital?

- Prospective audit with feedback (external review of antibiotic therapy by an expert in antibiotic use, accompanied by suggestions to optimize use, after the agent has been prescribed)
 - What conditions, drugs, or situations trigger prospective audit with feedback? _____
 - Method used to provide feedback (e.g., in person, email): _____
 - Are outcomes of this intervention measured? Yes/No
- Preauthorization
 - What antibiotic drugs require preauthorization? _____
 - Method used to for provider communication (e.g., in person, email): _____
 - Are outcomes of this intervention measured? Yes/No
- Reporting of antibiotic use to the CDC National Healthcare Safety Network (NHSN) Antimicrobial Use Option
- Reporting of antibiotic susceptibility testing data to the CDC NHSN Antimicrobial Resistance Option
- Indication required for all antibiotic orders
- Antibiotic formulary restrictions
- Guidelines for IV to oral conversion
- Guidelines to address inappropriate treatment of asymptomatic bacteriuria
- Patient/family/public education about antibiotic use.
- Tracking of *C. difficile*
- Tracking of antibiotic resistance patterns (e.g., ESBL, carbapenem resistance)

Part Three: Collaborative antibiotic stewardship endeavors

This section is required of all facilities applying for the Gold Honor Roll level. This level is meant to recognize hospitals who are looking beyond their facility to practice antibiotic stewardship.

Submission of your most recent hospital-specific annual antibiogram and description of collaborative activity are both required.

- 1. Submission of your most recent annual hospital antibiogram.** If you have not already submitted your antibiogram to MDH, you can let us know in the online Honor Roll application, and we will send you the link for the antibiogram submission form.
- 2. Describe how your hospital engages in ongoing, formal collaboration beyond your facility to advance antibiotic stewardship. Some examples of how this requirement can be met are:**
 - a. Formal mentorship of area hospitals, long-term care facilities, or clinics where expertise is shared in a structured, ongoing partnership.
 - b. Regional coordination of data, protocols, or best practices (e.g., sharing antibiotic use and resistance data with other hospitals in a benchmarking process) and using regularly scheduled meetings to facilitate information exchange.
 - c. Actively optimizing antibiotic stewardship during care transitions through regular meetings among facilities that share patients and development or improvement of protocols and communication practices.

Part Four: Optional collaboration opportunity

This applies to applicants for all Honor Roll levels. One goal of the Honor Roll program is to share ideas and to encourage facilities to take on new antibiotic stewardship activities. If you are willing to share your knowledge and experience with other facilities on an informal, as-needed basis, please check the box below. Your facility's willingness to share knowledge and experiences will be highlighted on the Honor Roll website.

- We are willing to share our Antibiotic Stewardship Program knowledge and experiences with other facilities!

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To obtain this information in a different format, call: 651-201-5414.