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| **Antibiotic Stewardship Program (ASP) Charter and Strategic Plan** |
| **FACILITY NAME** |  |
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| **PROGRAM START DATE** |   | **PROPOSED DATE FOR PROGRAM****EVALUATION AND CHARTER UPDATE** |   |
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| **BACKGROUND AND PURPOSE** | Unnecessary and inappropriate antibiotic use is harmful to patients and populations by contributing to antibiotic resistance, allergic reactions, *Clostridium difficile* infections and avoidable medical care. Increasing antibiotic resistance combined with the lack of new antibiotic agents in the drug development pipeline threaten our ability to practice modern medicine. Antibiotic stewardship—a set of commitments and activities to optimize antibiotic use—is necessary in order to achieve best outcomes for patients, and prolong the usefulness of these lifesaving medications. Therefore, **our facility commits to implementing a stewardship program** to improve appropriate and judicious use of antibiotics. This charter provides an initial framework for our strategic approach to this aim and establishes accountability for the ASP’s activities and outcomes.  |
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| **ASP AIM**  | Our ASP aims to achieve safe, effective, and efficient patient care, while reducing adverse effects of inappropriate antibiotic use—including resistant infections, *Clostridium difficile* infections, allergic reactions, and higher healthcare costs—and improving satisfaction of our key stakeholders. The program expects the following results:1.2.3.4.  |
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| **GUIDING PRINCIPLES AND STRATEGIES** | The ASP’s strategic, guiding principles for achieving our aim include:1. Promoting a culture of optimal antibiotic use through dedicated leadership and positive culture change
2. Ensuring timely and appropriate *initiation*, *administration,* and *de-escalation* of antibiotics
3. Monitoring data for ASP effectiveness in a culture of transparency, reporting, and open communication
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| **ASP ACTIVITIES** | To achieve the ASP aim, the following specific actions, activities, or interventions will be implemented. Additional interventions may be implemented, in time, as quantitative and qualitative data support such changes.  | **IMPLEMENTATION TARGET DATE** |
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| **ASP TEAM MEMBERS** | **NAME** | **KEY RESPONSIBILITIES** | **DEDICATED ASP HOURS PER WEEK** |
| **ASP Lead** |   |  |   |
| **Nurse Leader** |   |  |   |
| **Prescriber** |   |  |   |
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| **OVERSIGHT COMMITTEE** | **REPORTING FREQUENCY** | **ASP EXECUTIVE SPONSOR** |
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| **ASP Interventions** | **DESCRIPTION** | **TARGET DATE** |
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| **COMMUNICATION PLAN** | **FREQUENCY** | **RESPONSIBLE LEAD/TEAM MEMBER** | **TOPIC** |
| ASP Team Meetings |   |  | Operations and daily management issues |
| Oversight Committee |   |  | Approvals, progress on goals |
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| **METRICS/MEASURES** | **FREQUENCY** | **GOALS** |
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| **APPROVAL** | **NAME** | **TITLE/ROLE/FUNCTION** | **DATE** | **SIGNATURE** |
| **Author** |  |  |  |  |
| **Approved** |   | Facility Executive |   |   |