Welcome

- Thank you for spending your valuable time with us today.

- This webinar will be recorded for your convenience.

- A copy of today’s presentation and the webinar recording will be available on our website. A link to these resources will be emailed to subscribers via our MT ABS Collaborative blog.

- Please mute your phone during the presentation unless you are asking a question. Computer users can use the chat box throughout the presentation.
Webinar Presenters/Support

- Patty Kosednar, Health IT Consultant;  
  Mountain-Pacific – Montana

- Casey Driscoll, Hospital Improvement Innovation Network Project Director  
  Montana Hospital Association – Montana

- Amber Rogers, RN – Practice Transformation Lead  
  Mountain-Pacific QIN/QIO – Montana

Acronyms

- ABS – Antimicrobial Stewardship  
- APIC – Association for Professionals in Infection Control  
- ASP – Antimicrobial Stewardship Program  
- CAH – Critical Access Hospital  
- CDC – Center for Disease Control  
- CMS – Centers for Medicare and Medicaid  
- DOT – Days of therapy  
- DPHHS – Department of Public Health and Human Services  
- EHR – Electronic Health Record (software)  
- FLEX – Medicare Rural Hospital Flexibility Program  
- HAI – Hospital Acquired Infections  
- HIIN – Hospital Innovation Improvement Network  
- ICAR – Infection Control Assessment Tools  
- MHA – Montana Hospital Association  
- MP – Mountain-Pacific Quality Health  
- MT – Montana  
- QIO – Quality Improvement Organization  
- QPP – Quality Payment Program (CMS)  
- PPS – Prospective Payment Systems
MT ABS Collaborative Members

- Montana Hospital Association (MHA)
  - Flex Program
  - HIIN Program
  - Strive Program
- Mountain Pacific (MP)
  - Quality Improvement Organization (QIO) – outpatient focus
  - ICAR Program
- MT Department of Public Health and Human Services (DPHHS)
  - Communicable Disease Epidemiology Program
- Montana Communicable Disease Epidemiology/Skaggs School of Pharmacy (SSOP)
  - DPHHS contract

MT ABS Collaborative

- Goal: Collaborate, assist facilities and offer resources, skills and tools available through the multiple programs into a combined state wide ASP implementation plan for use by MT inpatient and outpatient facilities
  - Outcomes:
    - Increase effectiveness of technical assistance and educational services provided by programs, reduce redundancy between programs and improve value add program ASP services to inpatient and outpatient facilities in MT
    - Increase % of performance on CDC ASP elements for inpatient and outpatient facilities in MT
    - Optimize and reduce inappropriate antibiotic usage and infection rates in MT
Webinar Objectives

- Review previously provided information and homework assignments from the Jumpstart Stewardship Workbook
- Discuss importance of identifying possible barriers to ASP implementation
- Review tools to help proactively define strategies to mitigate barriers
- Discuss creating a timeline for implementation of your ASP and review examples
- Provide instructions for next homework assignment

Be Prepared To:

- Share your approaches
- Share what barriers you might have run into
- Ask questions and share info with your colleagues
- Please participate😊
CDC ASP Core Elements

- Inpatient
  - Leadership Commitment
  - Accountability
  - Drug Expertise
  - Action
  - Tracking
  - Reporting
  - Education

- Outpatient
  - Action
  - Commitment
  - Education/Expertise
  - Tracking and Reporting

Poll Question

- Is this the first Jumpstart Stewardship webinar you have attended??
Jumpstart Stewardship Review

- We are using the [Jumpstart Stewardship Implementation Guide](#) as a tool
- Created for small rural facilities (focuses on hospitals, but much of the information and tools can easily be used for outpatient/long term care as well)

Jumpstart Stewardship Review, cont

- MHA has taken the templates in the workbook and created a working MS Excel copy for you to use
- This MS Excel workbook will be used for all “homework” assignments and can be used for ASP project and audit documentation
- This workbook takes you through the process of setting up an ASP;
  - identifying your current state thru developing an ASP implementation plan
- [Link to Jumpstart Stewardship Workbook](#)
Jumpstart Stewardship Roadmap

Assess Your Facility's Current State → Identify Key Stakeholders for Success → Build Your Team and Resources

Plan Mitigation Strategies for Potential Barriers → Evaluate Data Sources for Key Metrics → Select An Intervention

Create Timeline for Implementation → Calculate the Business Case → Write Your Charter and Strategic Plan

Jump In! Start Your Stewardship Activities

Jumpstart Stewardship – Previous Homework

- Assess current State
- ID key stakeholders and team
- Select an intervention
- Identify data sources and key metrics
  - Discussed data sources and performance measures for both your ASP and for interventions
  - Examples follow

- Check out the MT ABS Blog for more details about previous homework
### Measuring Effectiveness: Homework example 1

<table>
<thead>
<tr>
<th>Intervention/ Evaluation</th>
<th>Program or Intervention Evaluation Measure</th>
<th>Metric/ Indicator (of Outcome, Outcome or Outcome)</th>
<th>Numerator Data Source</th>
<th>Denominator Description</th>
<th>Denominator Data Source</th>
<th>Notes</th>
<th>Time Period</th>
<th>Reported To</th>
<th>Frequency</th>
<th>Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antimicrobial usage, Days of Therapy</td>
<td>Program Outcome Data</td>
<td>Denominator data</td>
<td>Days of antimicrobial therapy for enrollees in the intervention group</td>
<td>EHR Custom Report – IT</td>
<td>EHR Custom Report – IT</td>
<td>EHR Custom Report – IT</td>
<td>Rate</td>
<td>Calculation: numerator / denominator (per 1,000)</td>
<td>Letter time period of data used</td>
<td>Letter time period of data used</td>
</tr>
<tr>
<td>Volume of Antimicrobial Usage</td>
<td>Program Outcome Data</td>
<td>Denominator data</td>
<td>Total antimicrobial usage based on the denominator: quantity of antimicrobials ordered to date</td>
<td>Pharmacy report – Provider</td>
<td>Pharmacy report – Provider</td>
<td>Pharmacy report – Provider</td>
<td>Rate</td>
<td>Calculation: numerator / denominator</td>
<td>Letter time period of data used</td>
<td>Letter time period of data used</td>
</tr>
<tr>
<td>Surgical Site Infection Rate</td>
<td>Program Outcome Data</td>
<td>Denominator data</td>
<td>Total number of observed hospital infections of the denominator: identified events among all hospitalizations in the facility, including all in-patient and ambulatory care campuses</td>
<td>Manual abstraction – IP</td>
<td>Manual abstraction – IP</td>
<td>Manual abstraction – IP</td>
<td>Rate</td>
<td>Calculation: numerator / denominator (per 1,000)</td>
<td>Letter time period of data used</td>
<td>Letter time period of data used</td>
</tr>
</tbody>
</table>

### Measuring Effectiveness: Homework example 2

<table>
<thead>
<tr>
<th>Intervention/ Evaluation</th>
<th>Program or Intervention Evaluation Measure</th>
<th>Metric/ Indicator (of Outcome, Outcome or Outcome)</th>
<th>Numerator Data Source</th>
<th>Denominator Description</th>
<th>Denominator Data Source</th>
<th>Notes</th>
<th>Time Period</th>
<th>Reported To</th>
<th>Frequency</th>
<th>Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>EHR documentation of antibiotic prescription</td>
<td>Intervention Process Data</td>
<td>Numerator data</td>
<td>Of antibiotic orders entered in EHR with dose, duration and indication documented</td>
<td>EHR Custom Report – IT</td>
<td>EHR Custom Report – IT</td>
<td>EHR Custom Report – IT</td>
<td>Rate</td>
<td>Calculation: numerator / denominator</td>
<td>Letter time period of data used</td>
<td>Letter time period of data used</td>
</tr>
<tr>
<td>Time-to-antibiotic prescription change</td>
<td>Intervention Process Data</td>
<td>Numerator data</td>
<td>Of antibiotic orders entered after cultures were ordered or changed</td>
<td>EHR Custom Report – IT</td>
<td>EHR Custom Report – IT</td>
<td>EHR Custom Report – IT</td>
<td>Rate</td>
<td>Calculation: numerator / denominator</td>
<td>Letter time period of data used</td>
<td>Letter time period of data used</td>
</tr>
<tr>
<td>Randomized prescription of antibiotic therapy</td>
<td>Intervention Process Data</td>
<td>Numerator data</td>
<td>Of patients who received a randomized prescription for an antimicrobial agent</td>
<td>EHR Custom Report – IT</td>
<td>EHR Custom Report – IT</td>
<td>EHR Custom Report – IT</td>
<td>Rate</td>
<td>Calculation: numerator / denominator</td>
<td>Letter time period of data used</td>
<td>Letter time period of data used</td>
</tr>
</tbody>
</table>
Poll Question 2

- Do you need help with any of the following homework assignments?
  - Assess current state
  - ID key stakeholders and team
  - Select an intervention
  - Identify data sources and key metrics
  - All of the above

You are now up to date

- Again, the Jumpstart Stewardship Workbook walks you through the process of developing a plan for your ASP implementation
- You can choose to go through the Workbook and develop a full ASP plan and then implement it
- Or you can choose to implement the core elements as you go through the Workbook
- Either way is fine, do what works best for your team
Today’s Topic 1: Identifying and Mitigating Barriers to Success

- **Why is it important?**
  - Identifying barriers and proactively building mitigation strategies help increase your success/the performance of your ASP

- **Tasks**
  - Perform SWOT analysis
  - Identify mitigation strategies for most likely or most serious barriers

- **Tools:**
  - SWOT analysis template (strengths/weaknesses/opportunities/threats)
  - Barriers and mitigation planning template

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SWOT Analysis

- Performing the SWOT analysis will help identify the potential barriers your organization may face and tools you can use to implement your ASP
  - Internal to your organization:
    - Strengths – What do we do well?
    - Weaknesses – Where can we improve?
  - External to your organization
    - Opportunities – What is occurring that may create opportunities?
    - Threats – What is occurring that may create threats?

- SWOT analysis helps you focus on your strengths, minimize threats, and take the greatest possible advantage of opportunities available to you
**Identify the 3 or 4 most likely and/or serious barriers (from your threats/weakness section on SWOT)**

**Using the strengths and opportunities you listed on the SWOT, list potential strategies to proactively mitigate the barriers you identified**

**You may not “fix” everything – being aware of potential issues is the first step in avoiding them**
**Barrier Mitigation Plan – Example**

**Barriers and Mitigation Plan**

Using the SWOT analysis on the previous page, list below three or four of the most likely and/or serious barriers/threats/weaknesses identified. Using your identified strengths and opportunities in the SWOT, and other strategies, list potential ways you can proactively mitigate the barriers to improve your ASP’s success.

<table>
<thead>
<tr>
<th>Potential Barrier to Success</th>
<th>Mitigation Strategy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Only have part time pharmacist or limited access to pharmacist expertise</td>
<td>1. Identify interventions that do not require direct pharmacist participation (nurses implement “antibiotic time outs”, order/obtain cultures before all antibiotic orders, providing patient education for each antibiotic order, etc). 2. Offer access to training courses on antibiotic stewardship to help develop local expertise. 3. Seek additional expertise via multi-hospital improvement collaboratives; seek help from HiN, Strive, QIO, etc. 4. Long term – look into possible options for telepharmacy.</td>
</tr>
<tr>
<td>Physicians not engaged</td>
<td>1. Provide overall ASP education to all physicians (and staff) as required by leadership. 2. Have physician ASP leader meet individually with reluctant physicians to identify concerns, issues and work to address needs. 3. Provide data and proven clinical guidelines for all new interventions prior to implementation. 4. Include physicians in review of all interventions/actions prior to implementation, and get their approval. Listen to their concerns and try to identify ways to address issues/concerns. Include physicians in process via monthly training, new physician orientation (access HiN, STRIVE, QIO, etc for education materials).</td>
</tr>
</tbody>
</table>

**Polling Question 3**

- What do you feel are the biggest barriers for your ASP implementation?
  - Leadership commitment (culture, accountability, etc)
  - Physician engagement
  - Limited pharmacy resources
  - Limited time/staff resources to devote to ASP
  - Clinical knowledge/expertise on treating infections/antibiotic usage
  - Getting data out of EHR or advanced use of EHR
  - Finding resources to support ASP implementation (education, clinical guidelines, etc)
  - other
Today’s Topic 2: Create Timeline for ASP Implementation

- Why is it important?
  - Setting realistic goals and committing to a timeline for specific tasks, events and/or milestones are ways to set expectations, communicate and evaluate your ASP progress.

- Tasks
  - Create a timeline for your overall ASP
  - Create a timeline for individual interventions

- Tools:
  - MS Excel ASP timeline example
  - Jumpstart Stewardship intervention template

ASP Timeline

- Use ASP “gap analysis” – from information entered on “core elements” tab in Jumpstart Stewardship workbook to identify tasks needed for your facility
- Create a time line with list of tasks
  - Take top level tasks and break down into sub tasks
  - Put tasks in time/date order
  - Assign tasks to team member(s) and choose a due date
  - Include all tasks needed for the core elements you are not yet meeting, for the QIO and DPHHS deliverables and to meet internal requirements (COP), etc.
- Use MS Excel to document plan, or access the following example/template from our blog
Have you chosen at least 1 intervention to implement as part of your ASP?

- Yes have chosen at least 1 intervention
- Yes have chosen and are working on implementing at least 1 intervention
- Yes have chosen and implemented at least 1 intervention
- No have not yet chosen an intervention
- Would you like help from us with choosing and implementing an action?
Choose intervention to start with – may use information entered on “specific intervention” tab in Jumpstart Stewardship workbook or choose

Complete “timeline” tab on Jumpstart Stewardship workbook
Intervention Timeline – Example 2

KISS

- Keep it simple, seriously
Jumpstart Stewardship Homework Assignment

Previous Homework

- Download the Jumpstart Stewardship Workbook in MS Excel format (this is your working toolkit)
- Complete previously assigned homework (tabs on bottom of Excel Workbook)
  - Current State
  - Core Elements
  - Infectious Clinical Syndrome
  - Antibiotic Use Profile
  - Stakeholder ID
  - Stakeholder 2
  - Stakeholder 3
  - Team ID
  - Committee
  - Resource Needs
  - Intervention Feasibility
  - Specific Interventions
  - Data Sources
Today’s Homework

- Jumpstart Stewardship Workbook – Complete tabs:
  - SWOT
  - Barriers & Mitigation
  - Timeline for intervention(s)

- ASP timeline – will provide template via blog

Next Education Events

- 7/19/17 – 1:00 (Mountain) Outpatient Antibiotic Use and Stewardship – Link to webinar info

- 9/20/17 – 1:30 – 3:00– Montana Hospital Association – Fall Convention (In Billings)
  - MT Antimicrobial Stewardship Work Session
    - (registration for this event will be available in August – we will notify you via the MT ABS Blog)

Please add into the chat box any additional education topics you recommend
New ASP Resource

- CDC posted new resource called the [Antibiotic Stewardship Core Elements at Small and Critical Access Hospitals](#)
  - Has implementation suggestions for all core element requirements
  - Has recommendations for individual interventions and guidelines for:
    - Community acquired pneumonia
    - Urinary tract infections
    - Skin and soft tissue infections

ABS Resources

- [ABS Collaborative Resources Webpage](#)
  - All upcoming webinars and past webinar information, templates, links, etc

- [ABS Blog – Subscribe here](#)

- [Outpatient ABS Page (QIO)](#)
  - Tools and templates for Outpatient facilities

- [Jumpstart Stewardship Workbook (Excel)](#)
ABS Resources, cont.

- **Inpatient facility:** Strategies to assess antibiotic use and identify possible strategies for improvement in hospitals (CDC)
- **Outpatient:** treatment/intervention/action recommendations for adults and pediatric patients (CDC)
- **Inpatient facility:** patient education material/flyer (CDC)
- **Outpatient facility:** patient education materials/fliers (CDC) (click on “materials and references” in left hand navigation and then “print materials”)

ABS Blog Subscribe Today

We will use this Montana ABS blog as our “one voice” to standardize and streamline communication and education/outreach to all our partnering facilities. Take a minute to subscribe to this blog and receive the latest Montana ABS blogs by email. Also see the MT ABS Resources page for more links to upcoming webinars, tools and resources.

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- May 30, 2017: Catch Up on Your Jump Start Homework
- May 25, 2017: Montana ABS Webinar Materials
- May 10, 2017: Outpatient Antibiotic Stewardship Core Elements
- April 30, 2017: Inpatient Antibiotic Stewardship Core Elements
- April 20, 2017: Introducing the Jump Start Stewardship Toolkit
- April 8, 2017: Welcome to the Montana Antimicrobial Stewardship Collaborative

Link to Subscribe
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- Outpatient facilities in AK, HI or WY – contact Lori Chikoyak, Mountain Pacific
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Q & A
THANK YOU