

ANTIMICROBIAL STEWARDSHIP PROGRAMS

1. SUMMARY OF MAJOR CHANGES: This Veterans Health Administration (VHA) directive updates the ongoing development and expansion of Antimicrobial Stewardship Programs (ASPs) at all Department of Veterans Affairs (VA) medical facilities. Major changes are as follows:

a. Paragraph 2: Establishes roles for Veterans Integrated Services Network (VISN) Antimicrobial Stewardship Provider and Pharmacy Leads.

b. Paragraph 2.l.: Establishes VISN ASP Collaboratives.

c. Paragraph 5.d.: Requires that VA medical facilities that have transitioned to VA's updated electronic health record report antimicrobial resistance data to the Center for Disease Control and Prevention's National Healthcare Safety Network (NHSN) Antimicrobial Resistance (AR).

d. Appendix A: Recommends allocated full-time equivalent employee (FTEE) for VA medical facility Antimicrobial Stewardship Provider and Pharmacy champions.

2. RELATED ISSUES: None.

3. POLICY OWNER: The National Infectious Diseases Service (NIDS) (11SPEC13), within Specialty Care Program Office (11SPEC), Office of the Assistant Under Secretary for Health for Clinical Services (11) is responsible for the contents of this directive. Questions may be referred to the National Program Executive Director, NIDS at (513) 246-0270. Questions regarding the pharmacy aspects of this directive may be referred to the Pharmacy Benefits Management Services (12PBM), Office of Patient Care Services at 708-786-7862.

4. RESCISSIONS: VHA Directive 1031, Antimicrobial Stewardship Programs (ASP), dated January 30, 2019, is rescinded.

5. RECERTIFICATION: This VHA directive is scheduled for recertification on or before the last working day of September 2028. This VHA directive will continue to serve as national VHA policy until it is recertified or rescinded.

6. IMPLEMENTATION SCHEDULE: This directive is effective upon publication.

September 22, 2023

VHA DIRECTIVE 1031

**BY DIRECTION OF THE OFFICE OF THE
UNDER SECRETARY FOR HEALTH:**

/s/ Erica Scavella, M.D., FACP, FACHE
Assistant Under Secretary for Health
for Clinical Services/CMO

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NOTE: *All references herein to VA and VHA documents incorporate by reference subsequent VA and VHA documents on the same or similar subject matter.*

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STAFFING FOR DEPARTMENT OF VETERANS AFFAIRS ANTIMICROIBIAL
STEWARDSHIP PROGRAMSA-1

ANTIMICROBIAL STEWARDSHIP PROGRAMS

1. POLICY

It is Veterans Health Administration (VHA) policy that every Veterans Integrated Services Network (VISN) establishes a VISN Antimicrobial Stewardship Collaborative and that every Department of Veterans Affairs (VA) medical facility, to include inpatient, outpatient and long-term care facilities, implements and maintains a Facility Antimicrobial Stewardship Program (ASP). **AUTHORITY:** 38 U.S.C. § 7301(b).

2. RESPONSIBILITIES

a. **Under Secretary for Health.** The Under Secretary for Health is responsible for ensuring overall compliance with this directive.

b. **Assistant Under Secretary for Health for Patient Care Services/Chief Nursing Officer.** The Assistant Under Secretary for Health for Patient Care Services/Chief Nursing Officer is responsible for ensuring the support and advancement of ASPs across VHA, including the ASTF with the ASPCOCT to assist VA medical facilities with ASP implementation.

c. **Assistant Under Secretary for Health for Clinical Services/Chief Medical Officer.** The Assistant Under Secretary for Health for Clinical Services/Chief Medical Officer is responsible for maintaining the Antimicrobial Stewardship Task Force (ASTF) by charter, including the ASTF's Antimicrobial Stewardship Program Central Office Core Team (ASPCOCT), to assist VA medical facilities with ASP implementation.

d. **Assistant Under Secretary for Health for Operations.** The Assistant Under Secretary for Health for Operations is responsible for:

(1) Communicating the contents of this directive to each of the VISNs.

(2) Assisting VISN Directors to resolve implementation and compliance challenges in all VA medical facilities within that VISN.

(3) Providing oversight of VISNs to ensure compliance with this directive and its effectiveness.

e. **Executive Director of Analytics and Performance Integration.** The Executive Director of Analytics and Performance Integration is responsible for:

(1) Providing and optimizing electronic resources and databases to improve, modify or support national stewardship strategies and advancement, including dashboards for inpatient and outpatient antimicrobial use which have been endorsed by the ASTF.

(2) Providing information technology assistance to the ASPCOCT.

(3) Ensuring dedicated time for data management and analysis including, but not limited to, support of National Health Safety Network (NHSN) Antibiotic Use (AU) and Antibiotic Resistance (AR) Option reporting.

(4) Sharing awareness and requesting advice from the Human Factors Engineering division when there are challenges or identified issues with system performance.

f. **National Program Executive Director, National Infectious Diseases Service.** The National Program Executive Director, National Infectious Diseases Service (NIDS) is responsible for:

(1) Providing national oversight for the implementation and advancement of ASPs across VHA, including the ASTF with the ASPCOCT to assist VA medical facilities with ASP intervention implementation.

(2) Co-chairing the ASTF, as the infectious diseases provider subject matter expert, with the Executive Director, Pharmacy Benefits Management Services (PBM).

(3) Providing infectious diseases physician expertise for the ASPCOCT.

g. **Executive Director, Pharmacy Benefits Management Services.** The Executive Director, PBM is responsible for:

(1) Co-chairing the ASTF, as the clinical pharmacy subject matter expert, with the Executive Director, NIDS.

(2) Providing clinical pharmacy expertise in the area of infectious diseases, pharmacotherapy and practice integration for the ASPCOCT.

h. **Antimicrobial Stewardship Program Central Office Core Team Lead.** The ASPCOCT consists of, but is not limited to, infectious disease providers, infectious diseases clinical pharmacist practitioners and data management specialists. The ASPCOCT Lead is responsible for:

(1) Overseeing the ASTF to support generation of stewardship initiatives and supporting guidance documents.

(2) Serving as an expert group lead for ASP evaluation and advancement.

(3) Providing leadership, education and consultative support to VA medical facility ASPs.

(4) Collecting and analyzing information provided by facility ASPs through periodic national assessments and recommending actions based on identified needs.

(5) Analyzing stewardship outcomes measures and other data provided by electronic resources and databases and recommending actions based on identified needs.

(6) Collaborating with researchers to advance knowledge of antibiotic use and stewardship practices within VA to support ASTF strategic functions and advancement of ASPs.

i. **Antimicrobial Stewardship Taskforce Co-Chairs.** The ASTF Co-Chairs (as designated by NIDS and PBM) are responsible for:

(1) Summarizing and cataloging ongoing stewardship activities and current performance status

(2) Identifying new opportunities and improvement priorities for antimicrobial stewardship across VHA.

(3) Developing and supporting interventions to optimize prescribing based on evidence-based guidance.

(4) Developing and maintaining a coordinated plan to leverage clinical information tools that support antimicrobial stewardship.

(5) Defining key leadership actions in response to specific needs identified.

j. **Veterans Integrated Service Network Director.** The VISN Director is responsible for:

(1) Ensuring that all VA medical facilities in the VISN comply with this directive.

(2) Supporting the advancement of ASPs across the VISN.

k. **Veterans Integrated Service Network Chief Medical Officer.** The VISN Chief Medical Officer (CMO) is responsible for:

(1) Collaborating with the VISN Pharmacy Executive to:

(a) Ensure all VA medical facilities within the VISN have access to antimicrobial stewardship provider expertise. **NOTE:** *If a facility within the VISN does not have infectious diseases consultation services or subject matter experts in antimicrobial stewardship, inter-facility consultation or tele-consultation can be considered in addition to other means of securing this resource.*

(b) Ensure development of robust VISN Antimicrobial Stewardship Collaboratives to include provider stewardship champions from all facilities within the VISN coordinated by the VISN Antimicrobial Stewardship Provider Lead.

l. **Veterans Integrated Service Network Pharmacy Executive.** The VISN Pharmacy Executive (VPE) is responsible for:

(1) Collaborating with the VISN CMO and VISN Chief Nursing Officer to:

(a) Ensure all VA medical facilities within the VISN have access to antimicrobial stewardship clinical pharmacist practitioner expertise. **NOTE:** *If a facility within the VISN does not have antimicrobial stewardship clinical pharmacist practitioner subject matter experts, inter-facility consultation or tele-consultation can be considered in addition to other means of securing this resource.*

(b) Ensure development of robust VISN Antimicrobial Stewardship Collaboratives to include pharmacy stewardship champions from all facilities within the VISN.

(c) Support development of a VISN stewardship pharmacy lead position with dedicated time for VISN-level stewardship activities. **NOTE:** *Information regarding VISN Antimicrobial Stewardship Collaboratives is available the VHA ASTF SharePoint.*

m. **Veterans Integrated Service Network Antimicrobial Stewardship Provider Lead.** The VISN Antimicrobial Stewardship Provider Lead, in coordination with the VISN Antimicrobial Stewardship Pharmacy Lead, is responsible for:

(1) Serving as the co-leader with the VISN Antimicrobial Stewardship Pharmacy Lead to provide infectious diseases subject matter expertise to the VISN Antimicrobial Stewardship Collaborative. Infectious diseases subject matter expertise can be characterized by formal ID training, years of experience and/or antimicrobial stewardship certification programs. Continuing antimicrobial stewardship education can be obtained through the ASTF monthly antimicrobial stewardship webinars or outside educational programming.

(2) Facilitating access to resources for facility Antimicrobial Stewardship Provider Champions to ensure robust development of ASPs and compliance with antimicrobial stewardship regulatory requirements for all VA medical facilities within the VISN.

(3) Ensuring communication between all stakeholders, to include but not limited to, the ASTF, VISN leadership and facilities' stewardship provider champions regarding issues pertinent to antimicrobial stewardship.

(4) Collaborating with the VISN Antimicrobial Stewardship Pharmacy Lead to:

(a) Coordinate VISN-wide ASP programs and initiatives adopted by the VISN Antimicrobial Stewardship Collaborative.

(b) Establish a VISN-level consensus on antimicrobial stewardship priorities and goals in collaboration with the VISN Antimicrobial Stewardship Pharmacy Lead

(c) Enhance communication and collaboration among all VA medical facility ASP provider champions across the VISN.

n. **Veterans Integrated Services Network Antimicrobial Stewardship Pharmacy Lead.** The VISN Antimicrobial Stewardship Pharmacy Lead, in coordination with the VISN Antimicrobial Stewardship Provider Lead, is responsible for:

(1) Serving as the co-leader with the VISN Antimicrobial Stewardship Provider Lead to provide clinical pharmacy antimicrobial stewardship subject matter expertise to the VISN Antimicrobial Stewardship Collaborative. Clinical pharmacy antimicrobial stewardship subject matter expertise can be characterized by formal ID training, years of experience or antimicrobial stewardship certification programs.

(2) Facilitating access to resources for facility antimicrobial stewardship pharmacy champions to ensure robust development of ASPs and compliance with antimicrobial stewardship regulatory requirements for all VA medical facilities within the VISN.

(3) Ensuring communication between all stakeholders, to include but not limited to, the ASTF, VISN leadership and facilities' stewardship pharmacy champions regarding issues pertinent to antimicrobial stewardship.

(4) Collaborating with the VISN Antimicrobial Stewardship Provider Lead to:

(a) Coordinate VISN-wide ASP programs and initiatives adopted by the VISN Antimicrobial Stewardship Collaborative.

(b) Establish a VISN-level consensus on antimicrobial stewardship priorities and goals in conjunction with the VISN Antimicrobial Stewardship Provider Lead.

(c) Enhance communication and collaboration among all medical facility ASP pharmacy champions across the VISN.

o. **VA Medical Facility Director.** The VA medical facility Director is responsible for:

(1) Ensuring overall VA medical facility compliance with this directive and appropriate corrective action is taken if non-compliance is identified.

(2) Providing leadership support and oversight for the multidisciplinary ASP program at the facility level.

(3) Ensuring that adequate staffing with appropriate allocated FTEE (as described in Appendix A) and resources are allotted for ASP activities with clinical pharmacy, infectious diseases, infection prevention and control, nursing, program administration and information technology support. For an ASP to be successful, active leadership and ongoing maintenance are required. **NOTE:** *Allocated FTEE must meet or exceed the standards set by regulatory oversight agencies. The VISN Specialty Care Integrated Clinical Community of infectious disease clinicians in coordination with clinical pharmacists, can serve as a resource to guide this effort.*

(4) Sustaining a facility ASP with a written local implementation plan (or other local authoritative document) defining stewardship initiatives based on selected focus areas specific to the VA medical facility and the resources available. **NOTE:** *An ASP written implementation template is available on the VHA ASTF SharePoint at: <https://dva.gov.sharepoint.com/sites/VHAPBM/ASTF>. This is an internal VA website that is not available to the public.*

(5) Ensuring the performance of an annual evaluation of the VA medical facility's specific ASP process and clinical outcome measures to document program successes and determine new areas in which to focus stewardship efforts. **NOTE:** *An ASP annual report template is available on the VHA ASTF SharePoint at: <https://dvagov.sharepoint.com/sites/VHAPBM/ASTF>. This is an internal VA website that is not available to the public.*

(6) Ensuring that the ASP's evaluation is reported to the appropriate VA medical facility committees. This includes, but is not limited to, the Pharmacy and Therapeutics Committee; Infection Control Committee (ICC); Medical Executive Committee, or equivalent; and other appropriate staff.

(7) Ensuring the VA medical facility takes action on improvement activities identified by the ASP.

(8) Ensuring that the VA medical facility is enrolled in the NHSN AU Option for the VA medical facility ASP to monitor inpatient antimicrobial use if the VA medical facility has 30 or more acute care beds. **NOTE:** *Facilities with less than 30 acute care beds are not required to report to the NHSN AU Option but are strongly encouraged to consider enrollment.*

(9) Ensuring that, if the VA medical facility has transitioned to VA's modernized electronic health record, it is reporting antimicrobial resistance to the NHSN AR Option. **NOTE:** *NHSN AU and AR Option data is transferred nationally by the ASPCOCT data management team under the authority of an established memorandum of understanding with an explicit data use agreement between VA and the Centers for Disease Control and Prevention (CDC) and not by facility level personnel.*

(10) Ensuring that the ASP has all the necessary personnel and resources to be in compliance with current accrediting body standards such as The Joint Commission's Antimicrobial Stewardship Standards available at: <https://www.jointcommission.org/resources/patient-safety-topics/infection-prevention-and-control/antibiotic-stewardship/> and CMS Guidance to Surveyors for Antimicrobial Stewardship in Long term Care Facilities. Available at: <https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/downloads/appendix-pp-state-operations-manual.pdf>.

p. **VA Medical Facility Chief of Staff.** The VA medical facility Chief of Staff, in facilities where the provider or pharmacy service lines report to the Chief of Staff, is responsible for:

(1) Ensuring that a qualified clinical provider (physician or non-physician provider where applicable) with allocated FTEE (as described in Appendix A) is identified and appointed as a facility Antimicrobial Stewardship Provider Champion to be actively involved in defined components of the ASP.

(2) Ensuring that accurate and updated contact information for the facility ASP Provider Champion is posted on the ASP Pharmacist and ASP Provider Champions: PBM Directory available on the VHA ASTF SharePoint site.

(3) Ensuring that the facility ASP Provider Champion is qualified through education, training or experience in the knowledge and skills needed by facility ASP Champions to develop and co-lead a successful program with the facility ASP Pharmacy Champion. Information on the skills and knowledge needed for ASP Champions is available on the VHA ASTF SharePoint.

(4) Supporting ongoing systems improvement and clinical research projects recommended by the facility ASP Provider Champion based on improvement opportunities identified by the ASP.

q. **VA Medical Facility Associate Director for Patient Care Services**: The VA medical facility Associate Director for Patient Care Services, in facilities where the provider or pharmacy service lines report to the Associate Director for Patient Care Services, is responsible for:

(1) Ensuring that a qualified ASP provider (physician or non-physician provider where applicable) and pharmacy champions with allocated FTEE (as described in Appendix A) are identified and appointed as the facility Antimicrobial Stewardship Champions to be actively involved in defined components of the ASP.

(2) Ensuring that accurate and updated contact information for the facility ASP Champions are posted on the ASP Pharmacist and ASP Provider Champions: PBM Directory available on the VHA ASTF SharePoint site.

(3) Ensuring that the facility ASP Champions are qualified through education, training or experience in the knowledge and skills needed by facility ASP Champions to develop and co-lead a successful program. Information on the skills and knowledge needed for ASP Champions is available on the VHA ASTF SharePoint.

(4) Supporting ongoing systems improvement and clinical research projects recommended by the facility ASP Champions based on improvement opportunities identified by the ASP.

r. **VA Medical Facility Chief of Pharmacy**. The VA medical facility Chief of Pharmacy is responsible for:

(1) Ensuring that a qualified clinical pharmacist practitioner with allocated FTEE (as described in Appendix A) is identified and appointed as a facility Antimicrobial Stewardship Pharmacy Champion to be actively involved in defined components of the ASP.

(2) Ensuring that accurate and updated contact information for the facility ASP Pharmacy Champion is posted on the ASP Pharmacist and ASP Provider Champions: PBM Directory available on the VHA ASTF SharePoint site.

(3) Ensuring that the facility ASP Pharmacy Champion is qualified through education, training or experience in the knowledge and skills needed by ASP Champions to develop and co-lead a successful program with the facility ASP Provider Champion. Stewardship training is available from several accredited certification programs. Information on the skills and knowledge needed for ASP Champions is available on the VHA ASTF SharePoint.

(4) Supporting ongoing systems improvement and clinical research projects recommended by the facility ASP Pharmacy Champion based on improvement opportunities identified by the ASP.

s. **VA Medical Facility Chief of Health Informatics.** The VA medical facility Chief of Health Informatics is responsible for:

(1) Providing informatics resources necessary to monitor relevant ASP processes and clinical outcomes measures.

(2) Supporting ongoing systems improvement, if applicable and if feasible, to support the VA medical facility ASP.

(3) Maintaining or establishing, monitoring, and providing training efforts regarding backup and a Continuity of Operations Plan (COOP)/Disaster Recovery (DR) plan for informatics systems degradations or complete system failure that are designed to maintain an adequate level of system performance in providing core and safe patient care services. Reference: VHA Directive 0320, VHA Comprehensive Emergency Program, dated July 6, 2020.

t. **VA Medical Facility Infection Control Committee Lead.** The VA medical facility Infection Control Committee (ICC) (or equivalent) Lead is responsible for reviewing and providing input on the annual ASP evaluation if requested by the VA medical facility ASP.

u. **VA Medical Facility Antimicrobial Stewardship Provider Champion/s.** The VA medical facility Antimicrobial Stewardship Provider Champion/s is responsible for:

(1) Serving as the ASP co-leader with the VA medical facility ASP Pharmacy Champion to provide infectious diseases subject matter expertise in the design, implementation, advancement, management and function of the ASP. Infectious diseases subject matter expertise can be characterized by formal ID training, years of experience and/or antimicrobial stewardship certification programs. Continuing antimicrobial stewardship education can be obtained through the ASTF monthly antimicrobial stewardship webinars or outside educational programming. **NOTE:** *Examples of ASP interventions that are suggested as opportunities for intervention can be found on the VHA ASTF SharePoint site.*

(2) Collaborating with the VA medical facility ASP Pharmacy Champion/s to:

(a) Co-lead the implementation of facility-wide ASP activities based on nationally recognized guidelines and optimizing the facility's antimicrobial use and other metrics needed to identify areas for stewardship interventions.

(b) Provide competency-based education to other health care professionals regarding stewardship ideologies and practices and optimal use of antimicrobials at a minimum of annually.

(c) Communicate and collaborate with VA medical facility staff on antibiotic use issues and interact with the facility Infectious Disease Consult Service, or equivalent, for advice to health care providers on alternative antimicrobial therapy.

(d) Serve as a facility antimicrobial formulary subject matter expert and advise providers on alternatives when a non-formulary antimicrobial agent is ordered.

(e) Perform or facilitate the daily operations of the facility ASP to include ASP interventions, program management and analysis and outcomes tracking to include in the ASP Annual Evaluation.

(f) Ensure the facility's NHSN's Annual Survey and Monthly Reporting Plans are completed and the facility's floor specialty designations and mapping within NHSN are accurate. **NOTE:** *NHSN AU and AR Option reporting is handled by data management members of the ASPCOCT as a national process and not sent by the local stewardship champions.*

v. **VA Medical Facility Antimicrobial Stewardship Pharmacy Champion/s.** The VA medical facility Antimicrobial Stewardship Pharmacy Champion/s is responsible for:

(1) Serving as the ASP co-leader with the VA medical facility ASP Provider Champion/s to provide clinical pharmacy antimicrobial stewardship subject matter expertise in the design, implementation, advancement, management and function of the ASP. Clinical pharmacy antimicrobial stewardship subject matter expertise can be characterized by formal ID training, years of experience or antimicrobial stewardship certification programs. **NOTE:** *Examples of ASP interventions that are suggested as opportunities for intervention can be found on the VHA ASTF SharePoint site.*

(2) Collaborating with the VA medical facility ASP Provider Champion/s to:

(a) Co-lead the implementation of facility-wide ASP activities based on nationally recognized guidelines and optimizing the facility's antimicrobial use and other metrics needed to identify areas for stewardship interventions.

(b) Provide competency-based education to other health care professionals regarding stewardship ideologies and practices and optimal use of antimicrobials at a minimum of annually.

(c) Communicate and collaborate with VA medical facility staff on antibiotic use issues and interact with the facility Infectious Disease Consult Service, or equivalent, for advice to health care providers on alternative antimicrobial therapy.

(d) Serve as a facility antimicrobial formulary subject matter expert and advising providers on alternatives when a non-formulary antimicrobial agent is ordered.

(e) Perform or facilitate the daily operations of the facility ASP to include ASP interventions, program management and analysis and outcomes tracking to include in the ASP Annual Evaluation.

(f) Ensure the facility's NHSN's Annual Survey and Monthly Reporting Plans are completed and the facility's floor specialty designations and mapping within NHSN are accurate. **NOTE:** *NHSN AU and AR Option reporting is handled by data management members of the ASPCOCT as a national process and not sent by the local stewardship champions.*

3. TRAINING

There are no formal training requirements associated with this directive.

4. RECORDS MANAGEMENT

All records regardless of format (e.g., paper, electronic, electronic systems) created by this directive shall be managed as required by the National Archives and Records Administration (NARA) approved records schedules found in VHA Records Control Schedule 10-1. Questions regarding any aspect of records management should be addressed to the appropriate Records Officer.

5. BACKGROUND

a. In response to the need to optimize antimicrobial use and improve patient care, VA has chartered an ASTF whose stated purpose is to optimize the care of Veterans by developing, deploying and monitoring a national-level strategic plan for improvements in antimicrobial therapy management. To achieve this purpose, the ASTF developed evidence-based national guidance for the operation of ASPs at all VA medical facilities and specific sample documents, initiatives, reports and dashboards to assist local implementation of ASPs at all VA medical facilities, which can be found at the VHA ASTF SharePoint.

b. The Joint Commission developed an Antimicrobial Stewardship Standard for inpatient medical facilities in January 2017, which was updated and expanded in early 2023 with additional inpatient ASP requirements including that the hospital establishes antimicrobial stewardship as an organizational priority with financial resources designated for staffing to support ASPs. The full details of The Joint Commission's Antimicrobial Stewardship Standards can be found at: <https://www.jointcommission.org/resources/patient-safety-topics/infection-prevention-and-control/antibiotic-stewardship/>. **NOTE:** *This linked document is outside of VA control and may not be conformant with Section 508 of the Rehabilitation Act of 1973.*

c. In addition to The Joint Commission, the Centers for Medicare and Medicaid Services (CMS) requires the existence of an ASP as a condition of participation for acute and long-term care facilities. For long-term care, VA contracts an oversight

organization for the Community Living Centers, which follows CMS' long-term care stewardship guidelines. Information regarding CMS' stewardship condition of participation can be found at: <https://www.cms.gov/files/document/gso-22-20-hospitals.pdf> and information regarding CMS' long-term care antimicrobial stewardship regulations can be found at: <https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/downloads/appendix-pp-state-operations-manual.pdf>.

d. Lastly, the White House in 2015 tasked a Federal inter-agency taskforce to create the National Action Plan for Combating Antibiotic Resistant Bacteria (CARB) which is available at: <https://www.hhs.gov/sites/default/files/carb-national-action-plan-2020-2025.pdf>. The National Action Plan for CARB requires health facilities operated by the U.S. Government, including VA medical facilities, to develop and implement antibiotic stewardship programs and participate in the CDC NHSN AU and AR Options for reporting use and resistance. With the assistance of the ASTF and the Office of Analytics and Performance Integration's Biosurveillance, Antimicrobial Stewardship and Infection Control (BASIC) Program, all VA medical facilities with 30 or more acute care beds are enrolled in the NHSN AU Option. NHSN AU Option data are transferred under the authority of an established memorandum of understanding with an explicit data use agreement between VA and CDC. AU Option data are electronically transferred to NHSN as aggregated de-identified antimicrobial use in days of therapy. All VA medical facilities that have transitioned to VA's updated electronic health record are to contribute to the number of sources for and quality of antibiotic resistance surveillance data by reporting antimicrobial resistance isolates to the NHSN AR Option. This process is also managed by the BASIC Program to ensure all compliance with data transfer requirements.

e. The most recent survey of VA stewardship activities was conducted by the ASTF in conjunction with the Health Analysis and Information Group. The survey revealed areas which require improvement to meet VA needs and increasingly rigorous accreditation standards. One significant finding of the survey was that only a quarter of sites met the previously recommended minimal staffing for stewardship champions. (See https://vaww.va.gov/HAIG/ASSurvey/2020_Animicrobial_Stewardship_in_VHA_Report.pdf. **NOTE:** *This is an internal VA website that is not available to the public.*) Previous studies have identified the presence of fully supported stewardship champions as a key component to highly effective ASPs and accreditation standards require facilities to resource ASPs appropriately. Staffing considerations should include daily ASP activities as well as program management to ensure that antimicrobials are used in an evidence-based fashion in all departments of the VA medical facility.

6. DEFINITIONS

a. **Antimicrobial.** Antimicrobial is a substance that kills or inhibits the growth of microorganisms.

b. **Antimicrobial Resistance.** Antimicrobial resistance is the development by a microbe, through mutation or gene transfer, of the ability to survive exposure to an

antimicrobial agent that was previously an effective treatment.

c. **Antimicrobial Stewardship**. Antimicrobial stewardship is an activity that promotes the appropriate selection, dosing, route and duration of antimicrobial therapy.

d. **Antimicrobial Stewardship Program**. ASP refers to a coordinated multidisciplinary program that promotes the optimal evidence-based use of antimicrobials in all areas and departments of the facility through activities designed to implement interventions supporting appropriate selection, dosing, route and duration of antimicrobial therapy.

e. **VISN Antimicrobial Stewardship Collaborative**. A VISN Antimicrobial Stewardship Collaborative is a collaborative group consisting of stewardship champions from all facilities within a VISN designed to encourage development and augmentation of stewardship programs amongst all facilities within that VISN. Information regarding development and augmentation of VISN Antimicrobial Stewardship Collaboratives is available on the VHA ASTF SharePoint at: <https://dvagov.sharepoint.com/sites/VHAPBM/ASTF>. **NOTE:** *This is an internal VA website that is not available to the public.*

7. REFERENCES

a. 38 U.S.C. § 7301(b).

b. VHA Directive 0320, VHA Comprehensive Emergency Program, dated July 6, 2020.

c. VHA Directive 1131(5), Management of Infectious Diseases and Infection Prevention and Control Programs, dated November 7, 2017.

d. VHA Directive 1304, National Human Immunodeficiency Virus Program, dated August 15, 2019.

e. VA Healthcare Analysis and Information Group, 2020 Survey of Antimicrobial Stewardship in VHA Report. Available at: https://vaww.va.gov/HAIG/ASSurvey/2020_Animicrobial_Stewardship_in_VHA_Report.pdf. **NOTE:** *This is an internal VA website that is not available to the public.*

f. VHA ASTF SharePoint site available at: <https://dvagov.sharepoint.com/sites/VHAPBM/ASTF>. **NOTE:** *This is an internal VA website that is not available to the public.*

g. The Joint Commission Antimicrobial Stewardship Standard. Accessed January 12, 2023, Available at: <https://www.jointcommission.org/resources/patient-safety-topics/infection-prevention-and-control/antibiotic-stewardship/>. **NOTE:** *This linked document is outside of VA control and may not be conformant with Section 508 of the Rehabilitation Act of 1973.*

h. Centers for Disease Control and Prevention, 2019 Antibiotic Resistance Threats Report. Accessed January 12, 2023, Available at: <https://www.cdc.gov/drugresistance/biggest-threats.html>.

i. Centers for Medicare and Medicaid Services Antimicrobial Stewardship Condition of Participation: Infection Prevention and Control and Antimicrobial Stewardship Programs. Accessed January 12, 2023, Available at: <https://www.cms.gov/files/document/qso-22-20-hospitals.pdf>.

j. Centers for Medicare and Medicaid Services, State Operations Manual, Appendix PP – Guidance to Surveyors for Long term Care Facilities, 42 C.F.R. § 483.80(a)(3), F881, Antibiotic Stewardship Program. Accessed January 12, 2023. Available at: <https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/downloads/appendix-pp-state-operations-manual.pdf>.

k. National Action Plan for Combating Antibiotic Resistant Bacteria 2020-2025. Accessed January 12, 2023. Available at: <https://www.hhs.gov/sites/default/files/carb-national-action-plan-2020-2025.pdf>.

l. Infectious Diseases Society of America, Society for Healthcare Epidemiology of America, and Pediatric Infectious Diseases Society (IDSA-SHEA-PIDS) Task Force on Antimicrobial Stewardship. Accessed January 12, 2023, Available at: <https://www.idsociety.org/clinical-practice/antimicrobial-stewardship2/antimicrobial-stewardship/>. **NOTE:** This linked document is outside of VA control and may not be conformant with Section 508 of the Rehabilitation Act of 1973.

STAFFING FOR DEPARTMENT OF VETERANS AFFAIRS ANTIMICROBIAL STEWARDSHIP PROGRAMS

Table 1: Recommended minimum allocated Full-Time Equivalent Employee (FTEE) for Antimicrobial Stewardship Programs (ASP) at all Department of Veterans Affairs Medical Centers (VAMCs). The minimum allocated FTEE includes a baseline FTEE level for ASP Program Management at all VAMCs (including outpatient only VAMFs) as well as additional minimum allocated FTEE based on number of acute care staffed beds and presence of a Community Living Center (CLC).

Position	Baseline FTEE for ASP Program Management at ALL VAMF		Additional FTEE Based on Number of Acute Care Staffed Beds					Additional FTEE for CLC (CLC with acute care center or standalone CLC)
			>220 beds	120-220 beds	60-119 beds	<60 beds		
Antimicrobial Stewardship Provider Champion – ID physician preferred but not required	0.25	+	1.25	0.75	0.25	0.125	+	0.25
Antimicrobial Stewardship Pharmacy Champion – Clinical Pharmacist Practitioner	0.5	+	1.5	1.0	0.5	0.25	+	0.25

1. All VAMCs include acute care, long term care and outpatient only facilities
2. The Joint Commission Medication Management Standard MM.09.01.01 Antibiotic Stewardship Element of Performance 10 explicitly states “The hospital allocates financial resources for staffing and information technology to support the antibiotic stewardship program.”

3. Many facilities with a higher volume or complexity of patient care may need higher FTEE levels than the minimum stated above in Table 1. Facility in-patient bed capacity as well as the annual number of Veterans served should be considered in addition to the ASTF Guidance and Staffing Calculator, created and validated by the ASTF and PBM Clinical Pharmacy Practice Office (CPPO), to determine staffing levels above the minimum for ASP champions stated in Table 1. The ASTF Guidance and Staffing Calculator is available at the VHA ASTF SharePoint at: <https://dvagov.sharepoint.com/sites/VHAPBM/ASTF>. **NOTE:** *This is an internal VA website that is not available to the public.*

4. The FTEE specified in Table 1 is specifically for designated antimicrobial stewardship activities and does not encompass other infectious diseases services or clinical pharmacy duties (including other infectious diseases pharmacy duties) as well as VISN Antimicrobial Stewardship Lead activities which would necessitate other FTEE. For recommended staffing for infectious diseases and infection control and prevention services additional to antimicrobial stewardship activities please consult VHA Directive 1131(5), Management of Infectious Diseases and Infection Prevention and Control Program, dated November 7, 2017. For recommended staffing for HIV programs please consult VHA Directive 1304, National Human Immunodeficiency Virus Program, dated August 15, 2019. For recommended staffing for clinical pharmacy programs please consult the appropriate guidance documents posted on the CPPO's website available at: <https://dvagov.sharepoint.com/sites/VHAClinicalPharmacy>. **NOTE:** *This is an internal VA website that is not available to the public.*

5. Funded research is encouraged but is in addition to FTEE defined by clinical need in Table 1.