ANTIMICROBIAL STEWARDSHIP PROGRAMS (ASP)

1. REASON FOR ISSUE: This Veterans Health Administration (VHA) directive establishes a policy for the implementation and maintenance of Antimicrobial Stewardship Programs (ASP) at all VA medical facilities.

2. SUMMARY OF MAJOR CHANGES: This updated VHA directive updates the ongoing development and expansion of ASPs at all Department of Veterans Affairs (VA) medical facilities. Significant changes include:

   a. A requirement that VA medical facilities with 30 or more acute care beds report antimicrobial use data to the Center for Disease Control and Prevention’s National Healthcare Safety Network (NHSN) Antimicrobial Use (AU) Option.

   b. Updated contact information for the VA medical facility provider and pharmacy antimicrobial stewardship champions.

3. RELATED ISSUES: None.

4. FOLLOW-UP RESPONSIBILITY: The National Infectious Diseases Service (NIDS, 10P11) within Specialty Care Services, Office of the Deputy Under Secretary for Health for Policy and Services (10P) is responsible for the contents of this VHA directive. Questions may be referred to the Director, National Infectious Diseases Service at 513-246-0270. Questions regarding the pharmacy aspects of this directive may be referred to the Pharmacy Benefits Management Service (10P4P) at 708-786-7862.


6. RECERTIFICATION: This VHA directive is scheduled for recertification on or before the last working day of January 2024. This VHA directive will continue to serve as national VHA policy until it is recertified or rescinded.

CERTIFIED BY:                  BY THE DIRECTION OF THE UNDER
/s/Lucille B. Beck, PhD.       SECRETARY FOR HEALTH
Deputy Under Secretary for Health for
Policy and Services

/s/Lucille B. Beck, PhD.
Deputy Under Secretary for Health for
Policy and Services
NOTE: All references herein to VA and VHA documents incorporate by reference subsequent VA and VHA documents on the same or similar subject matter.

ANTIMICROBIAL STEWARDSHIP PROGRAMS (ASP)

1. PURPOSE

This Veterans Health Administration (VHA) directive establishes policy and responsibilities for the implementation and maintenance of antimicrobial stewardship programs (ASP) at all Department of Veterans Affairs (VA) medical facilities.

AUTHORITY: Title 38 United States Code (U.S.C.) 7301(b).

2. BACKGROUND

a. Antimicrobial resistance in hospitals and communities has risen and continues to rise at an alarming rate, despite widespread efforts to control the spread. Many multidrug resistant organisms (MDRO) are resistant to all or nearly all available antimicrobials.

b. Antimicrobial stewardship programs (ASP) are thought to be one of the most effective ways to improve antimicrobial utilization. In response to the need to optimize antimicrobial use and improve patient care, VHA has chartered an Antimicrobial Stewardship Task Force (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 guidance for the operation of ASPs at all VA medical facilities and specific sample policies and reports for selected stewardship activities, all of which can be found at the VHA ASTF SharePoint site at: https://vaww.pbmnat.va.gov/sites/PBM/ASTF/SitePages/Home.aspx. NOTE: This is an internal VA web site that is not available to the public.

c. In addition to the VA stewardship efforts, other agencies have recognized the need for ASPs. The Joint Commission developed an Antimicrobial Stewardship Standard which began to be surveyed in January 2017 and the Centers for Medicare and Medicaid Services now require the existence of an ASP as a condition of participation. Lastly, The White House, with the development of the National Action Plan for Combatting Antibiotic Resistant Bacteria (CARB) (Objective 1.1.1.A at: https://obamawhitehouse.archives.gov/sites/default/files/docs/national_action_plan_for_combating_antibiotic-resistant_bacteria.pdf), requires health facilities operated by the U.S. Government, including VA medical facilities, to develop and implement antibiotic stewardship programs and participate in the Center for Disease Control and Prevention’s (CDC) National Healthcare Safety Network (NHSN) antibiotic use and resistance reporting. NOTE: This linked document is outside of VA control and may not be conformant with Section 508 of the Rehabilitation Act of 1973. With the assistance of the ASTF and the Salt Lake City VA’s Collaborative Research to Enhance and Advance Transformation and Excellence (CREATE) research group, over 75 percent of VA acute care medical facilities have already voluntarily enrolled in the NHSN Antimicrobial Use (AU) Option. NHSN AU Option data is transferred under the authority of an established memorandum of understanding with an explicit data use agreement between the VA and the CDC. Data is electronically transferred to NHSN as aggregated de-identified antimicrobial use in days of therapy.
3. DEFINITIONS

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

b. **Antimicrobial Stewardship.** An activity that promotes the appropriate selection, dosing, route and duration of antimicrobial therapy.

c. **Antimicrobial Stewardship Pharmacy Champion.** A facility designated clinical pharmacist/clinical pharmacy specialist assigned to co-lead the antimicrobial stewardship program with the antimicrobial stewardship provider champion.

d. **Antimicrobial Stewardship Provider Champion.** A facility designated provider assigned to co-lead the antimicrobial stewardship program with the antimicrobial stewardship pharmacy champion. The provider champion is typically an infectious diseases provider. In those facilities without infectious diseases staff, however, this may be any provider (i.e. hospitalist, primary care provider, advanced practice provider) with an interest in stewardship.

e. **Antimicrobial Stewardship Program.** A facility-wide multidisciplinary program that designs policies and interventions to promote appropriate selection, dosing, route, and duration of antimicrobial therapy. The primary goal is to optimize clinical outcomes while minimizing unintended consequences of antimicrobial use, including toxicity, the selection of pathogenic organisms, and the emergence of resistance.

f. **Antimicrobial Stewardship Taskforce.** A national VHA multidisciplinary committee with the purpose of optimizing the care Veterans by developing, deploying and monitoring a national-level strategic plan for improvements in antimicrobial therapy management.

4. POLICY

It is VHA policy that each VA medical facility must maintain an ASP with a written policy and a local implementation plan, identify facility stewardship provider and pharmacy champions, and perform an annual evaluation of the ASP’s activities. In addition, it is VHA policy that VA medical facilities with 30 or more acute care beds must report antimicrobial use to the NHSN AU Option. Those facilities with 30 or more acute care beds not currently enrolled in the NSHN AU Option must enroll and submit one or more months of data into the Option no later than one year after the publication of this directive.

5. RESPONSIBILITIES

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

b. **Deputy Under Secretary for Health for Operations and Management.** The Deputy Under Secretary for Health for Operations and Management is responsible for supporting the advancement of ASPs across VHA.
c. **Deputy Under Secretary for Health for Policy and Services.** The Deputy Under Secretary for Health for Policy and Services is responsible for supporting the implementation of ASPs across VHA.

d. **Assistant Deputy Under Secretary for Health for Patient Care Services (PCS).** The Assistant Deputy Under Secretary for Health for PCS is responsible for ensuring the support and advancement of ASPs across VHA including the ASTF with an Antimicrobial Stewardship Program Central Office Core Team (ASPCOCT) to assist VA medical facilities with ASP intervention.

e. **Chief Improvement and Analytics Officer for VHA Office of Reporting, Analytics, Performance, Improvement, and Deployment (RAPID).** The Chief Improvement and Analytics Officer for VHA Office of RAPID is responsible for:

   (1) Optimizing electronic resources and databases to improve or modify national stewardship strategies and advancement.

   (2) Providing information technology assistance to the ASPCOCT.

f. **Chief Consultant, Specialty Care Services.** The Chief Consultant, Specialty Care Services is responsible for supporting the implementation and advancement of ASPs across VHA including the ASTF with an Antimicrobial Stewardship Program Central Office Core Team (ASPCOCT) to assist VA medical facilities with ASP intervention implementation.

g. **Antimicrobial Stewardship Taskforce (ASTF).** The ASTF is responsible for:

   (1) Summarizing current performance and improvement priorities for antimicrobial stewardship.

   (2) Cataloging, where possible, ongoing antimicrobial stewardship activities across VHA.

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

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

h. **Director, National Infectious Diseases Service (NIDS).** The Director, NIDS, or designee, is responsible for:

   (1) Co-administering the ASTF with the Chief Consultant, Pharmacy Benefits and Management Services (PBM).

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

i. **Chief Consultant, Pharmacy Benefits and Management (PBM).** The Chief Consultant, PBM, or designee, is responsible for:
(1) Co-administering the ASTF with the director, NIDS.

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

j. **Antimicrobial Stewardship Program Central Office Core Team (ASPOCT).** The ASPCOCT, consisting of, but not limited to, infectious disease providers and clinical pharmacy specialists, is responsible for:

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

(2) Serving as an expert group 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 and defining actions based on identified needs.

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

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

k. **Veterans Integrated Service Network Director (VISN).** Each VISN Director is responsible for ensuring that all VA medical facilities in the VISN comply with this directive.

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

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

(2) Ensuring that adequate dedicated staffing, as described in VHA Directive 1131, Management of Infectious Diseases and Infection Prevention and Control Programs dated November 7, 2017 available at: https://www.va.gov/vhapublications/ViewPublication.asp?pub_ID=5616, 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.

(3) Establishing a facility ASP with a written policy and local implementation plan defining stewardship initiatives based on selected focus areas specific to the VA medical facility and the resources available.
(4) 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.

(5) 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.

(6) Ensuring that, if the VA medical facility has 30 or more acute care beds, it is enrolled in the NSHN AU Option in order for the VA medical facility ASP to monitor inpatient antimicrobial use.

**NOTE:** Facilities with less than 30 acute care beds are not required to report to the NSHN AU Option but are strongly encouraged to consider enrollment.

m. **VA Medical Facility Chief of Staff or Associate Director for PCS.** The VA medical facility Chief of Staff or the Associate Director for PCS is responsible for:

(1) Ensuring that a clinical provider is identified as an Antimicrobial Stewardship Provider Champion to be actively involved in defined components of the ASP.

(2) Ensuring that accurate and updated contact information for the ASP Provider Champion is posted on the VHA ASTF SharePoint site at: https://vaww.pbmnat.va.gov/sites/PBM/ASTF/SitePages/Home.aspx. **NOTE:** This is an internal VA Web site that is not available to the public.

(3) Ensuring that the ASP Provider Champion is trained in the knowledge and skills needed by ASP Champions to develop and co-lead a successful program with the ASP Pharmacy Champion.

(4) Ensuring that clinical providers, pharmacists, and nurses are educated on the principles of antimicrobial stewardship in accordance with The Joint Commission’s Antimicrobial Stewardship Standard available at: https://www.jointcommission.org/topics/hai_antimicrobial_stewardship.aspx.

(5) Encouraging and supporting ongoing systems improvement and clinical research projects, if applicable and if feasible within FTE dedicated to clinical needs, in antimicrobial stewardship.

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

(1) Ensuring that a clinical pharmacist or clinical pharmacy specialist is identified as an Antimicrobial Stewardship Pharmacy Champion to be actively involved in defined components of the ASP.

(2) Ensuring that accurate and updated contact information for the ASP Pharmacy Champion is posted on the VHA PBM Directory SharePoint site at,
https://vaww.cmopnational.va.gov/cmop/PBM/Lists/Pharmacy%20Phone%20Directory/General.aspx?View=%7b2EB620CD-8CFA-4133-B3A7-87C027D71EAC%7d&FilterField1=Telephone%5Fx0020%5FNumber&FilterValue1=ASP%20Pharmacist%20Champion. **NOTE:** This is an internal VA web site that is not available to the public.

(3) Ensuring that the ASP Pharmacy Champion has opportunity and resources, if needed, for necessary training in the knowledge and skills by ASP Champions to develop and co-lead a successful program with the ASP Provider Champion. Stewardship training is available from several accredited certification programs.

(4) Ensuring that clinical providers, pharmacists and nurses are educated on the principles of antimicrobial stewardship in accordance with The Joint Commission’s Antimicrobial Stewardship Standard available at, https://www.jointcommission.org/topics/hai_antimicrobial_stewardship.aspx.

(5) Encouraging and supporting ongoing systems improvement and clinical research projects, if applicable and if feasible within FTE dedicated to clinical needs, in antimicrobial stewardship.

- **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) Encouraging and supporting ongoing systems improvement, if applicable and if feasible, to support the VA medical facility ASP.

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

- **VA Medical Facility Antimicrobial Stewardship Provider Champion.** The VA medical facility Antimicrobial Stewardship Provider Champion is responsible for:
  
  (1) Serving as the ASP co-leader with the ASP Pharmacy Champion and subject matter expert in the design, implementation, advancement and function of the ASP.
  
  (2) Leading or co-leading the ASP in reviewing and optimizing the facility’s antimicrobial use and other metrics needed to identify areas for stewardship interventions.
  
  (3) Providing education to other health care professionals regarding stewardship ideologies and practices and optimal use of antimicrobials.
  
  (4) Interacting with the Infectious Disease Consult Service, or equivalent, for advice to health care providers on alternative antimicrobial therapy.
(5) Serving, in collaboration with the ASP Pharmacy Champion, as a facility antimicrobial formulary subject matter expert and advising providers on alternatives when a non-formulary antimicrobial agent is ordered.

(6) Performing or facilitating the daily operations of the ASP to include ASP interventions, program management and analysis and outcomes tracking to include in the ASP Annual Evaluation.

NOTE: Examples of ASP interventions that are suggested as opportunities for intervention can be found on the VHA ASTF SharePoint site at https://vaww.pbmnat.va.gov/sites/PBM/ASTF/SitePages/Home.aspx. NOTE: This is an internal VA Web site that is not available to the public.

r. **VA Medical Facility Antimicrobial Stewardship Pharmacy Champion.** The facility Antimicrobial Stewardship Pharmacy Champion is responsible for:

(1) Serving as the ASP co-leader with the ASP Provider Champion and subject matter expert in the design, implementation, advancement and function of the ASP.

(2) Leading or co-leading the ASP in reviewing and optimizing the facility’s antimicrobial use and other metrics needed to identify areas for stewardship interventions.

(3) Providing education to other health care professionals regarding stewardship ideologies and practices and optimal use of antimicrobials.

(4) Interacting with the Infectious Disease Consult Service, or equivalent, for advice to health care providers on alternative antimicrobial therapy.

(5) Serving, in collaboration with the facility ASP Provider Champion, as a facility antimicrobial formulary subject matter expert and advising providers on alternatives when a non-formulary antimicrobial agent is ordered.

(6) Performing or facilitating the daily operations of the ASP to include ASP interventions, program management and analysis and outcomes tracking to include in the ASP Annual Evaluation.

NOTE: Examples of ASP interventions that are suggested as opportunities for intervention can be found on the VHA ASTF SharePoint site at https://vaww.pbmnat.va.gov/sites/PBM/ASTF/SitePages/Home.aspx. NOTE: This is an internal VA Web site that is not available to the public.

6. **TRAINING**

There are no training requirements associated with this policy.
7. RECORDS MANAGEMENT

All records regardless of format (paper, electronic, electronic systems) created by this directive shall be managed per the National Archives and Records Administration (NARA) approved records schedules found in VHA Records Control Schedule 10-1. If you have any question to the regarding any aspect of records management, you should contact your facility Records Manager or your Records Liaison.

8. REFERENCES


b. VHA Antimicrobial Stewardship Taskforce (ASTF SharePoint site): https://vaww.pbmnat.va.gov/sites/PBM/ASTF/SitePages/Home.aspx. NOTE: This is an internal VA Web site that is not available to the public.


RECOMMENDED STAFFING FOR ANTIMICROBIAL STEWARDSHIP PROGRAMS


TABLE 1: Minimum FTE by Medical Facility Complexity Level

<table>
<thead>
<tr>
<th>Position Title</th>
<th>1a and 1b</th>
<th>1c and 2</th>
<th>3</th>
<th>Additional Staffing for CLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infectious Diseases Physician</td>
<td>0.50</td>
<td>0.25 – 0.5</td>
<td>0.25 – 0.375</td>
<td>See Note 1 below</td>
</tr>
<tr>
<td>Antimicrobial Stewardship</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clinical Pharmacist – Antimicrobial Stewardship</td>
<td>1.5 – 4.0</td>
<td>1.0 – 2.0</td>
<td>0.25 – 0.5</td>
<td>See Note 2 below</td>
</tr>
<tr>
<td>Nurse Practitioner and/or Physician Assistant –</td>
<td>0.5</td>
<td>0.5</td>
<td>0.0 – 0.25</td>
<td>See Note 1 below</td>
</tr>
<tr>
<td>Antimicrobial Stewardship</td>
<td></td>
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**NOTE 1:** For this case, no specific recommendations were made by the Infectious Diseases Field Advisory Committee and the FTE for the positions is left to the discretion of the VA medical facility.

**NOTE 2:** The National VA Antimicrobial Stewardship Task Force and Pharmacy Benefits Management (PBM) Clinical Pharmacy Practice Office (CPPO) created and validated a staffing calculator for Antimicrobial Stewardship Programs (ASP) in VA medical facilities. The VA medical facility may choose, for minimum staffing levels, to refer to the ASTF Guidance and staffing calculator at the VHA ASTF SharePoint at: https://vaww.pbmnat.va.gov/sites/PBM/ASTF/SitePages/Home.aspx.

**NOTE 3:** Funded research is encouraged but is in addition to FTE defined by clinical need in Table 1.