THE NATIONAL URGENCY FOR SAFER, MORE EFFECTIVE ANTIBIOTIC USE

Antibiotics are powerful drugs to treat serious infections. However, decades of overprescribing and misuse have resulted in bacteria that are increasingly resistant to these potent drugs, creating a growing threat of new superbugs that are difficult, and sometimes even impossible, to treat. According to the Centers for Disease Control and Prevention (CDC), drug-resistant bacteria cause two million illnesses and 23,000 deaths annually.

In 2014, CDC recommended that all acute-care hospitals in the United States implement an antibiotic stewardship program to guide efforts to improve appropriate and necessary antibiotic use and released the Core Elements of Hospital Antibiotic Stewardship Programs. In addition, the Obama Administration has identified antibiotic stewardship as a national priority and issued an executive order calling for the Department of Health and Human Services (HHS) to promote the implementation of antibiotic stewardship programs across all healthcare settings.

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NQF’S STRATEGIES TO BUILD ON CDC’S CORE ELEMENTS FOR ANTIBIOTIC STEWARDSHIP

National Quality Forum’s National Quality Partners (NQP) convened more than 25 experts and national stakeholders from the public and private sectors—including patient advocates, infectious disease physicians and pharmacists, and acute-care providers—to develop National Quality Partners Playbook: Antibiotic Stewardship in Acute Care. The goal of this new resource is to help hospitals and health systems strengthen existing antibiotic stewardship initiatives or create antibiotic stewardship programs from the ground up. The Playbook, which is based on CDC’s Core Elements, offers practical strategies for implementing high-quality antibiotic stewardship programs in hospitals nationwide:

1. **Leadership Commitment**. Antibiotic stewardship is a team sport in which many hospital staff—including physicians, pharmacists, nurses, and administrators—play an important role.

2. **Accountability**. Hospitals must appoint a single leader, such as a physician, who is responsible for program outcomes.

3. **Drug Expertise**. Hospitals must designate a single pharmacist who can lead initiatives to improve antibiotic use among patients.

4. **Action**. Hospitals must implement a systematic approach to evaluating patients’ needs for antibiotics.
5. Tracking. Monitoring the impact of antibiotics on patients and patient outcomes is essential to ensuring that antibiotics are prescribed only in cases where they treat bacterial infections.

6. Reporting. Doctors, nurses, and other key staff must regularly share information with all hospital stakeholders.

7. Education. Education must be provided regularly to all hospital staff, as well as patients and their families.

The Playbook includes examples for implementation, common barriers and suggested solutions, and sample tools and resources. At the same time, the Playbook provides a flexible framework for hospitals to create high-quality antibiotic stewardship programs that meet the needs of their communities.

LOOKING TO THE FUTURE

The Playbook began in response to a national call to action to address a potentially catastrophic health issue if serious and fatal diseases become resistant to our current drug arsenal. Moving forward, it is important that all hospitals have an antibiotic stewardship program in place to ensure that hospital staff are prescribing antibiotics appropriately. The Playbook is a practical tool to help hospitals create strategies to adopt CDC’s Core Elements. The Playbook provides a range of practical strategies to guide the implementation of antibiotic stewardship programs in hospitals in the United States. At the same time, many additional sectors need to be engaged in this effort, including state and local health departments and public health entities.

For more information or to provide feedback on your experience using the Playbook in your organization, please contact National Quality Partners at nationalqualitypartners@qualityforum.org or 202-783-1300.