<u>The Georgia Antibiotic Stewardship Plan (ASP):</u> Antibiotic stewardship is processes to measure and optimize the appropriate use of antibiotics. Given their societal value and the diminishing effectiveness of antimicrobial resistance, Georgia supports antibiotic stewardship across the healthcare spectrum.

Background: GDPH is interested in developing a statewide antibiotic stewardship program. To develop a sustainable program with limited funding, GDPH seeks to leverage existing relationships, identify and establish new relationships with complimentary programs, and identify, develop (when necessary), and distribute tools to support these efforts.

Approach: The project will phase-in different levels of care facilities. Phase 1 will begin with acute care facilities; Phase 2 with long-term care facilities, and Phase 3 with outpatient facilities. Each phase will cover approximately one year corresponding to the calendar, and at the conclusion of each Phase, the program will be evaluated to inform subsequent phases. Each phase will include communication with public and patients.

Outputs Activities Inputs **Outcomes** Strategic plan for Georgia Get • Identify existing and Intermediate-term Short-term Smart a coordinated potential partners with A coordinated statewide strategic Increased development of ASP Subcommittee antibiotic shared goals plan with a goal of using existing across the healthcare stewardship • Convene subcommittee to resources and imbedding spectrum. **HAI Coordinator** program develop and evaluate plan stewardship in existing programs Georgia healthcare facilities • Engage HAI AC in planning share models of ASP **Emory MPH** Georgia healthcare facilities student Formal, strategic Meet with partners · Increased involvement of record decreased pharmacy partnerships with community partners in coordinated **CDC Technical** · Receive input on strategic costs programs with activities and communication Support plan. • Improve engagement of complementary · Revise plan based on regarding ASP. patients and the public in goals Georgia Public partner input. antibiotic stewardship Health Division Develop formal MOUs (Acute Disease with partners Epidemiology), Vaccine **External incentive** Work with CDC/IHI to Preventable Increased evidence of effective programs for identify essential elements Disease. implementation of antimicrobial provider of ASP **Immunization** stewardship programs and participation Develop recognition Division, STD/HIV interventions programs · Offer forums for Community sharing/recognition Lona-term Partners (APIC, · Healthcare facilities across GHA, GIPN, Establishment of baseline data the healthcare spectrum GMCF, SafeCare for Clostridium difficile Evaluation of • Develop partnerships to engaged in ASP Campaign) ASP adoption evaluate state ASP efforts Use of EIP data for baseline Increased public (EIP. AHRQ) data for MRSA and CRE Healthcare understanding of appropriate · Distribute evaluation tools Providers develop evaluation **Providers** antibiotic use to providers programs · Decreased incidence of Healthcare MDROs and C.difficile in the Consumers **Patient** • Web site: · State resource for ASP state. engagement in o State ASP Plan • Communication directly with public · Decrease of healthcare Georgia Medical provider ASP o Resources for providers regarding ASP (public services Schools & trade associated infections (with programs and consumers announcements, posters, etc.) associations decrease of MDROs) o List facilities with ASP

Assumptions: Internal (GDPH) and external partners will come together to address antibiotic resistance.

External Factors: Competing Interest; lack of funding; support from community partners.