

Indian Health Service National Pharmacy Council & Pharmacy PSG Update



Presented By...

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Pharmacy Professional Specialty Group - Chair
NPC Nashville Area Representative
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Pharmacy Point of Sale Billing
Pharmacy Collection Committee
Clinton Indian Health Service

CDR Shannon Lowe, PharmD, MPH, BCPS

National Pharmacy Council – Chair
Haskell Indian Health Center

CAPT Weston Preston, D.Ph., MBA, BCPS

Advancing Pharmacy Practice (APPC) - Chair
NSSC Pharmacy Support Branch Supervisor

CAPT Kendall Van Tyle, PharmD, BCPS

Recruitment & Retention (RRC)
IHS National Pharmacy Residency
Phoenix Area Office

CDR Dinesh Sukhlall, PharmD, BCPS

Antimicrobial Stewardship Committee – Chair
Phoenix Indian Medical Center

Learning Objectives

- Overview of the National Pharmacy Council (NPC)
- Describe goals and accomplishments of NPC's committees
- Review the involvement of NPC with the IHS Information Technology Modernization efforts

NPC OVERVIEW

Purpose

- to provide advice and consultation to the Principal Pharmacy Consultant (PPC) of the Indian Health Service (IHS), and all IHS, Tribal, and Urban (I/T/U) pharmacy programs on issues related to developing and maintaining a pharmacy program that meets the IHS mission

NPC OVERVIEW

Committees

- Executive Leadership Committee
- Recruitment and Retention
- Pharmacy Collections Committee
- Advancing Pharmacy Practice Committee
- Pharmacy Professional Services Group (PSG) Committee
- Communications Committee
- Inventory Management Committee
- Pharmacy Technician Practice Advisory Committee
- Pharmacy Policy Alignment Committee
- Pharmacy Distribution
- Pharmacy Standards Committee
- Awards Committee
- Pharmacy Quality and Safety
- Antimicrobial Stewardship Committee

NPC OVERVIEW

Current Workgroups

- Space & Equipment
- Clinical Revenue

NPC Executive Leadership Committee

Goals/Purpose

- Facilitate teamwork within IHS Pharmacy (Obj. 1.2)
- Provide advice and consultation to the Principal Pharmacy Consultant (Obj. 3.1)
- Respond & resolve issues related to pharmacy practices in IHS using strategic plan to achieve the IHS mission (Obj. 3.1)

NPC Executive Leadership Committee

Accomplishments

- Identify & address training needs to improve clinical practice for pharmacists & pharmacy technicians. (Obj. 1.3)
- Participate in IHS quality initiatives. (Obj. 2.1)
- Improve communication across IHS Pharmacies. (Obj. 3.1)
- Developed toolkit for new NPC members & committee chairs. (Obj. 1.1)
- Hot Topics (pharmacy staff pay)
 - Presented – increase is coming
- Established Space & Equipment and Clinical Revenue workgroups

NPC Executive Leadership Committee

Deliverables

- Further develop existing processes to improve collaboration and sharing of best practices among I/T/U pharmacists. (Obj. 2.2)
- Increase access to healthcare services through training & establishment of best practices allowing pharmacy staff to practice at the top of their licensure. (Obj. 1.3)
- Continue to improve recruitment & retention processes & efforts. (Obj. 1.1)
- Develop IHS Pharmacy Strategic Plan that aligns with IHS Strategic Plan to move IHS Pharmacy into the future.

Recruitment & Retention Committee

CAPT Kendall Van Tyle

Recruitment & Retention Committee

Goals/Purpose

- Streamline process to match interested candidates to vacant pharmacy positions (Obj. 1.1)
- Introduce pharmacy students to IHS and USPHS, to gain experience & training , furthering their education & considering a career with the IHS (Obj. 1.1)
- Support IHS & Tribal Pharmacy Residency Programs with administration, application, selection, onboarding & training of pharmacy residents with a focus on long-term retention & progression into leadership roles throughout the agency (Obj. 1.1)
- Identify, define, & advocate for the staffing needs of pharmacies, provide best practice guidance related to 24-hour pharmacy coverage & TDY staffing (Obj. 1.3)
- Improving IHS pharmacies ability to recruit, develop, & retain a dedicated, competent, & caring workforce (Obj. 1.1) as well as increase access to quality health care services (Obj. 1.3)
- Maintain/Further develop processes to recruit pharmacy students into IHS, as interns, COSTEPs, & potential future employees (Obj. 2.1)

Recruitment & Retention Committee

Accomplishments

- Staffing subcommittee: produced a proposal for TDY Training as well as remote medication order processing (Obj. 1.3).
- COSTEP subcommittee: Selected & placed 20 JRCOSTEPs & 3 SRCOSTEPs at 18 IHS Service Units across the Nation (Obj. 1.1)
- Residency subcommittee: 111 standardized & centralized residency applications, led to the selection of 28 residents across 3 residency programs. (Obj. 1.1)
- Student programs subcommittee: Oriented new members. Developed standardized communication tools and FAQs(Obj. 1.1)
- Vacancies Subcommittee: Tracking method of TDY usage data throughout COVID-19. Collaborated with USPHS PharmPAC for combined vacancy listings and increased visibility to officers and other pharmacists outside of IHS. (Obj. 1.1)

Recruitment & Retention Committee

Deliverables

- Staffing subcommittee: Complete final draft of Remote Medication Order Processing & TDY Training proposal. Revise the IHS Pharmacy staff methodology (RRM). Collect & track data on TDYS, the impact/cost savings, & future site support. (Obj. 1.1, 2.1)
- COSTEP subcommittee: Raise COSTEP awareness by hosting Q&A sessions for students & sites. Standardize SRCOSTEP process across all Areas. Increase the number of COSTEPs funded/hosted.
- Residency subcommittee: Improve the ability of the IHS National Pharmacy Residency Program to provide program metrics to all stakeholders.
- Student programs subcommittee: Develop recruitment presentation. Expand to recruitment activities at schools. Develop preceptor toolbox to support sites.
- Vacancies subcommittee: Improve agency-wide TDY usage tracking & shared database. Encourage more IHS areas to adopt standardized TDY process. Examine long-standing vacancies in database for accuracy. Work with OIT to pull USAJobs listings into database.

Recruitment & Retention Committee

IHS Residency Programs

- 25 Post-Graduate Year 1 (PGY1) programs with 28 positions
- 4 Post-Graduate Year 2 (PGY2) programs with 4 positions
 - Specialty practice areas such as
 - Ambulatory Care
 - Medication Use & Safety
- 1 Combined PGY1-PGY2 program with 1 position
 - 2 year program
 - Health-System Pharmacy Administration & Leadership
- Agency-Wide
 - 11 IHS Areas
 - Both federal and tribal facilities

Recruitment & Retention Committee

IHS Residents Informatics History

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Recruitment & Retention Committee

Residency Informatics Longitudinal Rotation

- **Provide** pharmacy residents & pharmacy Informaticists with operational knowledge of Indian Health Service Pharmacy software systems
- **Explore** how pharmacy software interfaces with all users of the Electronic Health Record (EHR)
- **Review** pharmacy clinical informatics concepts as they relate to clinical pharmacy principles, practices, & techniques
- **Cultivate** interactive dialog promoting optimization of systems & alignment to “Best-Practice & Future-State” workflows through configuration & training

Recruitment & Retention Committee

Pharmacy Practice Training Program (PPTP)

- Long-standing IHS training, training over 2000 IHS pharmacists since inception
- 2 sessions/year, one dedicated to IHS pharmacy residents
- Status Post-pandemic
 - June 2022 – 27 – focused on residents
 - August 2022 – 30 – focused on residents
 - June 2023 – 15 – non residents
 - August 2023 – August 28 to 31; likely 24-30 – focused on residents
- Efforts to modernize curricula by building patient cases and exercises into the Electronic Health Record
- Attendees experience self-guided analysis of patient information collaboratively with other peers

Pharmacy Collections Committee

LCDR Michael Hunt

Pharmacy Collections Committee

Goals

- Provide trainings on pharmacy billing procedures (Obj. 2.1)
- Identify, define, prioritize & advocate for best practices in billing & collections for IHS pharmacies to increase collections (Obj. 1.3)

Accomplishments

- Provided monthly virtual trainings during OIT Pharmacy Office Hours covering all sections of Pharmacy Point of Sale. Trainings are recorded & available (Obj. 1.3)
<https://www.ihs.gov/rpms/training/recording-and-material-library/>

Pharmacy Collections Committee

Accomplishments (continued)

- Pharmacy POS Tutorial updated & available to all IHS sites (Obj. 1.3)
- Area trainings performed in OKC, Phoenix, Great Plains, Navajo, & Tucson
- Engaged in the update & amendment of third party contracts (Obj. 3.2)

Deliverables

- Continue monthly Pharmacy Point of Sale Office Hours sessions (Obj. 1.3)
- Continue updating of Pharmacy POS Tutorial as a training tool (Obj. 1.3)
- Continue to engage in the update & amendment of third party contracts to ensure fair & proper reimbursement (Obj. 3.2)
- Provide live Pharmacy Point of Sale trainings in each area of IHS (Obj. 2.1)

Advancing Pharmacy Practice Committee

CAPT Weston Thompson

Advancing Pharmacy Practice Committee

Purpose

- Advancing clinical pharmacy practice within IHS, by providing access to pharmacy mentorship, resource guides, & advanced clinical certificate programs (Obj. 2.2)

Goals

- Formalize partnerships with stakeholders in ICE and BOP to establish approved Physical Assessment courses and increase number of Physical assessment trained pharmacists across the three agencies (Obj 1.2, 1.3, 2.1)
- Build partnerships with other stakeholders across IHS to broaden the impact of the APPC Resource Toolkit and increase the utilization of the resources to impact and improve patient outcomes (Obj 1.2, 1.3)

Advancing Pharmacy Practice Committee

Accomplishments

- Collaborated with PharmPAC's NCPS Committee to develop new Diagnostician certificate ensuring recognition of pharmacists practicing at the highest levels, across multiple agencies (Obj 1.2, 2.2)
- Collaborated with IHS Area Pharmacy Consultants to compile and publish Resource Toolkit of Clinical Resources, Literature Citations, Note Templates, Practice Protocols and SME in a single, public facing location (Obj 1.2, 2.2)

Advancing Pharmacy Practice Committee

Deliverables

- Annual review of NCPS-Diagnostician certificate program, including feedback from field applicants, and implementing recommended changes to application packet. (Obj. 2.1)
- Completed biannual update of all APPC Resource Toolkit resources, including currently designated SME's. (Obj. 2.2)
- Supported the IHS's Strategic Initiative of Asthma Control in Tribal Communities by disseminating information and directly linking available Asthma resources in the Resource Toolkit. (Obj. 2.1, 2.2)
- Submitted Outstanding Unit Citation award to recognize broad range of accomplishments by the APPC over the last 2-3 years. (Obj. 1.1)

Pharmacy Professional Specialty Group (PSG)

LCDR Francisco Antigua

Pharmacy Professional Specialty Group (PSG)

Goals/Purpose

- To identify, define, prioritize & advocate for the information resource management & technology needs of pharmacists in Indian Health Service Federal, Tribal, and Urban (I/T/U) facilities (Obj. 3.3)
- To establish a central system to coordinate issues dealing with pharmacy computer software (Obj. 3.3)

Pharmacy Professional Specialty Group (PSG)

Accomplishments

- Active committee with the IHS Health Information Technology Modernization efforts (Obj 1.3)
- Developed and presented the 2022 EHR Clinical Informatics Webinar Series – Pharmacy Informaticist in collaboration with (OIT, NCI, APC, and Area Clinical Informaticists) (Obj 1.3)
 - Over 20 unique presentations during the week of Aug 15-19 with more than 19 SME and 40+ attendees each day
 - Recordings and course material available via the RPMS Training Library (available after remediation)
- Hosted Pharmacy Package Office Hours every month (Jan 2022 – Present) (Obj 1.2)

Pharmacy Professional Specialty Group (PSG)

Accomplishments

- Added e-learning component to Pharmacy Package Office hours (Recordings available via the RPMS Training Library) (Obj 1.2)
- Collaborate with OIT to review, evaluate and prioritize enhancement requests (Obj 3.3)
- Alpha and Beta testing pharmacy specific software patches (Obj 3.3)
- Optimized committees' MAX.GOV page to include training in progress and future one (Obj 1.2)

Pharmacy Professional Specialty Group (PSG)

Deliverables

- 2023 EHR Clinical Informatics Webinar Series – Pharmacy Informaticist in collaboration with (OIT, NCI, APC, and Area Clinical Informaticists) (Obj 1.3)
 - Scheduled for 10/2 – 10/6
 - New topics and potential for pharmacist continuing education credits
- Monthly Pharmacy Package Office Hours (Obj. 1.2)
- Remain partners with Office of Information Technology in Alpha and Beta testing of pharmacy package (Obj. 3.3)
- Maximize outreach efforts to share newly developed training material (Obj 1.2)

Communications Committee

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Communications Committee

Goals

- Develop and maintain various communication methods (Obj. 3.1)

Accomplishments

- Moderated NPC and IHS Pharmacists Listservs (Obj 3.1)
- Published Innovations Newsletter (Obj 3.1)
- Maintenance of Max.gov (Obj 3.1)
- Pharmacy website updates (Obj 3.1)
- Transitioned leadership roles (Obj 3.1)
- Recruited four new members (Obj 3.1)

Communications Committee

Deliverables

- Moderate NPC and IHS Pharmacists Listservs (Obj 3.1)
- Publish Innovations Newsletter (Obj 3.1)
- Max.gov maintenance (Obj 3.1)
- Expand focus and audience of Innovations Newsletter (Obj 3.1)
- Pharmacy website updates (Obj 3.1)
- Identify and develop alternative collaboration platform for NPC utilization (Obj 3.1)

Inventory Management Committee

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Inventory Management Committee

Goals/Purpose

- Review & promote inventory management practices to enhance compliance with federal regulations (Obj. 2.1)
- Provide annual Enhanced Surveillance Inventory (ESI) list (Obj. 3.2)

Accomplishments

- Provided feedback, create, & review several documents with the Vaccine Task Force (Obj. 2.1.6)
- ESI list revised & distributed IHS-wide (Obj. 3.2)
- Provide trainings on Inventory management to the National Pharmacy Leadership Trainings (Obj. 2.1)

Inventory Management Committee

Deliverables

- New committee leadership established (Obj. 3.1)
- Update ESI list to ensure relevance of list (Obj. 3.2)
- Finish committee intranet website update (Obj. 2.1)

**Pharmacy Technician Practice Advisory
Committee (PTPAC)**
LCDR Francisco Antigua

Pharmacy Technician Practice Advisory Committee (PTPAC)

Goals/Purpose

- Develop & support a training program for pharmacy technicians to obtain & maintain a national certification & practice at the top of their licensure & certification (Obj. 1.1.12)
- Collaborate with stakeholders & other agencies to augment technician training program (Obj. 1.2.4)
- Incorporate pharmacy technicians into interdisciplinary efforts (Obj. 1.3.6)
- Promote incentive program(s) for rewarding technicians who complete training & perform in expanded roles (Obj. 1.1.1)

Pharmacy Technician Practice Advisory Committee (PTPAC)

Accomplishments

- Collaborated with Pharmacy Technician Certification Board (PTCB) & Veterans Affairs to establish a sustainable training technicians (Obj. 1.1 -1.3)
- Created a ladder pharmacy technician (4, 5, 6, 7) position description that was successfully classified in the Phoenix Area. (Obj. 1.1)
- Open enrollment for all IHS pharmacy technicians for basic & advanced training (Obj. 1.1.8)
- Survey establishing the impact of pharmacy technician shortages completed (Obj. 3.1)

Pharmacy Technician Practice Advisory Committee (PTPAC)

Deliverables

- Analyze survey to identify current needs & provide better resources to technicians (Obj. 3.1)
- Continue to foster relationship between VA, IHS, and PTCB (Obj. 1.2)
- Develop changes for Chapter 7 3-7.8 B of IHS Manual to current pharmacy technician standards and practices. (Obj. 2.1)

Pharmacy Policy Alignment Committee

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Pharmacy Policy Alignment Committee

Goals/Purpose

- Ensure IHS Pharmacy Program alignment with the IHS Manual Part 3, Chapter 7 (Obj. 2.1)
- Modify current processes to improve efficiency
- Develop master report of review findings for Principal Pharmacy Consultant review

Pharmacy Policy Alignment Committee

Accomplishments

- Completion of Compliance Committee Charter (Obj. 3.1)
- Completion of 2020 – 2021 & 2022 Facility Reviews (Obj. 2.1)
- Comparative analysis of compliance data from 2019-2021 (Obj. 2.1)
- Upgrade of Compliance Committee max.gov home page (Obj. 3.3)
- Improved efficiency & ease of use of Compliance Review Tool (Obj. 2.1)

Pharmacy Policy Alignment Committee

Deliverables

- Comparative analysis of compliance data for 2022 (Obj. 2.1)
- Complete informational & training material for compliance review process & site policy improvement (Obj. 2.2)

Pharmacy Distribution Committee

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Pharmacy Distribution Committee

Goals/Purpose


- Provide quality pharmaceutical & medical supplies to I/T/U facilities at the lowest possible price in the most efficient manner (Obj. 3.2)
- Oversee the Consolidated Mail Out Program (CMOP) & Yearly Influenza Program on behalf of IHS (Obj. 2.2)
- Conduct emergency response procurement & distribution functions for critical items such as PPE, testing supplies, and vaccines on behalf of IHS (Obj. 1.3)

Pharmacy Distribution Committee

Accomplishments

- Executed the IHS' largest contract, the Supplemental Prime Vendor Contract for Open Market pharmaceuticals (Obj 1.1, 3.2)
- COVID-19 PPE/Testing Supply Response (Obj. 1.2, 1.3, 3.1)
- Distribution & Allocation Coordination, & Oversight for COVID-19 Vaccine/Therapeutics & Monkeypox Countermeasures (Obj. 2.1, 2.2)

Deliverables

- Influenza vaccine solicitation and pre-orders of 2024 influenza season (Obj 1.3, 2.2)
 - Supply Chain Modernization: complete Enterprise Resource Planning (ERP) System market research, statement of work, independent government estimate, and acquisitions plan (Obj 3.2)
 - Coordinate & oversee, the distribution & allocation of new COVID-19 vaccines, therapeutics, & Monkeypox countermeasures on behalf of IHS (Obj. 1.3, 2.2)
- 

Pharmacy Standards Committee
LCDR Francisco Antigua

Pharmacy Standards Committee

Purpose

- Responsible for providing resources and guidance to facilities within the IHS to ensure employee safety through proper handling of hazardous medications and compliance with sterile and non-sterile compounding standards

Goals

- Facilitate teamwork among IHS sites to achieve compliance with USP <795>, <797>, and <800> standards (Obj 2.1)
- Provide the tools, education, expertise, and resources needed to guide IHS facilities to successful implementation of USP standards. (Obj 2.1)

Pharmacy Standards Committee

Accomplishments

- Non-sterile <795> committee merged into Standards Committee. Charter reflects combined sub-committees of <795>, <797>, and <800> (Obj 1.2.4)
- In response to the proposed USP <797> updates, the committee solicited questions and concerns from across the agency and submitted comments to USP (Obj 1.2.3)
- Provided feedback to IHS Leadership on revisions of IHS Manual Part 3, Chapter 41 (Obj 2.1.6)
- Provided feedback to IHS Leadership on IHS Manual Part 3, Chapter 7 (Obj 2.1.6)
- Developed a sterile compounding and handling of hazardous medications toolkit to consolidate compliance resources for I/T/U pharmacies (Obj 2.2.6)

Pharmacy Standards Committee

Deliverables

- Remove barriers to accessing new USP standards through NIH Library (Obj 3.1.6)
- Support IHS site's implementations of USP standards through education and assistance (Obj 2.1)
- Revise IHM 3.41 Sterile Compounding to align with new USP standards (Obj 2.1.6)
- Collaborate with Principle Pharmacy Consultant and NPC leadership on ensuring timely implementation of USP standards by IHS facilities (Obj 2.2.6)


Awards Committee
CAPT Angela Troutt

Awards Committee

Goals

- Identify and promote awareness of internal and external award programs, facilitate the award nomination process, and coordinate all phases of award activity and recognition. (Obj 1.1)

Accomplishments

- Initiated Pharmacy Monthly Spotlight Program (Obj 1.1)
 - Promoted award nominations for NPC Committees (Obj 1.1)
 - Promoted award nomination for NPC Individual Awards (Obj 1.1)
 - Promoted IHS Director Award Nominations (Obj 1.1)
- 

Awards Committee

Deliverables

- Developed Monthly Spotlight selection guidelines (Obj 1.1)
- Five Pharmacy Monthly Spotlight recipients from 5 IHS Area selected and announced agency-wide (Obj 1.1)
- Two PHS Outstanding Unit Commendation Awards approved and submitted to IHS Awards Board (Obj 1.1)
- Three PHS Outstanding Service Medal Awards approved and submitted to IHS Awards Board (Obj 1.1)

Quality and Safety

CAPT Michael Lee

Pharmacy Quality and Safety Committee

Purpose:

- Promoting the safe and rational use of medications through use of IHS data (Objective 2.2.1)

Goals:

- Development of tools for Facility, Service Unit, Area and National use that promote the safe use of medications and improve the provision of quality

Pharmacy Quality and Safety Committee

Accomplishments:

- Developed and implemented an I-STAR dashboard for medication safety use that provided standardized reports for medication errors and good catch medication category A/B events

Future Activities:

- Update the IHS (I-STAR) Medication Safety Dashboard with reports that incorporate improvement sciences to allow for trending of medication errors and good catch medication category A/B events (in process)

NPC Workgroups

LCDR Francisco Antigua

Pharmacy Space and Equipment

Goals/Purpose

- Ensure that pharmacy programs have adequate space to support all aspects of pharmacy operations as well as anticipated growth
 - Work with pharmacy programs and HQ OEHE to provide recommendations and updated planning documents for space requirements of pharmacy program remodels and pharmacy program builds
- Identify common equipment to be considered when designing and building pharmacy programs
 - List common automation and other pharmacy equipment which need to be taken into consideration while planning for pharmacy builds and remodels

Revenue Enhancement for Clinical Services

Purpose

- To evaluate current pharmacy clinical billing practices, identify opportunities, and enhance collaboration within interdisciplinary teams to increase collections for billable clinical pharmacy services.

Revenue Enhancement for Clinical Services

Goals

- Improve awareness and knowledge of clinical pharmacists billing for services and increase clinical revenue by pharmacists within IHS/tribal facilities (Obj 1.1, 3.1)
- Analyze available clinical pharmacy reimbursement opportunities beyond point-of-sale revenue (Obj 3.2)
- Improve business operations, increasing revenue capturing to provide more services, equipment, and sustainability (Obj 2.2, 3.2)
- Identify, develop, and share resources with IHS pharmacists to support an improved understanding of workflows and documentation requirements to optimize Medicare and Medicaid reimbursement pharmacist-delivered primary care services (Obj 1.2, 3.1, 3.2)
- Provide a collective understanding of the billing process from Medicare and Medicaid programs for pharmacist-delivered primary care and specialty services for revenue capture (Obj 1.2, 3.1)
- Promote open communication between clinical and administrative services to promote information sharing and programmatic expansion (Obj 1.2)

Revenue Enhancement for Clinical Services

Accomplishments

- Ad Hoc Committee Charter created in February 2023, outlining goals, key questions, and next steps.
- Gap analysis/current state assessment survey developed and approved for dissemination to federal IHS sites in July 2023.

Future Goals/Plans

- Study practices of pharmacy driven clinical services which are billable and provide a model for implementation in other Federal and Tribal sites.
- Collaborate with business office to publish nationwide clinical pharmacy revenue generation statistics with aims of increasing available funding to advance pharmacy practice including but not limited to federal recognition of pharmacists as providers.

Antimicrobial Stewardship Program Committee(ASP)

CDR Dinesh Sukhlall

Antimicrobial Stewardship Program Committee (ASP)

Purpose

- Improve and measure appropriate use of antimicrobials within IHS by providing all sites with accessible tools and best practices to establish site specific antibiotic stewardship programs
- Optimize antibiotic prescribing to best treat infections while minimizing and or reducing antibiotic resistance

Goals

- Measure and improve appropriate use of antimicrobials within IHS (Obj 2.1)
- Utilize current published data to develop monthly webinar series (Obj 2.1.6)

Antimicrobial Stewardship Program Committee (ASP)

Accomplishments

- Monthly presentations started in January 2022 and series ending November 2022 (Obj 2.1.6)
- Webinar series provided 11 hours of CE to pharmacist across IHS (Obj 2.1.4)
- Collaborated with the MITRE team to develop the ASP workflow for EHR modernization (Obj 2.1)
- Coordinated discussion with the IHS National STD Program Lead/Senior Epidemiologist (Obj 2.1)

Antimicrobial Stewardship Program Committee (ASP)

Deliverables

- Provided information to be presented to the Presidential Advisory Council on Combating Antibiotic Resistant Bacteria (PACCARB) (Obj 2.1)
- Webinar series providing 7 hours of CE to pharmacist across IHS (Obj 2.1.4)
- Presenting during End the Syndemic (ETS) Informatics Response & Antimicrobial Stewardship Program (ASP) (Obj 2.1.4)
- A new [IHS Antibiotic Stewardship webpage](#), hosted on the [NPTC website](#) with content developed in collaboration with the IHS National Pharmacy Council's Antibiotic Stewardship Program. (Obj 2.1.4)

Antimicrobial Stewardship Program Committee (ASP)

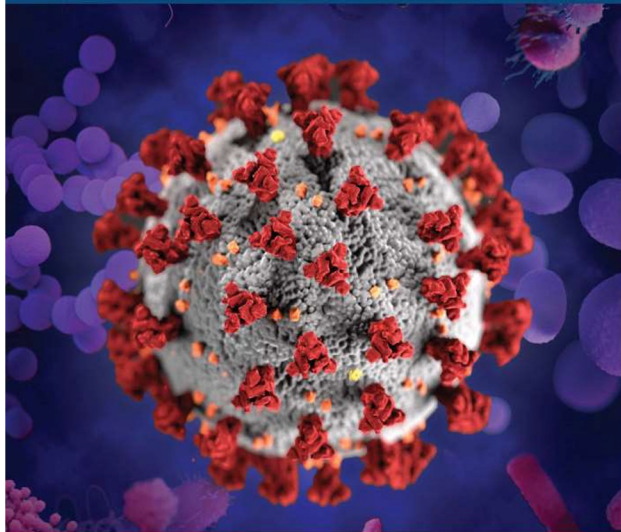
Background

- can lead to **increased quality of care** by decreasing inappropriate antimicrobial use
- can **slow or reverse** the development and spread of antimicrobial **resistance**
- can decrease secondary infection such as C. difficile
- can **optimize clinical outcomes** such as reduced length of stay, readmission rates and mortality
- are supported by regulatory bodies, accreditation agencies, and quality improvement groups

Antimicrobial Stewardship Program Committee (ASP)

COVID-19 CREATED A PERFECT STORM

The U.S. lost progress combating antimicrobial resistance in 2020



↑15% Antimicrobial-resistant infections and deaths increased in hospitals in 2020.

~80% Patients hospitalized with COVID-19 who received an antibiotic March-October 2020.



Delayed or unavailable data, leading to resistant infections spreading undetected and untreated.

INVEST IN PREVENTION.

Setbacks to fighting antimicrobial resistance can and must be temporary.

Learn more: <https://www.cdc.gov/drugresistance/covid19.html>

CDC Core Elements Ambulatory Care

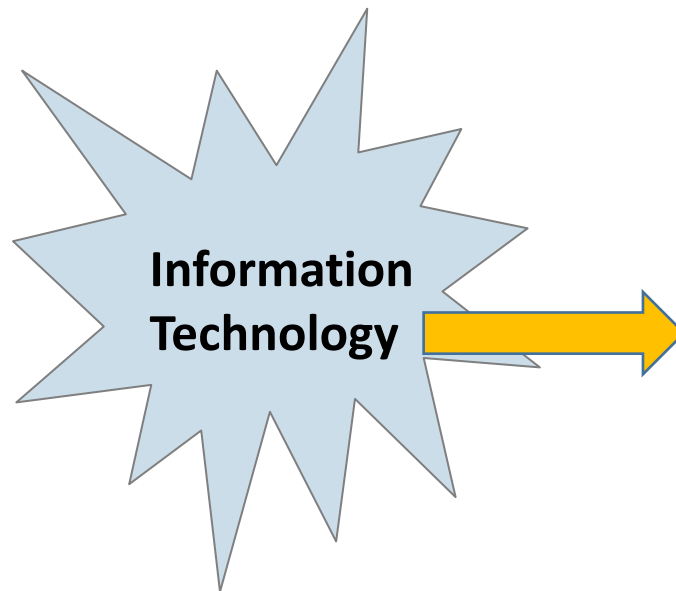







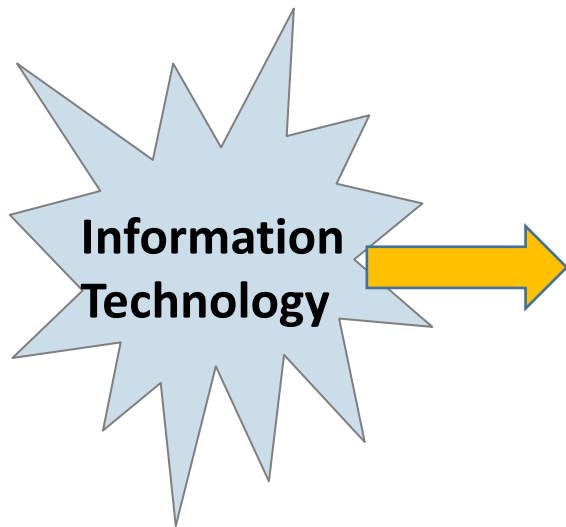
Table. The Core Elements of Hospital Antibiotic Stewardship Programs and the Priorities for Hospital Core Element Implementation.

Hospitals that have implemented the Hospital Core Elements of Antibiotic Stewardship can implement the Priorities for Hospital Core Element Implementation to further enhance their stewardship program.

Hospital Core Elements	Priorities for Hospital Core Element Implementation
Hospital Leadership Commitment	
 Dedicate necessary human, financial, and information technology resources.	Antibiotic stewardship physician and/or pharmacist leader(s) have antibiotic stewardship responsibilities in their contract, job description, or performance review.
Accountability	
 Appoint a leader or co-leaders, such as a physician and pharmacist, responsible for program management and outcomes.	Antibiotic stewardship program is co-led by a physician and pharmacist.*
Pharmacy/Stewardship Expertise	
 Appoint a pharmacist, ideally as the co-leader of the stewardship program, to help lead implementation efforts to improve antibiotic use.	Antibiotic stewardship physician and/or pharmacist leader(s) have completed infectious diseases specialty training, a certificate program, or other training on antibiotic stewardship.
Action	
 Implement interventions, such as prospective audit and feedback or preauthorization, to improve antibiotic use.	Antibiotic stewardship program has facility-specific treatment recommendations for common clinical condition(s) and performs prospective audit/feedback or preauthorization.
Tracking	
 Monitor antibiotic prescribing, impact of interventions, and other important outcomes, like <i>C. difficile</i> infections and resistance patterns.	Hospital submits antibiotic use data to the NHSN Antimicrobial Use Option.
Reporting	
 Regularly report information on antibiotic use and resistance to prescribers, pharmacists, nurses, and hospital leadership.	Antibiotic use reports are provided at least annually to target feedback to prescribers. In addition, the antibiotic stewardship program monitors adherence to facility-specific treatment recommendations for at least one common clinical condition.
Education	
 Educate prescribers, pharmacists, nurses, and patients about adverse reactions from antibiotics, antibiotic resistance, and optimal prescribing.	No implementation priority identified.

* For critical access hospitals (CAHs), this criterion can be met if the hospital has a physician leader with a pharmacist involved in stewardship (recognizing that some CAHs do not have pharmacists on staff, so co-leadership is not possible).

CDC Core Elements Ambulatory Care



Commitment

Demonstrate dedication to and accountability for optimizing antibiotic prescribing and patient safety.



Action for policy and practice

Implement at least one policy or practice to improve antibiotic prescribing, assess whether it is working, and modify as needed.



Tracking and reporting

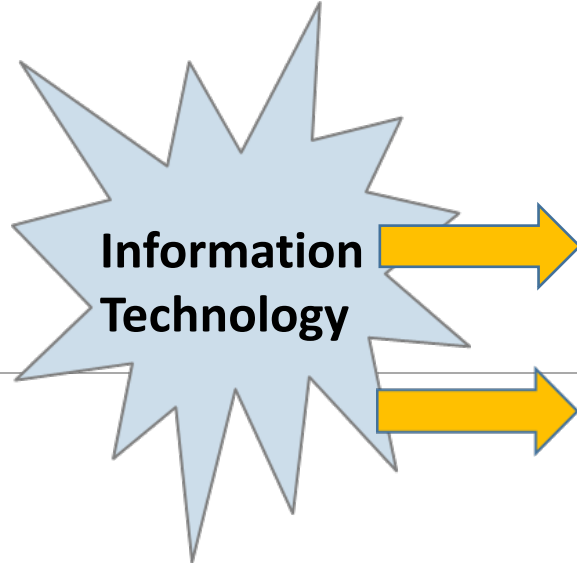
Monitor antibiotic prescribing practices and offer regular feedback to clinicians, or have clinicians assess their own antibiotic prescribing practices themselves.



Education and expertise

Provide educational resources to clinicians and patients on antibiotic prescribing, and ensure access to needed expertise on optimizing antibiotic prescribing.

TJC Requirements



The hospital allocates financial resources for staffing and information technology to support the antibiotic stewardship program. (See also LD.01.03.01, EP 5)

The governing body appoints a physician and/or pharmacist who is qualified through education, training, or experience in infectious diseases and/or antibiotic stewardship as the leader(s) of the antibiotic stewardship program.

Note: The appointment(s) is based on recommendations of medical staff leaders and pharmacy leaders.

The leader(s) of the antibiotic stewardship program is responsible for the following:

- Developing and implementing a hospitalwide antibiotic stewardship program that is based on nationally recognized guidelines to monitor and improve the use of antibiotics
- Documenting antibiotic stewardship activities, including any new or sustained improvements
- Communicating and collaborating with the medical staff, nursing leaders, and pharmacy leaders, as well as with the hospital's infection prevention and control and quality assessment and performance improvement programs on antibiotic use issues
- Providing competency-based training and education for staff on the practical applications of antibiotic stewardship guidelines, policies, and procedures

The hospital has a multidisciplinary committee that oversees the antibiotic stewardship program.

Note 1: The committee may be composed of representatives from the medical staff, pharmacy services, the infection prevention and control program, nursing services, microbiology, information technology, and the quality assessment and performance improvement program.

Note 2: The committee may include part-time or consultant staff. Participation may occur on site or remotely.

The antibiotic stewardship program demonstrates coordination among all components of the hospital responsible for antibiotic use and resistance, including, but not limited to, the infection prevention and control program, the quality assessment and performance improvement program, the medical staff, nursing services, and pharmacy services.

The antibiotic stewardship program documents the evidence-based use of antibiotics in all departments and services of the hospital.

The antibiotic stewardship program monitors the hospital's antibiotic use by analyzing data on days of therapy per 1,000 days present or 1,000 patient days or by reporting antibiotic use data to the National Healthcare Safety Network's Antimicrobial Use Option of the Antimicrobial Use and Resistance Module.

The antibiotic stewardship program implements one or both of the following strategies to optimize antibiotic prescribing:

- Preauthorization for specific antibiotics that includes an internal review and approval process prior to use
- Prospective review and feedback regarding antibiotic prescribing practices, including the treatment of positive blood cultures, by a member of the antibiotic stewardship program

The antibiotic stewardship program implements at least two evidence-based guidelines to improve antibiotic use for the most common indications.

Note 1: Examples include, but are not limited to, the following:

- Community-acquired pneumonia
- Urinary tract infections
- Skin and soft tissue infections
- Clostridioides difficile colitis
- Asymptomatic bacteriuria
- Plan for parenteral to oral antibiotic conversion
- Use of surgical prophylactic antibiotics

Note 2: Evidence-based guidelines must be based on national guidelines and also reflect local susceptibilities, formulary options, and the patients served, as needed.

The antibiotic stewardship program evaluates adherence (including antibiotic selection and duration of therapy, where applicable) to at least one of the evidence-based guidelines the hospital implements.

Note 1: The hospital may measure adherence at the group level (that is, departmental, unit, clinician subgroup) or at the individual prescriber level.

Note 2: The hospital may obtain adherence data for a sample of patients from relevant clinical areas by analyzing electronic health records or by conducting chart reviews.

The antibiotic stewardship program collects, analyzes, and reports data to hospital leaders and prescribers.

Note: Examples of antibiotic stewardship program data include antibiotic resistance patterns, antibiotic prescribing practices, or an evaluation of antibiotic stewardship activities.

The hospital takes action on improvement opportunities identified by the antibiotic stewardship program.

Project: STI Syndemic Response

Syphilis	
<u>Clinical Notes</u>	<u>Primary/Secondary/Early Latent (<1yr since negative RPR)</u>
~Prenatal Pts: Consult OBGYN for tx	[] Penicillin (LA Bicillin) 2.4MU IM x 1
~Low threshold for sending RPR and tx	
~Any pts with s/sx or risk factors	<u>Late Latent/Unknown Duration/Tertiary</u>
	[] Penicillin (LA Bicillin) 2.4MU IM Weekly x 3wks
~Assess pt's neurological sx for possible neurosyphilis	
	<u>Severe PCN Allergy (Anaphylaxis)</u>
	~Primary/Secondary/Early Latent
	[] Doxycycline 100mg po BID x 14 Days
	~Late Latent/Unknown Duration/Tertiary
	[] Doxycycline 100mg po BID x 28 Days
<u>References</u>	Updated May 2021
1. CDC STD Guidelines. MMWR. 2015	

IHS Antibiotic Stewardship Webpage

U.S. Department of Health and Human Services

Indian Health Service
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Strategic Initiatives

National Core Formulary



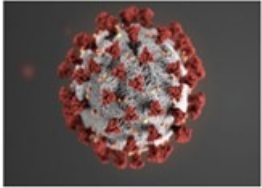
The National Core Formulary is regularly updated as current medical practice and literature warrant change. Please visit the [National Core Formulary](#) often for updates.

Clinical Guidance



Clinical Guidance documents offer convenient, concise reviews of NPTC topics. [Formulary Briefs](#)

COVID-19 Clinical Information



The NPTC provides original clinical content and guidance on COVID-19 related issues for I/T/U providers. [NPTC COVID-19 clinical information](#)

The Indian Health Service (IHS) National Pharmacy and Therapeutics Committee (NPTC) is a permanent, chartered committee consisting of both field members and leadership officers. Field membership includes twelve practicing physicians and pharmacists representing the full spectrum of geographic and practice settings in Indian country. Leadership of the NPTC resides in a physician Chairperson and a pharmacist Vice-Chair.

The primary responsibility of the NPTC is to ensure that the IHS National Core Formulary (NCF) remains up to date with changes in medical knowledge and practice and provides I/T/U clinicians with the tools to deliver evidence-based and cost-effective pharmaceutical services. The NPTC meets quarterly to discuss evolving research and practice guidelines for conditions addressed by the NCF, to review the status of national contracts and other pharmaco-economic data, to consult with subject matter experts on formulary and guidelines issues and to modify the NCF as needed.

STAY CONNECTED

Sign up on our [NPTC LISTSERV](#) for latest news, updates and discussions.

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National Pharmacy & Therapeutics Committee / Antibiotic Stewardship Program

Antibiotic Stewardship Program

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Strategic Initiatives

The Indian Health Service (IHS) Antibiotic Stewardship Program Committee (ASP) is a subcommittee of the IHS National Pharmacy Council (NPC) and is responsible for providing guidance on improving and measuring the appropriate use of antimicrobials by promoting the selection of the optimal antimicrobial drug regimen, dose, duration of therapy, and route of administration in Federal, Tribal, and Urban (I/T/U) facilities within the Indian Health Service (IHS). The ASP team will provide support of IHM Part 3 Chapter 39 and advise the Director, OCPS regarding aspects of the ASP under their purview.

Mission

The ASP Committee seeks to improve and measure appropriate use of antimicrobials within IHS by providing all sites with accessible tools and best practices to establish site specific antibiotic stewardship programs.

Vision

To optimize antibiotic prescribing to best treat infections while minimizing and or reducing antibiotic resistance.

STAY CONNECTED

[IHS ASP Listserv](#) (click to sign up)

Clinical Resources

- [A Review of Antimicrobial Resources](#) (PDF - 1770 KB)
- [Ambulatory Care ASP Elements Presentation](#) (PDF - 1516 KB)
- [Antibiograms](#) (PDF - 1422 KB)
- [Antimicrobial Efforts in the Emergency Room](#) (PDF - 249 KB)
- [ASP Quality Improvement with SMRRT Software](#) (PDF - 1343 KB)
- [Core Elements of Antimicrobial Stewardship](#) (PDF - 786 KB)
- [Implementing AUC-MIC Vancomycin Monitoring at an IHS Medical Center](#) (PDF - 3650 KB)
- [Organizing Quick Order in EHR](#) (PDF - 1960)

Previous Webinar Recordings

[Inpatient ASP Reporting](#)

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Vice-Chair – CDR James "Garrett" Sims, PharmD
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Secretary – LCDR Madison Adams, PharmD
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Presentation Coordinator - Vacant

Antimicrobial Stewardship Program Committee (ASP)

Future Considerations

- Expanding national ASP efforts beyond pharmacist/pharmacy department
- Establish a mechanism to report antibiotic data to NHSN
- Actively recruit presenters for the annual NPC ASP webinar series



Antimicrobial Stewardship Program Committee (ASP)

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