



Nebraska Antimicrobial Stewardship
Assessment and Promotion Program

Antimicrobial Stewardship Self-Assessment Instrument for Outpatient Facilities

Facility Name: _____ **Date Completed:** _____

I. Commitment

1. Does your facility have written commitments or policies in support of antibiotic stewardship?	Yes		No
If yes, are these commitments or policies displayed publicly?	Yes	N/A	No
2. Has your facility identified a single leader to direct antibiotic stewardship activities?	Yes		No
3. Has your facility included antibiotic stewardship-related duties in position descriptions or job evaluation criteria?	Yes		No
4. Does your facility communicate with all clinic staff members regularly to set patient expectations regarding appropriate antibiotic indications?	Yes		No

II. Action for Policy and Practice

5. Does your facility offer its providers evidence-based diagnostic criteria and treatment recommendations (i.e., based on national or local clinical guidelines) for common infections?	Yes	Developing	No
If yes, describe how you are doing this.			
6. Are your providers encouraged to use delayed prescribing practices or watchful waiting, when appropriate (e.g., acute uncomplicated sinusitis, mild acute otitis media)?	Yes	Developing	No
7. Does your facility provide communications skills training pertaining to antibiotic prescribing for clinicians?	Yes	Developing	No
8. Does your facility require explicit written justification in the medical record for non-recommended antibiotic prescribing (e.g. antibiotics for viral URI)?	Yes	Developing	No
9. Does your facility utilize clinical decision support processes to improve antibiotic prescribing?	Yes	Developing	No
If yes, briefly describe the clinical decision support process(es) used.			
10. Does your facility use call centers, nurse hotlines, or pharmacist consultations as triage systems (e.g., patients call these services for self-care advice for upper respiratory symptoms) to prevent unnecessary clinic visits for mild upper respiratory infections?	Yes	Developing	No

III. Tracking and Reporting

11. Do you track outpatient antibiotic prescribing in any way either for a population, a condition, or by prescriber?	Yes		No
If yes, how is this tracking accomplished and what information is tracked?			
If antibiotic prescribing is tracked, is this data shared with clinicians?	Yes	N/A	No
If shared, is this data used for process quality improvement?	Yes	N/A	No

If yes, list an example of a quality improvement project you have undertaken based on this data.			
12. Do your clinicians participate in any other quality improvement activities focused on tracking and improving antibiotic prescribing?	Yes		No
If yes, describe these activities.			
13. Does your facility assess and share performance on quality measures and established goals regarding appropriate antibiotic prescribing from health care plans and payers?	Yes		No
If yes, what groups or organizations do you work with in this process (e.g., insurance companies, other payers, etc.)?			
IV. Education and Expertise			
Patient-centered education			
14. Does your facility routinely use specific communications strategies (e.g. in-visit counseling, educational materials, group classes) to educate patients about when antibiotics are and are not needed?	Yes		No
15. Does your facility routinely educate patients about the potential harms or side effects of antibiotic treatment?	Yes		No
16. Does your facility routinely provide patient education materials regarding antibiotic use or the management or symptomatic relief for common infections?	Yes		No
Clinician-centered education			
17. Does your facility onboard/train clinicians in a systematic way to educate patients about appropriate use or side effects of antibiotics?	Yes		No
18. Does your facility provide face-to-face educational training (academic detailing) for clinicians regarding appropriate antibiotic prescribing?	Yes		No
19. Does your facility provide continuing education activities pertaining to antibiotics or communication strategies about appropriate antibiotic prescribing for clinicians?	Yes		No
20. Does your facility ensure timely access to persons with expertise (e.g., pharmacists, infectious diseases specialists) to assist clinicians in improving antibiotic prescribing?	Yes		No
V. Additional Questions on Antimicrobial Stewardship Challenges			
21. In your opinion, what are the top three areas of antimicrobial misuse or overuse at your facility?			
a) _____			
b) _____			
c) _____			
22. In your opinion, what are the top three barriers to starting or improving antimicrobial stewardship processes at your facility?			
a) _____			
b) _____			
c) _____			

