

AHRQ Safety Program for Improving Antibiotic Use

Data Collection Frequently Asked Questions (FAQ)

Q: What will the data be used for?

A: The data is collected by NORC at the University of Chicago for program evaluation purposes and as a tool for each site’s own quality improvement efforts. NORC will use the collected data to evaluate the adoption and effectiveness of each antibiotic stewardship program. Additionally, each site can use their data to track, monitor and improve processes and outcomes within their own antibiotic stewardship program.

Q: What data do we need to collect?

A: Data will be collected differently in acute care, long-term care and ambulatory care settings. Please see the tables below for which data will be collected in each care setting.

Setting	Data Collection Tools
<i>Acute Care</i>	<ul style="list-style-type: none"> • Structural Assessment tool (completed by unit leaders) • Hospital Survey on Patient Safety Culture (completed by all unit staff) • Team Antibiotic Review Form (completed by stewardship team) • Days of antibiotic therapy (DOT) per 1,000 days present (extracted from EHR) • Clostridium Difficile (c.diff) laboratory-identifiable (LabID) events per 10,000 patient-days by unit (extracted from EHR)
<i>Long-term Care</i>	<ul style="list-style-type: none"> • Structural Assessment tool for long-term care settings (completed by unit leaders) • Nursing Home Survey on Patient Safety Culture (completed by all staff) • Days of antibiotic therapy (DOT) per 1,000 resident-days (extracted from EHR) • Rate of new antibiotic starts initiated in nursing home per 1,000 resident-days (extracted from EHR) • Clostridium Difficile (c.diff) laboratory-identifiable (LabID) events per 10,000 resident-days by unit (extracted from EHR) • Number of urine cultures obtained per 1,000 resident-days (extracted from EHR)
<i>Ambulatory Care</i>	<ul style="list-style-type: none"> • Structural Assessment tool for ambulatory care settings (completed by unit leaders) • Medical Office Survey on Patient Safety Culture (completed by all staff) • Number of antibiotic prescriptions per 100 patient-visits (extracted from EHR) • Proportion of antibiotic prescription among patients with ICD-10 codes for non-antibiotic appropriate respiratory conditions (extracted from EHR)

Q: How frequently do we need to collect the data?

A: For all three settings –

1. The **structural assessment tool** will be collected at multiple points during the pilot. Please collect the data and **submit it into the Liberty system** sometime during the following time periods:

Structural Assessment (for all three settings)	
Collection Period	Timeframe to Submit into Liberty
Baseline	TBD
End of pilot	April 1, 2018–April 14, 2018
One year after the pilot ends	April 1, 2019 –April 14, 2019

2. The **patient safety and culture surveys** will also be collected twice during the study period. Please collect the data and **submit it into the Liberty system** sometime during the following time periods:

Patient Safety and Culture Surveys (for all three settings)	
Collection Period	Timeframe to Submit into Liberty
Baseline	TBD
End of pilot	March 5, 2018- May 6, 2018

3. **Electronic Health Record extracts** will be collected retrospectively to reflect patients admitted, housed or seen during each of the months within the study period (April of 2017 through March of 2018). To give sites time to develop a data extraction process, monthly data from the baseline period (April, May and June 2017) will all be due by July 14, 2017. Starting with the July 2017 monthly data extracts, the data should be retrospectively extracted and sent to NORC between the 1st and the 14th of the following month (i.e. DOT per 1,000 days present data from **July 2017** should be submitted to the Liberty system between **August 1-August 14, 2017**).

C.diff LabID events will be collected quarterly for acute care and long-term care settings only (baseline, 1st and 2nd quarters in 2017 and 3rd quarter in 2018).

Please collect all the EHR data and **submit it into the Liberty system** by the following dates:

EHR Clinical Data	
Collection Period	Deadline to Submit into Liberty

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Baseline data (April, May, June 2017)	TBD
Monthly data from July 2017	TBD
Monthly data from August 2017	September 14, 2017
Monthly data from September 2017	October 14, 2017
Quarterly data from Quarter 1 of Pilot (July, August, September 2017)	October 14, 2017
Monthly data from October 2017	November 14, 2017
Monthly data from November 2017	December 14, 2017
Monthly data from December 2017	January 14, 2018
Quarterly data from Quarter 2 of Pilot (October, November, December 2017)	January 14, 2018
Monthly data from January 2018	February 14, 2018
Monthly data from February 2018	March 14, 2018
Monthly data from March 2018	April 14, 2018
Quarterly data from Quarter 3 (final quarter) of Pilot (January, February, March 2018)	April 14, 2018

4. **The Antibiotic use review form** will be completed by anyone on the stewardship team for the acute care settings only, on a monthly basis during the pilot period (starting in July 2017 and reoccurring monthly until March 2018)
 - i. Please plan to sit down with your team to discuss as many patients with antibiotic prescriptions as possible on that day. The antibiotic review form can be completed multiple times each month in order to review a total of at least 10 cases of patients with antibiotic prescriptions per month (i.e. on September 15, a stewardship team can choose to perform a real-time review of all 10 cases of patients on antibiotic prescriptions that day or they can review cases of 5 patients with antibiotic prescriptions on September 8, 3 cases on September 18, and 2 cases on September 26). Regardless of if you complete all 10 reviews in one day or throughout the month, these cases should reflect 10 different patients with antibiotic prescriptions.

Keep in mind that the second half of the questions should be answered specifically for patients on antibiotics >24 hours. Please complete the online review form with the stewardship team and submit it right away.

Antibiotic Review form data	
	Deadline to Submit into Liberty (teams may

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Collection Period	<i>choose to perform real-time reviews multiple times throughout the month, the dates below denote the last date a real-time review should be completed and submitted each month)</i>
10 cases during August 2017	August 31, 2017
10 cases during September 2017	September 30, 2017
10 cases during October 2017	October 31, 2017
10 cases during November 2017	November 30, 2017
10 cases during December 2017	December 31, 2017
10 cases during January 2018	January 31, 2018
10 cases during February 2018	February 28, 2018
10 cases during March 2018	March 30, 2018

Please see appendices I-III for all data collection and submission dates separated by care setting

Q: How should we share the collected data with NORC?

A: The data should be sent to NORC through the following channels:

- 1) The structural assessment tool, antibiotic review form, and patient safety culture surveys will be collected via NORC’s online data collection platform. NORC will send unique survey links for each eligible respondent to answer the assessment and survey.
- 2) EHR data extracts should be uploaded via the NORC online data collection system. As a default setting, only your Coordinating Entity Lead has permission to upload the data. Please reach out to the support team if you need permission for other individuals to upload the data. After you log in, please click on “Data Collection Tool” in the top right corner of the yellow tool bar. Under the **Collections** drop-down click “Clinical Measures” to continue, then follow the instructions and select the corresponding file to upload. Please provide a description with every upload and include the facility name and type of setting (acute, long-term, ambulatory) in the file name. The data dictionary and EHR extract template can be found on this page. Please feel free to use your own template as long as all the required data (as outlined in the EHR extract template) are provided. Only files of 10MB or less can be uploaded. If you need to submit files larger than 10MB or have technical questions, please reach out to the support team at ahrq-as-support@norc.org.

Q: How will data submitted to NORC be managed?

A: The data will be stored in NORC’s secure server and only project team members will be authorized to access the data.

Q: Who will be able to access to the data results?

A: NORC will provide feedback to sites within 30 days of when they submit the data. Sites will have access to de-identified information on how they are performing relative to the other pilot sites. Results will also be shared with the project team and AHRQ.

Q: Who should I contact with if I have any other questions?

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A: If you have any questions about data collection (e.g. difficulty to enter or share the data, difficulty to understand the assessment/survey/clinical measures, concerns about data security), please send an email to: AHRQ-AS-SUPPORT@NORC.ORG with the Subject Line: Data Collection.

Appendix I: Timeline for data collection and submission in the ACUTE CARE setting

Data Collection Instrument	Key person(s) completing the data collection	Frequency of Data Collection	Timeline for Data Submission (please submit each data instrument within each timeframe outlined below)
Structural Assessment for the Acute Care Setting	Unit leaders	Complete three times <i>(beginning of the baseline period, end of the pilot, year after the pilot ends)</i>	Beginning of baseline period: TBD End of the pilot: April 1, 2018 – April 14, 2018 One year after the pilot ends: April 1, 2019 – April 14, 2019
Hospital Survey on Patient Safety Culture	All unit staff	Complete twice <i>(baseline period and at the end of the pilot)</i>	Baseline period: TBD End of the pilot: March 5, 2018- May 6, 2018

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Data Collection Instrument	Key person(s) completing the data collection	Frequency of Data Collection	Timeline for Data Submission (please submit each data instrument within each timeframe outlined below)
Days of antibiotic therapy per 1,000 days present for patients who are hospitalized in your unit	Site IT Staff	<p>Monthly data extracts should be <u>submitted no later than the 14th of the following month</u></p> <p><u>Retrospectively collect monthly data during the entire pilot period</u> (for a total of 12 months of data)</p>	<p>Submission of monthly EHR data:</p> <ol style="list-style-type: none"> 1. April, May, June 2017 data (submitted TBD) 2. July 2017 data (submitted TBD) 3. August 2017 data (submitted between September 1-September 14, 2017) 4. September 2017 data (submitted between October 1-October 14, 2017) 5. October 2017 data (submitted between November 1-November 14, 2017) 6. November 2017 data (submitted between December 1-December 14, 2017) 7. December 2017 data (submitted between January 1-January 14, 2018) 8. January 2018 data (submitted between February 1-February 14, 2018) 9. February 2018 data (submitted between March 1-March 14, 2018) 10. March 2018 data (submitted between April 1-April 14, 2018)
Number of <i>c.diff</i> LabID events per 10,000 patient-days for patients who are hospitalized in your unit	Site IT Staff	<p>Collect four times (<i>Baseline period, Quarter 1, Quarter 2, Quarter 3</i>)</p>	<p>Baseline data (April, May, June 2017): submitted TBD</p> <p>Quarter 1 data (July, August, September 2017): submitted between October 1-October 14, 2017</p> <p>Quarter 2 data (October, November, December 2017): submitted between January 1-January 14, 2018</p> <p>Quarter 3 data (January, February, March 2018): submitted between April 1-April 14, 2018</p>

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Data Collection Instrument	Key person(s) completing the data collection	Frequency of Data Collection	Timeline for Data Submission (please submit each data instrument within each timeframe outlined below)
Team Antibiotic Review Form	Stewardship team	<p>Complete monthly after the 3 month baseline period ends</p> <p>Perform a real-time review of patients on antibiotics <u>on that day</u></p> <p>Teams may choose to perform real-time reviews of a total of <u>at least 10</u> cases of patients with antibiotics multiple times throughout the month or all on one day <i>(e.g. on October 15, 2017 review all 10 cases of patients who are on antibiotics on October 15 <u>or</u> on October 9 review 3 cases from October 9 and on October 18 review 7 cases from October 18).</i></p>	<p>The dates below denote the last date a real-time review should be completed and submitted each month. Please submit the online form immediately after the review is completed.</p> <ol style="list-style-type: none"> 1. August 2017 Antibiotic Review: By August 31, 2017 2. September 2017 Antibiotic Review: By September 30, 2017 3. October 2017 Antibiotic Review: By October 31, 2017 4. November 2017 Antibiotic Review: By November 30, 2017 5. December 2017 Antibiotic Review: By December 31, 2017 6. January 2018 Antibiotic Review: By January 31, 2018 7. February 2018 Antibiotic Review: By February 28, 2018 8. March 2018 Antibiotic Review: By March 31, 2018

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Appendix II. Timeline for data collection and submission deadline in the LONG-TERM CARE setting

Data Collection Instrument	Key person(s) completing the data collection	Frequency of Data Collection	Timeline for Data Submission (please submit each data instrument within each timeframe outlined below)
Structural Assessment for Long-term Care Setting	Unit leaders	Complete three times <i>(beginning of the baseline period, after the pilot, year after the pilot ends)</i>	Beginning of the baseline period: TBD End of the pilot: April 1, 2018–April 14, 2018 One year after the pilot ends: April 1, 2019 –April 14, 2019
Nursing Home Survey on Patient Safety Culture	All staff	Complete twice <i>(baseline period and at end the end of the pilot)</i>	Baseline period: TBD End of the pilot: March 5, 2018 -- May 6, 2018
Days of antibiotic therapy per 1,000 resident-days for patients who are housed in your unit Rate of new antibiotic starts initiated in nursing home per 1,000 resident-days Number of urine culture collected per 1,000 resident-day for patients who are housed in your unit	Site IT Staff	Monthly data extracts should be submitted no later than the 14th of the following month Retrospectively collect monthly data during the entire pilot period (for a total of 12 months of data)	Submission of monthly EHR data: <ol style="list-style-type: none"> April, May, June 2017 data (submitted TBD) July 2017 data (submitted TBD) August 2017 data (submitted between September 1-September 14, 2017) September 2017 data (submitted between October 1-October 14, 2017) October 2017 data (submitted between November 1-November 14, 2017) November 2017 data (submitted between December 1-December 14, 2017) December 2017 data (submitted between January 1-January 14, 2018) January 2018 data (submitted between February 1-February 14, 2018) February 2018 data (submitted between March 1-March 14, 2018) March 2018 data (submitted between April 1-April 14, 2018)
Number of c.diff LabID events per 10,000 resident-days for patients who are housed in your unit	Site IT Staff	Collect four times <i>(Baseline period, Quarter 1, Quarter 2, Quarter 3)</i>	Baseline data (April, May, June 2017): submitted TBD Quarter 1 data (July, August, September 2017): submitted between October 1-October 14, 2017 Quarter 2 data (October, November, December 2017): submitted between January 1-January 14, 2018 Quarter 3 data (January, February, March 2018) submitted between April 1-April 14, 2018

Appendix III. Timeline for data collection and submission deadline in the AMBULATORY CARE SETTING

Data Collection Instrument	Key person(s) completing the data collection	Frequency of Data Collection	Timeline for Data Submission (please submit each data instrument within each timeframe outlined below)
Structural Assessment for the Ambulatory Care Setting	Unit leaders	Complete three times <i>(beginning of the baseline period, after the pilot, year after the pilot ends)</i>	Beginning of the baseline period: TBD End of the pilot: April 1, 2018–April 14, 2018 One year after the pilot ends: April 1, 2019 –April 14, 2019
Medical Office Survey on Patient Safety Culture	All staff	Complete twice <i>(baseline period and at end the end of the pilot)</i>	Baseline period: TBD End of the pilot: Week of March 5, 2018- Week ending on May 6, 2018
Number of antibiotic prescriptions per 100 patient-visits Proportion of antibiotic prescription use among patients with ICD-10 codes for non-antibiotic appropriate respiratory conditions	Site IT Staff	Monthly data extracts should be <u>submitted no later than the 14th of the following month</u> <u>Retrospectively collect monthly data during the entire pilot period</u> (for a total of 12 months of data)	Submission of monthly EHR data: 1. April, May, June 2017 data (submitted TBD) 2. July 2017 data (submitted TBD) 3. August 2017 data (submitted between September 1-September 14,2017) 4. September 2017 data (submitted between October 1-October 14, 2017) 5. October 2017 data (submitted between November 1-November 14, 2017) 6. November 2017 data (submitted between December 1-December 14, 2017) 7. December 2017 data (submitted between January 1-January 14, 2018) 8. January 2018 data (submitted between February 1-February 14, 2018) 9. February 2018 data (submitted between March 1-March 14, 2018) 10. March 2018 data (submitted between April 1-April 14, 2018)