1. **Core Elements 1 & 2: Leadership Commitment & Accountability**
   * Is the C-suite involved and aware?
   * ASP policy written?
   * ASP is part of QI and Patient Safety
   * On the agendas?
   * Is there a statement of support from the hospital board? Have you reported out to them?
   * Has there been a message from te C-suite supporting your program?
   * Is hospital leadership providing support for ASP training for team members?
2. **Core Element 3: Drug Expertise** 
   * Pharmacist leader with dedicated FTE and time
   * Physician leader
   * Offer access to training courses on antibiotic stewardship to help develop local expertise
   * Seek additional expertise by joining multi-hospital improvement collaboratives or through remote consultation (e.g. telemedicine)
3. **Core Element 4: Action** 
   * Anything!
4. **Core Element 5: Tracking**
   * CDC NHSN AU and Resistance or DDD if AUR not possible
   * Monitor adherence to facility-specific treatment recommendations
   * Perform a MUE to assess courses of therapy for selected antibiotics to see if there are opportunities to improve use.
   * IV to PO assessment
   * Dual anaerobic treatment
   * Discharge antibiotics
   * Urine cultures and/or tx of ASB
   * Azithromycin use
5. **Core Element 5: Reporting** 
   * Prepare regular reports on the measures being tracked related to antibiotic Include these data as a standing report to key stakeholders within the facility, e.g., pharmacy and therapeutics, patient safety/quality, medical staff leadership/committees, and hospital board.
   * If feasible, share provider-specific reports with individual clinicians
   * Distribute data and key messaging through staff newsletters and emails.
6. **Core Element 6: Education** 
   * Publish on blogs, website, intranet, and employee newsletters
   * Provide targeted in-person or web-based educational presentations and messages to key provider, pharmacist and nursing groups at least annually
   * Get out of the office and meet the prescribers
   * Get on orientation schedule
   * (Re)credentialing education
   * Patient education material
   * Educating the community