

CASC-NEOS Timeline for Individual Hospitals

1. Hospital commitment by December 2019
 - a. Completion of Part I of Project Charter including signatures
 - b. Completion of IRB exemption (if applicable)
 - c. Scheduling of initial site visit
2. Site Visit Preparation
 - a. Begin work on Part II of Project Charter
 - b. Fill out site visit survey
3. Hospital Site Visits with CASC Steering Members
 - a. Education about antibiotic stewardship, early onset sepsis, and use of the SRC for risk stratification
 - b. Complete Project Charter Part II: IHI Project Charter to identify barriers and opportunities before launch
 - c. Discuss possibility of future publication
4. Data Collection & Reporting
 - a. Completion of CPCQC Data Use Agreement
 - b. Hospital team to collect 6 months of retrospective baseline AUR data (before CASC commitment)
 - c. Hospital team to collect monthly AUR data from time of CASC commitment to SRC implementation
 - d. Hospital team to continue to collect monthly AUR data after SRC implementation
 - e. CPCQC to provide monthly run charts to hospitals with data interpretation
5. Coaching Calls
 - a. Conduct as need coaching calls with appropriate Steering Committee members to address hospital-specific education and implementation concerns
6. Secondary Intervention PDSA Cycles
 - a. After determining data trends begin to test additional interventions such as:
 - i. Automatic Stop Orders at 36 or 48 hours
 - ii. Early Onset Sepsis Guideline/Policy Development
 - iii. Individual feedback to prescribing providers