



Colorado Perinatal Care Quality Collaborative
Colorado Antibiotic Stewardship Collaborative
Neonatal Early Onset Sepsis (CASC-NEOS)
Project Charter Part II

1. What are we trying to accomplish?

Problem:

- Describe your current process for evaluating and treating newborns for early onset sepsis

Project Description:

- Describe your thoughts about what could be improved about the current process?

- What interventions might you implement? (i.e. Sepsis Risk Calculator, automatic stop orders). Note the patient population and the unit where the work will take place.

Rationale:

- Why/how do you think the intervention(s) proposed will benefit your hospital, nursery, patients, families, team etc.?
- What is the business impact of the proposed intervention(s)? Such as reduced costs or financial benefits to your hospital?
- Provide any available baseline data demonstrating your nursery's current Antibiotic Utilization Rate (AUR)

Aim Statement: (SMART – Specific, Measurable, Achievable, Realistic, Time-Bound)

Overall Initiative Aim:

By December 2020, newly participating CASC hospitals will utilize defined best practices for evaluating risk for neonatal sepsis to demonstrate a 10% decrease in antibiotic utilization rate (AUR), without any missed cases or delayed treatment for cases of true sepsis in patients 35 0/7 weeks or beyond.

- Complete an aim statement specific for your hospital (you can set a goal beyond the overall initiative's, but *not* below)

By December 2020, _____[Hospital Name]_____ will utilize defined best practices for evaluating risk for neonatal sepsis to demonstrate a X% decrease in antibiotic utilization rate (AUR), without any missed cases or delayed treatment for cases of true sepsis in patient 35 0/7 weeks or beyond.

2. What changes can we make that will result in improvement?

Key Stakeholders:

- Whose input and support will this initiative require?

- How will you engage these stakeholders?

Barriers:

- What barriers do you predict?

- How will you overcome these barriers?

3. How will we know that a change is an improvement?

Outcome Measure(s):

- List the measure(s) you ultimately want to affect as a result of this initiative (Note: CPCQC will provide data reports for all required measures and optional supported measures. CPCQC will provide templates but will not create data reports for other measures).
 - (REQUIRED): Antibiotic Utilization Rate (AUR) = Antibiotic Days / 1000 patient care days
 - (OPTIONAL, SUPPORTED): Number of newborns exposed to antibiotics

List any additional outcome measures your team is interested in collecting (OPTIONAL)

Process Measure(s):

- List the measure(s) that will tell you if the system is performing as planned to affect the outcome measure (OPTIONAL)
 - (OPTIONAL, SUPPORTED) Measure whether intervention(s) are being performed on all intended newborns

Balancing Measure(s):

- List the measure(s) that will tell you whether you are introducing problems into the system.
 - (REQUIRED): Case review on all babies with a positive blood culture drawn in the first 7 days of life

List any additional balancing measure your team is interested in collecting (OPTIONAL)