

## What is the Hospital National Antimicrobial Prescribing Survey?

The Hospital National Antimicrobial Prescribing Survey (Hospital NAPS) assists in the auditing of antimicrobial prescribing practices within Australian hospitals. It is coordinated by a multi-disciplinary team of clinicians within the Guidance Group at the National Centre for Antimicrobial Stewardship, based at the Doherty Institute in Melbourne. The survey is designed to provide a standardised data collection tool which allows participants to audit prescribing within their facility and to receive useful reports and national benchmarking data.

## Why participate in the survey?

Antimicrobial stewardship programs have been developed to reduce inappropriate and unnecessary use of antimicrobials and assist in slowing the progression of antimicrobial resistance. These programs are an accreditation criterion in the Australian National Safety and Quality Health Service Standards and hospitals are required to audit and monitor antimicrobial prescribing. This survey will help facilities determine prescribing trends, identify targets for quality improvement and over time assist in the evaluation of any implemented changes. The survey also aims to assist hospitals in meeting accreditation for standard 3.14.3 *Monitoring of antimicrobial usage and resistance* and is supported by the Australian Commission on Safety and Quality in Health Care.

## Who can participate in the survey?

Any Australian acute or subacute health care facility is eligible to participate. This includes all public and private hospitals (metropolitan, regional, rural or remote). Auditors can include doctors, pharmacists, nurses or infection control personnel.

## When to perform the survey?

We recommend that the survey is completed *prior* to World Antimicrobial Resistance Awareness Week (November), so that the results are available for discussion and education.

The website remains open throughout the year so that health care facilities can continue to utilise the data collection tools to conduct other audits.

## How to perform the survey?

Facilities are able to elect to perform the survey as either a hospital wide point prevalence survey, repeat point prevalence surveys or a randomised sample of patients.

All data is to be entered into the online database at [www.naps.org.au](http://www.naps.org.au).

## Reporting

Once data entry has been completed, a number of automated reports are available. Reports include a dashboard, more specific detailed reports, benchmarking (see below) and a data export function.

### Benchmarking

If your facility wishes to participate in comparative benchmarking, a written letter of consent must be provided to the NAPS team. This will allow your de-identified information (to facility/hospital and patient) to be released for benchmarking purposes. This should be from an appropriate body within your facility and may include a letter from your CEO, quality or drug and therapeutic committee, or in rare cases, require ethics committee approval (as a quality assurance/DUE/QUM activity). Documents to assist with this approval process are available from the *Resources* page. Approval does not need to be provided before data entry however facilities will not have access to the benchmarking functionality until the approval is received.

## Privacy and ethics

All personal or patient specific information that you provide will be protected at all times and will not be used or provided to any external body or third party without your prior consent and is collected solely for the purpose of reporting and the provision of services. Institutional demographic information may be provided to jurisdictional liaison committees within that jurisdiction upon request however no personal or patient specific information will be provided. Facilities outside of the jurisdiction will not be identified.

De-identified pooled data will be used for general reports and publications, de-identified institutional data may be used for benchmarking purposes with like facilities, but only with prior consent. All generated reports to third parties or for publication will only use de-identified information to person and facility.

Originally, data was collected as part of a National Health and Medical Research Council (NHMRC) research grant and utilised under the ethics and requirements of that grant. Ethics for the project had been granted as a Quality Assurance/Negligible Risk research study by Melbourne Health's, Health Research and Ethics Committee: project number QA2013059. An updated Human Research and Ethics approval HREC/74195/MH-2022 governs the collection of data for research purposes.

The NAPS application and data is managed in accordance with Melbourne Health cybersecurity framework and policies.

## How can I become involved?

For further information, contact us at [support@naps.org.au](mailto:support@naps.org.au)