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# **CURRENT STEWARDSHIP AND EDUCATIONAL ACTIVITY IN RUSSIA - WHAT'S NEXT?**

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# FIRST AB STEWARDSHIP SURVEY: KEY FINDINGS

## Personal education

- **Education in the field of appropriate AB use/AB stewardship received:**
  - at under-graduate stage - **57% (47-79%)** respondents
  - at post-graduate stage - **38% (27-83%)** respondents
- **Training in appropriate AB use/AB stewardship provided by:**
  - employing hospital - **28%**
  - university/college - **22%**
  - scientific conferences - **13%**
- **AB stewardship/infection control training provided:**
  - at induction - **24%** (mandatory - 16%)
  - throughout employment - **57%**

# FIRST AB STEWARDSHIP SURVEY: KEY FINDINGS

## Current AB use policy

- **Availability of group/committee for rational AB use/AB stewardship in the hospital:**
  - **73% (60-80%)**
- **Availability of initiatives/interventions target AB prescribing:**
  - **63% (32-76%)**
- **Initiatives/groups of healthcare professionals play a role in rational AB use/AB stewardship:**
  - **Physicians - 81%**
  - **Microbiologists - 63%**
  - **Pharmacists - 62%**

# FIRST AB STEWARDSHIP SURVEY: KEY FINDINGS

## Education requirements

- **Rational AB use/AB stewardship education topics with the highest priority:**
  - Adequate/prompt timing of AB administration - **56%**
  - Infection prevention and control measures - **48%**
  - Minimise unnecessary AB prescribing - **46%**
- **Preferred post-graduate AB stewardship training tools:**
  - Face-to-face lectures - **54%**
  - 'On the job' learning - **40%**
  - Face-to-face workshops or seminars - **37%**
- **Who should be responsible for rational AB use/AB stewardship education:**
  - Employing hospital - **71%**
  - National or regional governmental agency - **43%**
  - Employees own responsibility - **25%**

# AB STEWARDSHIP SURVEY: NEXT STEPS

- **To broaden the survey:**
  - engage more participated hospitals
  - recruit different types of hospitals - size, specialization, funding sources, location
  - enroll private health care sector
- **To encourage participation of different parties involved in AB use/purchase/circulation:**
  - pharmacists
  - hospital epidemiologists
  - health care authority representatives, etc.
- **To amend the survey:**
  - simplify questionnaire
  - promote e-form of questionnaire with prompt feedback at individual and hospital level
  - advertise to raise awareness of the project

# **AB STEWARDSHIP IN HOSPITALS: EDUCATION & OTHER ACTIVITIES (I)**

- **Establish multidisciplinary AB stewardship team/working group:**
  - **create and update AB stewardship network**
  - **develop AB stewardship national guidelines**
  - **facilitate local AM stewardship programs implementation**
  - **cooperate with professional societies, health care authorities, government bodies**
  - **promote AB stewardship concept to the society**
- **Develop and update national AB stewardship education toolkit:**
  - **available in different formats**
  - **useful for different groups of health care professionals**
  - **suitable for groups and self-education**
- **Create and implement AB clinical decision support system**

# **AB STEWARDSHIP IN HOSPITALS: EDUCATION & OTHER ACTIVITIES (II)**

- **Facilitate implementation of AM stewardship program for hospitals participated at the survey:**
- **- Provide with decision makers support (to get necessary human, financial, technology resources)**
- **- Help to create an efficient team, share responsibilities and appoint the leader responsible for the program**
- **- Assist in identifying a list of appropriate interventions/ actions to implement**
- **- Support selection of outcomes and schedule for audit of prescription and feedback to the relevant staff**
- **- Provide with required education materials and tools, help to implement them in the most efficient way**