

# Launching Antimicrobial Stewardship Programs in Rural Canadian Hospitals: Implementation of a Pharmacist-Led Telestewardship Model

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## BACKGROUND

- Antimicrobial resistance (AMR) is a major patient safety issue across all healthcare facilities
- National bodies recommend antimicrobial stewardship programs (ASP) for all acute care hospitals
- Rural and small hospitals face limited staffing and antimicrobial stewardship (AMS) expertise with similar antimicrobial use (AMU) pressures as larger centers
- Gap:** Limited Canadian guidance for rural and small hospital ASP implementation
- Strategy:** Pharmacist-led antimicrobial telestewardship model

## ACTION

Describe the implementation and evaluation of a pharmacist-led antimicrobial telestewardship program at rural Canadian hospitals.

## METHODS

**DESIGN:** Retrospective descriptive implementation study

### StaRI Framework – Implementation Reporting

*Differentiates intervention and implementation*

#### INTERVENTION

Pharmacist-led telestewardship program

- Remote infectious diseases pharmacy support
- Delivered to five rural Canadian hospitals

#### IMPLEMENTATION

How the intervention was introduced

- Pre-launch activities
- Program launch processes
- Ongoing delivery adaptations

*Reported using Standards for Reporting Implementation (StaRI)*

### RE-AIM Framework- Outcome Evaluation

Reach

Who was exposed

Effectiveness

What impact was observed

Adoption

Organizational uptake

Implementation

How the program was delivered

Maintenance

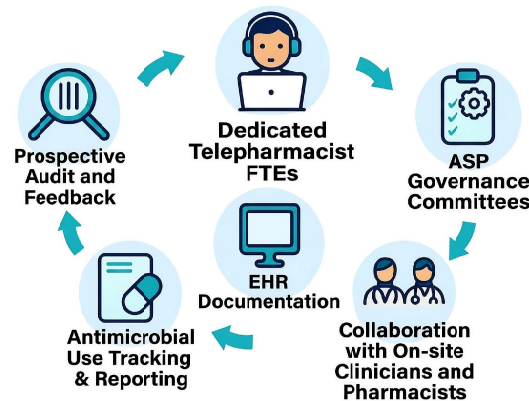
Sustained stewardship

## INTERVENTION AND IMPLEMENTATION

### PRE-LAUNCH



### LAUNCH



## BARRIERS

- Limited AMU data in rural Ontario hospitals
- Low AMS literacy
- Funding constraints (low FTEs)
- Remote ASP pharmacist recruitment challenges
- Cost concerns from leadership

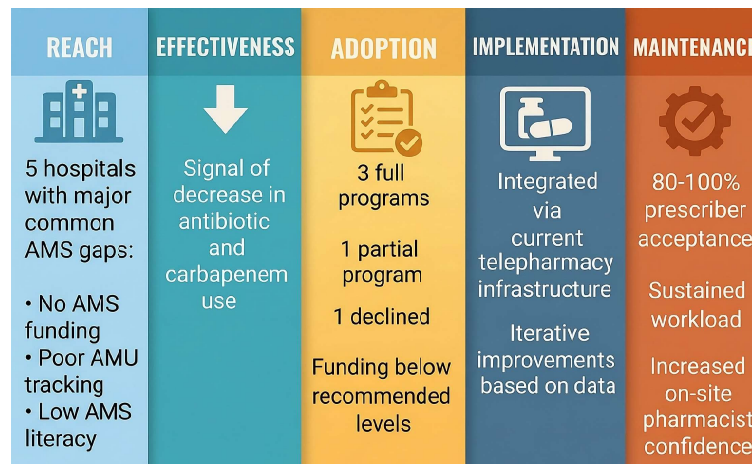
## FACILITATORS

- Strong stakeholder support
- Telepharmacy infrastructure
- Data-driven gap analysis
- Workload demonstrating value

## KEY POINTS

- Telestewardship is feasible in rural hospitals
- Gap analysis is essential
- Works even with limited resources
- High clinician acceptance
- Supports local capacity building

## OUTCOME EVALUATION



## CONCLUSIONS

- Telestewardship enables rural ASP implementation
- Potential for a scalable and sustainable model
- Promising early outcomes
- Future work: formal effectiveness evaluation

## DISCLOSURES

Tran E.	Employed by Northwest Telepharmacy Solutions
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Thomas T.	Employed by Northwest Telepharmacy Solutions
Langford B.	None
Newman P.	Employed by Northwest Telepharmacy Solutions
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