

Illinois Department of Public Health Acute Care Antimicrobial Stewardship Honor Roll Application

The Illinois Department of Public Health Acute Care Antimicrobial Stewardship Honor Roll aims to recognize hospitals that prioritize and excel in implementing evidence-based practices of antimicrobial stewardship. While nearly 98% of Illinois hospitals have reported successful implementation of all seven of the Centers for Disease Control and Prevention's (CDC) Core Elements of Hospital Antibiotic Stewardship Programs, less than 10% have reported implementing all six of the CDC Priorities for Hospital Core Element Implementation, highlighting a significant opportunity to strengthen antimicrobial stewardship efforts statewide. By focusing on these Priorities, the Honor Roll encourages adoption of targeted strategies to improve the quality and impact of existing antimicrobial stewardship programs (ASPs) and promotes best practices and collaboration across health care facilities to combat antimicrobial resistance.

Part I (required): Hospitals will be recognized based on their level of implementation:

Bronze Tier: Implementation of at least 2 Priorities

Silver Tier: Implementation of at least 4 Priorities

Gold Tier: Implementation of all 6 Priorities

Part II (Optional): Antimicrobial Stewardship Collaboration Distinction

This distinction is awarded to hospitals that demonstrate a strong commitment to formal, documented, and sustained partnerships beyond their own institution. Collaborations must meaningfully contribute to the broader stewardship community and reflect a shared goal of improving antimicrobial use across healthcare settings.

Awarded independently of tier status and is open to all applicants.

For assistance with completing this application, please refer to the guidance document found [here](#).

We commend your facility's commitment to advancing antimicrobial stewardship through participation in the IDPH Acute Care Antimicrobial Stewardship Honor Roll program.

Are you applying to the IDPH Acute Care Antimicrobial Stewardship Honor Roll for the first time, or applying for a renewal or an upgrade in tier?

- New Application
 Renewal
 Upgrade in Tier

Please note we are not currently accepting renewals for the Acute Care Honor Roll. Selecting this response will end the application. Do you still wish to continue with this response?

- Yes
 No

Eligible facilities should have received a direct link from IDPH to the Upgrade Application at the start of the application period. If you did not receive a link, please contact DPH.Antimicrobial.Stewardship@Illinois.gov. Selecting this response will end the application. Do you still wish to continue with this response?

- Yes
 No

Honor Roll Designation Renewal

Please note we are not currently accepting renewals for the Acute Care Honor Roll.

Organization/Facility Name

- Advocate Christ Medical Center
- Advocate Condell Medical Center
- Advocate Good Samaritan Hospital
- Advocate Good Shepherd Hospital
- Advocate Illinois Masonic Medical Center
- Advocate Lutheran General Hospital
- Advocate Sherman Hospital
- Advocate South Suburban Hospital
- Advocate Trinity Hospital
- Alton Memorial Hospital
- Anderson Hospital
- Anderson Rehabilitation Institute
- Ann & Robert H. Lurie Children's Hospital of Chicago
- Ascension Alexian Brothers
- Ascension Alexian Brothers Behavioral Health Hospital
- Ascension Saint Alexius
- Ascension Saint Joseph - Chicago
- Blessing Hospital
- Carle BroMenn Medical Center
- Carle Eureka Hospital
- Carle Foundation Hospital
- Carle Health Methodist Hospital
- Carle Health Pekin Hospital
- Carle Health Proctor Hospital
- Carle Hoopes Regional Health Center
- Carle Richland Memorial Hospital
- Carlinville Area Hospital
- CGH Medical Center
- Chicago Behavioral Hospital
- City of Hope Chicago
- Clay County Hospital
- Community First Medical Center
- Community Hospital of Staunton An Anderson Healthcare Partner
- Crawford Memorial Hospital
- Deaconess Illinois Crossroads
- Deaconess Illinois Medical Center
- Deaconess Illinois Union County
- Decatur Memorial Hospital
- Edward Hines Jr VA Hospital - Hines
- Encompass Health Rehabilitation Institute of Libertyville
- Endeavor Health Edward Hospital
- Endeavor Health Elmhurst Hospital
- Endeavor Health Evanston Hospital
- Endeavor Health Glenbrook Hospital
- Endeavor Health Highland Park Hospital
- Endeavor Health Linden Oaks Hospital
- Endeavor Health Northwest Community Hospital
- Endeavor Health Skokie Hospital
- Endeavor Health Swedish Hospital
- Fairfield Memorial Hospital
- Ferrell Hospital
- Franciscan Health Olympia Fields
- Franklin Hospital District
- Garfield Park Behavioral Hospital
- Gateway Regional Medical Center
- Gibson Area Hospital & Health Services
- Gottlieb Memorial Hospital
- Graham Hospital
- Hamilton Memorial Hospital District
- Hammond-Henry Hospital
- Hardin County General Hospital
- Harrisburg Medical Center
- Hartgrove Behavioral Health System
- Herrin Hospital
- Hillsboro Health
- Holy Cross Hospital

- Hopedale Medical Complex
- Horizon Health
- HSHS Good Shepherd Hospital
- HSHS Holy Family Hospital
- HSHS St. Anthony's Memorial Hospital
- HSHS St. Elizabeth's Hospital
- HSHS St. Francis Hospital
- HSHS St. John's Hospital
- HSHS St. Joseph's Hospital - Breese
- HSHS St. Joseph's Hospital - Highland
- HSHS St. Mary's Hospital
- Humboldt Park Health
- Illini Community Hospital
- Insight Hospital & Medical Center
- Iroquois Memorial Hospital & Resident Home
- Jackson Park Hospital & Medical Center
- Jacksonville Memorial Hospital
- Jersey Community Hospital
- Jesse Brown VA Medical Center - Chicago
- John H. Stroger, Jr. Hospital of Cook County
- Kindred Hospital Chicago North
- Kindred Hospital Chicago Northlake
- Kirby Medical Center
- La Rabida Children's Hospital
- Lake Behavioral Hospital
- Lawrence County Memorial Hospital
- Lincoln Memorial Hospital
- Lincoln Prairie Behavioral Health Center
- Loretto Hospital
- Loyola University Medical Center
- MacNeal Hospital
- Marion VA Medical Center
- Marshall Browning Hospital
- Mason District Hospital
- Massac Memorial Hospital
- McDonough District Hospital
- Memorial Hospital Association
- Memorial Hospital Belleville-Shiloh
- Memorial Hospital of Carbondale
- Memorial Hospital, Chester
- MercyHealth Crystal Lake Hospital and Medical Center
- Mercyhealth Hospital - Freeport
- Mercyhealth Hospital and Medical Center - Harvard Campus
- Mercyhealth Javon Bea Hospital - Riverside Boulevard Campus
- Mercyhealth Javon Bea Hospital - Rockton Avenue Campus
- MercyOne Genesis Aledo Medical Center
- MercyOne Genesis Silvis Medical Center
- Midwest Medical Center
- Montrose Behavioral Health Hospital
- Morris Hospital & Healthcare Centers
- Morrison Community Hospital
- Mount Sinai Hospital
- Northwestern Medicine Catherine Gratz Griffin Lake Forest Hospital
- Northwestern Medicine Central DuPage Hospital
- Northwestern Medicine Delnor Hospital
- Northwestern Medicine Huntley Hospital
- Northwestern Medicine Kishwaukee Hospital
- Northwestern Medicine Marianjoy Rehabilitation Hospital
- Northwestern Medicine McHenry Hospital
- Northwestern Medicine Palos Hospital
- Northwestern Medicine Valley West Hospital
- Northwestern Medicine Woodstock Hospital
- Northwestern Memorial Hospital
- OSF HealthCare Divine Mercy Continuing Care Hospital

- OSF HealthCare Holy Family Medical Center
- OSF HealthCare Little Company of Mary Medical Center
- OSF HealthCare Sacred Heart Medical Center
- OSF HealthCare Sacred Heart Medical Center - Urbana
- OSF HealthCare Saint Anthony Medical Center
- OSF HealthCare Saint Anthony's Health Center
- OSF HealthCare Saint Clare Medical Center
- OSF HealthCare Saint Elizabeth Medical Center - Ottawa
- OSF HealthCare Saint Elizabeth Medical Center - Peru
- OSF HealthCare Saint Francis Medical Center
- OSF HealthCare Saint James-John W. Albrecht Medical Center
- OSF HealthCare Saint Katharine Medical Center
- OSF HealthCare Saint Luke Medical Center
- OSF HealthCare Saint Paul Medical Center
- OSF HealthCare St. Joseph Medical Center
- OSF HealthCare St. Mary Medical Center
- Pana Community Hospital
- Pinckneyville Community Hospital
- Prime Healthcare Holy Family Medical Center
- Prime Healthcare Mercy Medical Center
- Prime Healthcare Resurrection Medical Center
- Prime Healthcare Saint Francis Hospital
- Prime Healthcare Saint Joseph Hospital - Elgin
- Prime Healthcare Saint Joseph Medical Center - Joliet
- Prime Healthcare Saint Mary of Nazareth Hospital
- Prime Healthcare St. Mary's Hospital - Kankakee
- Provident Hospital of Cook County
- Red Bud Regional Hospital
- Riveredge Hospital
- Riverside Medical Center
- RML Chicago
- RML Specialty Hospital
- Rochelle Community Hospital
- Roseland Community Hospital
- Rush Copley Medical Center
- Rush Oak Park Hospital
- Rush Specialty Hospital
- Rush University Medical Center
- Saint Anthony Hospital
- Salem Township Hospital
- Sarah Bush Lincoln Fayette County Hospital
- Sarah Bush Lincoln Health Center
- Sarah D. Culbertson Memorial Hospital
- Schwab Rehabilitation Hospital
- Shirley Ryan AbilityLab
- Shriners Children's Chicago
- Silver Cross Hospital
- Silver Oaks Behavioral Hospital
- South Shore Hospital
- Sparta Community Hospital
- Springfield Memorial Hospital
- SSM Health Good Samaritan Hospital - Mount Vernon
- SSM Health St. Mary's Hospital - Centralia
- St. Bernard Hospital & Health Care Center
- St. Joseph Memorial Hospital
- Streamwood Behavioral Healthcare System
- Taylorville Memorial Hospital
- The Pavilion
- The Quad Cities Rehabilitation Institute
- The Rehabilitation Institute of Southern Illinois
- Thomas H. Boyd Memorial Hospital
- Thorek Memorial Hospital
- Thorek Memorial Hospital - Andersonville
- Touchette Regional Hospital
- UChicago Medicine AdventHealth Bolingbrook
- UChicago Medicine AdventHealth GlenOaks

- UChicago Medicine AdventHealth Hinsdale
- UChicago Medicine AdventHealth La Grange
- UChicago Medicine Ingalls Memorial
- UChicago Medicine Medical Center
- UI Health
- UnityPoint Health - Trinity Moline
- UnityPoint Health - Trinity Rock Island
- UW Health Belvidere Hospital
- UW Health SwedishAmerican Hospital
- Van Matre Encompass Health Rehabilitation Hospital
- Vista Medical Center East
- Wabash General Hospital
- Warner Hospital and Health Services
- Washington County Hospital
- West Suburban Medical Center

Please provide a signed leadership letter affirming that stewardship efforts remain at or above the previously recognized level

Primary Point of Contact

Organization/Facility Name

- Advocate Christ Medical Center
- Advocate Condell Medical Center
- Advocate Good Samaritan Hospital
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- Edward Hines, Jr. Veterans Affairs Hospital
- Encompass Health Rehabilitation Institute of Libertyville
- Endeavor Health Edward Hospital
- Endeavor Health Elmhurst Hospital
- Endeavor Health Evanston Hospital
- Endeavor Health Glenbrook Hospital
- Endeavor Health Highland Park Hospital
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- Endeavor Health Skokie Hospital
- Endeavor Health Swedish Hospital
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- Graham Hospital
- Hamilton Memorial Hospital District
- Hammond-Henry Hospital
- Hardin County General Hospital
- Harrisburg Medical Center
- Hartgrove Behavioral Health System
- Herrin Hospital
- Hillsboro Health projectredcap.org

- Holy Cross Hospital
- Hopedale Medical Complex
- Horizon Health
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- UW Health SwedishAmerican Hospital
- Van Matre Encompass Health Rehabilitation Hospital
- Vista Medical Center East
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- Warner Hospital and Health Services
- Washington County Hospital
- West Suburban Medical Center

Facility County

- Adams
- Alexander
- Bond
- Boone
- Brown
- Bureau
- Calhoun
- Carroll
- Cass
- Champaign
- Christian
- Clark
- Clay
- Clinton
- Coles
- Cook
- Crawford
- Cumberland
- DeKalb
- De Witt
- Douglas
- DuPage
- Edgar
- Edwards
- Effingham
- Fayette
- Ford
- Franklin
- Fulton
- Gallatin
- Greene
- Grundy
- Hamilton
- Hancock
- Hardin
- Henderson
- Henry
- Iroquois
- Jackson
- Jasper
- Jefferson
- Jersey
- Jo Daviess
- Johnson
- Kane
- Kankakee
- Kendall
- Knox
- La Salle
- Lake
- Lawrence
- Lee
- Livingston
- Logan
- McDonough
- McHenry
- McLean
- Macon
- Macoupin
- Madison
- Marion
- Marshall
- Mason
- Massac
- Menard
- Mercer
- Monroe
- Montgomery
- Morgan
- Moultrie

- Ogle
- Peoria
- Perry
- Piatt
- Pike
- Pope
- Pulaski
- Putnam
- Randolph
- Richland
- Rock Island
- Saline
- Sangamon
- Schuyler
- Scott
- Shelby
- St. Clair
- Stark
- Stephenson
- Tazewell
- Union
- Vermilion
- Wabash
- Warren
- Washington
- Wayne
- White
- Whiteside
- Will
- Williamson
- Winnebago
- Woodford

First Name

Last Name

Title/Role

Email Address

Phone Number

((must be a 10-digit U.S. phone number))

Part I: CDC Hospital Core Elements and Priorities

A summary of the CDC Core Elements of Hospital Antibiotic Stewardship Programs and the Priorities for Hospital Core Element Implementation are provided here for your reference. On the following pages, please indicate which Priorities your hospital has implemented.

Core Elements of Hospital Antibiotic Stewardship Programs Priorities for Hospital Core Element Implementation
Leadership Commitment

Dedicate the necessary human, financial, and information technology resources. Antimicrobial stewardship (AS) physician and/or pharmacist leader(s) have AS responsibilities in their contract, job description, or performance review.

Accountability

Appoint a leader or co-leaders, such as a physician and pharmacist, responsible for Antimicrobial Stewardship Program (ASP) management and outcomes. ASP is co-led by a physician AND pharmacist.*

Drug Expertise

Appoint a pharmacist, ideally as the co-leader of the ASP, to help lead implementation efforts to improve antibiotic use.

AS physician and/or pharmacist leader(s) have completed infectious diseases specialty training, a certificate program, or other training on AS.

Action

Implement interventions, such as prospective audit and feedback or preauthorization, to improve antibiotic use. ASP has facility-specific treatment recommendations for common clinical condition(s) AND performs prospective audit and feedback OR preauthorization for specific antibiotic agents.

Tracking

Monitor antibiotic prescribing, the impact of interventions, and other important outcomes, like *Clostridioides difficile* infections and resistance patterns. Hospital submits antibiotic use data to the National Healthcare Safety Network (NHSN) Antimicrobial Use (AU) Option.

Reporting

Regularly report information on antibiotic use and resistance to prescribers, pharmacists, nurses, and hospital leadership. Prescriber, unit or service-level antibiotic use reports are provided at least annually to target feedback to prescribers AND the ASP monitors adherence to facility-specific treatment recommendations for at least one common clinical condition.

*For critical access hospitals (CAHs), accountability can be met if the hospital has a physician leader with a pharmacist involved in stewardship (recognizing that some CAHs do not have pharmacists on staff, so co-leadership is not possible).

Leadership Commitment

AS physician and/or pharmacist leader(s) have AS responsibilities in their contract, job description, or performance review.

- Yes
 No

Please select the type of documentation you are submitting for the Leadership Commitment Priority:

- Employment contract, job description, or performance review excerpt that explicitly includes antimicrobial stewardship responsibilities for the physician and/or pharmacist leader(s).
 Letter of attestation from facility leadership reflecting assignment of AS responsibilities to physician and/or pharmacist leader(s).

Please upload your Leadership Commitment documentation HERE:

Please ensure that all supporting documentation is fully de-identified and does not contain any patient health information (PHI). Please note, once you select "Upload", you will no longer be able to see or edit your file(s).

Optional: Please provide any context or clarification that may assist reviewers in reviewing this documentation.

Accountability

ASP is co-led by a physician AND pharmacist.

- Yes
 No

* For critical access hospitals (CAHs), accountability can be met if the hospital has a physician leader with a pharmacist involved in stewardship (recognizing that some CAHs do not have pharmacists on staff, so co-leadership is not possible). If that is the case, please answer "N/A" for the pharmacist champion's contact information below.*

Physician Champion Contact Information Pharmacist Champion Contact Information

First and Last Name _____ First and Last Name _____
Email Address _____

Email Address _____
Phone Number _____ Phone Number _____

Please select the type of documentation you are submitting for the Accountability Priority:

- ASP organizational chart listing both the physician and pharmacist as co-leaders
 ASP charter, committee roster, or meeting minutes, identifying both co-leaders by name and role

Please upload your Accountability documentation [HERE](#).

Please ensure that all supporting documentation is fully de-identified and does not contain any patient health information (PHI). Please note, once you select "Upload", you will no longer be able to see or edit your file(s).

Optional: Please provide any context or clarification that may assist reviewers in reviewing this documentation. _____

Drug Expertise

AS physician and/or pharmacist leader(s) have completed infectious diseases specialty training, a certificate program, or other training on AS.

- Yes
 No

Please select the type of documentation you are submitting for the Drug Expertise Priority:

- CV or transcript showing ID fellowship, residency, or relevant education
 Certificate(s) of completion from SIDP Antimicrobial Stewardship Certificate Program or MAD-ID Antimicrobial Stewardship Training Program

Please upload your Drug Expertise documentation [HERE](#).

Please ensure that all supporting documentation is fully de-identified and does not contain any patient health information (PHI). Please note, once you select "Upload", you will no longer be able to see or edit your file(s).

Optional: Please provide any context or clarification that may assist reviewers in reviewing this documentation.

Action

ASP has facility-specific treatment recommendations for common clinical condition(s)

- Yes
 No

Please select the type of documentation you are submitting for the Action (facility-specific treatment recommendations) Priority:

- Facility-specific evidence-based treatment guideline(s) for common infections (e.g., community acquired pneumonia, urinary tract infection, skin and soft tissue infection)
 Screenshot(s) of clinical decision support software or order entry process that includes antimicrobial recommendations based on indication
 Protocol(s) for stewardship interventions targeting a common infection

Please upload your Action (facility-specific treatment recommendations) documentation [HERE](#)

Please ensure that all supporting documentation is fully de-identified and does not contain any patient health information (PHI). Please note, once you select "Upload", you will no longer be able to see or edit your file(s).

Optional: Please provide any context or clarification that may assist reviewers in reviewing this documentation.

ASP performs prospective audit and feedback (PAF)

- Yes, prospective audit and feedback (PAF)
 Yes, preauthorization (PA)
 No

OR

preauthorization (PA) for specific antibiotic agents

Please note, in order to qualify for the Action Priority, the ASP must have facility-specific treatment recommendations for common clinical condition(s) AND perform prospective audit and feedback OR preauthorization for specific antibiotic agents.

Please select the type of documentation you are submitting for the Action (PAF) Priority :

- Policy or protocol describing how PAF is conducted (e.g., daily review of select antimicrobials or patients by stewardship team)
 Screenshot(s) of dashboard or tracking tool used for identifying and following up on patients for PAF
 List of antimicrobials or patient types reviewed for PAF
 Blank or de-identified audit template or feedback note used to track reviews and recommendations

Please upload your Action (PAF) documentation [HERE](#).

Please ensure that all supporting documentation is fully de-identified and does not contain any patient health information (PHI). Please note, once you select "Upload", you will no longer be able to see or edit your file(s).

Optional: Please provide any context or clarification that may assist reviewers in reviewing this documentation.

Please select the type of documentation you are submitting for the Action (PA) Priority :

- Antimicrobial restriction policy listing agents that require PA and corresponding criteria
- Protocol describing PA workflow (i.e., who reviews requests, how approval is granted, what criteria are used, etc.)
- Screenshot(s) of clinical decision support software or order entry process showing PA alert or approval process

Please upload your Action (PA) documentation [HERE](#).

Please ensure that all supporting documentation is fully de-identified and does not contain any patient health information (PHI). Please note, once you select "Upload", you will no longer be able to see or edit your file(s).

Optional: Please provide any context or clarification that may assist reviewers in reviewing this documentation.

Tracking

Hospital submits antibiotic use data to the NHSN
Antimicrobial Use (AU) Option

- Yes
 No

Please select the type of documentation you are
submitting for the Tracking Priority:

- Recent report downloaded from NHSN indicating
submission of antimicrobial use data

Please upload your Tracking documentation [HERE](#).

Please ensure that all supporting documentation is fully de-identified and does not contain any patient health information (PHI). Please note, once you select "Upload", you will no longer be able to see or edit your file(s).

Optional: Please provide any context or clarification
that may assist reviewers in reviewing this
documentation.

Reporting

Prescriber, unit or service-level antibiotic use reports are provided at least annually to target feedback to prescribers

- Yes
 No

Please select the type of documentation you are submitting for the Reporting (antibiotic use report) Priority:

- Prescriber, unit, or service-level antibiotic use report that has been shared with prescribers for at least one antimicrobial agent or common clinical condition

Examples of acceptable documentation for this Reporting Priority requirement shown below.

[Attachment: "Reporting Examples_Redacted.pdf"]

Please upload your Reporting (antibiotic use report) documentation [HERE](#).

Please ensure that all supporting documentation is fully de-identified and does not contain any patient health information (PHI). Please note, once you select "Upload", you will no longer be able to see or edit your file(s).

Optional: Please provide any context or clarification that may assist reviewers in reviewing this documentation.

The ASP monitors adherence to facility-specific treatment recommendations for at least one common clinical condition.

- Yes
 No

Please note, in order to qualify for the Reporting Priority, the ASP must provide prescriber, unit or service-level antibiotic use reports at least annually to target feedback to prescribers AND the ASP must monitor adherence to facility-specific treatment recommendations for at least one common clinical condition.

Please select the type of documentation you are submitting for the Reporting (monitoring adherence) Priority:

- Prescriber, unit, or service-level report indicating adherence to treatment recommendations for at least one common clinical condition
 Medication use evaluation of adherence to treatment recommendations for an antimicrobial agent or condition

Please upload your Reporting (monitoring adherence) documentation [HERE](#).

Please ensure that all supporting documentation is fully de-identified and does not contain any patient health information (PHI). Please note, once you select "Upload", you will no longer be able to see or edit your file(s).

Optional: Please provide any context or clarification that may assist reviewers in reviewing this documentation.

Part II: Antimicrobial Stewardship Collaboration Open to all applicants and awarded independently of tier status

To achieve this distinction, facilities must engage in active, structured, and ongoing collaborations that extend beyond their own institution to advance antimicrobial stewardship. These collaborations should involve sharing best practices, data, and resources with external partners to collectively enhance antimicrobial use practices and combat antimicrobial resistance.

Examples include:

- Participation in the PALASE Collaborative and/or CHARM Project. Regional Collaborative: Collaborating with regional hospitals, long-term care facilities, outpatient clinics, etc. to share antimicrobial use and resistance data. This includes developing and integrating stewardship interventions and protocols, facilitated through regularly scheduled meetings to exchange information and strategies. Formal Mentorship/Support: Establishing structured, ongoing mentorship programs where your facility provides antimicrobial stewardship expertise to regional hospitals, long-term care facilities, outpatient clinics, etc. This involves regular meetings, shared resources, and continuous support to help mentee facilities develop and enhance their stewardship programs. Optimizing Stewardship at Care Transitions: Engaging in regular meetings with facilities that share patients to optimize antimicrobial use during transitions of care. This involves developing or improving protocols and communication practices to ensure continuity and appropriateness of antimicrobial therapy. Community Outreach: Providing ongoing antimicrobial stewardship education and outreach to the general public and community stakeholders. This may include hosting awareness events, developing educational materials, collaborating with schools or community groups, and/or promoting responsible antimicrobial use through public health campaigns. Activities That Would Not Qualify:

Occasional discussions or information sharing with peers that lack formal structure, documentation, or sustained collaborative efforts. Providing a one-time webinar or educational session to another facility without ongoing support or collaboration. Partnering with a "sister" hospital within the same health system to consolidate or coordinate antimicrobial stewardship interventions. Providing antimicrobial stewardship support within your hospital Emergency Department.

Do you share best practices with others and engage in ongoing, formal collaboration outside of facility to advance antimicrobial stewardship?

- Yes
 No

Please select all that apply:

- Participation in the PALASE Collaborative
 Participation in the CHARM Project
 Regional Collaborative
 Formal Mentorship/Support
 Optimizing Stewardship at Care Transitions
 Community Outreach
 Other

Please describe your collaboration efforts in detail, including:

- Name(s) of partner organizations
- Goals of the collaboration
- Target population
- When the collaboration was initiated
- Frequency of engagement or meetings
- Activities conducted (e.g., meetings, data sharing, protocol development, training sessions, intervention implementation)
- Outcomes or impact to date

If possible, please provide any supporting documentation for your collaboration efforts HERE.

Please note, once you select "Upload", you will no longer be able to see or edit your file(s).

Leadership Support Letter & Attestation

Please review and have the attached attestation form signed by your facility leadership and ASP champion(s).

By signing, you confirm that:

- Your facility is committed to improving the quality and impact of your ASP by implementing the CDC Priorities for Hospital Core Element Implementation.
- All information submitted in this application is complete and accurate to the best of your knowledge.

[Attachment: "IDPH AS Acute Care Honor Roll Leadership Support Letter Attestation_Final.pdf"]

Please upload the signed attestation form [HERE](#).

Closing Questions

Are you willing to share your ASP knowledge and experiences with other facilities by participating in a statewide AS champion call?

- Yes
 No

Would you be interested in sharing your ASP experience with a poster presentation at the annual Illinois Summit on Antimicrobial Stewardship?

- Yes
 No

Email address we can contact about this opportunity:

Thank you for completing the Acute Care Honor Roll application!

If you have any questions about your application, please contact: DPH.Antimicrobial.Stewardship@Illinois.gov.

Applicants will be notified of their award 3 months from the close of the application deadline.