Request for Proposals: Antimicrobial Resistance Surveillance Taskforce Consultant

CSTE is seeking a consultant to lead the newly created Antimicrobial Resistance Surveillance Taskforce in developing a national strategic plan for AR surveillance.

Interested applicants should submit a letter of intention and CV to Nicole Bryan (nbryan@cste.org) by 5:00PM ET on Monday, August 22, 2016. Please send any questions to Nicole Bryan (nbryan@cste.org).

Scope of Work:

Background:

Antimicrobial resistance surveillance provides key data on the emergence and spread of resistant pathogens. Early detection of resistance at the local and state level is important for studying the factors responsible for the emergence as well as preventing the spread of AR pathogens.

Currently, surveillance for antimicrobial resistance is inadequate to contend with the rapidly evolving problem of resistance. New solutions are needed that build upon the strengths of existing infrastructure and provide more timely, comprehensive, and broadly applicable data about current and emerging antimicrobial resistance problems. Position Statement 13-SI-01: Recommendations for strengthening public health surveillance of antimicrobial resistance in the United States states that the US lacks a standardized and comprehensive strategy for national AR surveillance and requests that action should be taken to develop a strategic plan to identify, develop, and put into practice scientific, technical, and policy solutions needed to strengthen AR surveillance. The CDC/CSTE Antimicrobial Resistance Surveillance Taskforce was formed in response to Position Statement 13-SI-01 and has been charged with identifying, developing, and putting into practice the scientific, technical, and policy solutions needed to strengthen antimicrobial resistance surveillance.

CSTE is seeking a consultant to lead the Antimicrobial Resistance Surveillance Taskforce in developing a national strategic plan for AR surveillance.

Objectives: The Consultant will develop and lead the CDC-CSTE Antimicrobial Resistance Surveillance Taskforce in close collaboration with CDC and CSTE. Specific activities may include:

1. Development of a detailed vision of the purposes of AR surveillance at different jurisdictional levels (local, state, federal) for different programs/organisms.
2. Development and dissemination of recommendations/guidelines for transmission of comprehensive microbiological results from clinical laboratories to public health and other partners (e.g., infection control, antimicrobial stewardship).
3. Development of an AR Surveillance Strategic Plan for the period 2016-2020 including a vision statement, recommendations for action, and a suggested research agenda
4. Maintenance of focus on the NHSN and state notifiable disease reporting, the role of various surveillance methods for different organisms, and data needs
5. Promotion of common infrastructure to support reporting to both ELR and NHSN to avoid
6. Connection of public health surveillance data collection and analysis to appropriate public health actions, including assuring appropriate control measures in facilities (hospitals and nursing homes) and communities;
7. Promotion of the effective use of epidemiologic data to guide public health programs and policy.
8. Identification of policy levers that can be applied to streamline and standardize delivery of antimicrobial resistance data to public health surveillance systems;
9. Explanation of public health’s role at different jurisdictional levels in identifying facility clusters and supporting facility control efforts; Delineate appropriate public health control measures in the community; Define how public health surveillance data can support antimicrobial stewardship efforts in facilities and in the community.
10. Recommendation of models for communicating AR surveillance data to healthcare and public health practitioners, policymakers and the public in actionable forms to promote and implement AR prevention programs;
11. Participate in regular and ad hoc calls including:
   a. Participate in and lead AR Taskforce calls
   b. Provide updates on AR Taskforce to CSTE Infectious Disease and Surveillance/Informatics Steering and Subcommittee calls (as relevant)
12. Participate in meetings as prioritized by CSTE and CDC including, but not limited to:
   a. CDC-CSTE Antimicrobial Resistance Surveillance Taskforce meeting (Winter 2017)
   b. CSTE Annual Conference (June 2017)

Deliverables: The project deliverables must include the following components. The Consultant is encouraged to propose additional relevant deliverables.
1. Strategic project plan for the 3-year project term including:
   a. a detailed timeline and milestones
   b. defined roles and responsibilities for the different governmental levels for AR surveillance
   c. propose solutions the problem of suppression of lab information
2. Copies of written updates and presentations prepared for meetings, webinars, and conference calls
3. Written summaries of AR Taskforce meetings and conference calls
4. Products of liaison work including, but not limited to publications, toolkits, white papers, issue briefs, and reports
5. Monthly detailed progress reports and invoices to CSTE
6. Regular check-in conference calls with CSTE describing upcoming activities and completion or progress made regarding other deliverables and objectives described above (as needed)
7. Informal communication (phone calls, emails) with CSTE National Office staff and leadership as needed