



## Minnesota Prioritizes Strategic Planning for Antibiotic Stewardship

### Background



In 2015, the Minnesota Department of Health (MDH) partnered with the Minnesota Department of Agriculture (MDA), Board of Animal Health (BAH), Minnesota Pollution Control Agency (MPCA), and partners in industry, academia, and professional

associations and boards to establish a steering committee focused on promoting judicious antibiotic use in Minnesota. By identifying relevant subject matter experts within each state agency, MDH achieved buy-in from key change agents, and identified essential strategic partners. The committee established a mission to provide a collaborative environment to promote judicious antibiotic use and stewardship and to reduce the impact of antibiotic-resistant pathogens of human, animal, and environmental health importance. Their vision is for Minnesota leaders in human, animal, and environment health to work together to raise awareness and change behaviors to preserve antibiotics and treat infections effectively.

In the development of this partnership, the committee recognized the following: (1) consensus building is needed among all stakeholders, (2) finger-pointing must be avoided, (3) optimization of health among humans, animals and the environment is deeply interrelated, and (4) despite considerable investment in improving stewardship we need to make tangible and sustainable advances. Strategic planning was important to build consensus regarding a synergistic path forward, align goals before determining objectives and action steps, empower coalition-building, gain trust, and build relationships essential for collaborative work.

### What Was Done



The steering committee organized a one-day summit to discuss antibiotic stewardship, share best practices, and collaboratively identify priorities to inform a stewardship strategic plan for the state of Minnesota. The steering committee sought out

key subject matter experts and key change agents in the state and requested their feedback on who should attend the summit to ensure stakeholder participation.

Over 100 participants came together on January 19, 2016, including representatives from human healthcare, animal health, environmental health, and academia. Summit activities included group exercises and breakout sessions designed to explore ideas and build consensus across One Health stakeholders about antibiotic stewardship priorities, outcomes, resources needed, and potential barriers. The summit revealed that stakeholders are largely aligned when it comes to their hopes and fears regarding antibiotic resistance and stewardship. It was important to recognize this to set the foundation for critical partner relationship building.

The knowledge gained from the summit informed a strategic plan with four components: human health, animal health, antibiotic footprint, and One Health. Each component used a logic model to identify inputs, activities, and short-term and long-term outcomes. The strategic plan is a partnership between four state agencies including MDH, MDA, BAH, and MPCA, and a range of external stakeholders. Technical working groups were developed for each of the categories mentioned above and are led by various experts. Likewise, all summit participants contributed to the foundation of the plan. The technical working groups as described above have agreed to continue to be involved with the implementation of the plan and will meet on a quarterly basis to evaluate plan progress. Evaluation results will also be posted in a transparent way on the [collaborative website](#) for the public to track the progress of the plan as well.

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### How It Was Accomplished



Senior leadership supported the initiative and dedicated personnel to work on strategic planning. Organizational leadership across the One Health areas was regularly updated and asked for feedback to encourage buy-in.

MDH took a convening role in the initiative, actively sought out key contacts at the other state agencies with whom to work collaboratively, and arranged many of the logistics allowing the work to be possible. A fellow at MDH dedicated to this project supported this organizational work and minimal funding was used from MDH to support the summit. Internal MDH communications staff were also consulted to develop supporting web tools. Moving forward, the state agencies are actively planning budget and financial resources needed to support the work from different funding channels.

The technical working groups provided input to form the strategic plan. They regularly met to revise and refine the plan drafts. MDH's fellow, with guidance from the state epidemiologist and medical director, led the organization of these workgroups and compiled feedback accordingly. A website was created to highlight the plan and provide resources to all state stakeholders. A press conference was held by the Commissioner of each agency (MDH, MDA, MPCA, BAH), and a press release was disseminated to encourage media coverage. A letter was sent to all hospital leadership in the state to announce the plan and website resource. Similar email communications were also sent to all technical workgroup members and summit participants across the One Health areas.

### Impact



The state of Minnesota now has a comprehensive strategic plan that focuses stewardship-related efforts for the next five years, and a long list of partners who are committed to implementing the activities. A number of lessons have been learned

from the summit including the need for significant preparation prior to the meeting. The steering committee enabled ownership by multiple partners since they suggested agenda items, language used, and invitees. Pre-summit homework engaged participants and prepared facilitators. Various meeting techniques were used including initially setting table assignments to ensure interaction among fields, using "foot-voting" to encourage participants to move to an area of greatest interest, using TED-like talks to provide background information from each field, using regular report-outs while typing on screen to affirm notes with large group, and having a dynamic expert facilitator.

With regard to strategic planning, MDH has identified additional lessons learned, including that One Health is a unique perspective that can be used to promote collaboration, in addition to being essential to solving scientific challenges. Additionally, MDH found that the carefully-planned summit was critical for engaging partners and setting the tone, regular communication with technical workgroups was needed to promote buy-in and continue engagement, rapid plan launch timeline encouraged prioritization of work, and use of a broad dissemination of plan for feedback further encouraged interest and engagement. Finally, they learned that the start of plan implementation should include early resource assessments, plan for regular communication/engagement/review of plan, and the development of online platform to garner support.

