New Jersey Department of Health – Antimicrobial Stewardship Honor Roll (ASHR) 2025
-Frequently Asked Questions-
Presentation dates: 10/29/25 and 11/18/25

1. **What is the New Jersey Department of Health's (NJDOH) Antimicrobial Stewardship Honor Roll (ASHR) program?**
    - The NJDOH ASHR is a program to recognize the work of organizations in their endeavors towards the appropriate, safe, and effective use of antimicrobial agents throughout the State of New Jersey and across various setting types.

2. **When is the application period for the current cycle of recognition (ASHR)?**
    - Applications will open for submission on January 5, 2026, and remain open through February 6, 2026; please note, applicants applying for recognition are doing so for work completed in the calendar year of 2025. The referenced work should have been in effect for at least 6 months leading up to the application period.

3. **Is the NJDOH ASHR different than the previous NJDOH Antimicrobial Stewardship Recognition Program (ASRP)?**
    - Yes; although both programs seek to recognize the hard work of facilities in antimicrobial stewardship (AS/AMS), the ASHR replaced ASRP in 2024, which was in effect from 2019-2023.

4. **Why did this change from ASRP to the current ASHR occur?**
    - The former ASRP sought to recognize the work of various organizations as referenced; however, it was very extensive in terms of required resources and needed to be changed as a result. Whereas other states with lesser AS/AMS recognition programs have entirely discontinued their programs due to limited resources, the NJDOH staff wanted to maintain an opportunity for a recognition program in this recently updated context.

5. **I was previously recognized in either ASHR last year or ASRP in previous years. May I proceed with applying for "maintenance" status in the current ASHR program?**
    - No; the ASHR program is separate from the recent recognition program. All application proceedings for the referenced program will begin as a new process on an annual basis; all interested organizations and associated staff members should apply in accordance with the most current application (which evaluates program activities for the preceding calendar year) for consideration of recognition.

6. **Can an organization obtain recognition status if most of the Centers for Disease Control and Prevention (CDC) Core Elements are met?**
    - No; the applicant must answer all questions and provide all information and documentation requested in the application, to corroborate each response. If there is a question and/or documentation required with multiple areas, all aspects must be

addressed for the application to move forward and for further consideration of recognition.

7. **Can an organization with multiple locations and/or setting types within the same healthcare system use one ASHR application to apply for multiple aspects of recognition?**
    - No, each facility type (entity) must apply using a separate application.

8. **What is a setting type and respective licensing standard?**
    - A healthcare facility is licensed as an acute care, post-acute care, or outpatient care setting in terms of licensing. It is very important to apply for recognition in accordance with the licensing of your organization. The designation of an organization's licensing status should be confirmed with administrative leadership, prior to beginning the application process. A facility and its staff are required to follow certain regulations, in accordance with the Centers for Medicare and Medicaid Services (CMS) regulations, in addition to guidance from the Centers for Disease Control and Prevention (CDC). If facility staff members apply for recognition and are deemed to have done so under the incorrect licensing status, the application will not move forward and the granting of any recognition will be precluded. Please note, there will be no exceptions for such occurrences and we will ask the applicant to consider reapplying next year, in accordance with the organization's designated licensure.

9. **It seems highly efficient to have one representative from a healthcare system apply for multiple facilities, where multiple locations/buildings exist. Should my organizational staff proceed in this manner?**
    - No; a representative from each building should apply for their own location. This should include a separate application and supporting documentation from each, individual location and a designated representative, even if part of a healthcare network with multiple locations/buildings. The computer on which the single application (for that building alone and independent of all others) is initiated and completed should remain the same throughout the entire application process, in order to avoid any technical issues or problems. In addition, cache, cookies, memory, and similar features should not be cleared for the same reasons. Deviating from this practice will cause applications to get "overwritten" or otherwise lost and preclude the granting of recognition. Please note, there will be no exceptions for such occurrences and we will ask the applicant to consider reapplying next year.

10. **What should I do if I apply for ASHR and then my facility is subject to a change in name?**
    - We have requested that all applicants fill out their facility names EXACTLY as they would like them to appear on the recognition page of the NJDOH website, should achievement status be granted; if a name change to a facility occurs, this should be made known to NJDOH staff immediately by sending a message to ashr@doh.nj.gov. The message should include the former (original) name under which the application was made and the new name of the facility, EXACTLY as it should appear for recognition, should such an achievement be granted. Please be mindful of abbreviations in submitting the name of the organization.

11. **How long should the CDC Core Elements and related practices be in place before an organization considers pursuing ASHR recognition status?**

- An organization should have ALL aspects of each core element in place for 6-12 months, PRIOR to applying for ASHR recognition and be able to provide proof and documentation to that effect.

12. What is the future of organizations having previously attained recognition status in ASHR?

- The application process will begin as a new review period and applicants will be required to apply for recognition with a new application each year. It is also important to note that the requirements for recognition are likely to change annually, as antimicrobial stewardship (AS/AMS) components and practices are constantly evolving and subject to the direction and guidance of the Centers for Disease Control and Prevention (CDC), in addition to possible regulatory changes as previously referenced.

13. Should I use the "save and continue" feature, when updating my application?

- Yes, if facility staff will not complete the application process as a single action as recommended, for the purpose of data being retained and tracked. Please be certain to use the designated link for referring back to, updating, and/or amending the application; once an application is completed and/or updated, the applicant MUST continue advancing through all the screens and press the rightward pointing (advancement) button, EACH AND EVERY TIME an update is made to the application. There should be one ASHR application designee per building, completing the process for one application, on one computer, in one building, and for each and every building, even if multiple buildings (locations) are part of a network.

14. Does the New Jersey Department of Health (NJDOH) provide a confirmation receipt after receiving an ASHR application?

- Yes; this feature was present in the previous recognition program; also, there are options to view, print, and amend submitted application(s), up until the application deadline. Please remember to adhere to the recommendations regarding the avoidance of clearing computer memory and similar features, to avoid any technical difficulties.

15. How can I learn more about the CDC Core Elements of Antimicrobial Stewardship for my setting type?

- Please refer to the Centers for Disease Control and Prevention (CDC) website for much more comprehensive and detailed information, in accordance with your facility's setting type (and as per your facility's licensure, as referenced).

16. If I submit an application that is incomplete or incorrect, will I receive feedback from the staff at NJDOH with how to correct it, so that I can get recognition?

- No; due to the volume of applications received, in combination with limited resources and competing priorities, we are not able to follow-up with applicants for whom applications are incomplete or otherwise do not meet CDC Core Element requirements.

17. Which ASHR application should be used by an assisted-living facility (ALF) to apply for recognition?

- There is not a category within our recognition program to grant recognition to an assisted-living facility (ALF) for work done in stewardship; in such cases, the staff at the referenced facility should encourage the individual, participating providers (prescribers) to apply for recognition on an individual basis, for their workplace within the outpatient

setting. We are not able to issue recognition status to a facility as a result of work conducted by external individuals and/or organizations. We regret any current or past inconveniences and confusion as a result of this matter.

18. **When do you expect status outcomes to be made?**
    - Our expectation and goal is for announcements to be made in early Spring of 2026, subject to change and via an e-mail forum; in addition, recognized facilities will be posted by setting type (Acute Care, Post-Acute Care, and Outpatient) online, as there will not be a ceremony or any additional materials associated with the recognition process.

19. **May I expect feedback regarding my ASHR application, once the cycle has concluded?**
    - No; due to limited resources and competing priorities, we are not able to follow up with applicants for whom recognition was not granted and for which CDC Core Element requirements were not met. While this practice was in effect in previous cycles, it cannot be sustained as a result of the aforementioned reasons.

20. **What is the requirement for submitting timely documentation with regard to the review period?**
    - Please note and remember that all data, work, tasks, and developments that are being submitted must have occurred during the review period, the previous calendar year (2025), rather than the current year (2026), in which the application is being submitted. The NJDOH team encourages facilities to remain current with clinical guidelines, evidenced-based medicine, and evolving issues related to stewardship and resistance. As an example, consider a policy for potential treatment of an infection. While it is important and necessary to remain current and consistent with treatment guidelines, the expectation would not be to rewrite the entire treatment policy each year, but rather to update, revise, and review it annually. The data associated with it, however, must coincide with the review period. Data, such as drug, dose, duration, and diagnoses, related to the treatment policy that is submitted to demonstrate program details must have occurred during the review period. The meeting notes for which stewardship and resistance interventions were discussed must also have occurred during the review period. The aforementioned scenarios are not exhaustive or representative of all examples and/or requirements, but are offered as guidance that is applicable to dynamic data and various criteria points of the application, over the course of the review period.

21. **Are there any exceptions to data and information related to the aforementioned review period?**
    - Yes, one exception to the review period data submission requirement is the antibiogram. There is a lag in time associated with updating such information, which additionally varies among facilities. As such, there will be an exception for this requirement, for a period of up to one year preceding the review period; this allows for submission of antibiograms for the years of 2024 and 2025.

22. How can I consolidate multiple files for submission as one upload?

- Please do not submit documentation in excess of what is required to meet the various core elements. If it becomes necessary, on very rare occasion, to submit several documents, please consolidate them into one document and remember to label it in accordance with the directions on each section of the application. Some examples of doing so are as follows:

    1. Take two to three screenshots of an electronic document, consolidate them onto a word processing file, label it appropriately, and upload it for review OR
    2. Submit a spreadsheet with multiple tabs (pages), label it appropriately, and upload it for review OR
    3. Scan two to three pages of documents, label the document appropriately, and upload it for review.

  Please note, PDF (portable document format) is the preferred mechanism for supporting documentation submission. Again, do not submit information and data in excess of what is requested for a particular requirement.