

## **Background**

The Global Point Prevalence Survey of Antimicrobial Consumption and Resistance (Global-PPS) is a unique and ambitious project to develop further on (1) the point-prevalence surveys (PPS) carried out by the European Surveillance of Antimicrobial Consumption (ESAC) project between 2006 and 2009; (2) the PPS in neonates and children carried out by the Antibiotic Resistance and Prescribing in European Children (ARPEC) project between 2011 and 2013; and (3) the Global-PPS piloted in 2014 and conducted in 2015, 2017, 2018 and 2019. The ESAC and ARPEC projects were funded by the European Commission. bioMérieux is the sole private sponsor of the Global-PPS.

The Global-PPS has established a global network of hospitals conducting point prevalence surveys and providing quantifiable measures to assess and compare quantity and quality of antimicrobial prescribing and resistance in hospitalised adults, children and neonates worldwide. The Global-PPS allows

- to determine the variation in drug, dose and indications of antimicrobial prescribing in hospitalised patients' across all continents
- to collect information on the prevalence of resistance in hospitals across all continents (e.g. MRSA, VRE, ESBL, Carbapenem-resistance)
- to identify potential targets for quality improvement of antimicrobial prescribing
- to design hospital interventions that aim at promoting the appropriate use of antimicrobials
- to reduce the prevalence rates of antimicrobial resistance in bacterial infections.

## **Terms of Reference**

- The Global-PPS participant is any person participating in the Global-PPS and entering data on the Global-PPS database; and is defined as:
  - the local administrator representing a hospital or a network of hospitals
  - an extra Global-PPS user helping the local administrator with data-entry at hospital level.
- The "national or regional Global-PPS Participant" is a person who voluntary takes the lead to coordinate, analyse and publish Global-PPS data at national or regional level. He/she might represent a (regional or national) institution and might coordinate data-entry using the Global-PPS tool.
- The Global-PPS leader acts as guardian of the main data file which is stored on the ESAC server based at the University of Antwerp, Belgium.

## **Principles regarding ownership of data:**

- Each hospital participating to the Global-PPS, and represented by a person who has entered PPS data online using the Global-PPS tool, a web-based application for data-entry and reporting ([http://app.globalpps.uantwerpen.be/globalpps\\_webpps](http://app.globalpps.uantwerpen.be/globalpps_webpps)), remains the owner of his own data. The person representing the hospital might change over time. A new representative can take over the hospital's Global-PPS database to allow continuation of the project over time.
- The hospital only has access to its own data, which were entered online. If data have been entered online for more than one hospital, the hospital (local administrator and/or extra users)



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has access to all of these data. Raw data are extractable at any time in excel format, allowing for verification and analysis of own data.

**Principles regarding use of data:**

- A “national or regional Global-PPS Participant” representing an institution (e.g. Ministry of Public Health or University) who has centralised data-entry on the Global-PPS tool for a number of hospitals, has access to all data and will act within the terms of reference or contracts signed within the country.
- Data exchanges between individual participating hospitals are only possible if agreed (with written evidence) between the Global-PPS leader and the participants (more than one hospital) concerned. As such, participants e.g. within the same region or country can agree to work and analyse their data together.
- Regional and national benchmarking data resulting from the real-time feedback report, which can be downloaded by the participant after data entry and validation, are only for internal use at local level. These data are NOT publicly available and therefore NOT to be used as benchmarking in scientific publications.
- Analyses and outputs using Global-PPS data are carried out in collaboration and agreement with the Global-PPS leader. Herewith, it is aimed to standardise and validate analyses and output.
- The Global-PPS leader is to encourage regional or country specific analysis led by “local collaborating participant” or the “national or regional Global-PPS Participant”, but analyses are to occur in conjunction with the Global-PPS leader.

**Principles regarding authorship**

1. The Global-PPS leader has the duty to look for opportunities for dissemination and to create and support opportunities for authorship.
2. ‘Main’ scientific papers and outputs (analyses, drafting, etc) occur under the directorship of Global-PPS leader.
3. National or regional publications and outputs occur under the directorship of a ‘national or regional Global-PPS lead’ which is agreed upon with the ‘Global-PPS leader’. The Global-PPS leader at the University of Antwerp, Belgium keeps the overview of data, on-going analyses and output (intermediate actor).
4. All authors must meet authorship criteria (see details below).
5. The national or regional Global-PPS lead takes ultimate responsibility for deciding authorship within these principles.
6. The national or regional Global-PPS lead takes ultimate responsibility for deciding authorship order.
7. The Global-PPS project is to be recognised in all non-peer reviewed papers and reports at national and international level citing names and affiliations.
8. Per regional or national ‘peer reviewed paper’, members of the Global-PPS Coordinating Centre & Technical Support team are co-author.
9. Recognition of further contributing individuals or groups, where and as appropriate.
10. Decisions need to be made in consultation with overall Global-PPS leader in event of controversy/conflict.



**Publications and Authorship:**

The following criteria are based on BMJ rules on authorship and contributorship (see <http://www.bmj.com/about-bmj/resources-authors/article-submission/authorship-contributorship>) and will be used to acknowledge the level and nature of contribution of key individuals in publications arising from the Global-PPS.

**Authorship criteria:**

Authorship credit will be based only on substantial contribution to all the following criteria:

- a. Conception and design, or analysis and interpretation of data.
- b. Drafting or critically revising the article with important intellectual content.
- c. Final approval of the version to be published.

The author should have participated sufficiently to take public responsibility for its content. One or more authors should take responsibility for the integrity of the work as a whole, from inception to published article.

The order of authorship is the responsibility of the respective 'national or regional Global-PPS lead'.

Main publications respective Global-PPS: Authors are to be listed, followed by the statement 'on behalf of the Global-PPS network'.

**Contributorship criteria:**

In the acknowledgements of all publications, contributors, some of whom may not be included as authors, will be listed including their names, roles and level of contribution.

The level of a contributor will be determined by the following criteria:

- Major contributor: Someone who has made a major and continuous scientific contribution to the study and was involved on an on-going basis for at least six months in the study. Someone who devotes a percentage of their employed time to the study on a monthly basis. Acknowledgement as a major contributor is reserved for those people who have invested significantly in the study.
- Other contributors (eg administrative, organisational): Someone who has made a major, but not scientific contribution to the study. Someone who has made a major contribution to the implementation of the protocol and who has been involved in the study on an on-going basis for at least three months.

**Acknowledgements**

- Coordination by the University of Antwerp AND funding by bioMérieux has to be acknowledged in the acknowledgements section of all publications using data generated through the Global-PPS project. The sentence must read as follows (unless journal editors request explicit modification): "The Global Point Prevalence Survey is coordinated at the University of Antwerp, Belgium and sponsored through an unrestricted grant given to them annually by bioMérieux."



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- For national publication or publications within networks, hospitals are to be acknowledged following the terms of reference or contracts signed within the country if appropriate.

As agreed upon,  
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