

Minute
National Interdepartmental AMR Consultative Committee
Third Meeting, 13th April 2016

Attendance:

Location : Hawkins House, Room 10.15

Chairs

Dr. Tony Holohan, Chief Medical Officer (CMO) (Chair)

Mr. Martin Blake, Chief Veterinary Officer (CVO) (Co-Chair)

Committee Members

Dr. Niamh O'Sullivan, Chair, HSE /RCPI Clinical Advisory Group on HCAI

Dr. Darina O'Flanagan, HSE, Director, Health Protection Surveillance Centre

Dr. Karen Burns, HSE, Health Protection Surveillance Centre

Dr. Kevin Kelleher, HSE (o.b.o. Dr. Stephanie O'Keeffe, National Director, Health and Wellbeing Directorate HSE)

Dr. Dónal Sammin, Director of DAFM Laboratories o.b.o. Dr. John Egan, Superintending Senior Research Officer, Central Veterinary Research Laboratory

Mr. Ray Finn, President, Veterinary Council of Ireland

Mr. John Comer, President, Irish Creamery Milk Suppliers Association

Dr. Lorraine Nolan, CEO, Health Products Regulatory Authority

Dr. Margaret O'Sullivan, Chair, National Zoonoses Committee

Dr. Pamela Byrne, CEO, Food Safety Authority of Ireland

Mr. Brian Donlan, Environmental Protection Agency, o.b.o. Dr. Laura Burke

Mr. Bert Stewart, o.b.o. Irish Farmers' Association

Department of Health

Dr. Kathleen MacLellan, Head of Patient Safety & Quality Unit

Ms. Eithne Barron, Patient Safety & Quality Unit

Ms. Sarah Delaney, Patient Safety & Quality Unit

Department of Agriculture, Food & the Marine

Ms. Hazel Sheridan, Senior Superintending Veterinary Inspector

Ms. Caroline Garvan, Superintending Veterinary Inspector

Ms. Breda Meehan, Veterinary Medicines Division

Guest Speakers / Guest attendance

Prof. Martin Cormican, NUI Galway / Galway University Hospital

Dr. Fiona Walsh, Maynooth University

Ms. Aisling O'Connor, EPA

Apologies

Dr. Robert Cunney, Clinical Lead, HSE HCAI & AMR Clinical Programme

Ms Laura Burke, Director General Environmental Protection Agency (EPA)

Mr. John O'Rourke, President, Veterinary Ireland

1) Welcome & Apologies

The CMO welcomed all and apologised for his absence and Mr. Blake's early departure from the last meeting of 11th June 2015. Apologies for this meeting from three Committee members were also noted.

2) Approval of Minutes of meeting of 11th June 2015

The Minutes of the last meeting were approved.

3) Matters arising

The final Terms of Reference (ToR) are taken as agreed and are included in documentation packs for the meeting.

4) Declarations of Interest

Conflict of Interest documentation was circulated for Committee members to complete and return to the secretariat (either DoH or DAFM as preferred).

5) World Health Organisation (WHO) – Global Action Plan (GAP) on Antimicrobial Resistance

Ireland is required to complete a National Action Plan to demonstrate its commitment to meet the requirements of the GAP. On foot of a prepared document by the WHO Global Action Plan Subgroup of the Committee, a Preliminary Assessment of Ireland's position in the context of meeting the five Strategic Objectives of the GAP was discussed.

Health Update

Dr. Kelleher noted that awareness of AMR within the health service continues to improve although variations across the country are noted. Campaigns on prudent use of antibiotics, European Antibiotic Awareness Day (EAAD), undertheweather.ie, E-bug training for schools and undergraduate training are all well established. More training for post-graduate curricula and certain specialities is required, however.

Surveillance through the HPSC is ongoing and the Centre's leading place in the HALT study of AMR in long term residential facilities, recently published, was acknowledged. The HSE's national target of 90% compliance with hand hygiene procedures is close to being met and stewardship of antibiotic use in hospitals is ongoing but more limited in the community; this is another key area to address.

A business case for enhanced surveillance is currently being progressed through the HSE's Health and Wellbeing Directorate.

Agriculture Update

Ms Garvan presented on the five Objectives from the Agriculture perspective, noting that in 2014 the DAFM held a Conference on AMR calling for collective action by all stakeholders in the Agrifood Sector to address the spread and development of AMR. A dedicated webpage on DAFM's website was launched in 2015 to increase awareness and keep stakeholders and public alike informed on various developments. The Department continues to work to advance national AMR surveillance in conjunction with strategies to improve animal health and enhanced disease prevention. The promotion of development of prudent use policies by the various stakeholders in the agri-food sector through participatory policy making remains a priority for the Department. Veterinary Ireland published a policy document on AMR in 2014 emphasising the challenge of minimising disease in larger farms as well as the possible increased restrictions on the supply and administration of Critically Important Antimicrobials (CIAs). The FSAI 2015 publication on Potential for Transmission of AMR in the Food Chain also supported enhanced surveillance and prudent use of antibiotics. Food Wise 2025, a 10-year road map for the Irish agrifood industry is a government priority.

Education and training in disease prevention, legislative controls re supply of antimicrobials, stewardship of antimicrobials and prioritisation of scientific research to develop economic tools to estimate costs of usage and disease all continue and are priority areas for the Department.

A business case for additional resources for surveillance and prioritisation of scientific research is with the Department at present.

General discussion

The Committee's input into the WHO document in the coming months was invited. Members were invited to consider what might be included in the Plan; the FSAI noted that its work encompasses both sectors. It was noted that the current version of the document is a starting point and that the final submission from Ireland early in 2017 will have had regard to balance in inputs across all relevant sectors.

Action: It is intended to prepare a draft document to bring back to the Committee by end-year.

6) Joint Surveillance and Reporting- Update Health

Dr Burns presented on AMR and consumption in human health, examining what data is currently available, what data it would be useful to have (e.g. prescriber-level data in the community setting) and what is required to achieve the Committee's objectives. Examples of how antibiotic resistance spreads and the effects of AMR on treatment requirements as well as the beneficial effects of correct choice of and speed in administering antimicrobials were outlined.

Data on various blood stream infections and concerns around increasing levels of Carbapenem resistant Klebsiella (CRE) and the threat to last-resort antimicrobials was described. The increase in CRE in the mid-west is of concern; abroad, Spanish hospitals have noted a marked increase in CRE. The importance of surveillance, analysis and collaborative working with the veterinary and food safety sectors was also emphasised.

The HPSC will continue to liaise with the HSE's Health & Wellbeing directorate on surveillance capacity.

Agriculture

Dr. Sammin updated the group on surveillance for AMR in food-producing animals. Monitoring for AMR in zoonotic and indicator bacteria isolated from animals and food and diagnostic support for disease prevention and prudent use of antimicrobials are the two relevant areas of activity supported by DAFM laboratories. There is harmonisation of sampling and monitoring across the Member States (MSs) for monitoring resistance in isolates obtained from poultry and pigs since 2014; Ireland compares well with other Member States. The 2014 EU summary report on AMR in zoonotic and indicator bacteria from humans, animal and food (EFSA/ECDC) noted levels of resistance increasing in 2015. The challenge is to obtain more information on antibiotic usage in animals and to develop methodologies to capture this information at farm level.

General discussion

The CMO raised the issue of practical cooperation between the two sectors in surveillance and capacity and how to progress. The CVO suggested that the two sides share the data each is collecting now and address knowledge deficits with more surveillance capacity. Dr. Holohan emphasised that both sides need to break new ground in cooperation between the two sectors and noted that assurances on the health side had already been given – the HSE’s agreement to support the HPSC’s business case for enhanced surveillance requires further action by the Health and Wellbeing Directorate. Both sectors need to be facilitative of actual cooperation.

7) Report of Dutch Presidency ‘AMR Outcome Document’

Dr. O’Sullivan updated the group on her and Mr. Blake’s attendance at the EU Ministerial AMR One Health conference in February. The Conference discussed a draft ‘Outcome Document’ to feed into MS’s discussions on an EU ‘One Health’ Action Plan against AMR. Council Conclusions are awaited. Discussions covered reduced use of antibiotics without losing economic benefits and measurable targets for national and EU action plans. Accountability was continuously emphasised throughout the conference. There was broad support for an EU ‘One Health’ Network as a forum for exchange between MS’s and agreement that further discussion was needed on banning preventive use of antibiotics in animals and firm restrictions of Critically Important Antimicrobials (CIAs). The Health and Agriculture Attachés are taking this document forward to have final Council Conclusions agreed by the end of the Dutch Presidency.

The CVO noted that political commitment across Europe is needed and referenced the difference between the agriculture and health sectors regarding legislation in place. The UK CMO has suggested that AMR be considered as a ‘health security issue’ as such a designation offers a greater possibility for MSs to agree to act together at political level.

The Secretariat to this Committee will circulate the Council Conclusions to members.

8) EPA Presentations

Professor Cormican presented on the topic of AMR and environment. He noted that ESBLs are invasive now and that CRE in waste discharge into the environment has become an issue of concern; 95% of antibiotics taken by humans are excreted. A system of ‘safe disposal of antibiotics’ could be put in place this year as a ‘quick win’: regulations are in place in the animal sector for accepting returns of antibiotics but not in the human health sector. The discovery last year of a colistin resistant gene is an irreversible event of permanent consequence and unquantifiable cost. A system to collect unused antimicrobial and other pharmaceutical agents may help build momentum for change.

Dr. Walsh presented on research initiatives examining the links between animal, human and environment in terms of AMR including the European Commission Water Joint Programming Initiative (JPI) project 2015-2018, funded by the EPA which is examining sources, mitigation, impacts and risk of antibiotics in waste water. Gaps in our knowledge include the role played by water bodies in the emergence, selection and spread of antibiotic resistant bacteria and the consequences for human and animal health. EU research aims include examination of waste water treatment plants and what technologies can be used to reduce

and remove unwanted additions to the water supply; Ireland is a leader of one Work Package and a member of another four.

General discussion

It was agreed that it would be important for Ireland's continuing involvement in the European JPI and other research initiatives including the Horizon 2020 research call for proposals entitled 'One Health' – AMR. Professor Cormican will revert to Dr John Egan in relation to Irish participation in a Mirror Group via the MedVetNet association; further discussions with the Health Research Board (HRB) will be required. The CMO noted the Committee's interest, suggesting that the Department of the Environment and its agencies would better be a component of this initiative than the Committee directly.

The HPRA noted that a medicines return programme would be a very tangible and achievable initiative to develop; industry already takes back wholesale medicine and community pharmacies could perhaps formally be encouraged to do so also. The Medicines Management Programme of the HSE could perhaps become involved.

AOB

- a) *The Group's view on putting Committee material (membership, ToR, minutes) on both Departments' websites was sought.*

In the context of the Committee being an Exempted Body under the Regulation of Lobbying Act 2015 the Committee can be exempted from the requirement to register its members under Section (5)(5)(n) of the Act, the Committee being a 'relevant body' as described in Section 6(a) and (b). The Committee will conduct its activities in accordance with the criteria as set out in the Department of Public Expenditure and Reform's Transparency Code (certain information to be put on the Departments' websites).

Individual presenters will advise the secretariat on when they would be satisfied for their presentations to be uploaded.

- b) *Date of next meeting: a November 2016 date will be arranged between the two Departments.*

Patient Safety & Quality Unit
13th April 2016