National Public Health Emergency Team
for Carbapenem-producing Enterobacteriaceae (CPE)
Minutes of Meeting

Date and Time 09 November 2017 at 11:30-1pm (Meeting 2)
Location Department of Health, Hawkins House, Dublin 2
Chair Dr Tony Holohan, CMO, Department of Health

Members in Attendance
Dr Kathleen Mac Lellan, Director, National Patient Safety Office (NPSO), Department of Health (DOH)
Ms Fionnuala Duffy, Acute Hospitals Policy Division, (DOH)
Ms Sandra Walsh, Primary Care Division, (DOH)
Dr Kevin Kelleher, Director (acting), HSE Health Protection Surveillance Centre (HPSC)
Ms Denise Long (on behalf of Mr Tom McGuinness) Emergency Management & National Ambulance Service, (HSE)
Professor Martin Cormican, HCAI National Clinical Lead (HSE)
Ms Audrey Lambourn, Client Director HCAI/AMR Clinical Programme. (HSE)
Mr John Connaghan, Chief Operations Officer (HSE) via teleconference from 12:30-12:40pm during discussion on Action 7

Apologies
Mr Patrick Lynch, National Director, Quality Assurance and Verification Division (HSE)
Dr Stephanie O’Keeffe, National Director, Health Wellbeing Division, (HSE)

Secretariat and in attendance
Ms Deirdre Hyland, Ms Sarah Treleaven, Patient Safety Surveillance Unit, NPSO, DOH
Ms Pamela Carter, Press Office, DOH, Mr Andrew Kelly, Press Office

No. Item
Welcome
New members were welcomed.

It was noted that members in attendance at meetings have the delegated authority to speak on behalf of the HSE.
In order to maintain continuity between meetings substitutes should be by exception and agreed by the Chair.

Update on Action 1 full list to be provided by J Connaghan by 10 November.

Update on patient representatives:
Update on Action 2: DOH requested patient representative nominee from Patient Focus, awaiting a response.

Update on Action 3 P Lynch provided an update in advance of the meeting. A patient representative has been sought, awaiting a response.

2 Conflicts of Interests Declarations – pause for verbal declarations
Forms were completed by new attendees. No verbal conflicts were declared.
Minutes from Previous Meeting (for adoption)
The minutes were formally adopted with no change. They will be published on the DOH website.

Matters Arising (for discussion)
The group discussed information received from the HSE (J Connaghan via email on 06 November) in relation to the minutes of the previous meeting and including an action: *HSE and DoH to discuss and resolve any additional resourcing needs.* The Chair provided clarification that the focus of the NPHET will be to seek assurance that existing resources are being used to maximum effect. The decision of the release of any new resources is a matter for the Department of Health, as informed by the work of the NPHET, upon receipt of appropriate business cases and expenditure timelines. The Terms of Reference were agreed with no changes.

Expert group membership:
**Update on Action 4** DOH provided HSE with outline of Expert Group membership on 03 November via the minutes for meeting 1.

**Update on Action 5** HSE/ K Kelleher provided a draft TOR for the Expert Group via email on 08 November, which was circulated at the meeting.

Agreed updates:
- The Expert Group will provide expert advice to the NPHET.
- Additional terms of reference ‘The work of the group will be as directed by the NPHET’.
- Add Modus Operandi: to include requirement for written reports from the Expert Group to NPHET as required. Minimum timeframe for reports on a monthly basis.
- The Chair of the Expert Group will attend NPHET meetings as required.

Agreed: Revised TOR for the Expert Group to be provided by 10 November for formal sign off by the NPHET on 16 November.

New Action 13: K Kelleher to progress establishment of the Expert Group, including issuing invitations to Chair and members with HPSC to provide secretariat. To be completed by the end of 30 November.

Surveillance and monitoring (for discussion)

a) **Update on Action 6:** Department of Health to consider adding CPE colonisation to list of notifiable diseases.
   Update provided on communication with Health Protection Unit, DOH.

New Action 14: HPSC and DOH engagement to review the list of notifiable diseases in the context MDROs, in particular CPE colonisation and MCR and prepare necessary rationale documentation to progress legislative change.

b) **Update on Action 7:** HSE to provide a report on the current quality and periodicity of CPE reporting including quantitative descriptions of surveillance and practices for referral of specimens to the CPE National Reference Laboratory, Galway.
   Due 17 November. Draft provided via email on 08 November, which was circulated at the
meeting.

The requirement to include more specificity in this report was noted.

Gaps in surveillance were referred to including coverage, voluntary reporting and no national IT surveillance system. It was noted that enhanced surveillance is a key strategic objective (Objective 2) in the National AMR Action Plan 2017-2020 and strategic intervention “2.1 Strengthen national surveillance system to ensure integration and timely information” specifies a number of key activities which should be progressed.

**New Action 15**: Quantify gaps in surveillance system with a view to prioritised business case in line with AMR Action Plan 2017-2020 Strategic intervention 2.2/Activities 2.1.1 “Conduct gap analysis of current surveillance capabilities and develop business case for enhancement of the system...”.

The requirement to track numbers of CPE cases was noted. K Mac Lellan highlighted that DoH had requested inclusion of rates of CPE in the 2018 HSE Service Plan KPIs. M Cormican updated that two CPE related KPIs are due for inclusion in the 2018 Service Plan. HSE agreed to provide information on the KPIs to DOH.

**New Action 16**: HSE to provide DOH with details of CPE related KPIs for inclusion in the 2018 Service Plan.

c) **Update on Action 8**: HSE to provide a report on assessment of response requirements and capacity for various care settings. Due 10 November draft report provide via email on 08 November, which was circulated at the meeting.

**New Action 17**: HSE to prepare a draft template to collect information from Hospital Groups (Chief Executives) and CHOs (Chief Officers) regarding their infection prevention and control governance arrangements mapped against the HSE national best practice standard. Due 14 November for consideration at NPHET meeting on 16 November.

**New Action 18**: Infection prevention and control governance arrangements information gathering process to be completed by 30 November.

6 **Review of current situation (for information and discussion)**

a) **Last week’s actions**
   
   (i) **Update on Action 9**: HSE to provide a report on the status of implementation of the CPE Outbreak and Management Response Plan. Due 10 November draft report provide via email on 08 November, which was circulated at the meeting
**New Action 19:** DOH to provide feedback on the draft document in advance of meeting on 16 November.

(ii) **Update on Action 10:** HSE to provide a report on the status and stage of implementation of national protocols in relation to the screening, surveillance and management of CPE. Protocols to be provided to the NPHET.

Due 17 November no update available.

b) **Current situation**

    HSE update provided in relation to confirmed outbreaks in a number of HSE hospitals.

c) **Next week’s actions**

7 **Communications Planning (for discussion)**

- **Key stakeholders communications**
  
  **Update on Action 11** HSE Communications person confirmed and in attendance: A Lambourn.

  **Update on Action 12** HSE single point of contact confirmed: K Kelleher.

- **Press release(s)**
  
  Press release issued on 02 November and on DOH website.
  Press release will issue after today’s meeting.

8 **National and International Notifications (for discussion)**

- **Government Taskforce and other national bodies**
  
  Government Taskforce briefed at their meeting on 08 November by DOH.

- **EU bodies** No DOH or HSE updates since last meeting.

- **Global bodies** No DOH or HSE updates since last meeting.

9 **AOB**

Date of next meeting - Thursday, 16th November 2017 at 9:30 am in Hawkins House

List of confirmed dates for meetings provided by email.
<table>
<thead>
<tr>
<th>Action</th>
<th>Responsible</th>
<th>Date assigned</th>
<th>Due Date</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Full membership of HSE officials on the NPHET will be considered. A full list of NPHET HSE members will be sent by the DG, HSE to the CMO.</td>
<td>J Connaghan</td>
<td>02/11/17</td>
<td>10/11/17</td>
<td>In progress</td>
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<td>2. DoH will seek nomination from Patient Focus for NPHET.</td>
<td>K Mac Lellan</td>
<td>02/11/17</td>
<td>8/11/17</td>
<td>In progress</td>
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<td>3. HSE will identify a nomination from Patients for Patient Safety or other appropriate patient group.</td>
<td>P Lynch</td>
<td>02/11/17</td>
<td>8/11/17</td>
<td>In progress</td>
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<td>4. DoH to provide HSE with proposed outline of membership of the Expert Group.</td>
<td>K Mac Lellan</td>
<td>02/11/17</td>
<td>03/11/17</td>
<td>Complete</td>
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<td>5. The HSE will propose the full terms of reference and membership and chair for the expert group to the NPHET for their approval.</td>
<td>K Kelleher</td>
<td>02/11/17</td>
<td>10/11/17</td>
<td>In progress</td>
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<td>6. Department of Health to consider adding CPE colonisation to list of notifiable diseases.</td>
<td>Department of Health</td>
<td>02/11/17</td>
<td>08/11/17</td>
<td>Complete</td>
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<td>7. HSE to provide a report on the current quality and periodicity of CPE reporting including quantitative descriptions of surveillance and practices for referral of specimens to the CPE National Reference Laboratory, Galway.</td>
<td>K Kelleher</td>
<td>02/11/17</td>
<td>17/11/17</td>
<td>In progress</td>
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<td>8. HSE to provide a report on assessment of response requirements and capacity for various care setting.</td>
<td>S O'Keeffe</td>
<td>02/11/17</td>
<td>10/11/17</td>
<td>In progress</td>
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<td>9. HSE to provide a report on the status of implementation of the CPE Outbreak and Management Response Plan (National Taskforce for HCAI/AMR, March 2017).</td>
<td>K Kelleher</td>
<td>02/11/17</td>
<td>10/11/17</td>
<td>In progress</td>
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<td>10. HSE to provide a report on the status and stage of implementation of national protocols in relation to the screening, surveillance and management of CPE. Protocols to be provided to the NPHET.</td>
<td>S O'Keeffe</td>
<td>02/11/17</td>
<td>17/11/17</td>
<td>Complete</td>
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<tr>
<td>11. The HSE to confirm if this will be HSE HCAI Communications Manager.</td>
<td>S O'Keeffe</td>
<td>02/11/17</td>
<td>06/11/17</td>
<td>Complete</td>
</tr>
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<td>12. The HSE to confirm the nominee of the single point of contact to co-ordinate information from the HSE to the Department and NPHET</td>
<td>K Kelleher</td>
<td>02/11/17</td>
<td>10/11/17</td>
<td>Complete</td>
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<td>14. Adding CPE colonisation to notifiable disease list. HPSC and DOH engagement required regarding the necessary rationale documentation to progress legislative change.</td>
<td>DOH</td>
<td>09/11/17</td>
<td>TBD</td>
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<td>15. Quantify gaps in surveillance system with a view to prioritised business case in line with <em>AMR Action Plan 2017-2020</em> Strategic intervention 2.2</td>
<td>M Cormican</td>
<td>09/11/17</td>
<td>TBD</td>
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<td>16. HSE to provide DOH with details of CPE related KPIs for inclusion in the 2018 Service Plan</td>
<td>M Cormican</td>
<td>09/11/17</td>
<td>14/11/17</td>
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<td>17. HSE to prepare a draft template to collect information from Hospital Group (Chief Executives) and CHOs (Chief Officers) regarding their infection prevention and control governance arrangements mapped against the HSE national best practice standard.</td>
<td>M Cormican</td>
<td>09/11/17</td>
<td>14/11/17</td>
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<td>18. Infection prevention and control governance arrangements information gathering process complete (linked to Action 17)</td>
<td>M Cormican</td>
<td>09/11/17</td>
<td>30/11/17</td>
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<td>19. Provide feedback on report on the status of implementation of the CPE Outbreak and Management Response Plan</td>
<td>DOH</td>
<td>09/11/17</td>
<td>14/11/17</td>
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