Welcome

to the 23rd RESIST newsletter from the Antimicrobial Resistance and Infection Control Team (AMRIC). In this edition we set out AMRIC IPC and community antibiotic prescribing guidance updates. Share photos of IPC and AMS colleagues that attended recent AMRIC RHA Winter events. We also set out updates on key AMRIC projects aligned to the HSE AMRIC Action Plan 2022-2025. Thank you for your comments and inputs, if you have any suggestions on content or want further information please contact us on hcai.amrteam@hse.ie Page 1. Message from the Chief Clinical Officer Page 3. Message from AMRIC Clinical Lead Page 4. Meet our new AMRIC team member Page 4. New and updated HSeLanD AMRIC eLearning Modules Page 5. AMRIC IPC Guideline Updates Page 6. What is new on AntibioticPrescibing.ie Page 7. GP Out of Hours antimicrobial prescribing project Page 8. CPE Update Page 9. National Clinical Surveillance Infection Control System Page 11. AMRIC Regional Winter Events Page 18. Accessing AMRIC Print Resources and Patient information

Dr. Colm Henry, HSE Chief Clinical Officer

As Chief Clinical Officer for the HSE, I welcome the publication, this week, of updated AMRIC Infection Prevention Control (IPC) and Antimicrobial Stewardship (AMS) guidance. As we move into the most challenging times of the year for health and social care delivery it is essential that there is clear IPC and AMS guidance to support our healthcare workers and IPC and AMS teams to deliver safe and effective care to our patients. I want to acknowledge and thank Dr. Eimear Brannigan, AMRIC Clinical Lead for her leadership in progressing these guidelines to publication.

I would also like to acknowledge and thank these teams across the country for their extraordinary contribution. Their work, throughout the year, across the system of healthcare prevents healthcare infections amongst the most vulnerable of people, keeping patients and colleagues safe and protecting services. We know that every day antibiotic resistance is causing people to suffer more and die younger than they need to. We are all well aware that Antimicrobial Resistance (AMR) has been recognised as one of the greatest potential threats to human and animal health.

AMR has long-term consequences for health and healthcare and these will be profound unless we act now. The two pillars of the response are: (a) improving how we use antibiotics and (b) improving IPC. If we prevent infection, we need less antibiotics. The foundation for the control of infection has been the care and attention to detail of our health and social care workers with support from the local and national IPC and AMS teams.



Dr. Colm Henry, HSE Chief Clinical Officer

Continued overleaf



Vaccination is of course one of our primary weapons against preventable diseases. I encourage all healthcare workers and service users to endeavour to keep up to date with their vaccinations. Vaccines have helped us to eliminate diseases but increased misinformation, scepticism and complacency and vaccine fatigue means that diseases we thought were all but eliminated like measles are seeing a resurgence. I ask you to encourage and support any of our colleagues, patients and service users who are not up to date with their vaccinations to get vaccinated as soon as possible.

As well as the development and publication of guidance, raising awareness, providing education and training are key deliverables for the AMRIC team and IPC and AMS teams across our services, you would have seen many teams raising awareness over the recent European Antibiotic Awareness Day (EAAD). It is always a good opportunity to remind us all of our key messaging, this messaging is also appropriate for the Christmas season, these include:

- Antibiotics are a valuable resource and it is important it is that we only use them when needed
- Everyone in the health service has a role to play in AMS, check out the AMS guidance for all healthcare settings
- For prescribers; prescribe antibiotics as set out on <u>www.antibioticprescribing.ie</u> or on hospital guidelines and be aware of the red/green antibiotic prescribing programme
- These lifesaving drugs are under threat from the growing problem of antibiotic resistance.
- · Antibiotics can cause more harm than good if taken unnecessarily
- If you do need antibiotics take them as prescribed and finish the course Influenza, colds COVID-19 are viral infections – antibiotics do not work for infections caused by viruses
- Take care of yourself and learn to treat common illnesses that do not require antibiotics use https://www2.hse.ie/conditions/common-illnesses/

Thank you to each and every one of you, for the work that you do, it is greatly appreciated. I would like to wish you and your loved ones a happy, healthy and safe Christmas. I hope you get to take a well-deserved break.

Míle buíochas d'achan dhuine,

Dr. Colm Henry, Chief Clinical Officer.



Left to Right: Petrina Donnelly, Chief Nursing Officer; Dr Eimear Brannigan AMRIC Clinical Lead; Bernie O'Reilly, Patients for Patient Safety; Dr. Colm Henry, HSE Chief Clinical Officer; Shirley Keane, AMRIC Head of Service



F Dr. Eimear Brannigan, AMRIC Clinical Lead

Delivery of healthcare is always challenging over the festive season, I hope AMRIC IPC and AMS guidelines will support staff dealing with the ever changing environment of infection risks but always based on the underlying principles of safe healthcare. Guidelines will never replace professional judgement on particular cases or circumstances if an individual guideline recommendation is not appropriate in the circumstance presented. In addition to the AMRIC guidelines recently published you can also find the National Clinical Guideline for Infection Prevention and Control No 30. <u>Here.</u>



Dr. Eimear Brannigan, HSE Clinical Lead for Antimicrobial Resistance and Infection Control

I want to thank the many HSE services who helped to mark EAAD and as always work tirelessly to spread the word about AMS. Thank you for highlighting and supporting our collective effort to promote prudent use of antibiotics and combat AMR. This annual event reminds us all how valuable antibiotics are, how important that we only use them when we need them and that these drugs are under threat from the growing problem of AMR.

As we move through the winter season and into Christmas, we all worry a little bit more about the kids getting sick. As well as measles, viruses like croup and RSV tend to be commonplace around autumn and winter. It can be hard to know how to mind everybody. The most important thing to do if your child is unwell is to keep them home from school or crèche to stop infections spreading to others. Most common illnesses are caused by viral infections and do not require an antibiotic. Our bodies can fight off these infections without antibiotics. Young children may get 6-7 viral infections each year, mainly in the autumn and winter months. This can be concerning for parents. The good news is that there is lots of information available to help you cope with common illnesses this winter. For information on how to protect your child from common winter illnesses, check out the https://www2.hse.ie/my-child/ where you'll find lots of helpful information about everyday illnesses like colds, coughs, croup, flu, earache and sore throats and how your own immune system is often enough to help you get better. Vaccination is a great way to protect your child from certain infections.

This is the time of year when flu is in circulation and children are twice as likely as adults to catch the flu, which can sometimes cause serious illness. The good news is that the nasal spray flu vaccine is available for free for all children aged 2-17 years from participating GP practices and pharmacies. It's a safe and effective way to protect them, and the rest of your family too. You can find out more at www.hse.ie/flu. Only take antibiotics if prescribed and as prescribed, antibiotics do not treat common viruses including the flu, colds, sore throats, many coughs or COVID-19. Taking antibiotics when you do not need them can cause you unnecessary harm. About 1 in 7 people who take antibiotics develop side effects, such as a rash, upset stomach or diarrhoea. If we have an infection caused by bacteria, like pneumonia or a urinary tract infection, antibiotics can be of benefit, so we can accept the side effects that go with them. However if we have an infection caused by a virus, like coughs, colds, flus and sore throats, we might get side effects but for zero benefit because antibiotics do not treat viral illness. Antibiotics will not relieve pain or fever caused by viral infections - for this; you will need to take paracetamol or ibuprofen. Antibiotics will not ease a cough unless the cough is from pneumonia, which thankfully is uncommon. If you are unsure, you can talk to your pharmacist for cough medicines or try warm honey and lemon drinks. Your can cough can persist for up to 3 weeks after a viral infection. Taking antibiotics when you don't need them means that they might not work for you when you do.

I hope you all have a safe and happy Christmas,

Dr. Eimear Brannigan, AMRIC Clinical Lead.



Professor Clare Rock

(MB BCh BAO (Hons), PhD, MS, FIDSA, FSHEA)

has joined the team as the Deputy Clinical Lead. Prof. Rock is an infectious disease consultant, who qualified from UCD in 2004, and completed Irish general medical and infectious disease specialist training before crossing the Atlantic to Baltimore, Maryland, USA. Prof. Rock was a consultant at Johns Hopkins Hospital and Johns Hopkins University School of Medicine, a core faculty member at the Armstrong Institute for Patient Safety and Quality, an Associate Hospital Epidemiologist, with a secondary appointment at the Johns Hopkins Bloomberg School of Public Health. Prof. Rock's expertise is in IPC, AMS, epidemiology, patient safety, and public health.



Prof. Clare Rock, HSE Deputy Clinical Lead for Antimicrobial Resistance and Infection Control

In her operational role she was primarily responsible for the IPC programme at The Johns Hopkins Hospital. Her research activities have been funded by the Center for Disease Control and Prevention, and she has been the principal investigator for US and international multi-country-based studies. Prof. Rock is a past elected councilor to the board of the Society of Healthcare Epidemiology of America (SHEA), past Chair of SHEA Research Network, and research co-director of the High-Value Practice Academic Alliance.

Clare has returned to Dublin with her husband Patrick, who is an oncologist, and three children, and are all enjoying settling into Dublin and being closer to extended family and friends.

New and updated HSeLanD AMRIC eLearning Modules

A new eLearning module specifically on the Role of the Registered Nurse/midwife in Antimicrobial stewardship (AMS) will be live on the AMRIC Hub next week. This educational resource will support registered nurses/midwives in their roles in the area of AMS and further enhance available resources for health and care professionals in the area of AMS.

To coincide with EAAD on November 18th and World AMR Week November 18th–24th, a webinar was held in collaboration with Marie Philbin, AMRIC, Chief I Antimicrobial Pharmacist. A series of webinars were held throughout 2024 and this was the fourth on this particular topic.

The Surgical ABX Prophylaxis module was reviewed, updated and launched in December 2024.

Each of our eLearning modules are highly interactive throughout and designed using internal best practice in learning design to support the performance development of multidisciplinary staff throughout the services across multiple settings.

Our eLearning modules align with the National Clinical Guideline No. 30 (2023) and are accredited with NMBI and RCPI and can be readily accessed on our HSeLanD AMRIC hub.



The AMRIC Hub



V1.4 Infection Prevention and Control Precautions for healthcare workers for the management of possible or confirmed Mpox cases - Clade II MPXV (formerly West African clade) As at 04.12.2024 <u>here</u>

Updates include:

- · Links to HCID guidance
- Links to the following: Interim Guidance for the Public Health Management of Cases and Contacts of mpox: Chapter 1 Introduction, Chapter 2 (Clade I Cases and their Contacts), Chapter 3 (Clade II Cases and their Contacts), Interim Public Health Risk Assessment for Humanitarian Aid Worker returning from MPXV Clade I Areas
- general revision and editorial updates

V2.0 Public Health and Infection Prevention and Control guidance on the prevention and management of cases and outbreaks of respiratory viral infections in Residential Care Facilities as at 05/12/2024 <u>here</u>

Updates include:

- · Removal of reference to antigen testing
- Inclusion of duration of transmission based precautions for patients receiving antiviral therapy for the treatment of influenza
- Removal of vaccination status as a consideration for extension of transmission based precautions
- Inclusion of link to guidance on the use of antiviral agents for the treatment and prophylaxis of Influenza
- Inclusion to utilise community support teams (CST) for additional support as part of an outbreak management strategy

V3.1 Acute Hospital Infection Prevention and Control guidance on the prevention and management of cases and outbreaks of respiratory viral infections as at 05/12/2024 <u>here</u>

Updates include:

- Inclusion of duration of transmission based precautions for patients receiving antiviral therapy for the treatment of influenza
- Removal of vaccination status as a consideration for extension of transmission based precautions
- · Rewording to risk assessment when identifying inpatient contacts
- Inclusion of link to guidance on the use of antiviral agents for the treatment and prophylaxis of Influenza
- · Update to section on aerosol generating procedures

V8.0 Infection Control Guiding Principles for Buildings Acute Hospitals and Community Healthcare Settings as at 09/12/2024 <u>here</u>

To further support this guidance a post-construction/pre-commission guide for building projects has been developed to support application of IPC standards and guidelines was developed. The purpose of this document is a guide to support individuals at the post

construction/precommission stage of building projects (new constructions, renovations and maintenance works) to ensure IPC best practice is considered.



Prevention of Surgical Site Infections (SSI)

SSI are associated with longer length of hospital stays for affected patients, additional surgical procedures or treatment in intensive care units, and greater rates of morbidity and mortality (ECDC, CDC). It is estimated that SSIs affect over 500,000 people per year in Europe and costs €19 billion (WHO).

SSI is the third most common healthcare-associated infection (HCAI) accounting for 13.6% of all HCAIs in Ireland as per 2023 European point prevalence survey (PPS) (ECDC 2023).

An AMRIC guideline on the prevention of SSI was published in December 2024 following consultation with stakeholders. It is published on hpsc.ie <u>here</u>. It sets out recommendations for practice including:

- Core Recommendations
 - Patients and carers/ family
 - Pre-operative recommendations
 - Intra-operative recommendations
 - · Post-operative recommendations
 - Additional recommendations
 - Surveillance
 - Governance for surgical site infection surveillance

What's new on www.antibioticprescribing.ie

During the winter season it is important to ensure all patients are up to date with influenza, COVID-19 and pneumococcal vaccine as per national immunisation guideline recommendations

Respiratory tract infections - Nov 2024

 <u>Respiratory infection information leaflet (including self-care and safety-netting advice) (PDF 488</u> <u>KB</u>) is now available for GP consultations with patients presenting with respiratory or ENT infections that do not require immediate antibiotics

C-section Wound Infection - Oct 2024

- Updates to recommended duration of treatment (5-7 days in general, 10 days if Group A *Strep* isolated)
- Additional advice on antibiotic treatment for mother and neonate if Group A Strep is isolated

Perineal Wound Infection - Oct 2024

- Updates to recommended duration of treatment (5-7 days in general, 10 days if Group A *Strep* isolated)
- Additional advice on antibiotic treatment for mother and neonate if Group A Strep is isolated
- Advice on hygiene and wound care



HSE AMRIC National General Practitioners (GP) Out of Hours (OOH) antimicrobial prescribing project

HSE AMRIC team, Transformation and Technology (formerly eHealth) and Access & Integration – Primary Care colleagues are working together to improve and reduce antibiotic prescribing in established national GP Out of Hours settings.

Ireland has the ninth highest level of overall antibiotic consumption in EU (2023), with 90% of antibiotics used in human health occurring in the community sector. This project is a scale up of a successful SouthDoc out of hours antibiotic quality improvement project (2018 -2021), which led to significant and sustained improvement in the quality of antibiotic prescribing in Cork Kerry GP OOH services.

If your doctor says

you don't need an antibiotic, that's ok.

KOP

There are over 4,370 GPs, in Ireland, with approximately 16 OOH Co-Operatives nationwide providing services to both rural and urban areas. People in Ireland visit their GP up to four times each year. The objectives of this project are to:

- Reduce antibiotic prescribing in line with the HSE AMRIC Action Plan 2022-2025 of a reduction of 8% in red antibiotic prescribing to 26% in General Practice by 2025 and a 2% reduction in prescription rate (as measured by antibiotic prescriptions per 100 GMS patients) year on year to 2025
- Implement a quality improvement antibiotic trigger tool capable of auditing individual GP prescribing to recognised OOH computer software systems to improve antibiotic stewardship in the community
- Reduce overall antibiotic consumption in the community; target of 20.5 DDD by 2025
- Improve consistency of prescribing, awareness and knowledge of AMR through staff education and peer review

The auditing and reporting capabilities within this GP OOH electronic trigger tool will provide all GPs who participate with an individual report on their OOH prescribing on a bimonthly basis which can be used as a quality improvement initiative and audit tool to address their quality and quantity of prescribing in the OOH setting.

The vision of this innovative project is to target a whole population based approach to improve the quality of antibiotic prescribing by GPs; reduce antibiotic prescriptions, promote patient self-care and increase the proportion of preferred antibiotic agents.

Recent significant progress on project deliverables include an updated electronic antibiotic trigger tool. A phased implementation approach is planned for 2025 - 2026 with initial stakeholder engagements completed and positive feedback received from GPs in OOH settings. Dr. Edel Doorley, AMRIC GP advisor says this initiative will influence participating GPs in their antibiotic prescribing in both their OOH work and daytime work practices and support their antimicrobial stewardship.

If you would like more information or would like to speak to someone working on this project please contact Margaret Culliton, Project Lead: <u>margaret.culliton@hse.ie</u> or Dr. Edel Doorley, GP Lead: <u>edel.doorley2@hse.ie</u>



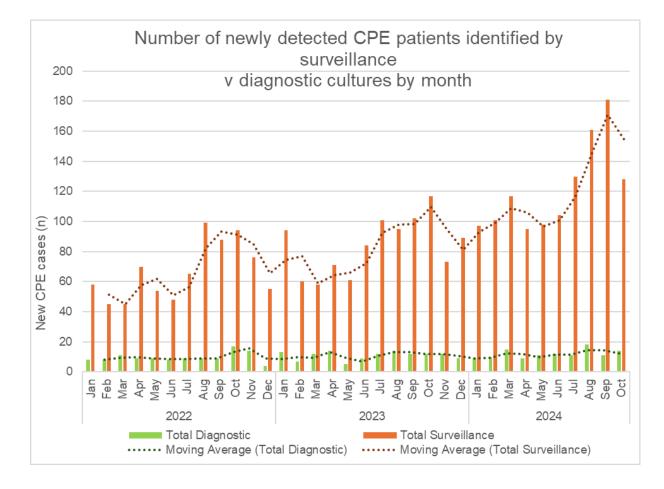


In October 2024, 124 new CPE patients were reported to HSE acute hospital operations, a decrease on the peak seen in September 2024 which was the highest reported number of new CPE patients' year to date (150 patients).

35,778 CPE surveillance samples were tested in HSE laboratories, which was the largest number of CPE screenings performed to date this year. The National CPE Reference Laboratory Service (NCPERLS) received 142 isolates for new patients (including private hospitals). Out of 48 hospitals returning data one hospital reported a new CPE outbreak and eleven hospitals reported having an existing CPE outbreak (two hospitals were no longer in outbreak and two hospitals were unspecified).

The figure, analysing data from NCPERLS, shows how CPE colonisation identified via screening of asymptomatic patients has increased over time (partly due to increased screening), while the number of CPE infections diagnosed in symptomatic patients has remained relatively low and stable.

For more information, the full report is available here.





B National Clinical Surveillance Infection Control System (NCSICS)

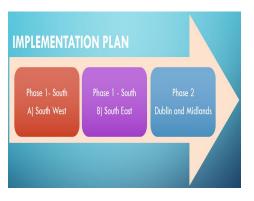
The NCSICS IT System for IPC project is underway. It is estimated that about half of HCAIs can be prevented and the introduction of this software will support the surveillance of HCAIs and will play a key part in reducing them. The system which has been procured is a Baxter product called ICNET and it will be available across all Access and Integration acute and community services including Public Health. This is a multi-million euro project which will deliver significant benefits to patients, service users and staff.

The initial focus of this project was on resourcing a national team and providing each area with a dedicated resource for the project and the completion of an EU tendering process. Following this the national infrastructure for the system was built in the National Data Centre, by the National Project and Tech Hosting teams in Technology and Transformation. These regional instances are aligned to our Regional Health Areas.

Implementation

The project has now moved to the implementation phase with the initial focus on the HSE South West area and will continue with a national deployment.

The governance for implementation in the South West has been set up with an area steering group in place and local implementation groups established. Various working groups are also in place focusing on standardisation of terminology around organisms, alerts and reporting from the system. The national project team work closely with Laura Moore, CNM in Informatics for this area and are currently building interfaces between the Patient Administration System and Laboratory system in collaboration with local teams. The vendor has commenced the application configuration. User acceptance testing, training and go live are planned for Q1 2025.



Baxter events

In May 2 workshops (29th of May – Cork and 30th of May – Dublin) were held, these day long workshops focused on providing information for staff on the ICNET surveillance software and how it is deployed. The national team provided an update on the project. There were 2 excellent demonstrations of ICNET in use in practice.

Ross Darley spoke about how the system is used in NHS Scotland (Dumfries and Galloway trust). The work of the Limerick IV Care team was showcased and this demonstrated how the team has adapted the system to track their phlebitis cases. The events were very successful with over 50 attendees at the Cork event and almost 100 at the Dublin event. Participants had the opportunity to have individual demonstrations and opportunities to speak with product specialists in break out areas.





Left to Right: Cathal O'Conallain, Project Manager; Deirdre Mullins, Project Manager; Regina Monahan; Project Manager, Sinead Conroy, CNM informatics ULHG; Bernie Hannigan, Project Manager; Josephine Galway, Director of Nursing AMRIC

December 2024 Edition 23 **IF** Making services safer; introducing the new National Clinical Surveillance Infection Control System Contd.



Cathal O'Conallain, Project Manager providing a project update at Dublin event



Claire Hanson, Product specialist and trainer with Baxter providing demonstration of system live at Cork event



Sharon Maher, ADON IPC; Gwen Regan, Director of Nursing, Access and Integration community; Josephine Galway, DON, AMRIC



Ross Darley, IPC Manager and Decontamination lead, NHS Dumfries and Galloway

Existing Customer Workshop 26th of November

On the 26th of November Baxter hosted an ICNET Ireland existing customer workshop. This workshop provided participants with an opportunity to network with colleagues across Access and Integration acute, community and public health who currently use this system in their work. There were also interactive activities which focused on how the various different features of the system can be adapted locally to support different workflows. The afternoon provided insights into reporting. The event also allowed the opportunity to feedback to the vendor the types of changes which would be welcome in future versions of the system.

Recent Webinar

On 12th of November a project update and case study on the NCSICS project was delivered by the National Project team and Sinead Conroy CNM Informatics, HSE Mid West – if you would like to listen to this recording it is available <u>here</u>





Participants at the existing customer workshop – 26th of November

If you would like more information or would like to speak to someone working on this project, please contact <u>NCSICS@HSE.ie</u>

H AMRIC Regional Winter Events

The AMRIC team have held winter events in each of the 6 new Regional Health Areas (RHA's). These IPC and AMS events have been scheduled to support International Infection Prevention Week (IIPW) and EAAD. In our last Resist newsletter we showcased the events in RHAs Dublin South East, the South West and the West North West.

The events in RHAs Midwest, Dublin North East and Midlands have also taken place. These have been really successful events and provided a great opportunity for local IPC and AMS staff to re-engage and showcase their local IPC and AMS quality improvement initiatives.

Each event was opened by the Regional Executive Officer or a member of the RHA Senior Management Team. Dr. Colm Henry, Chief Clinical Officer delivered the opening address for the RHA Dublin North East event.

A patient partner presented at each event which was a good reminder to all of us why we work in the domain of IPC and AMS and the importance of the work we do.

We wish to thank all our patient partners for sharing their stories with us.

Some photographs from the event are shared in the following pages.



Thank you to Clara Meehan, Patients for Patient Safety Representative for sharing her father's story with us



Thank you to Eimear Hallihan telling her powerful story of her newborn baby James



Thank you to Joseph for allowing Maria Molyneaux CNM2 for University Hospital Limerick to share his experience of the Outpatient Parenteral Antimicrobial Service



Thank you to Bernie O'Reilly, Patients for Patient Safety for sharing the story of her late husband Tony



HE HSE Dublin and South East



Nicole Nugent, ADON IPC speaking on challenges of outbreaks



Michelle Hennebry, ADON IPC speaking on challenges of outbreaks



Dr. Ruth McDermott, Public Health speaking about outbreak management



Dr. Lili Peterson Public Health speaking about outbreak management



Mairead Galvin shares her experience as a Pharmacy Executive Manager in the Midlands Regional Hospital Tullamore



Colleagues at our HSE Dublin and South East event



HSE South West



Dr. Adrian Yan, Palliative Care Registrar, Marymount Hospice and Dr. Karen Fitzmaurice, Consultant in Infectious Diseases and Microbiology speak to the trends, challenges and solutions in IPC & AMS in end of life care



Dr. Anne Sheahan, Area Director and Louise Carlton, ADON Public Health HSE South West share their perspective on outbreak management



Eleanor McCarthy from the Cork/Kerry Community Healthcare Infection Prevention and Control Nursing Service talks implementing the link practitioner programme

Shirley Keane, AMRIC Head of Service, Dr. Peter Kearney, Regional Clinical Director; Dr. Eimear Brannigan, AMRIC Clinical Lead





Callum Ryan, Community Antimicrobial Pharmacist speaking about AMS in Dental Services



December 2024 Edition 23

HSE West North West



Mary Regan and Aisling Clancy, Antimicrobial Pharmacists promoting responsible prescribing of antibiotics



Judith Davitt, Group IPC ADON for the West North West discussed integration between Acute and Community IPC Services



Ann Cosgrave, Integrated Health Area Manager for Galway and Roscommon opens the AMRIC West North West event in Sligo



Dr. Anthony Breslin Consultant Public Health gives a health protection perspective on outbreak management.



Prof. Martin Cormican, Consultant Microbiologist Galway University Hospital HSE Clinical Lead for Laboratory Services Reform Programme



Dr. Róisín Mulqueen & Dr. Jayanta Sarma Integrated Consultant Microbiologists from the West North West discuss their roles in an integrated consultant led microbiology service



HSE Mid West



Eimhin Cullen, Data Analyst Access and Integration community; Aileen Prout, IPCN; Trudy Ryan, IPCN; Bushra Farah, IPCN; Dr. Louise Lowrey, Dental Orthodontist; Shirley Armitage, Community Pharmacist, Joanne Minogue, IPCN; Dr Brid Minihan, Consultant Microbiologist



Dr. Brid Minihan, newly appointed Integrated consultant microbiologist in the HSE Mid West



Niamh Houlihan, IPCN; Mairead Downey IPCN, Noreen O'Regan, Quality and Safety Manager, QSSI



Sandra Broderick, Regional Executive Officer, opening our event



Siobhan Treacy CNM with Public Health in HSE Mid West talks about the public health perspective on outbreaks



HSE Dublin North East



Barbara Slevin, ADON AMRIC; Eimear O'Donnovan; ADON AMRIC; Martina Connolly, CNS IPC



Dr. Richard Drew, Consultant Microbiology; Shirley Keane, AMRIC Head of Service, Bernie O'Reilly, Patients for Patient Safety; Dr. Eamon O'Moore, Director National Health Protection; Dr. Siobhan Ní Bhrian, Integrated Care Lead, Dr. Eimear Brannigan, AMRIC Clinical Lead



AMRIC team



Public Health Colleagues

December 2024 Edition 23



HSE Dublin Midlands



Eileen Whelan, CDONM and Quality, HSE Dublin Midlands, Marie Philbin, Chief Pharmacist; Dr .Eimear Brannigan, AMRIC Clinical Lead, Kate Killeen White, Regional Executive Officer; Shirley Keane, Head of Service AMRIC; Josephine Galway, DON AMRIC



Dr. Des Hickey discussed challenges of outbreak management in vulnerable populations



Karen Davis Holden & Nuala Clarke, Group Sepsis ADONs talk about the challenges in recognising sepsis.



Dr. Cilian Ó Maoldomhnaigh, paediatric infectious disease consultant shares a paediatric perspective on antimicrobial stewardship

Colleagues in attendance at our HSE Dublin Midlands event



This is a reminder to all staff that you have access to a wide range of patient leaflets and translated patient information. Please allow 7 working days for completion of orders.

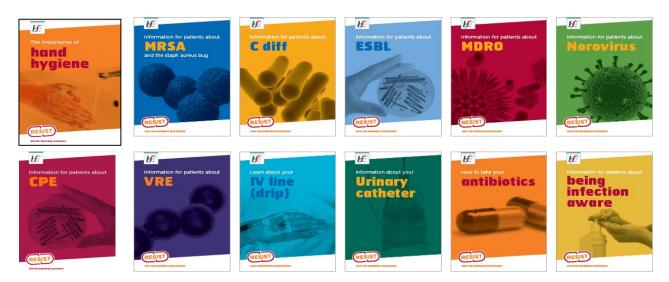
There are a number of AMRIC print resources available to order including awareness posters, guidance posters and patient information leaflets. These resources are available to order online from <u>www.healthpromotion.ie</u>. To place an order you should first set up a professional account when registering. To access the AMRIC resources you should select RESIST from the search box. This will bring up the many items that are currently available to health professionals to order.

The printed patient information leaflets include the following:

CPE	C. diff	VRE
MRSA	ESBL	IV lines
How to take your antibiotics	Norovirus	Urinary catheters
Infection prevention in hospital	Multiple Drug Resistant Organisms (MDROs)	

We have updated <u>healthpromotion.ie</u> so now you can view a PDF preview of all of our items before ordering.

If you are having any issues with ordering a complete guide can be found on the HPSC website at this link: https://bit.ly/AMRICOrders



RESIST merchandise (t-shirts, note books, bags etc) is reserved for hand hygiene day, European Antibiotic Awareness Day and RESIST launches. Merchandise will continue to be issued via the AMRIC team and are not available to order online. If you have any queries please contact the AMRIC team <u>hcai.amrteam@hse.ie</u>

