

## Welcome

to the 25<sup>th</sup> RESIST Newsletter from the Antimicrobial Resistance and Infection Control (AMRIC) team. In this edition we hear about; a NOCA award for pharmacy colleagues, the environmental impact of antibiotics, we have updates on ICNET, the monthly CPE report, the Point Prevalence Survey in acute hospitals 2024 and lots of great photos from World Hand Hygiene Day, Link Practitioners and a RESIST rollout.

*Thanks for your comments and inputs, if you have any suggestions on content or want further information please contact*

[hcai.amrteam@hse.ie](mailto:hcai.amrteam@hse.ie)

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4. Point Prevalence Survey (PPS) of Acute Hospitals 2024
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20. Accessing AMRIC print resources
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**Upcoming events:** International Infection Prevention Week (IIPW) 13<sup>th</sup> – 19<sup>th</sup> October '25  
European Antibiotic Awareness Day (EAAD)  
18<sup>th</sup> November '25

## Dr. Colm Henry, HSE Chief Clinical Officer

In health, our roles are always challenged especially with increases in the prevalence and circulation of serious illness. I know that that our IPC practices play a key role in how we keep our patients, service users and staff safe. Indeed, on World Hand Hygiene Day (WHHD) on 5<sup>th</sup> May last, we are all reminded of the importance of hand hygiene in preventing the spread of infection, both in our working life and in our day to day life. I was heartened to see coverage of some of your events marking WHHD, on social media and indeed in this issue of RESIST. I want to express my sincere appreciation for the work you continue to do and advocating continuously for high standards of infection prevention. There are guidelines, leaflets, posters, webinars, elearning courses and many other resources available from the HSE AMRIC team and indeed from international sources to support you with further improving IPC and AMS.

Vaccination is one of our primary tools against preventable diseases. Again, I encourage all healthcare workers, patients and service users to seek to keep up to date with their vaccinations. Vaccines have helped to all but eliminate diseases such as polio but increased misinformation, complacency and vaccine fatigue means diseases we understood to be all but eliminated, e.g. measles, are seeing an increase in cases. Please 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.

Thank you for your continued commitment to providing services to the people that need our help and support.

Míle buíochas le achan dhuine, GRMA

**Dr. Colm Henry, HSE Chief Clinical Officer**



*Dr. Colm Henry,  
HSE Chief Clinical Officer*



## Skip the Dip for UTI in Over 65s: Highly Commended in NOCA QI Champion Award

The 'Skip the Dip for UTI in Over 65s' project was one of four initiatives shortlisted for the Quality Improvement (QI) Champion Award at the National Office of Clinical Audit (NOCA) Conference, in the Royal College of Surgeons in Ireland (RCSI) on 4<sup>th</sup> February 2025.

This antimicrobial stewardship initiative, led by HSE Community Antimicrobial Pharmacists, aimed to optimise the assessment of urinary tract infections (UTIs) in HSE Older Persons Residential Care Facilities (OP RCFs) in Ireland.

Diagnosing UTIs in older adults can be challenging. A 2020/21 point prevalence survey (PPS) found dipsticks were still used routinely on admission to assess for UTIs in the majority of HSE OP RCFs. The use of dipsticks to assess for UTI in this population is unreliable and can lead to unnecessary antibiotic prescribing. UTIs accounted for over half of all antibiotic prescriptions in these settings, highlighting this as a key area for quality improvement.

The Skip the Dip initiative was launched in 2023/24 across 97 HSE OP RCFs and delivered locally by Community Antimicrobial Pharmacists who applied a human factors approach using the Systems Engineering Initiative for Patient Safety (SEIPS) methodology. All the Skip the Dip QI educational resources produced are available on [www.antibioticprescribing.ie](http://www.antibioticprescribing.ie)

### Key actions undertaken included:

- Engaging nursing staff, prescribers, and healthcare assistants through focus groups, surveys, and education
- Developing practical resources such as a staff handbook, resident leaflet and posters
- Delivering over 3,500 staff training sessions, both face-to-face and online
- Raising awareness among GPs through webinars, articles, and small group learning.

The impact of Skip the Dip has been significant:

- Dipstick use for UTI assessment fell from 99% in 2020/21 to 53% in 2023, and further to just 24% in 2024 following the QI initiative
- Antibiotic use for UTI treatment reduced from 2.6% of residents in 2020/21 to 1.6% in 2024.

While substantial progress has been made, sustaining change within OP RCFs and further engaging prescribers, including out-of-hours services, remains a priority. Expanding Skip the Dip into privately operated facilities and other healthcare settings is being explored.

This initiative demonstrates the power of collaboration, education, and local leadership driving safer, evidence-based care for older people. The team was delighted to receive a "Highly Commended" award from NOCA, and recognition as a QI champion highlights its national impact.

Thank you to the Older Persons and QSSI teams across the country for their support and engagement. The support provided by the AMRIC team and the national Community IPC / AMS team was also crucial to the success of this initiative.



(L-R) Collette Tully (Executive Director NOCA), Dr. Brian Creedon (Clinical Director NOCA) Bernard Gloster (HSE CEO), Prof Deborah McNamara (President RCSI), Margaret Donnelly, Dr. Michael Lane, Mary Bedding, (front) Dr. Nessa Keane and Patricia Sheehan.

## *New National Action Plan for AMR*

As you know, Ireland has a National Action Plan for tackling Antimicrobial Resistance, iNAP2 2021 – 2025. iNAP3 is currently being developed with input from all interested parties, including the HSE. You may have seen that the Department of Health and the Department of Agriculture, Food and the Marine recently asked the public to take part in an online survey to inform iNAP3.

HSE AMRIC is actively involved in contributing to iNAP3 which is due to be published later this year. It is important to build on the progress made in both iNAP1 and iNAP2 and to be ambitious and innovative in iNAP3; we need to aim high to mitigate the very real threat from AMR.



*Dr. Eimear Brannigan, HSE Clinical Lead, AMRIC*

## *World Hand Hygiene Day*

World Hand Hygiene Day took place on Monday 5<sup>th</sup> May this year. It is really wonderful to see all the events that are held right across the country throughout the month of May, marking the importance of good hand hygiene. It is encouraging to see all staff participating and engaging so well with colleagues and indeed to see residents and visitors being included. Well done to everyone involved; I know these events take a lot of organising, and thank you for sending on your photos.

## *Point Prevalence Survey 2024*

You'll see in this issue that my colleagues have published the national report on the *Antimicrobial Point Prevalence Survey of Acute Hospitals in Ireland 2024*. The team have also developed an infographic poster, highlighting the key findings and recommendations from the national report which has been issued to all acute hospitals.

## *Environmental Impact of Antibiotics*

My colleague Ellen Martin, has written about the environmental impact of antibiotics. This is an important topic and Ellen outlines how there are substantial environmental benefits associated with the responsible use of antibiotics.

The environmental impacts of the manufacture and use of antibiotics are significant. As prescribers we can consider minimising the use of IV antibiotics where possible and appropriate. Switching from IV to oral medications has an immediate reduction in carbon footprint and reduces the risk of infection to our patients from IV cannulas.

Every time we insert a cannula into a patient, we open an entry point for infection. Always consider if there is an oral alternative that is better for the patient and the environment. We also need to stop and think about the production effects and waste from prescribing inappropriate IV antibiotics instead of pills.

To find out more about how the HSE is working towards more sustainable healthcare, see the [HSE Climate Action Strategy 2023 - 2050](#)

## *HSE AMRIC Guidance for Site Visits*

Site visits by senior HSE staff and government ministers are an important part of HSE day to day business. HSE AMRIC has published and circulated some helpful guidance, '*HSE AMRIC guidance for promoting the importance of hand hygiene and infection prevention and control (IPC) measures when visiting HSE services*'. This brief document provides guidance on appropriate IPC measures to be considered during such formal visits and is available [here](#).

Thank you again for all your feedback and submissions to RESIST. Please continue to share your photos, progress and innovations; your contributions are such an important part of this newsletter and benefit us all.

*Enjoy your well-deserved breaks over the summer months.*





# National Antimicrobial Point Prevalence Survey (PPS) of Acute Hospitals 2024

The [national report of the antimicrobial PPS of acute hospitals](#) has now been published and is available on [antibioticprescribing.ie](#)

HSE AMRIC have also developed an infographic poster highlighting the key findings and recommendations from the national report. Printed copies are being disseminated to all acute hospitals in Ireland.

On 30<sup>th</sup> April, AMRIC hosted a webinar on the key findings and recommendations. Members of the AMRIC team were joined by AMS specialists from across acute hospital settings to discuss:

- The key findings and recommendations of the National Antimicrobial PPS 2024
- The challenges of implementing AMS in practice
- The learnings and experiences of other colleagues across the acute hospital setting in implementing quality improvement work relating to the key recommendations
- How we can build on the excellence that exists in AMS across the acute hospital setting.

The discussion focussed on key findings and recommendations for quality improvement in three areas:

*Proportion of antimicrobials used based on the AMRIC Green / Amber / Red classifications*

- promote timely review of all antimicrobials
- promote use of Green antimicrobials
- opportunity to steward piperacillin / tazobactam

*Proportion of IV antimicrobials*

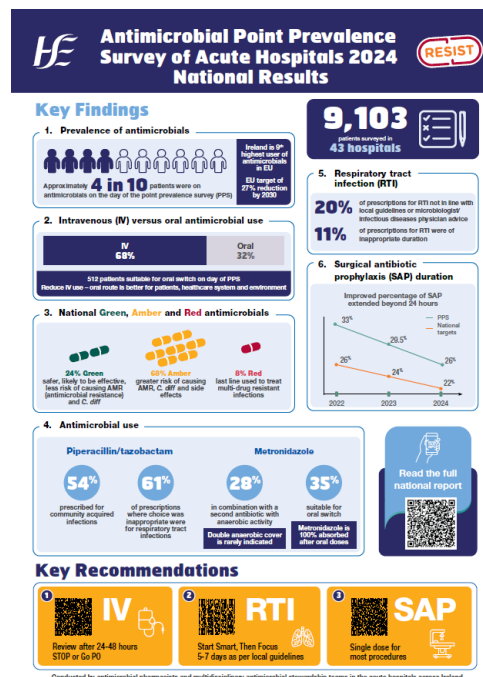
- oral prescribing should be used where possible

*Surgical antibiotic prophylaxis duration*

- continue to reduce surgical antibiotic prophylaxis extended beyond 24 hours

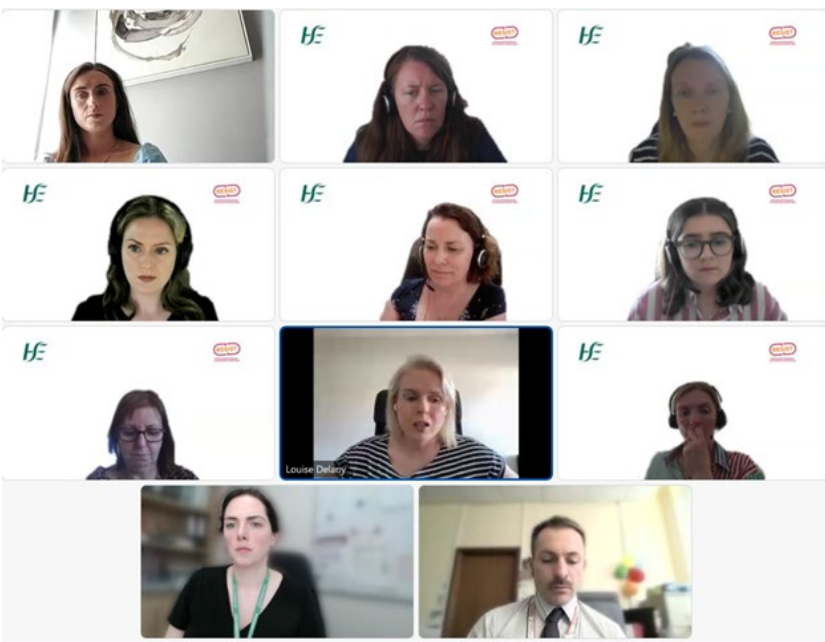
Watch the webinar here:

<https://www.youtube.com/watch?v=5pQWL-d56kM>



*Discussion panel members shown in photo:*

Carol Doherty, Senior Antimicrobial Pharmacist, Sligo University Hospital, Eimear O'Donovan, AMRIC Assistant Director of Nursing, Marie Philbin, AMRIC Chief I Pharmacist, Ellen Martin, AMRIC Senior Pharmacist, Barbara Slevin, AMRIC Assistant Director of Nursing, Dr Emily Glynn, AMRIC Fellow and Clinical Microbiology SPR, Josephine Galway, AMRIC Director of Nursing, Louise Delany, Senior Antimicrobial Stewardship Pharmacist, National Maternity Hospital, Mary Kelly, Chief II Pharmacist, AMRIC Acutes, Office of the National Director Access and Integration, Roisin McMenamin, Antimicrobial Stewardship Pharmacist, Letterkenny University Hospital, Dr Stefano Savinelli, Consultant Physician Infectious Diseases, St Vincent's University Hospital.





AMRIC's epidemiology team revised and updated the monthly summary report on CPE in Ireland in January this year. The updates reflect recent changes in the HSE's structure, now organised into 6 health regions, and take into account the new quarterly quotas introduced by the National CPE Reference Laboratory Service (NCPERLS) in January 2025. These quotas limit the number of isolates detected from screening samples that can be sent for whole genome sequencing.

As detailed in the report, most of the new CPE cases each month are detected through screening patients in acute hospitals who show no symptoms. This early detection allows healthcare teams to quickly implement measures to control the spread of CPE.

## What's in the revised report?

### Five figures including:

- National total of newly detected CPE cases
- and screening samples collected
- Number of newly detected cases and screening samples by HSE health regions (see example Figure 1, April 2025 data)
- Monthly number of HSE acute hospitals reporting current outbreaks
- Distribution of carbapenemase types of new detected CPE cases by region (see example Figure 2, April 2025 data)
- Proportion of OXA genotypes.

*Two tables including:* the total newly detected CPE cases and screening samples collected in HSE acute hospitals and hospitals reporting current CPE outbreaks by HSE health region.

For more information, the updated reports are available [here](#)

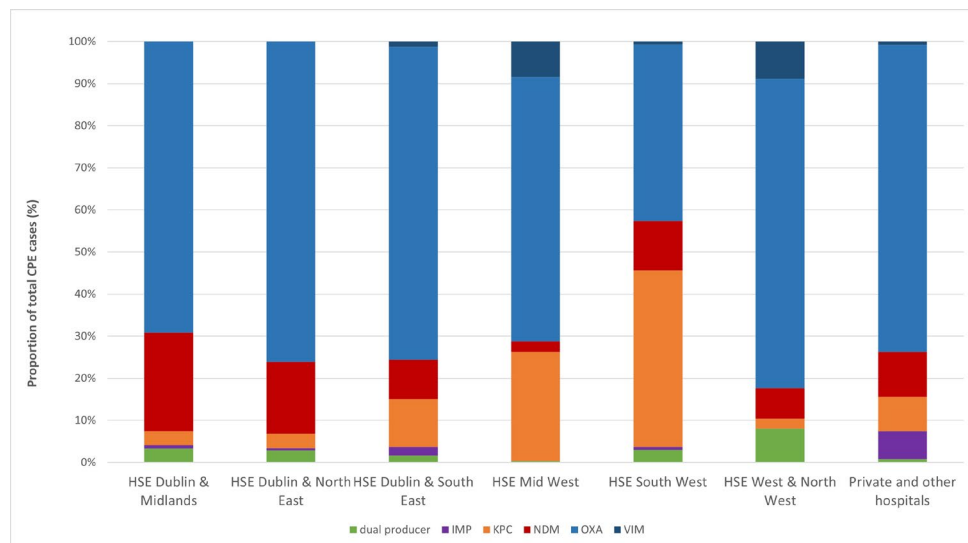


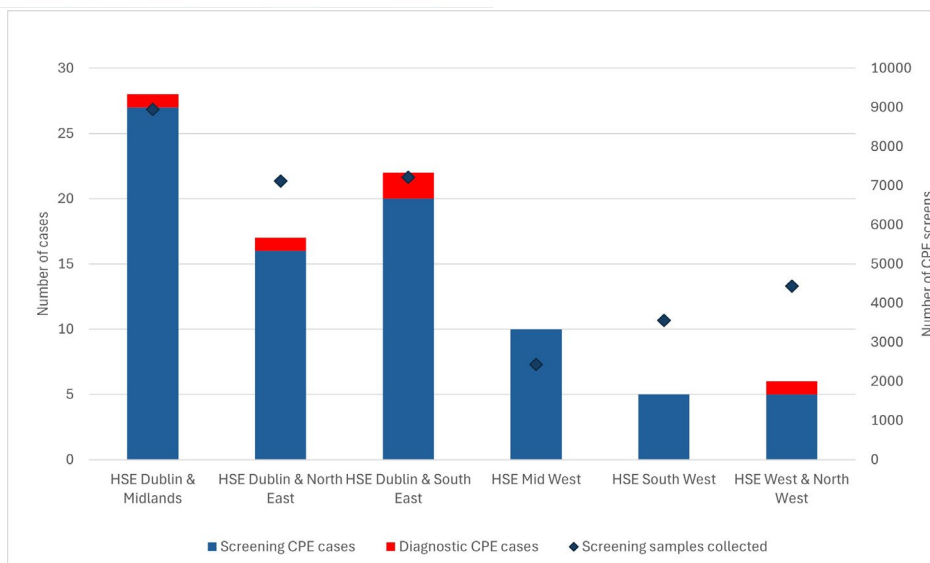
Figure 1 Number of newly detected CPE cases and screening samples collected by HSE health region, April 2025. Data source: BIU.

Data sources for the report are the HSE's Business Information Unit (BIU) and NCPERLS.

Figure. 2 Distribution of carbapenemase type of newly detected CPE cases by region, May 2024 – April 2025.

Data source: NCPERLS.

Figure 2 footnote legend: NOTE: Dual producers include: OXA/VIM, OXA/NDM, OXA/KPC, OXA/IMP/KPC/NDM.

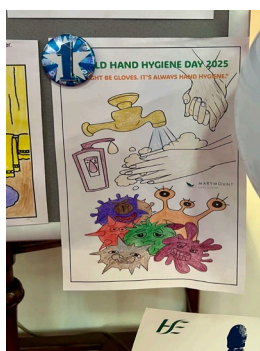


***We are delighted to share photographs of fantastic events held by colleagues around the country to mark World Hand Hygiene Day (WHHD) 2025.***

### HSE Dublin and Midlands

World Hand Hygiene Day was promoted throughout May in Dublin South City and West, Dublin South West, Kildare and West Wicklow Integrated Healthcare Areas, HSE Dublin and Midlands. IPC Link Practitioners and hand hygiene trainers promoted hand hygiene among residents/clients, colleagues and visitors. They led targeted campaigns, raised awareness through education, practical demonstrations, competitions and fun activities. Their efforts increased staff knowledge, encouraged correct hand hygiene techniques, and strengthened a culture of infection prevention.

By engaging healthcare workers and residents/clients alike, they contribute to reducing healthcare-associated infections and promote sustained safety improvements across services and facilities. The IPC community team would like to thank all the staff who took part from our HSE older person, primary care and mental health services as well as from our private nursing home providers, who have been involved in promoting and advocating for good hand hygiene practices that align with the WHO 5 moments and techniques.



*Making our facilities and services safer places for people to live, work and visit.*



## HSE Dublin and Midlands

World Hand Hygiene Day was celebrated with the focus, **'It might be gloves, it's always hand hygiene'** to educate, raise awareness and advocate for effective IPC practice and the role that healthcare professionals play in mitigating the spread of infection. The IPC team developed a key message document, which was shared with services to support delivery at safety pauses/handovers.

**WORLD HAND HYGIENE DAY, 5<sup>TH</sup> MAY 2025**  
**IT MIGHT BE GLOVES. IT'S ALWAYS HAND HYGIENE**

**Hand Hygiene Guideline for IHA (Feb) 2025**  
In line with HR Memo 043/2024, Hand Hygiene is mandatory for all staff working in healthcare.

Staff to complete HSE and E-Learning Hand Hygiene module and supplemented by practical face to face training. Hand Hygiene Face to face training can be provided by trained hand hygiene trainer/IPC Link Practitioner or from IPCN following request.

**Attention:**

Medical gloves can get contaminated as easily as bare hands and do not protect 100%. When worn, gloves should be removed, for example, after touching a patient and hand hygiene performed immediately as per the WHO 5 moments for hand hygiene.

**Regardless of whether gloves are worn or not, Hand hygiene at the right time and in the right way is still one of the most important measures to protect those receiving care as well as health and care staff.**

**It might be gloves. It's always hand hygiene.**

**Excessive glove use contributes significantly to the volume of health care waste. Appropriate glove use and hand hygiene can help to minimise this waste.**

**IPC National Clinical Guideline No. 30 (2023 (Vol 1))**  
**Use of gloves is not an alternative to hand hygiene.**

**Are you hand hygiene ready?**

**No more than one plain ring is worn.** If jewellery must be worn in clinical areas it should be limited to a plain band (for example a wedding ring). Rings with sharp surfaces may puncture gloves. Hand hygiene practices are likely to be performed in a suboptimal way if voluminous rings or rings with sharp edges or surfaces are worn.

**No wrist jewellery is worn.** The wearing of jewellery by healthcare workers can compromise performance of optimal hand hygiene. The consensus recommendation is to strongly discourage the wearing of watches, rings or other jewellery during health care.

**Nails are short.** Fingernails should be kept short (the length of the finger pad) and clean. Long, sharp fingernails, either natural or artificial, can puncture gloves easily. They may also limit HCW's performance in hand hygiene practices. Keep natural nails short (tips less than 5mm or approximately 1 inch).

**No nail varnish, false or enhanced nails are worn.** Nail polish/varnish should not be used, particularly as chipped nail polish may support the growth of microorganisms on the fingernail. The wearing of artificial fingernails by healthcare workers can compromise performance of optimal hand hygiene. Wearing artificial acrylic fingernails can also result in hands remaining contaminated with pathogens after use of either soap or alcohol-based hand gel.

**Sleeves are short 'bare above the wrists'.** The minimum requirement is that the forearm is bare for 5 to 10cm above the wrist when working in patient care areas to ensure that clothing does not interfere with performance of hand hygiene. For this reason, the expression "bare above the wrists" may be preferred.



Gigimol Kollalilittoop IPCLP, Stephy Rex IPCLP with staff in Riada House, CNU Tullamore.



Abbeylax Community Nursing Unit.



Jincy Ann Philip (IPCLP) Alvina Gibson (IPCLP) Liz Winters (CNS IPC).



Rosemary Young and Claire Dowling CNS IPC, St. Vincent's CNU, Mountmellick.



Sudeepa Jose (IPCLP), St Joseph's CNU, Longford.



The Village Residence and resident involvement.



Ambily Nair and Elizabeth McConnell (IPCLPs), St Joseph's Ardee.



Noeleen Hallahan CNM2 IPC, Susan Mulligan, Lesselle Betache IPCLP, Christy Joseph and Peter Kyle, St Oliver Plunkett's CNU, Dundalk.







Heather House Community Nursing Unit HSE South West. Link Practitioner Manjusha and staff created a wall display of posters to mark WHHD and staff and residents attended an education session on hand hygiene.

## HSE South West

The HSE South West IPC nursing team supported services to promote World Hand Hygiene Day (WHHD). Infection Prevention and Control (IPC) Link Practitioners were very innovative with art work.

They worked with activities coordinators, residents, families and even grand children to promote WHHD.



Schull Community Hospital art work display for WHHD. A clock identifying times to clean your hands was made with residents and staff led by Link Practitioner Hazel Bird and activities coordinator.



Killarney Community Hospital - A selection of art work developed by Link Practitioner Kerrie Beckett and completed with residents to mark WHHD

Residents and staff of Skibbereen Community Hospital gathering with the IPC Team to mark WHHD where they had quizzes and activities to encourage hand hygiene.







## HSE West and North West

Blackwater House, Monaghan



St. Mary's, Castleblayney



St John's Hospital, Sligo



CI Tobar, Donegal



Primary Care Centre Carrick on Shannon



RSW Sligo



Ballyshannon Community Nursing Unit Donegal



Arus Carolan, Mohill Leitrim



# World Hand Hygiene Day 2025 (continued)



*Ramona Neill IPC CNS and the staff in St Augustine's CNU, Ballina, promoting WHHD.*



*Ramona Neill IPC CNS and Mary Regan AMS Pharmacist, Ballina District Hospital.*



*Staff in Joe and Helen O'Toole, CNU Tuam.*



*IPC CNS Katie Finn with staff from Aras Mhathair Phoil.*



*Home Support staff promoting WHHD in Tuam Health Centre.*



*Ramona Neill IPC CNS and the staff from Home Support in Mayo completing the practical element of hand hygiene education.*



*Residents in St Augustine's CNU Ballina promoting WHHD.*



*Staff and residents in Plunkett CNU, Boyle Co. Roscommon celebrating WHHD.*

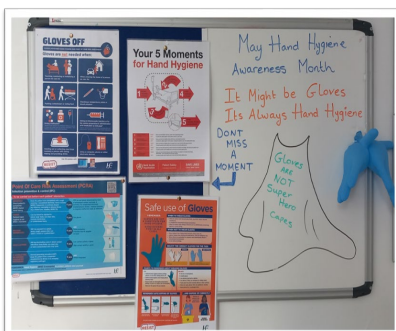




## HSE Dublin and South East



Willowbrook Lodge, Tipperary



CROPS, Tipperary



St John's Community Hospital, Wexford



Sacred Heart Hospital, Carlow



Castlecomer District Hospital, Kilkenny



Signacare Nursing Home, Waterford



Haywood Lodge, Tipperary



Abbeygale House, Wexford



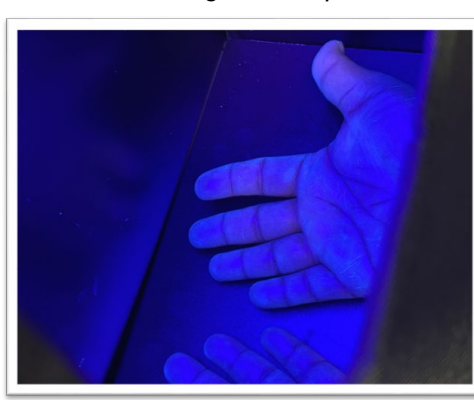
New Houghton Hospital, Wexford



Dungarvan Community Hospital



St Columba's Hospital,  
Thomastown



Oakfield Nursing Home, Wexford





# World Hand Hygiene Day 2025

(continued)



*Staff events marking World Hand Hygiene Day (WHHD) 2025 in Clonskeagh Hospital and Wicklow Nursing Unit*



## Harold's Cross Hospice and Blackrock Hospice



*Eimer Noone Tissue Viability Nurse, Terry Smith IPC Lead, Sharon Cranny CNM2 IPC, Laura Bane Quality and Patients Safety Team, Mary Byrne CNM3 Older Persons Services.*



*Terry Smith IPC Lead, ADON Libby McGrane, Sharon Cranny CNM2 IPC & ADON Steven McDermott.*



*Caroline Casey Occ Health CNS, Sharon Cranny CNM2 IPC and Terry Smith, IPC Lead.*



## Blackrock Hospice







# World Hand Hygiene Day 2025

(continued)

## HSE Dublin and North East



Tonlee Primary Care Centre



St Vincents



Omni Primary Care Centre



Thank you to the team who organised events in a number of locations raising awareness of WHHD.



Grangegorman Primary Care Centre

## Link Practitioner Study Days in HSE Dublin and Midlands

### Link Practitioners Mark World Hand Hygiene Day 2025

The Midlands, Louth Meath Infection Prevention and Control Team welcomed Infection Prevention and Control Link Practitioners (IPCLP) to a workshop on the 7<sup>th</sup> May 2025, as part of World Hand Hygiene Day. It was great to welcome so many IPCLPs to the workshop, which focused on topics for hand hygiene preparedness, *Clostridioides difficile*, scenario based exercises, urinary catheter resource pack and overview of HIQA by the HSE Compliance and Monitoring Lead for HIQA Regulation.

Thank you to all the Infection Prevention and Control Link Practitioners for their engagement in the IPC/AMS Workshop and for their work within their facilities.



IPC Link Practitioners Workshop May 2025





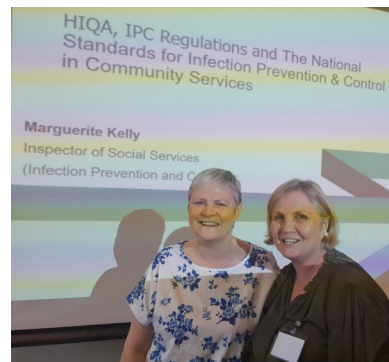
The vital role of Link Practitioners (LPs) was highlighted at an IPC Link Practitioners Study Day, on 1<sup>st</sup> May at the Centre for Learning and Development (CLD), Tallaght University Hospital (TUH).

LPs act as key facilitators between frontline staff and the community IPC teams, promoting best practices in hand hygiene, outbreak prevention and management. They lead education, conduct audits, and support IPC policy / guideline implementation within their units/services, fostering a culture of quality and safety. Their contributions are essential in reducing healthcare-associated infections and enhancing patient safety.

## Key speakers included:

Dr. Gwen Regan, National DON IPC, HIQA Inspector Marguerite Kelly and the IPC community team.

LPs Catherine Miller and Sunita Jindal shared valuable insights on the IPC quality improvements successfully implemented in their respective facilities. They highlighted continuing best practices and lessons learned, to inspire ongoing advancements in patient safety across our facilities and services. The community IPC team would like to thank everyone who contributed to the success of the study day, including TUH CLD nursing team, key speakers and our link practitioners for attending and contributing to the day.



**We look forward to our next study day in October.**





# Implementation of Urinary Catheter Resource Pack

Infection Prevention and Control commenced implementing the urinary catheter resource pack in HSE Older Persons Services in Q2 2025. The urinary catheter resource pack is the outcome of a quality improvement project that aimed to address key areas relating to the management and care of indwelling urinary catheter devices. This followed a national audit undertaken in March 2023 in HSE older person services residential care facilities.



St. Vincent's Community Nursing Unit, Mountmellick.



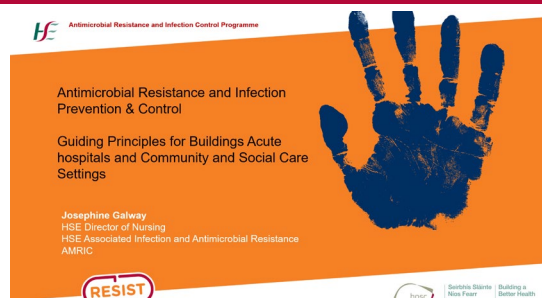
Birr Community Nursing Unit.

## Critical Role of the Built Environment in IPC

Josephine Galway, AMRIC Director of Nursing attended the annual Infection Prevention Control Ireland conference which took place in Dublin on 2<sup>nd</sup> May 2025.

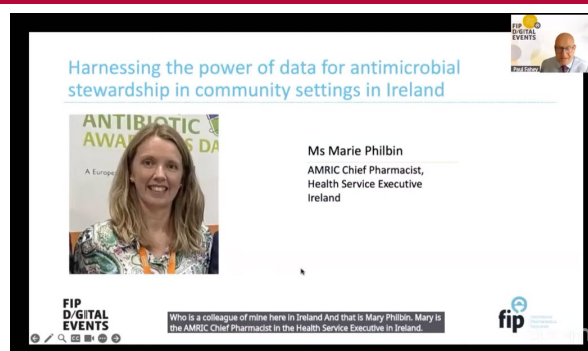
This conference was well attended by IPC professionals from all around the country. Josephine presented on AMRICs work on the guiding principles for buildings, acute hospitals and community and social care settings, highlighting the critical role the built environment plays in preventing infection.

Josephine outlined the HSE's actions in response to iNAP 2, influencing change in this area by developing guidance, reflecting how involving IPC practitioners at design phase is fundamental to ensure IPC requirements are considered and incorporated as part of any new build, refurbishment or any internal works in healthcare facilities. The current guidance, Infection Control Guiding Principles for Buildings Acute Hospitals and Community Health and Social Care Settings, was published in April 2025 and is available [here](#).



## Harnessing the Power of Data in Antimicrobial Stewardship (AMS)

Marie Philbin, AMRIC's Chief Pharmacist shares the [recording of a webinar](#) to the International Pharmaceutical Federation on 5<sup>th</sup> May. The event was entitled: *Harnessing the Power of Data in Antimicrobial Stewardship (AMS) - Use of Data in Benchmarking Antimicrobial Use and Improving AMS Programme Performance*. It was a fantastic opportunity to share the successful HSE AMRIC GP antibiotic prescribing quality improvement initiative and highlight how PCRS data can be used to improve prescribing.







# Midlands Regional Hospital Portlaoise Hosts SAPD Event



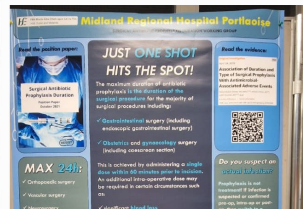
## Surgical Antibiotic Prophylaxis Duration (SAPD)

Staff in Midland Regional Hospital, Portlaoise hosted a very successful 'Surgical Antibiotic Prophylaxis Duration' (SAPD) awareness stand on 28<sup>th</sup> May.



Members of the SAPD working group hosted and welcomed more than 100 attendees on the day with great engagement from all disciplines.

Thank you to everyone who supported the event.



## AMRIC Team Meeting

AMRIC team members held their quarterly face to face meeting in June. Valuable updates were shared and team members had the opportunity to discuss projects, emerging issues and track all work plans for the next quarter.

The team were sorry to say goodbye to colleagues Dr Emily Glynn (3<sup>rd</sup> left), and Liam McLoughlin (front right) who have both moved on to new ventures. We thank you both for your huge contribution and wish you the very best in the future.



Members of the AMRIC team.







# National Clinical Surveillance Infection Control System (NCSICS) – Update on Rollout

The NCSICS IT System for IPC project continues to be rolled out across our acute hospitals and community services. The system, ICNET (by Baxter Healthcare) supports the surveillance of health care acquired infections helping IPC practitioners in their work, increasing patient safety and control of antibiotic resistant organisms.

ICNET is already in use in HSE Mid-West and Tallaght University Hospital, in HSE West in Galway, Mayo and Roscommon hospitals with Sligo, Letterkenny and Portlinculla hospitals scheduled for the coming months.

Phase one of the national project to introduce ICNET in HSE Dublin and South East and HSE South West has commenced with University Hospital Kerry going live in the coming weeks.

Integral to the project are the regional based Informatics CNM2 posts of which 4 of 6 positions are filled. We welcome, Laura Pueyo Cuesta, CNM2 in Informatics for HSE Dublin and South East back from leave.



## Webinar – Utilising technology to deliver safer care in IPC

More than 100 staff attended a webinar delivered by the AMRIC nursing team on 29<sup>th</sup> May. The webinar featured Tallaght University Hospital (TUH) and University Hospital Limerick (UHL) showcasing their experience of using ICNET.

If you would like to listen to this recording it is available [here](#)

### *Tallaght University Hospital (TUH)*

Shaini Paul Mathew, IPC ADON in TUH, gave an overview of how the IPC team use ICNET every day to review new positive laboratory results, tag patients, manage cases and capture additional information (extended properties). Extended properties can also be used by Surveillance Scientists, e.g., in capturing enhanced surveillance on *C.difficile* cases. The system provides real-time results, is time efficient and can be used for contact tracing and assisting the IV Care team. It also provides reports used for daily rounds, including in ITU, and assists bed management in placing patients safely.

### *IPC Informatics Nurse and IV Care Team Collaboration in UHL*

Sinead Conroy, Informatics CNM2 and Margaret Carroll, CNM3 of the IV Care Team (IVCT) in UHL, outlined how they have used ICNET to report and manage phlebitis cases (vein inflammation). Phlebitis is a sign of an adverse effect the IV device is having and the Visual Infusion Phlebitis (VIP) score is used to grade the severity of the phlebitis. Timely and effective management of phlebitis leads to a better outcome for the patient and less associated blood stream infections.

Sinead explained how all the relevant data is captured on ICNET, replacing cumbersome excel sheets. This has helped the IVCT and the relevant clinical teams better manage these cases. Reports have also been generated to help with auditing and tracking phlebitis patients and their outcomes. In addition, data requested nationally is easily accessible through an ICNET report. The team concluded by highlighting the positive impact the system has had and how it is ever evolving and improving work practices.

ICNET is being implemented by AMRIC and HSE Acute and Community Services, Technology and Transformation (formerly eHealth). If you would like more information or would like to speak to someone working on this project, please contact [NCSICS@HSE.ie](mailto:NCSICS@HSE.ie)





# RESIST Roll Out - Shamrock Plaza, Primary Care Centre Carlow

Putting hand hygiene front and centre, the roll out of RESIST at Shamrock Plaza saw an excellent turnout on 26<sup>th</sup> May. The RESIST programme promotes a combination of hand hygiene training with standardised national training materials.

All staff showed great enthusiasm and engagement throughout the event. It was also really well supported by members of the public who were attending Shamrock Plaza on the day; this was encouraging to see as the public can also play a big part in reducing the spread of infection.



*Julie Meally IPC CNS, Helen Delaney (CNS Wound Management) IPC Link Practitioner and Maree Hosey IPC CNS*



*Anne Walpole and Julie Meally.*



*Julie Meally, Helen Delaney, Sinead De Lacey ADPHN, Anita Mahon and Maree Hosey*



*Maria Farrell A/ADPHN, Helen Delaney, Maree Hosey IPC CNS and Sarah Smith*



*Francis O'Donoghue and Maree Hosey*



*Theresa Cronin and Julie Meally*



*Julie Meally and Sinead De Lacey ADPHN*





*There are substantial environmental benefits associated with the responsible use of antibiotics.*



Antimicrobial stewardship (AMS) has been a concern for decades. While the public health issues are paramount, the environmental impacts of the manufacture and use of antibiotics are significant. Applying AMS principles such as vaccination and appropriate prescribing reduces the overall use of antibiotics, mitigates the environmental footprint of these medicines and lowers the level of environmental contamination (e.g. antimicrobial resistant organisms in wastewater), through human excretion.

## The carbon footprint of antibiotics

Many of us know that anaesthetic gases and inhalers (in particular metered-dose inhalers), are 'high emission' medicines. But many people do not realise that typically the carbon footprint of many antibiotics are rated as high. The [medicines carbon footprint formulary](#) gives standardised per dose carbon footprint ratings for thousands of small molecule medicines. This tool reports the carbon footprint rating for amoxicillin 500mg capsules and clarithromycin 500mg tablets as high.

*Estimating, standardizing, and stratifying medicine carbon footprints, at scale*, by Taylor et al. in 2024 observed that having generated standardised medicine carbon footprint for 2,214 products, the products analysed accounted for 2.2 billion NHS England prescribed doses in January 2023. Three antibiotics, amoxicillin, flucloxacillin and penicillin V, contributed 15% of emissions. Amoxicillin 500mg capsules had the highest monthly emissions despite being only the 38<sup>th</sup> most prescribed product, and was responsible for 10,000 tonnes CO<sub>2</sub>e, equivalent to the monthly emissions of 69,000 cars. They estimate that implementing a 20% antibiotic prescription reduction could save 4,200 tonnes CO<sub>2</sub>e per month; equivalent to removing 29,000 cars.

The study identifies antibiotics as a major contributor to medicine carbon emissions, and advocates for AMS as a strategy to reduce both AMR and greenhouse emissions.

## Other AMS considerations

Preventing AMR through appropriate antibiotic use has potential to reduce greenhouse gas emissions in other ways too. Resistant infections often require complex and/or prolonged healthcare contact which results in significant environmental pollution. Furthermore, optimising antibiotic use in the community could greatly reduce greenhouse gas emissions by preventing a person's admission to hospital and/or preventing the spread of infection and subsequent demand for additional medical interventions.

We also know antimicrobial residues and antimicrobial resistant organisms contaminate the environment through human excretion. A recent EPA research report found widespread occurrence of clinically significant antimicrobial resistant bacteria and antimicrobial resistant genes in wastewater and aquatic environments throughout Ireland.



## So what can we do?

All healthcare workers should adhere to the 8 principles of good AMS to not only improve patient safety and combat AMR but to also reduce healthcare associated carbon emissions:

1. Recognise clinical evidence of infection
2. Avoid unnecessary antimicrobial use
3. Choose an antimicrobial that will have the most benefit and cause the least harm
4. Optimise the dosing regimen and route
5. Minimise the duration
6. Assess response to treatment
7. Communicate effectively about antimicrobials
8. Prevent infection (including vaccination).

For more information about antimicrobial stewardship complete AMRIC eLearning modules on HSELAND and visit the [AMS page on antibioticprescribing.ie](#)



***This is a reminder that you have access to a wide range of free patient information leaflets including translated material.***

There are a number of AMRIC print resources available to order including awareness posters, guidance posters and patient information leaflets. These free resources are available to order online from [www.healthpromotion.ie](http://www.healthpromotion.ie). Ordering is very straightforward, just set up a professional account when registering. To access the AMRIC resource select 'RESIST' from the search box. This will bring up the many items that are currently available to health professionals to order. Please allow seven days for the order to be completed.

*The printed patient information leaflets include the following:*

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

[healthpromotion.ie](http://healthpromotion.ie) has been updated, you can view a PDF preview of all items before ordering.

If you are having any issues with ordering, a complete guide can be found on the HPSC website here: <https://bit.ly/AMRICOrders>



RESIST merchandise (t-shirts, note books, bags etc) is available for World Hand Hygiene Day (WHHD), European Antibiotic Awareness Day (EAAD) and RESIST launches. Merchandise will continue to be issued via the AMRIC team and is not available to order online. If you have any queries please contact the AMRIC team [hcai.amrteam@hse.ie](mailto:hcai.amrteam@hse.ie)





Antimicrobial Resistance and Infection Control Programme

## Welcome

to the 24<sup>th</sup> RESIST newsletter from the Antimicrobial Resistance and Infection Control (AMRIC) team. In this edition we look at World Hand Hygiene Day 2025, the needle free flu vaccine and updates to [antibioticprescribing.ie](mailto:hcai.amrteam@hse.ie). We also have lots of updates on antimicrobial stewardship (AMS) and infection prevention and control (IPC) news.

Thanks for your comments and inputs, if you have any suggestions on content or want further information please contact us on [hcai.amrteam@hse.ie](mailto:hcai.amrteam@hse.ie)

1. Message from the Chief Clinical Officer
2. New scabies videos
3. AMRIC Clinical Lead column
4. GP audits
5. EU-JAMRA 2 conference
6. antibioticprescribing.ie updates
7. IPISA educational event
8. Nasal Flu vaccine
9. Learning update
10. Meet AMRIC's RCSI Fellow
11. Nursing team project update
12. Cavan General Hospital visit
13. World Hand Hygiene Day
14. NOCA poster winners
15. REMINDER: Accessing AMRIC print resources
16. Submissions for RESIST

Upcoming events:  
World Hand Hygiene Day, Monday 5<sup>th</sup> May 2025

## Dr. Colm Henry, HSE Chief Clinical Officer

The day to day care we deliver on the frontline of the health service will always be of paramount importance. At a recent progress meeting with the Department of Health, the level and scale of IPC and AMS projects being implemented and supported across all of our services was very much acknowledged. Frontline IPC and AMS teams are leading the way, motivating and guiding staff to ensure best IPC and AMS practice across all our services.

In supporting this ongoing work, it is necessary to adopt new methods of communication and to incorporate digital innovation into our services.

One such project is the National Clinical Surveillance IT System for Infection and Prevention Control project that is underway. The introduction of this software will support the surveillance and control of HCAs. An update on the roll out of this important project featured in the last edition of Resist. I look forward to supporting its implementation phase, with the initial focus on the South West area.

Another significant recent digital development, is the launch of the HSE Health App by the HSE and the DoH. The app will bring essential health information to the fingertips of our service users while reinforcing the safety and quality of our services. This marks another significant step forward in our commitment to providing accessible, patient-centred care through digital innovation.



Dr. Colm Henry,  
HSE Chief Clinical Officer

We would love to hear from you if you have an article in mind for RESIST. Please send us a brief outline along with an estimated word count and suggested photographs. The more photographs the better!

- **News articles - maximum 400 words**
- **Feature articles - maximum 900 words for a two-page feature**
- **Photographs in jpeg format**
- **Clear captions for all photographs particularly for a stand-alone photo with an extended caption.**

If you have any suggestions on content, photos or want further information, please get in touch at: [hcai.amrteam@hse.ie](mailto:hcai.amrteam@hse.ie)

*Please bear in mind that due to space restraints, not every article submitted may be published.*

## Upcoming Events

- **International Infection Prevention Week: 13<sup>th</sup> - 19<sup>th</sup> October 2025**
- **European Antibiotic Awareness Day: 18<sup>th</sup> November 2025**
- **World AMR Awareness Week: 18<sup>th</sup> - 24<sup>th</sup> November 2025**

*Please send us photos of your events for the next issue of RESIST*

## RESIST Deadlines

### Autumn edition '25

**Initial ideas by:**

15<sup>th</sup> August 2025

**Finished articles by:**

5<sup>th</sup> September 2025

### Winter edition '25

**Initial ideas by:**

14<sup>th</sup> November 2025

**Finished articles by:**

5<sup>th</sup> December 2025