

Welcome

to the 26th RESIST Newsletter from the Antimicrobial Resistance and Infection Control (AMRIC) team. In this edition we have news on; Antimicrobial guidelines for community settings, ICNET going live in Kerry, new IPC guidelines for GPs, AMS microlearning videos for community pharmacists, a study of dentists experiences of antimicrobial use and stewardship, IPC guidance to manage the COVID19 surge, understanding increasing *C. difficile* rates as well as updates to the sepsis clinical guidelines and information on how to join PAMSnet; a network for pharmacists to promote AMS.

Thank you all for your contributions; if you have any suggestions or want further information please contact hcai.amrteam@hse.ie

1. Message from the Chief Clinical Officer
2. RESIST programme
3. IIOP AMRIC Poster Presentation at ICC & PAMSnet
4. AMRIC Clinical Lead column
5. Experiences of Sepsis, Infection & AMR Report
6. Key IPC / AMR Events
7. Meet Our New AMRIC Team Members and RTI leaflet
8. AMRIC Presents at ESCMID Summer School and Introducing GreenEM
9. New IPC Guide for GPs in Ireland and HSE Updates National Clinical Guidelines on Sepsis
10. Antimicrobial Guidelines for Community Settings
12. IPC Guidance to Support COVID-19 Surge Response
13. University Hospital Kerry Goes Live with ICNET
14. New Videos Highlight the Wise Use of Antibiotics
15. Dentists Experiences of Antimicrobial Use – Study
16. AMS Microlearning for Pharmacists – Pilot
18. Understanding Increasing *C. difficile* Rates
19. AMRIC Resources
20. Submissions for RESIST

Dr. Colm Henry, HSE Chief Clinical Officer

As we head into the autumn, your expertise and leadership in infection prevention and control (IPC) in healthcare settings is more important than ever.

HSE services are seeing and treating more patients in hospitals and in the community than ever before. However, we know the autumn/winter period is a particularly challenging time; we need to keep providing our normal services whilst acknowledging that increased incidences of respiratory illnesses continues to put a strain on our services and our staff who deliver those services.

You will be aware that there has been a significant rise in notified COVID-19 hospitalised cases in recent weeks. This increase is likely due to an upsurge in hospital and nursing home outbreaks. As our services and staff come under increasing pressure, the spread of respiratory viruses in healthcare settings is a specific concern. IPC measures, like good hand hygiene, reduce the spread of most infections including flu and COVID-19. However, they do not eliminate risk. Vaccination is recommended as a key additional protection against illness.

This year the flu vaccine is strongly recommended for healthcare workers as the best protection against serious illness from flu.

As part of the HSE staff winter vaccination programme, flu and Covid19 vaccinations are available free of charge to all healthcare workers; see hse.ie/staffclinics for more information and to find a clinic near you.

Please encourage and support colleagues, patients and service users who are not up to date with their vaccinations to get vaccinated as soon as possible. It may help them to talk to you if they have questions or concerns.

As always, our staff, with their knowledge and experience, is our greatest resource.



*Dr. Colm Henry,
HSE Chief
Clinical Officer*

You will find further information on page 12 of this newsletter about maintaining and strengthening IPC practices to mitigate the spread of respiratory viruses as well as AMRIC's updated IPC guidance to support health and care workers in responding to this surge.

Antimicrobial Resistance – a new action plan for Ireland

As you know, antimicrobial resistance (AMR) is one of the greatest potential threats to human and animal health. The two pillars of the response are:

- (a) improving how we use antibiotics and
- (b) improving infection prevention and control.

If we prevent infection, we need antibiotics less.

Later this year, we will see the publication of Ireland's 3rd national action plan on antimicrobial resistance; iNAP3. Many of you may have contributed to this plan as part of the Department of Health's public consultation process some months back.

We look forward to the publication of this plan and moving forward to address the real and growing issue of AMR. The HSE response plan to iNAP3 is also being developed for publication.

Awareness of Infection Prevention and Control and Antimicrobial Resistance

Raising awareness and education and training are key deliverables for the AMRIC team and IPC and AMS teams across our services.

In the next couple of months we have two significant IPC and AMR events:

- International Infection Prevention Week (IIPW) from 19th – 25th October and
- European Antibiotic Awareness Day (EAAD) on Tuesday 18th November.

I would encourage you to get involved and further highlight your important work; not only on the ground through service delivery and leadership but, by showcasing your work to a wider audience. I look forward to seeing photos of your events in the next issue of RESIST.

Thank you to each and everyone of you, for the work that you do, it is greatly appreciated.

Míle buíochas le achan dhuine, GRMA
Dr. Colm Henry, HSE Chief Clinical Officer

RESIST – Supporting IPC and AMS initiatives

RESIST is part of the HSE's Antimicrobial Resistance and Infection Control (AMRIC) programme.

It is a behaviour change initiative that incorporates antimicrobial stewardship (AMS) and infection prevention and control (IPC) aimed at health and social care workers. The aim of RESIST is to mobilise groups of people to form a movement to 'join the superbug RESISTance'.

RESIST supports existing HSE / AMRIC initiatives to reduce infection and antimicrobial resistance in our health facilities.

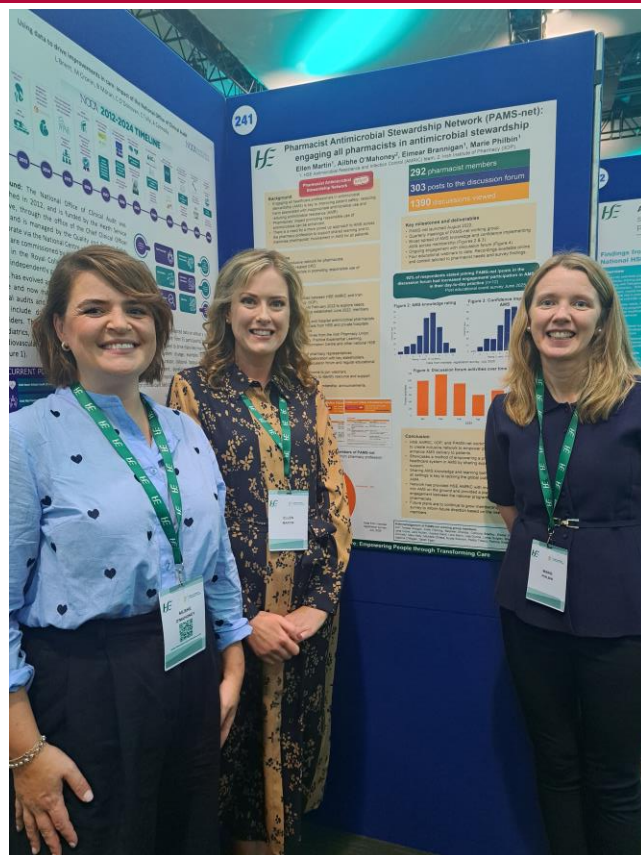
Thank you to colleagues who continue to promote and further roll out the RESIST programme across our healthcare facilities. There are a lot of resources available on www.healthpromotion.ie to support you in doing this. See page 19. for details on how to order RESIST leaflets / posters and other resources. We appreciate seeing photographs of all your events, displays, etc and ongoing roll out of RESIST. Please send them to hcai.Amrteam@hse.ie so that they can be featured in this newsletter.



HSE AMRIC and the Irish Institute of Pharmacy (IOP) were delighted to present a poster on the PAMS-net project at the HSE integrated care conference on 4th September. PAMS-net is a network for pharmacists working across all settings with an interest in responsible use of antimicrobials.

Establishing networks and sharing AMS knowledge, both across and within settings, is essential to tackling the global public health threat of AMR and is key to providing safe, effective patient care. As new models of healthcare evolve and the landscape of antimicrobial prescribing changes in Ireland, communities of practice, such as the PAMS-net, are becoming increasingly important. The PAMS-net has an essential role sharing AMS knowledge amongst pharmacists, supporting shared learning and building on the AMS excellence that already exists across all settings and supporting enhanced community involvement in AMS in Ireland.

As pharmacy care in Ireland evolves, to include provision of new services such as the community pharmacy Common Conditions Service, there is need now, more than ever, to empower all pharmacists in AMS.



Ailbhe O'Mahony, CPD Quality Assurance Pharmacist, Ellen Martin, Senior Pharmacist AMRIC, Marie Philbin, Chief I Pharmacist AMRIC.

PAMS-net; a Network for Pharmacists to Promote AMS

For all our pharmacist colleagues, if you have not done so already, please do check out the PAMS-net (Pharmacist Antimicrobial Stewardship Network).

Pharmacists play a pivotal role in antimicrobial stewardship (AMS) due to their expertise in medicines and accessibility to patients.

We welcome all pharmacists with an interest in AMS and would encourage you to join the network.

To become a member of the network click here <https://bit.ly/3RPu6Wa>. Or go to the "Courses and Events" page on the IOP website and click the "Forum" tab.

The network was set up by AMRIC and the Irish Institute of Pharmacy (IOP) for all registered pharmacists.

The PAMS-net webpage and discussion forum aims to support pharmacists across all sectors to work towards the common goal of promoting responsible use of antimicrobials and limiting the emergence of antimicrobial resistance.

The network aims to bring together pharmacists from a diverse range of settings including community, hospital, education, researchers, other HSE and national bodies. PAMS-net vision is a more joined up approach to AMS across the pharmacy profession by;

- Sharing knowledge, information, learning and experience in AMS in the sector
- Providing a discussion forum for members
- Sharing AMS work and fostering creativity in AMS
- Assisting in providing CPD for pharmacists with an interest in AMS.



As we head into the autumn/winter season, and what is a challenging time in health care, thank you for your continued focus on IPC and AMS.

We have some **key IPC and AMS dates** coming up with International Infection Prevention Week (IIPW) in October and European Antibiotic Awareness Day (EAAD) in November. These dates provide an opportunity to raise awareness, demonstrate practical measures to address IPC and AMR and highlight the resources, training and support available. We are always encouraged by the level of activity on the ground around these events and the lengths that colleagues go to in highlighting good IPC and AMS measures, sharing knowledge and showcasing local initiatives. Please do share your photos or updates of any such events with us for publication in RESIST.

Your work is a vital component of planning for this busy winter period. I would echo the CCO's message and encourage staff to keep up to date with vaccinations; it is an important element of keeping ourselves, our colleagues and our patients safe from serious illness such as flu.

You will see throughout the newsletter the new developments or updated guidance available to support IPC and AMS work. The AMRIC team has published a new **Infection Prevention and Control (IPC) guide for general practice in Ireland**. Aligned with the Department of Health's National Clinical Guideline No. 30 (2023), it provides practical, evidence-based advice to reduce infection risks in primary care.

'Patients and Healthcare Staff Stories Project; Experiences of Sepsis, Infection and AMR

I had the honour of speaking at this report launch recently about the challenges of antimicrobial resistance, the actions being taken to support prescribers and the resources available to support staff in their AMS roles. The stories told by patients and staff on the day were powerful and humbling and gave such an insight into the real-life impact of sepsis and AMR.



Dr. Eimear Brannigan, HSE Clinical Lead, AMRIC

The **HSE's national clinical guidelines for sepsis** management in adults (including maternity) have been updated. Many of you may have attended the webinar for clinical staff recently where we heard about the key updates, including changes in the timeframe around administering antibiotics. The HSE's National Sepsis Team have developed a training and education programme which will be delivered to all hospitals and the sepsis training on HSEland has also been updated.

Antibioticprescribing.ie continues to be a trusted and well used reference source for GPs, dentists, nurses and community pharmacists. My colleagues have written about the comprehensive process that goes into developing and publishing guidelines to ensure the information is accurate and current. With more than 2 million page views in 12 months, it is encouraging to see the numbers of those using the site continuing to grow.

Rollout of ICNET – University Hospital Kerry successfully went live this Summer with the ICNET, the new National Clinical Surveillance Infection Control System. This is such a major step forward in the national rollout of this system. Congratulations to the South West region who have been very proactive in implementing ICNET; you'll read more about what goes into getting this significant project over the line. We look forward to the further rollout across the South West region and in the HSE Dublin and South East region.

Pharmacy microlearning – my pharmacy colleagues have shared an interesting pilot project. HSE AMRIC, in collaboration with McCauley Pharmacy group, developed five short and focussed 10 minute microlearning videos. We all recognise the importance of ongoing education but we recognise also the time pressures that challenge this. This novel approach to engage community pharmacists in AMS demonstrated a time efficient and cost effective approach to providing AMS education; the learnings of which may be transferable to other healthcare professional groups.

As you know, **Ireland's national action plan (iNAP)** on antimicrobial resistance will be published in November. This will be Ireland's third action plan; iNAP3. AMR is not a threat in the distant future but a real and current challenge to our health.

The HSE response plan to iNAP3 is also being developed for publication. This will build on your good work to date and strengthen our AMS efforts; we must never underestimate our role in antimicrobial stewardship and safeguarding antibiotic use for future generations. We look forward to sharing this with you when published.

Experiences of Sepsis, Infection & AMR Report Launch

A new report, 'Patient and Healthcare Staff Stories Project; experiences of sepsis, infection and AMR' was recently launched by the Minister for Health, Jennifer Carroll MacNeill TD. The report captures the views and experiences of people, families and healthcare staff in Ireland who have experienced serious infections, AMR or sepsis.

Commissioned by the Department of Health and carried out by a team from the School of Pharmacy and School of Public Health, UCC, the report highlights the experiences of patients and will help inform the development of future policy in this area.

The stories in the report and relayed on the day, gave a voice to the statistics, underlining the real-life impact of sepsis and AMR. Significant work has been done to raise awareness among the public and healthcare staff on the signs of sepsis, underlining the importance of early intervention.

L-R: Dr. Aoife Fleming, Senior Lecturer in Clinical Pharmacy, UCC, Project participants, Dr Niamh Feeley, Consultant Anaesthetist, University Hospital Kerry and Chloe Greene, Jennifer Carroll MacNeill TD, Minister for Health, Dr. Eimear Brannigan, Clinical Lead, HSE AMRIC and Eimear Allen, Head of Clinical Effectiveness and AMR, DoH. .



L-R: Dr. Andrea Fitzgerald, Irish College of GPs Clinical Lead, paediatric sepsis, Dr. Ellen Hayes, Irish College of GPs Clinical Lead, adult sepsis, Dr. Eimear Brannigan, Clinical Lead, HSE AMRIC, Dr. Aoife Fleming, Senior Lecturer in Clinical Pharmacy, UCC, Dr. Scott Walkin Irish College of GPs Clinical Lead, AMRIC, Dr. Michael O Dwyer, Clinical Lead HSE National Sepsis Programme and Dr. Patrick Kelly, Irish College of GPs Clinical Lead, Vaccination.



The report is available to read here:

[Patients and Healthcare Staff Stories Project; Experiences of Sepsis, Infection & AMR Report](#)

International Infection Prevention Week (IIPW): 19th – 25th Oct 2025

IIPW takes place from October 19th – 25th 2025. The week provides the opportunity to put a strong focus on the importance of good infection prevention, the work of IPC professionals and the resources, training and support available to all staff to continue to maintain high IPC standards across all healthcare settings. Each year, a particular theme is announced. Further details will be announced at: <https://infectionpreventionandyou.org/iipw-2/>

Remember, you can order any HSE AMRIC leaflets or posters etc you may need to support events in your area on: www.healthpromotion.ie

European Antibiotic Awareness Day: Tuesday 18th November 2025

European Antibiotic Awareness Day (EAAD) takes place on Tuesday 18th November 2025. This is an annual initiative to raise awareness about the threat to public health of antimicrobial resistance (AMR) and the importance of prudent antibiotic use.

It is a time to remind everyone how valuable antibiotics are. Effective antimicrobials are absolutely essential to the practice of modern medicine. We need effective antimicrobials in order to enable medical interventions and treatments such as chemotherapy, c-section and organ transplant.

Prudent use of antibiotics can help prevent or slow down resistant bacteria developing and help keep antibiotics effective for future generations. Further details will be made available at:

<https://antibiotic.ecdc.europa.eu/en/about>

EAAD runs alongside **World AMR Week, 18th – 24th November 2025**. This is an annual World Health Organisation event. See <https://www.who.int/campaigns/world-amr-awareness-week>

Please send photographs or news updates of any events you are supporting or hosting during IIPW or EAAD to: hcai.amr@hse.ie for publication in the next edition of RESIST Newsletter

Launch of iNAP3 on AMR: Tuesday 18th November 2025

Antimicrobial resistance (AMR) is recognised as one of the top 10 global public health threats by the WHO. AMR claims up to 700,000 lives worldwide each year, with over 35,000 deaths per year in the EU. This figure threatens to reach 10 million by 2050.

The Department of Health and the Department of Agriculture, Food and the Marine work together and with other partner agencies, such as the Environmental Protection Agency, to tackle this problem using a holistic OneHealth approach. They also work in collaboration with the WHO and EU Commission to address this global challenge.

As part of this work, Ireland is required to develop, publish and implement a National Action Plan on AMR. Ireland's first national action plan, (iNAP) was published in 2017, iNAP2 in 2021 and iNAP3 is due to be published in November 2025. The HSE's response plan to iNAP3 is also being developed for publication.



HSE Meet Our New AMRIC Team Members

Dr. Robyn Traynor, Specialist Registrar, Clinical Microbiology and AMRIC Fellow

Robyn is originally from Co. Kildare but has been living in Dublin for many years. She graduated from UCD in 2016 with a degree in medicine. After gaining experience in general medicine, both in Ireland and in Western Australia, she commenced specialist training in Clinical Microbiology in 2021. Throughout her career, so far, Robyn has worked in 10 different acute hospitals within Ireland as an NCHD. Robyn is happy to help with anything related to clinical infection management, laboratory and diagnostics or to give an insight into the day to day running of acute hospitals and services. You can contact Robyn by email at: robyn.traynor@hse.ie



Dr. Robyn Traynor, Specialist Registrar, Clinical Microbiology and AMRIC Fellow



Tich Matsweru, Epidemiologist, HSE AMRIC

Tich Matsweru joined our Epidemiological team in August 2025 from the HSE National Immunisation Office (NIO).

Originally from Zimbabwe, Tich has worked in diverse roles within the HSE in community as well as public health. He is a graduate in Health Informatics, Epidemiology and Biostatistics from UCD and Health Protection from UCC. He has experience in data quality, analytics, and reporting. You can contact Tich by email at: tich.matsweru@hse.ie

Tich Matsweru, Epidemiologist, HSE AMRIC

Respiratory Tract Infections – GP Information



This information is for use during GP consultations with patients aged 3 months old and above presenting with respiratory tract infections (RTIs) where there is no immediate need for an antibiotic.

Patient Name: _____ Date: _____

- Antibiotics do not work for viral infections such as colds and flu, and most coughs.
- Colds, most coughs, sinusitis, ear infections and sore throats are mainly caused by viruses, and antibiotics are not necessary in the majority of cases.
- Your body can usually fight these infections on its own.
- Your doctor will assess whether you need an antibiotic.

Your infection:	Most are better by:
<input type="checkbox"/> Middle-ear infection	3 - 7 days
<input type="checkbox"/> Sore throat	7 days
<input type="checkbox"/> Common cold	14 days
<input type="checkbox"/> Sinusitis	14 - 21 days
<input type="checkbox"/> Cough or bronchitis	21 days

Upper respiratory infections are common among infants in childcare (up to 10-12 per year) but become less common as children get older.

How to look after yourself and your family.

- Have plenty of rest to help you get better.
- Drink enough fluids to avoid feeling thirsty.
- Ask your local pharmacist to recommend medicines to help your symptoms or pain (or both).
- A high temperature is a sign the body is fighting the infection and usually gets better by itself in most cases. You can use paracetamol if you or your child are uncomfortable because of a fever.
- Cover your coughs and sneezes. Use a tissue and place it immediately in the bin. Cough or sneeze into your upper sleeve, not into your hands.
- Hand hygiene is essential to help prevent spread of infection to your family, friends and others you meet. Wash your hands with soap and water or use alcohol based hand rub or sanitiser.
- See <https://www2.hse.ie/conditions/common-illnesses/> for further information.



A respiratory tract infection (RTI) information leaflet is available on www.antibioticprescribing.ie for GPs to use during consultations with their patients. The leaflet can be shared with patients presenting with respiratory or ENT infections that do not require immediate antibiotics.

The information in the leaflet supports the message that antibiotics do not work for viral infections and should only be given when necessary. It provides information about the expected duration of common viral illnesses, how to manage these illness, what to do if the condition is not improving and when to get help. The leaflet also highlights the signs and symptoms of sepsis in adults and in children. It is available here; [Respiratory Tract Infection leaflet](#)

The leaflet was developed to support GPs in their consultations with patients when an antibiotic is not indicated. Feedback from GPs found that using the leaflet during consultations was helpful for both doctors and patients and did not lengthen consultation time.

European Society of Clinical Microbiology and Infectious Diseases (ESCMID)

Professor Clare Rock, Deputy Clinical Lead, HSE AMRIC presented recently at the ESCMID Summer School 2025.

Hosted in Dublin for the first time, the Summer School took place from 29th June to 9th July.



ESCMID has a membership of 13,000 delegates, and its annual conference recently attracted 16,000 visitors. The summer school's programme, consisting of lectures, workshops and practical sessions on developing presentation skills also included site visits to hospitals and laboratories in Dublin. Professor Rock had the pleasure of addressing Summer School delegates on 'The Role of the AMS Hospital Lead'.

*L-R: - Stephen Gordan, Professor in Infection Biology, Veterinary Medicine, UCD
- Suzy Fitzgerald, Consultant Microbiologist, St Vincent's Hospital,
- Holger Rohde, ESCMID Director of AMR Action and Medical Microbiologist, Hamburg, Germany
- Clare Rock, Deputy Clinical Lead, HSE AMRIC and
- Maeve Doyle, Director of ESCMID Summer School and Consultant Microbiologist, University Hospital Waterford.*

Introducing GreenEM

GreenEM is a national Emergency Medicine project to cut avoidable waste and emissions without adding burden to busy teams.

Led by the Emergency Medicine Programme with initial pilot sites in Waterford, Galway, Mayo and Bantry, supporting and trialling the elements of the project. It gives departments a short playbook, a checklist, and a simple dashboard to track progress. The aim is the triple bottom line: better care for people, lower impact on the planet, and smarter use of public money. *Key goals are;*

- Cut what we don't need: fewer single-use items and better waste segregation (less in yellow bins by default)
- Choose lower-impact care when safe e.g. rational tests and treatments based on individual patient need, fewer routine cannulas, use of IV antibiotics only when needed, fewer unnecessary investigations to remove implications of incidentalomas, endorsement of the 'gloves off' campaign to improve hand hygiene
- Tackle high emitters first: medical gases and over-ordering/over-packaging.

There is a lot of overlap within the GreenEM and AMRIC goals; many changes that prevent infection also reduce waste and carbon including PPE usage, reducing unnecessary glove usage, IV antibiotics only as needed as early IV to oral switch.

It was fantastic to see AMRIC's "Gloves Off" campaign on show at the International Congress of Emergency Medicine (ICEM) Montréal this year; clear messaging that fits perfectly with GreenEM's "only what adds value" approach.



Sustainability 'Marketplace' ICEM courtesy of Lai Heng Fung, Chair, Public and Environmental Health Special Interest Group, International Federation of EM.



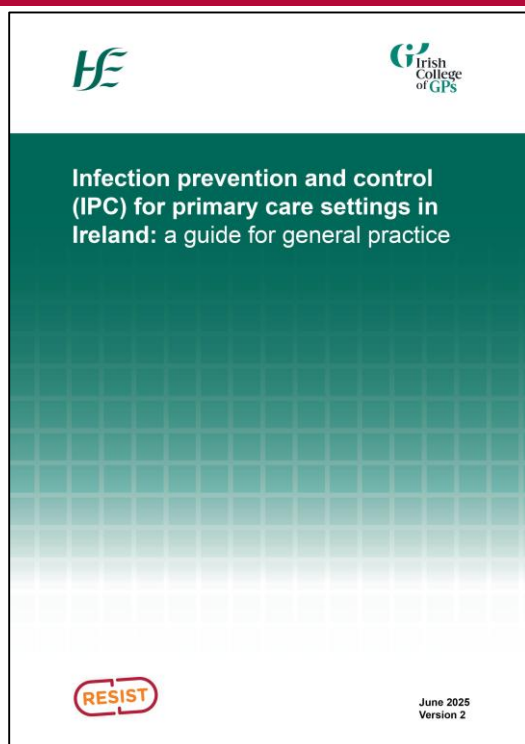
The HSE AMRIC team has published a new Infection Prevention and Control (IPC) guide for general practice in Ireland.

Aligned with the Department of Health's National Clinical Guideline No. 30 (2023), it provides practical, evidence-based advice to reduce infection risks in primary care.

Dr. Edel Doorley, lead author of the guide, and HSE AMRIC GP advisor says, "This updated IPC guide provides essential, evidence-based tools for general practices to implement strong infection control measures, ultimately protecting both healthcare workers and patients."

The guide covers standard and transmission-based precautions, hand hygiene, PPE use, equipment management, and environmental cleaning. It also highlights staff health and safety, including vaccination.

Together with complementing resources, such as www.antibioticprescribing.ie this guide supports general practices in protecting patients and staff through strong IPC measures.



The full guide, *Infection Prevention and Control (IPC) for Primary Care Settings in Ireland: a Guide for General Practice*, is available here: [Infection prevention and control \(IPC\) for primarycare settings in Ireland; a guide for general practice](http://www2.healthservice.hse.ie/org...)

HSE Updates National Clinical Guidelines on Sepsis

The HSE has launched an update to the National Clinical Guideline No. 26 on Sepsis Management for adults including maternity care.

This update was led by the National Clinical Effectiveness Committee (NCEC) and reflects the latest international best practices. This update will ensure that sepsis treatment in Ireland remains evidence-based and aligned with global standards.

A well attended webinar for clinical staff was held recently where participants heard about the key updates including changes to the timeframe for administering antibiotics based on the severity of illness at presentation. This ensures: rapid treatment for those who need antibiotics urgently and reduced risk of unnecessary antibiotic use for those who may not have sepsis.

In line with the updated guidelines, the HSE's National Sepsis Team has developed a comprehensive training and education programme for all hospitals.

The HSeLand sepsis training has also been updated. Access the updated guidelines and resources: <https://www2.healthservice.hse.ie/org...>

This training is mandatory for all clinical acute hospital staff.

A training programme for clinical staff in non-acute settings is currently being developed and will be available by the end of the year.



AMRIC National Antimicrobial Guidelines for Community Settings – key resources for health professionals

These guidelines are the key antimicrobial prescribing reference source for GPs, dentists, nurses and community pharmacists in community settings when prescribing antibiotics. They provide an evidence-based approach to treating common infections in community settings and are available on the website:

www.antibioticprescribing.ie

This website was established in 2014 with governance moving to AMRIC in 2018. One of the site's primary aims is to promote the safe and effective use of antimicrobials and limit antimicrobial resistance (AMR). The website has more than 70 clinical guidelines available for a wide variety of specialties, as well as several other resources to support antimicrobial stewardship (AMS).

How the guidelines are developed

The guidelines are developed by the National Antimicrobial Guidelines Working Group. This includes the HSE's Antimicrobial Resistance and Infection Control (AMRIC) team, HSE community antimicrobial pharmacists (CAMPs), the Irish College of GPs Antimicrobial Resistance and Infection Control Lead and the Information Specialist with HSE Research and Evidence.

The HSE Senior CAMPs lead and coordinate each guideline review, with oversight from the Antibiotic Working Group Co-Chairs. All guidelines are approved by the AMRIC Clinical Lead prior to publication on the website. The AMRIC Clinical Lead provides oversight with delegated authority for guideline approval from the HSE Chief Clinical Officer.

For each guideline, an expert advisory group (EAG) is convened. The EAG generally consists of:

- HSE Senior CAMP (the EAG lead)
- Chief II Antimicrobial Pharmacist AMRIC
- GPs
- Clinical specialist consultant
- Clinical microbiologist / infectious diseases physician
- Community pharmacist.

These EAGs are essential to ensure guidance reflects best practice and that the content is useful to the wide variety of health professionals who use them.

We would like to express our appreciation for their contribution to the guidelines development process.

The list of recent contributors is available [here](#).

"This is an invaluable source of information that we use and signpost to on a regular basis."

(National Medicines Information Centre)

"I have found the website an excellent resource and use it frequently. I am very grateful for all the updates on more specific conditions that have appeared in recent times - extremely useful to have this information so readily to hand."

(GP in Dublin)

"I am a big fan and daily user of the website antibioticprescribing.ie. I think it is a fantastic resource to primary healthcare in Ireland and want you and your team to know how appreciative us community pharmacists are for it."

(Community Pharmacist)



How widely used is this resource?

The website is very widely used with more than 2 million page views in the 12 months to 30th April 2025; an increase of 9% on the previous 12 months. A recent study¹ found that www.antibioticprescribing.ie is the most widely used resource for clinical practice guidance amongst GPs in Ireland, with 76% of 499 GPs surveyed reporting they use the website.

Contact: The website working group can be contacted via email:

antibiotics.prescribing@hse.ie

¹O'Brien et al (2023). GP preferences for, access to, and use of evidence in clinical practice: a mixed-methods study. BJGP Open. Issue 7, Vol.4.

Meet the AMRIC Community Antimicrobial Guidelines Working Group Members

HSE Community Antimicrobial Pharmacists



Mary Eva Regan
HSE West



Shirley Armitage
HSE Mid West



Aisling Clancy
HSE North West



Patricia Sheehan
HSE South West



Catherine Mannion
HSE Dublin & SE



Olivia Gallagher
HSE Dublin & SE



Nora Dwyer
HSE Dublin & NE



Roisin Foran
HSE Dublin & Midlands



Margaret Donnelly
HSE Dublin & NE

Project support



Teresa Cunningham
AMRIC Admin Support



Breedge Finn,
AMRIC Project Manager



Siobhan McCarthy
Website Editor

AMRIC Clinical Leads



Dr. Eimear Brannigan
AMRIC Clinical Lead



Prof. Clare Rock
AMRIC Deputy Clinical Lead

GP Leads



Dr. Scott Walkin
ICGP AMR / IPC Clinical Lead



Dr. Edel Doorley
AMRIC GP Lead

AMRIC Pharmacists



Marie Philbin
AMRIC Chief 1 Pharmacist



Ellen Martin
AMRIC Senior Pharmacist

Antimicrobial Working Group Co-Chairs



Dr. Paul Ryan
AMRIC GP Lead



Mala Shah, AMRIC Chief II
Antimicrobial Pharmacist



AMRIC have updated and published IPC guidance to support health and care workers in responding to the current COVID-19 surge and as part of planning for the coming Winter.

There has been a significant rise in notified COVID-19 hospitalised cases in recent weeks, with increases in hospital and nursing home outbreaks. The spread of respiratory viruses in healthcare settings is a specific concern. The basic IPC principles remains a key defence for protecting patients, colleagues and ourselves from acquiring these respiratory viral infections.

Maintaining and strengthening the IPC practices below mitigate the spread of respiratory viruses, such as COVID-19, in healthcare facilities especially during peak periods of hospital admission; thus protecting patients and staff and preventing further strain on hospital personnel and other resources.

Implementing standard precautions for all patients/residents at all times including:

- Hand hygiene; health and care workers should perform hand hygiene according to the WHO 5 moments technique with alcohol-based hand rub (ABHR) or soap and water when hands are visibly soiled. Patients / residents and visitors should also be encouraged to practice regular hand hygiene
- Promoting cough and respiratory etiquette
- Appropriate use of PPE including masks - wear surgical or respirator masks when caring for patients with acute respiratory symptoms. Use the point of care risk assessment (PCRA) to support appropriate PPE choice
- IPC measures include patient / resident placement; minimum distancing is required between individuals in multi-occupancy rooms
- Enable natural ventilation to the greatest extent possible
- Those with signs and symptoms of respiratory infection should stay away from health and care settings until symptoms have resolved for 48 hours (this includes staff, other service providers, and visitors)
- Ensure adequate environment and patient equipment cleaning and disinfection.

Transmission based precautions (TBP):

- Recognising patients with symptoms consistent with respiratory virus to ensure timely testing, and implementing appropriate TBP such as appropriate patient placement and PPE use
- Single room or cohorting those with same infection (e.g. COVID-19)
- Bed closures for IPC purposes should be the result of local risk assessment when IPC issues/ outbreaks arise
- Promoting the uptake of winter vaccines for both patients and staff. Actively encourage staff to take up the offer of seasonal flu and COVID-19 booster vaccines (which may be given concurrently) and support patient vaccination campaigns where appropriate.

The following AMRIC guidance has been updated and published to www.hpsc.ie

[V3.2 Acute Hospital Infection Prevention and Control Precautions for Possible or Confirmed COVID-19 in a Pandemic Setting as at 25.08.25](#)

[V2.2 Public Health and Infection Prevention and Control Guidelines on the Prevention and Management of Cases and Outbreaks of COVID-19, Influenza and other Respiratory Infections in Residential Care Facilities as at 25.08.25](#)

[V3.1 Guidance on Balancing Competing Demands in Relation to Restrictions on Bed Use Related to Infection Prevention and Control in Acute Hospital Settings as at 25.08.25](#)

[V3.1 Guide to prioritisation of patients for single room isolation when there are not sufficient rooms for all those patients that require isolation as at 25.08.25](#)

Other relevant guidance includes;

The National Clinical Guidance No. 30 Infection Prevention and Control contains recommendations and guidance on standard and transmission-based precautions available [here](#)

Current recommendations for COVID-19 vaccination available [here](#)



L-R: Cathal O'Conallain, Transformation & Technology (T&T) Project Manager, Eileen Hickey, IPC ADON, Anu Paul, IPC CNM2, Alison O'Brien, IPC CNM2, Laura Moore, CNM2 Health Informatics, Bernie Hannigan, T&T Business Analyst, Niamh Murphy, Senior Medical Scientist, Lab IT and Damien Moyles, Operations Manager.



University Hospital Kerry successfully went live with the new National Clinical Surveillance Infection Control System (NCSICS) software system (ICNET) on August 20th 2025. This is a major step forward in the national rollout of this system.

Phase 1 of the roll out focused on the HSE South West region who have been very proactive in implementing the system; a big thanks to all the staff that assisted in getting the background work completed, tested and over the line.

The local implementation group (LIG) were instrumental in the progression of the project in UHK. Steps including user acceptance testing (UAT), system training and testing post go-live were carried out by this multi-disciplinary group. Baxter (vendor) specialists provided in person training over 5 days for all key UHK staff prior to the go-live.

Laura Moore, CNM2 in Informatics said "We are delighted to have ICNet Go-Live in UHK. This was the culmination of many months' work by colleagues across multiple disciplines and sites in the South West. The collective effort and collaboration to standardise processes and optimise the system for our patient's needs is testament to our colleagues' commitment to quality improvement and patient safety. We have configured the system to best support our Infection Prevention and Control (IPC) nurses in their vital work managing patients with IPC alerts and protecting patients, public and staff from health care associated infections.

It was a pleasure to work with local, regional and national colleagues with a special thank you to the LIG, Area Steering Committee, subgroups, the national project team and the vendor Baxter. We look forward to seeing ICNet rolled out across the rest of HSE South West".

Transforming IPC

Infection prevention and control (IPC) is at the heart of safe patient care. With the increasing complexity of healthcare environments, timely surveillance, rapid response, and accurate data reporting are critical. This system has been designed to give IPC teams the tools they need to monitor, track and respond to infection risks more effectively and to improve reporting and overall respond to infection risks more effectively. The system reduces administrative burden on infection control staff, releasing more time to care.

Extensive training sessions, user support, and feedback channels have been put in place to ensure a smooth transition and continuous system improvement. The UHK infection prevention and control team have embraced the system and are very happy with it.

Deirdre Mullins, Project Manager, AMRIC said, "I am delighted to reach this milestone and congratulate Laura Moore, CNM2 informatics and all the dedicated colleagues across the South West who have come together to standardise ways of working to ensure a robust system for the region.

I would also like to thank Bernie Hannigan, Project Manager, Technology and Transformation (T&T), Cathal O'Conallain, Project Manager T&T and Regina Monahan, Project Manager AMRIC who have worked alongside colleagues in the South West and with National T&T colleagues to host this system in the National Data Centre. They should be very proud of this milestone."

Looking Ahead

Over the coming months, we look forward to the further rollout across the South West region and in the HSE Dublin and South East region.

The AMRIC and T & T team would like to thank everyone who contributed to this important milestone.

This project is sponsored by the HSE's Chief Clinical Officer, Dr. Colm Henry and Chief Technology and Transformation officer, Damian McCallion.

It is being rolled out nationally on a phased basis by AMRIC and Technology and Transformation teams working collaboratively.

3 New Videos Highlight Wise Use of Antibiotics

Antimicrobial resistance (AMR) remains one of the most pressing global health threats, and tackling it requires action in every consultation room, pharmacy counter and waiting area. To support this action, a new set of short educational videos are being developed, aimed at healthcare professionals, adult patients, and parents or carers of children. The videos have been developed through a joint initiative between HSE AMRIC, the Irish College of GPs, and Trinity College Dublin, supported by a Knowledge Transfer Award from the Health Research Board. Each video offers practical messages with the shared goal of promoting responsible prescribing and preserving these vital medicines. *The videos, which will be made available in the coming weeks, are tailored to three audiences:*

Healthcare professionals

A clinical-focused video provides practical guidance on evidence-based prescribing for respiratory tract infections, recognising common barriers such as diagnostic uncertainty, patient expectations, and consultation time pressures. It highlights strategies like delayed prescriptions, structured communication, and guideline-led practice. The CHESTSSS framework is a proven consultation tool evaluated in a randomised controlled trial. It is introduced as a structured way to explore concerns, set expectations, explain illness timelines, and provide safety-netting advice, all while reducing unnecessary prescribing.

Adults with respiratory infections

This resource explains why antibiotics are not effective against common viral illnesses such as colds, flu and sore throats, and outlines simple self-care measures. It also addresses the risks of inappropriate antibiotic use, including disruption of normal flora, the development of resistant 'superbugs', and the potential for severe conditions like sepsis to become harder to treat.

Parents and carers of children

The third video tackles common concerns among parents, emphasising that most childhood coughs and colds are viral and self-limiting. It discusses the additional risks of early-life antibiotic overuse, such as impacts on gut microbiota, allergy risk, and asthma. Practical advice is given on comfort measures, infection prevention, and when to seek medical attention.

Together, these resources aim to support clinicians in their stewardship role, equip patients with accurate knowledge, and help families make informed choices. Importantly, they highlight that using antibiotics wisely today is essential to ensure their effectiveness tomorrow.

By embedding these key messages into everyday conversations, healthcare professionals can help to safeguard antibiotics for future generations – while improving the quality of patient care in the present.

Dr. Scott Walkin

ICGP AMR / IPC Clinical Lead



The findings of a recent study exploring general dental practitioners' views and experiences of antimicrobial use and stewardship in Ireland won an award for the Best Staff Presentation at the UCC College of Medicine and Health Research Conference on 3rd September 2025.

Presented by Dr. Aoife Fleming, Senior Lecturer in the School of Pharmacy and Vice Head of Inter-professional Learning in UCC, the study was a collaborative piece of work between HSE Community Antimicrobial Pharmacists, Mala Shah and Callum Ryan, UCC Cork Dental School and Hospital, Dr. Cristiane de Mata and UCC School of Pharmacy, Dr. Aoife Fleming, Dr. Teresa Barbosa and MPharm students Cailin Napier and Charlotte Jennings.

The abstract here summarises the work and was published in JAC-Antimicrobial Resistance, Volume 7, Issue Supplement_3, July 2025, dladf118.053, <https://doi.org/10.1093/jacamr/dladf118.053>

Background: Antimicrobial prescribing in dentistry contributes to approximately 10% of overall antibiotic prescribing in primary care, which is significant. There is an opportunity to enhance antimicrobial stewardship (AMS) in dentistry practice in Ireland to address this. In order to understand the factors influencing antimicrobial prescribing by dentists, their views and experiences must be explored.

Objectives: To conduct a mixed methods study to explore general dental practitioner's views and experiences regarding antimicrobial use and antimicrobial resistance (AMR).

Methods: An explanatory sequential mixed methods study was conducted. First, a survey exploring dental antimicrobial prescribing and views on antimicrobial prescribing and AMR was emailed to Irish Dental Association members in September 2024. The survey findings were analysed descriptively. The findings helped to refine the topic guide of the subsequent qualitative, semi-structured interviews conducted with general dental practitioners in November/December 2024. The verbatim interview transcripts were analysed by

thematic analysis (Braun and Clarke) and then mapped to the Theoretical Domains Framework to inform areas for behaviour change. Ethics approval was obtained, and all participants provided written informed consent.

Results: A total of 79 survey responses (62% female) were obtained and 12 interviews (6 female) were conducted. The survey found that 45 (57%) dentists referred to the national health service antibiotic prescribing guidelines www.antibioticprescribing.ie

Many dentists felt antibiotics are overprescribed in dentistry, 61/78, (78.2%) agree/strongly agree and 59 (74.7%) agree/strongly agree that patients often expect to be prescribed an antibiotic.

The results found that 41% (32/78) of respondents reported they never calculate a weight-based antibiotic dose for a child. The main domains reported were knowledge, environmental context and resources, memory, attention and decision-making, beliefs about consequences, beliefs about capabilities, social influence and social/professional role.



Dr. Aoife Fleming (left) receiving the award from Dr. Helen Whelton (right), at the UCC College of Medicine and Health Research Day.

Dentists reported the pressure from patients to prescribe antibiotics and also the lack of time to review and intervene on patients with infection. Occasional 'just in case' antibiotic prescribing was noted in the survey and interview findings. Dentists interviewed noted the challenge when making decisions for infections not responding to the initial course of antibiotics and communicating with patients where English is not their first language. Challenges in dental interventions, or antibiotic compliance, in children or those with special needs were also noted as impacting on decisions. Many highlighted the importance of continuing professional development (CPD) and audits to improve antimicrobial prescribing practices.



Dr. Aoife Fleming presenting the study at the UCC College of Medicine and Health Research Conference.

Conclusions: This study identified important social and contextual factors in general dental practice which influence the prescribing of antimicrobials. To support the development of AMS in dental practice it is important to engage with dentists to ensure initiatives are tailored to their setting. CPD for dentists, patient education and surveillance of antibiotic prescribing in dental practice are recommended.

AMS Microlearning for Community Pharmacists – A Pilot Project

By Ellen Martin, Senior Pharmacist, HSE AMRIC, Karen Graham, Supervising Pharmacist, McCauley Pharmacy Group, Emily Kelly, Supervising Pharmacist, McCauley Pharmacy Group and Marie Philbin, Chief I Pharmacist, HSE AMRIC

HSE AMRIC, in collaboration with McCauley Pharmacy group, have developed 5 short and focussed 10 minute microlearning videos including;

- **Viral and self-limiting respiratory tract infections**
- **GREEN and RED antibiotics**
- **Safety profile of fluoroquinolone antibiotics**
- **Recurrent urinary tract infection**
- **Childhood infections**

Background

Community pharmacists have the skills and expertise to make a positive difference to antimicrobial prescribing in Ireland. Community pharmacists are consistently reported as one of the most trusted professions in Ireland and have an important role shaping patients understanding and expectations around antibiotics.

90% of antibiotic use for human health in Ireland occurs in community healthcare, with the majority dispensed through community pharmacies. With about 5,000 community pharmacists registered in Ireland, there is huge scope to have positive impact on antimicrobial use.

Scan here to view
the 10 minute
microlearning videos



However, a major challenge to engaging community pharmacists with AMS is the work environment. A high proportion report job stress and experiencing burnout in their role. It is within this context, a need was identified to extend the reach of the AMS education to community pharmacists in a sustainable, accessible and time efficient manner.

What is microlearning?

Microlearning is the acquisition of knowledge or skills in the form of small units. Two key features are: content is short and focussed - ranging from just a few seconds up to 15 minutes. And, it allows single click access to learning; use of a single url link means that there is no need to register / scroll to access the learning content and also allows rapid distribution between different digital environments.



Aim and method of pilot project

To explore and assess the impact and potential benefits of AMS microlearning for community pharmacists. The pilot intervention (5 AMS microlearning videos) was tested in community pharmacists employed by the McCauley pharmacy chain (35 pharmacies, employing 49 pharmacists). A pre and post intervention survey tool was developed and disseminated to all 49 pharmacists via email. The videos were disseminated one a week, via email, and were also included in the weekly newsletter.

Development of microlearning videos

Karen Graham, Supervising Pharmacist with McCauley group, collaborated with HSE Senior Pharmacist, Ellen Martin, from the HSE AMRIC team, in the development of the content for the 5 microlearning videos. This was essential to tailor the content and messaging to the community pharmacist audience.

“The knowledge retention of the microlearning was key. Being able to complete the learning in such a short time slot was a big advantage too, for instance, I can complete it on my commute on the Luas.” Karen Graham, Supervising Pharmacist, McCauley group

Subtitling was incorporated into the videos which were made available on the HSE YouTube account, a reputable and trusted platform. They were uploaded to YouTube as “unlisted” videos, meaning that you need to have the link to view and are unavailable in public searches.

Results

10 pharmacists responded to the pre intervention survey and 8 to the post intervention survey.

- All respondents believed that the scope of community pharmacists’ role in AMS in Ireland could be expanded
- An increase in the perceived AMS knowledge (from 3.1 - 3.6) and confidence implementing AMS in practice (from 2.9 - 3.8)
- 75% extremely useful, 25% useful
- All respondents said the AMS microlearning videos had positively impacted their engagement in AMS in day-to-day practice.

Here is what some of the survey respondents said;

“I have a patient on long term macrodantin so have now flagged it with the GP that it needs to be looked at with the possibility of deprescribing”
“The examples give you confidence and ideas on approaching prescribers”

These anecdotal examples really highlight the impact that microlearning can have on patient care and pharmacist’s confidence in their AMS role.

Table: YouTube views of AMS microlearning videos

AMS microlearning video for community pharmacists - topics	25.04.25 (Pilot end date)	26.08.25
Viral and self limiting RTI	40	424
GREEN and RED antibiotics	30	277
Safety profile of fluoroquinolone	30	244
Recurrent urinary tract infection	20	267
Childhood infections	19	269

The YouTube views provide assurance of good engagement with the content. Once the pilot project demonstrated the utility and acceptability of the videos, a multimodal dissemination plan was developed and is currently in progress. The ambition is to share the AMS microlearning with all community pharmacists in Ireland!

Conclusion

Microlearning represents a novel approach to engaging community pharmacists in AMS. The pilot project highlighted the value that microlearning can add to a multifactorial approach in maximising this engagement.

Microlearning represents a feasible, cost-effective, and time efficient approach to providing AMS education. The learnings from this project may be transferable to other healthcare professional groups and topics. Staff shortages, stress and burnout exist across the healthcare system and microlearning represents an opportunity to deliver AMS education in a concise and flexible format.

Clostridioides difficile (*C. difficile*) infection (CDI) is the most common healthcare-associated infection linked to healthcare settings in developed countries, and the number one cause of diarrhoea-related deaths in high-income countries (1). In Ireland, CDI rates have been rising again since the COVID-19 pandemic.

About half of CDI cases (56% in 2024 (2)) in Ireland are healthcare-associated (HA-CDI), meaning patients develop symptoms during or shortly after a hospital stay. However, many infections start in the community, with 41% of cases (2) showing symptoms outside healthcare facilities.

Testing and diagnosis of CDI is challenging, especially when trying to distinguish infection vs asymptomatic colonisation. Currently, testing varies between hospitals in Ireland, which makes reporting and estimation of rates inconsistent, sometimes inflating rates by over-diagnosing infections.

Hospitals in Ireland report infrequent person-to-person spread on wards, and this is supported by whole genome sequencing information from the national *C. difficile* Reference Laboratory. So it appears that picking up *C. difficile* in the community plays an important role in infections.

The United Nations' Food and Agriculture Organisation (3) recently recognised that food can carry *C. difficile* spores and contribute to transmission of infections. Other sources of *C. difficile* in the community include soil, wastewater and animals (mostly farm animals, but also our pets and wild animals).

Asymptomatic carriers of *C. difficile* are at risk of developing CDI if treated with antibiotics, and they could also be contributing to community transmission. This highlights the need for a One Health approach to reducing *C. difficile* infections.

One Health is an integrated, unifying approach that aims to sustainably balance and optimize the health of people, animals and ecosystems.

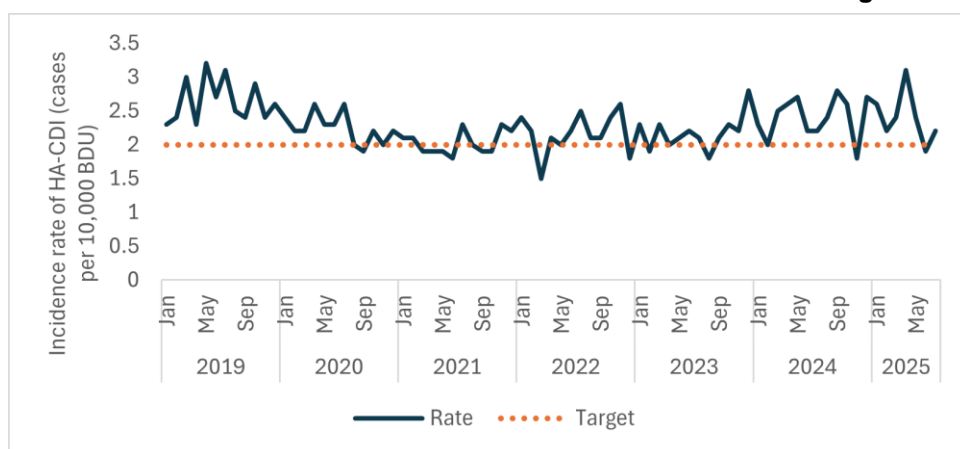
There is a correlation between higher antibiotic use in the community and times when CDI rates rise. During COVID-19, antibiotic use dropped and CDI rates also fell (Figure 1). When antibiotic use returned to pre-COVID-19 levels, CDI rates increased again. This highlights the importance of caution with prescribing "Red" antibiotics associated with greater risk of CDI.

AMRIC's CDI program includes recent update of national guidelines for infection prevention and control, regular monitoring of CDI cases and strains to detect outbreaks, educational programs for healthcare workers focus on antibiotic stewardship (using antibiotics wisely) and infection control. This includes the Green/Red reports for general practitioners. Improvements to hospital environments and antibiotic prescribing practices are ongoing.

Key Takeaway:

C. difficile appears to be spreading outside hospitals in Ireland. Increasing rates are likely related to several factors, including variable testing practice, antibiotic use and community exposures including contaminated food, soils and animals. Reducing unnecessary and high-risk antibiotic usage can help control this infection.

Figure 1.



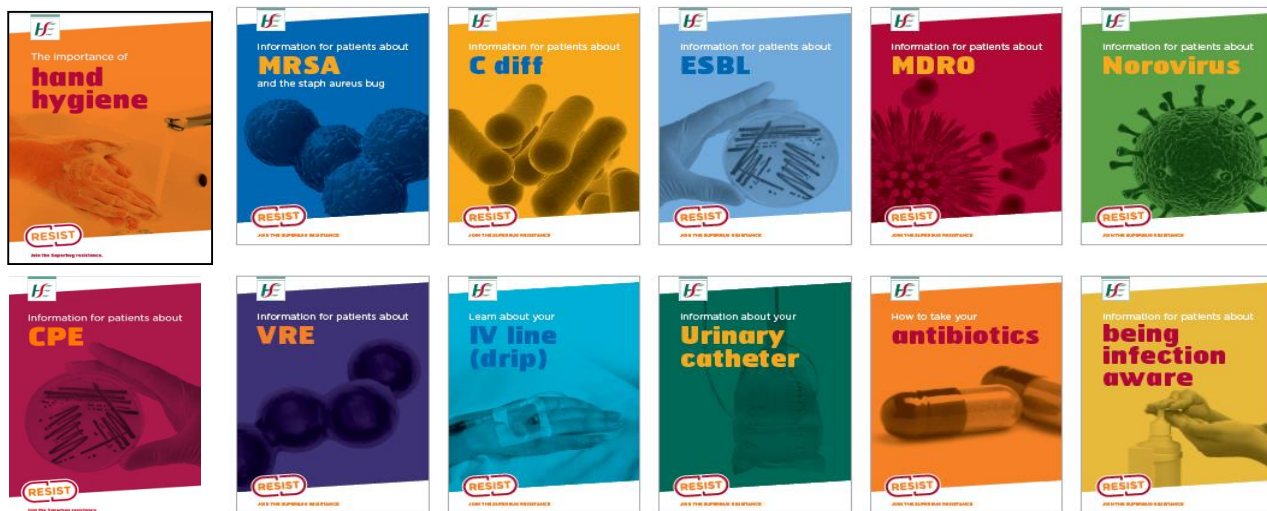
A wide range of free patient information leaflets including translated material is available on www.healthpromotion.ie

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

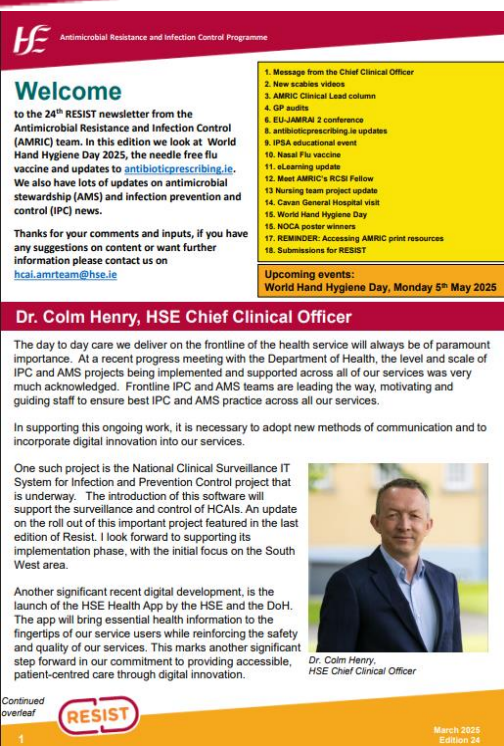
healthpromotion.ie has been updated, you can view a PDF preview of all items before ordering.

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), International Infection Prevention Week (IIPW), 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





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

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

Upcoming IPC / AMS Events

- **International Infection Prevention Week (IIPW):**
19th – 25th October 2025
- **European Antibiotic Awareness Day (EAAD):**
18th November 2025
- **World AMR Awareness Week:**
18th - 24th November 2025

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

RESIST Newsletter Deadlines

Winter '25 Edition 27

Initial ideas by:

14th November 2025

Finished articles by:

5th December 2025

Spring '26 Edition '28

Initial ideas by:

13th February '26

Finished articles by:

6th March '26

