

**Mid- term Review of Ireland’s second One Health National Action Plan on Antimicrobial Resistance (AMR) 2021- 2025 (iNAP2)**

As a key stakeholder from a human health perspective, thank you for taking the time to submit your comments / observations on the items below. This information will inform the Mid- term Review of iNAP2 from a human health perspective, and update on progress to date.

- A. **iNAP2: 2021 and 2022 Progress** - Activities, actions and initiatives undertaken by your organisation in 2021 and 2022 linked to iNAP2.
- B. **iNAP2: 2023 - 2025 Planning** - Priorities and actions planned by your organisation for the progression of iNAP2 during the final years of the plan 2023-2025.
- C. **Additional AMR observations** – Identify ideas or gaps that should be considered in relation to the wider health system’s response to AMR in Ireland.

Please complete the following tables and email your organisation’s submission to [OneHealth@health.gov.ie](mailto:OneHealth@health.gov.ie) by **5pm Thursday 8<sup>th</sup> December 2022**.

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**PART A – iNAP2 – 2021-2022**

| A. iNAP2 Strategic Objectives      | Initiative in line with each Strategic Objective  | Action and / or Activities undertake and / or underway  | Outcomes  |
|------------------------------------|---|---|---|
| 1: Improve awareness and knowledge | <p><b>Promote best practice and share new developments and key messages on AMR, IPC, and AMS in newsletters for health and social care professionals, in line with HSE AMRIC campaigns and iNAP2 national programmes and priorities.</b></p> <p><u>(i) Communication and Awareness Raising Initiatives</u><br/>           During 2021-2022, we sought to support pharmacists and their teams on AMR, IPC, and AMS through various communication activities by empowering the sector with accessible</p> | <p><b>PSI Newsletters</b><br/>           We aimed to ensure that AMR/IPC was a focus of our PSI newsletters throughout 2022:</p> <ul style="list-style-type: none"> <li>• Our March issue featured updated HSE Infection</li> </ul> | <p>We typically have good engagement with our newsletter (average open rate of over 60%). We see this as a good communications approach to improve awareness and understanding of antimicrobial</p> |



information and best practice about antimicrobial resistance through our newsletter.

We also used our social media channels to raise awareness and understanding of antimicrobial resistance by signposting relevant and up to date resources from HSE AMRIC campaigns and iNAP2 national programmes and priorities.

(ii) Disseminating global initiatives in AMR

There are a number of recognised AMR/AMS/IPC awareness campaigns in the calendar. We promoted these through our social media channels, or with mention in our newsletter.

Control Guidance: [Issue 1: March 2022 Newsletter \(newsweaver.com\)](#)

- We used our July issue as an opportunity to signpost registrants to up to date information from the HSE in relation to antibiotic prescribing guidelines for treatment of community infections and “what’s new on antibiotic prescribing” and we also shared the recent edition of [RESIST: Issue 2: July 2022 \(newsweaver.com\)](#)
- Our October newsletter included a piece on AMRIC antimicrobial stewardship guidance and new PAMS network for pharmacists: [Issue 3: October 2022 \(newsweaver.com\)](#)

**Disseminating global initiatives in AMR**

These included World Hand Hygiene Day, European Antibiotic Awareness Day, World Patient Safety Day, and World Antimicrobial Awareness Week.

resistance. While our key audience is pharmacy teams (the majority of PSI newsletter recipients are our registrants), newsletter subscribers also include some of our other key stakeholders.



(iii) AMR Engagement Initiatives

The PSI participated in a number of engagement initiatives linked to AMR/AMS/IPC during 2022.

**iNAP2 Conference**

PSI attended the Building One Health Action under iNAP2 conference in June 2022.

This was a good learning opportunity for our organisation together with being a key opportunity to engage with other stakeholders on AMR/AMS. Following our attendance at iNAP2, PSI shared this learning internally with our other colleagues across the organisation.

**European Commission study on the barriers to effective development and implementation of national policies on antimicrobial resistance**

We shared our perspective on AMR through our participation in the European Commission “Study on the barriers to effective development and implementation of national policies on antimicrobial resistance AMR”. We also helped to promote their

Improved staff awareness across the organisation.



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|  |  | pharmacist survey on our Twitter account.   |  |
|  | <p><b>Promote AMR and IPC as key areas for competence amongst health and social care professionals, by recognition in professional practice standards and guidance, as appropriate.</b></p> <p><u>(i) COVID-19 Operational Standards for Pharmacies</u></p> <p>PSI COVID-19 Operational Standards for Pharmacies, which were developed as part of our COVID-19 pandemic response are still in place. One of the key focuses of the Standards was to strengthen infection prevention and control in pharmacy settings.</p> <p>The Standards were collaboratively developed with a range of stakeholders including the Health Protection Surveillance Centre (HPSC) - Antimicrobial Resistance and Infection Control (AMRIC) Division.</p> <p><u>(ii) Review of vaccination guidance</u></p> | <p><b>COVID-19 Operational Standards for pharmacies</b></p> <p>A 2021 overview report on the Standards found that in the pharmacies we visited, significant efforts had been made in infection prevention and control practices to minimise the risk of the spread of COVID-19 and other infections in the pharmacies, including staff training on up-to-date infection prevention and control measures.</p> <p><b>Review of our vaccination guidance</b></p> <p>Our vaccination guidance was reviewed in September 2022 to support the 2022-23 vaccination season in pharmacies. This included IPC</p> | <p>Through the Standards we promoted IPC measures as an important focus in community pharmacies.</p> <p>Through this review of guidance, we ensured the vaccination guidance was up-to-date and in line with public health advice. PSI vaccination guidance helped to support the 2022-23 vaccination season in community pharmacies</p> |



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|  | <p><u>(iii) Responding to consultations to inform the work of other organisations, such as the HSE</u></p> <p>PSI regularly contributes to consultations to inform the work of other relevant organisations, including other regulators, the HSE and Department of Health.</p>  | <p>measures relating to vaccinations.</p> <p><b>Responding to consultations to inform the work of other organisations, such as the HSE</b></p> <p>We made a submission on the draft National Clinical Guideline for Infection Prevention and Control. The draft guideline sets out a comprehensive framework for a national coordinated approach to Infection Prevention and Control (IPC), focusing on core principles that can be applied to a wide range of healthcare settings.</p> | <p>including COVID-19 and influenza vaccinations.</p> <p>Upon publication, we will share these with the pharmacy profession and pharmacy owners and encourage their adoption to promote improvements and best practice in infection prevention and control.</p> |
|  | <p><b>Encourage the participation of GPs, pharmacists, registered nurses, registered midwives and other healthcare staff in continuous professional development and education on AMR, IPC, and AMS by promotion of resources and increased awareness of the importance of these areas for practice.</b></p> <p><b>Ensure education on AMR and IPC is included in pharmacy undergraduate and postgraduate core curriculum training and examinations.</b></p> |   |   |



(i) Inclusion of AMR as part of the revised Core Competency Framework for Pharmacists.

The PSI Core Competency Framework (CCF) for Pharmacists provides a blueprint of the competencies and behaviours a pharmacist requires in their day-to-day practice, to provide safe, quality health services for patients.

Pharmacists use the CCF to reflect on their practice and identify their continuing professional development (CPD) learning needs.

The schools of pharmacy in Ireland who train pharmacists, must align their undergraduate and postgraduate programmes to the CCF. It also informs our educational standards for accreditation of undergraduate education and training.

Following a review of the CCF for Pharmacists, a revised CCF has been developed. The revised CCF was recently approved by the PSI Council for implementation in 2023.

(ii) Encouraging the participation of pharmacists in CPD relating to IPC

By way of background, the Pharmacy Act 2007 and the PSI (Continuing Professional Development) Rules 2015 set out the framework for the system of Continuing Professional Development (CPD) for pharmacists in Ireland.

The PSI has established the Irish Institute of Pharmacy (IIOF) to oversee the development and

**PSI Review of the Core Competency Framework for Pharmacists**

A new indicative behaviour has been added to domain 5 of the revised draft CCF. This competency states, “I adhere to the principles of good antimicrobial stewardship and infection prevention and control and keep up to date with national guidelines to limit the development of antimicrobial resistance”.

**COVID-19 information hub**

In 2020, due to the evolving nature of the pandemic, the PSI identified the need for a dedicated information resource for pharmacists and requested that this be

The inclusion of AMR and IPC as essential components of the 5-year pharmacist qualification (the MPharm), as well as pharmacists' CPD, will help to ensure proper understanding and awareness of AMR/AMS/IPC among pharmacy professionals. It will also help to create an enabling environment for behavior change in areas like dispensing and IPC practices.

There was high engagement from registrants with the COVID-19 Information hub.



management of the CPD system for the pharmacy profession in Ireland, including facilitating the development and where required, accreditation of training programmes on behalf of the PSI.

developed and hosted by the IIOF. The intention of the [COVID-19 information hub](#) was to provide a single source of up-to-date and comprehensive information on COVID-19 for pharmacists, and to ensure they had a tool to facilitate ongoing CPD needs in this area, and ultimately, help facilitate safe practice on behalf of patients. As part of this “single point” CPD Information resource there is specific segment area dedicated to Infection Prevention and Control.

#### **AMS Training Programme for Pharmacists**

In September 2021, the IIOF launched a training programme through its online portal. This training programme, entitled ‘Antimicrobial Stewardship for Community Pharmacists’, is available for free to all registered pharmacists, and aims to provide an educational resource on antimicrobial stewardship and



to equip pharmacists with knowledge and tools to optimise antibiotic use for the general public and their patients.

**IIOB Webinars**

The IIOB also delivered a series of webinars for pharmacists which included AMS, AMR, and IPC, supported by AMRIC. The most [recent webinar](#) focused on AMS- Let’s talk antimicrobial stewardship in advance of European Antibiotic Awareness Day on 18 November 2022.

**Pharmacist Antimicrobial Stewardship Network (PAMS-net)**

In collaboration with AMRIC, the IIOB launched PAMS-net in August 2022. The mission statement of the forum is “to support pharmacists across all sectors to work towards the common goal of promoting responsible use of antimicrobials in all patients

IIOB webinars have proven to be a popular format for the delivery of information and training and will likely continue to be a format that will be used in the future on an ongoing basis.



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|   |  | and limiting the emergence of antimicrobial resistance.” All pharmacists are encouraged to join the network, which is supported from AMRIC, and includes a discussion forum and resources. |  |
| 2. Enhance surveillance of antibiotic resistance and antibiotic use   |  |  |  |
| 3: Reduce the spread of infection and disease   |  |  |  |
| 4: Optimise the use of antimicrobials in human and animal health  |  |  |  |
| 5: Promote research and sustainable investment in new medicines, diagnostic tools, vaccines and other interventions |  |  |  |



**PART B - iNAP2 – 2023-2025**

| B. iNAP2 Strategic Objectives   | iNAP2 Priorities for <u>your</u> Organisation<br>[Please insert in the column below your Organisation’s priorities against each of the Strategic Objectives] | Proposed activities and / or initiatives in line with each priority listed  | Key indicators / deliverables for each priority  |
|---|--|---|--|
| <p>In line with Strategic Objective 1 of our Corporate Strategy 2021-2023: Advancing the Role of Pharmacy and Pharmacists in the Future Integrated Healthcare System, we have committed to engage and collaborate with the Department of Health on policy developments relating to pharmacy, such as the national policy on anti-microbial resistance and are pleased to be considered as a key stakeholder in the delivery of iNAP2.</p> <p>In an effort to improve knowledge and awareness across the pharmacy sector on antimicrobial resistance, PSI has taken and will continue to take an inclusive approach across the organisation given that our agreed iNAP2 actions span across many of our business areas such as Strategic Policy and Communication, Practitioner Assurance and Community Pharmacy Assurance.</p> <p>Our agreed iNAP2 actions will also be part of the development of our next Corporate Strategy next year.</p> |  |   |  |
| <p><b>1: Improve awareness and knowledge</b></p>  | <p><b>Communication awareness</b></p>  | <p><b>Communication Awareness</b><br/>We will promote best practice and share new developments and key messages on AMR, IPC, and AMS in our newsletters, or through targeted emails to pharmacists, in line with HSE AMRIC campaigns and iNAP2 national programmes and priorities. We will encourage the adoption of any health and social care guidance related to AMS, AMR, and IPC across the pharmacy sector, including Guidance for AMS Ireland and the National Clinical Guidelines for IPC once published.</p> | <p>Contribute to delivering key messages and raising awareness of relevant resources to pharmacists and pharmacy teams. This will be ongoing throughout the lifetime of the iNAP2 plan to 2025</p> |



**Participation of pharmacists in CPD and education on AMR/IPC/AMS.**

Among its many functions, the PSI promotes and ensures high standards of education and training for pharmacists qualifying in Ireland. One of the ways the PSI achieves this is by determining the standards for pharmacist education and approving and keeping under review national pharmacy degree programmes through an accreditation process.

The PSI also ensures that registered pharmacists undertake appropriate continuing professional development (CPD). Accreditation Standards for CPD Programmes and Courses for Pharmacists are also available and aim to quality assure CPD training programmes and courses that are provided to pharmacists.

**Promote AMR and IPC as key areas for competence amongst pharmacists by recognition in professional practice standards and guidance, as appropriate.**

**Participation of pharmacists in CPD and education on AMR/IPC/AMS.**

Encourage the participation of pharmacists, in continuing professional development and education on AMR, IPC and AMS by promotion of resources and increased awareness of the importance of these areas for practice. Ensure education on AMR and IPC is included in the core curriculum and assessment of pharmacy education and training to first registration and also as part of formal CPD programmes.

**Professional standards and guidance**

We will promote AMR and IPC as key areas by recognition in relevant guidance documents for community pharmacies and in our accreditation standards for CPD programmes and courses.

**Implementation of the revised CCF**

Delivery of CCF will have two-fold implications for the sector. Firstly, the Schools of Pharmacy will have to map their MPharm programmes to the CCF (including competency 5.1)

Secondly, pharmacists will use the Core Competency Self-Assessment Tool (CCSAT) to identify the competencies most relevant for their development as part of the CPD model for pharmacists in Ireland.

**Accreditation standards and relevant guidance documents for retail pharmacy businesses**

In 2023 we will review our Accreditation Standards for CPD programmes and courses for pharmacists, as well as relevant guidance documents for retail pharmacy businesses.



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|   |                           |  | <p>In 2024, we will review the Accreditation Standards that underpin the integrated five-year MPharm degree programme (last updated in 2019).</p> <p>Any review process undertaken in respect of accreditation standards and/or guidance will take into account a range of perspectives to ensure up to date information and adherence to legislation, national and international guidance, and will also be informed by up-to-date advice and guidance in respect of AMR, AMS, and IPC.</p> |
| 2. Enhance surveillance of antibiotic resistance and antibiotic use   | Your priority/priorities: |  |  |
| 3: Reduce the spread of infection and disease   | Your priority/priorities: |  |  |
| 4: Optimise the use of antimicrobials in human and animal health  | Your priority/priorities: |  |  |
| 5: Promote research and sustainable investment in new medicines, diagnostic tools, vaccines and other interventions | Your priority/priorities: |  |  |

**Please note:** examples of priorities in relation to antimicrobial resistance and infection control may include a broad range of initiatives including: governance, surveillance, patient and staff engagement, policies and procedures, information dissemination, prescribing, education enhancement, professional development, capacity



(infrastructure and human resources), audit, research, optimisation of evidence based practice, communication, stewardship, cross-sectorial or service collaboration and partnerships etc.

## **PART C – Additional AMR Comments**

### **C. Additional AMR Comments**

Please identify if you have any additional ideas or gaps not included in your response in Table A or B above that should be considered a priority in regard to the wider health system.

[Please insert any additional information below]

#### **1. Enhanced education and awareness activities relating to safe disposal of medicines, as part of an “Antibiotic Amnesty” campaign.**

The majority of antimicrobial prescribing occurs in the community. Pharmacists have a key role to play in supporting the safe disposal of medicine and educating patients in this area.

The Regulation of Retail Pharmacy Businesses Regulations 2008 require that pharmacy owners ensure that disposal of medicinal products, including veterinary medicinal products, carried out in the course of conducting a retail pharmacy business, is carried out in a manner which will not result in danger to public health or risk to the environment. There is, however, a cost associated with the waste disposal of medicinal products for pharmacies, including out-of-date, damaged or patient-returned medicinal products.

PSI Guidelines on the Disposal of Medicinal Products for a Retail Pharmacy Business advise that pharmacists should ensure patients and their carers have sufficient and appropriate information on the safe disposal of medicinal products and that patients should be facilitated and encouraged to return unwanted or expired medicinal products to the pharmacy for disposal.

A national campaign across all pharmacies in Ireland should be considered, that would encourage patients and the public to return old or unused medicines to their local pharmacy for safe disposal, free of charge. This simple initiative would have the potential to significantly reduce the environmental contamination caused by expired antimicrobial medicines through sewers and landfill, as well as adding to overall patient safety. The Disposal of Unused Medication Properly (DUMP) campaign has been run successfully in a number of regions including Cork and Kerry since 2007. In 2007 this campaign resulted in the return of 12 tonnes of pharmaceuticals. One of the frequent queries received by the PSI from members of the public is about their recourse to return unused medicines to pharmacies. We understand that acceptance of dispensed medicinal products is mixed across pharmacies.



## 2. An integrated approach to tackling AMR.

A fully integrated health system that would include improved access to data on dispensing has the potential to optimise the use of antimicrobials by providing a full picture of antimicrobials prescribed and dispensed. Accurate and timely information on the prescribing and dispensing patterns of antibiotics are critical pieces of data for the purposes of data surveillance to understand where more strategic targets for interventions are needed to reduce AMR.

From a pharmacy perspective it is important to highlight that community pharmacies, as privately owned health care providers, use ICT systems which are not integrated or connected with those used in other areas of the health and social care system. It is essential that any future proposed health ICT solutions intended to enable the sharing of health information consider access and input by community pharmacists, as relevant to their roles in the provision of services and care to patients. Appropriate integration would enable pharmacists to be in a better position to make more informed interventions to promote the safe and rationale use of antibiotics in accordance with antibiotic prescribing guidelines for treatment of community infections, thereby reducing AMR.

## 3. The contribution of pharmacists in primary care

Community pharmacies are frequently accessed by the public and are often the entry gate to the health system, with approximately 2 million people visiting their community pharmacy per month in Ireland. This accessibility as well as pharmacists' medicines expertise would facilitate pharmacists playing an increasingly significant role as part of the national response to AMR.

A 2016 PSI report, *Future Pharmacy Practice in Ireland- Meeting Patients' Needs*, identified the potential of pharmacists supporting patients to manage minor and self-limiting conditions that could otherwise increase demand on other healthcare services, such as providing advice when a patient presents with a self-limiting or viral infection. The report highlights that in other jurisdictions a minor ailments service is provided by community pharmacists who provide advice and treatment to patients for specified minor illnesses and complaints. Further consideration should be given as to how a similar scheme in Ireland could operate, including supporting patients to treat a minor infection considered to be viral in nature, e.g., an upper respiratory tract infection.

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If you have any questions, please do not hesitate to contact us by email at [OneHealth@health.gov.ie](mailto:OneHealth@health.gov.ie).

Please return your completed form to [OneHealth@health.gov.ie](mailto:OneHealth@health.gov.ie) by **5pm Thursday 8<sup>th</sup> December 2022**.

**Thank you for continued support and valuable contribution as we continue to advance Ireland's response to tackling antimicrobial resistance.**

