Delivering the AMR strategy in Scotland

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AMR strategy

- UK 5 year AMR national action plan
- UK 20 year vision: AMR “contained and controlled”
- One Health
- Collaborative
- Bacterial resistance focus
A One Health approach to AMR
The UK’s five year national action plan

- Reducing need and unintentional exposure including lowering burden of infection
- Optimise use of antimicrobials through stronger lab capacity and surveillance
- Innovation, supply and access for diagnostics and treatments
The Scottish Context

• We are well placed (but there gaps)
  – Established national antimicrobial stewardship in humans
  – Existing one health focus through SONAAR programme
  – SONAAR report
  – Good working relationships between many of the relevant partners
• The Strategy is ambitious but if we work together we can deliver
  – Lever for affecting change
• Existing work closely aligned
• We helped shape its development
UK targets

• Halve healthcare associated Gram-negative blood stream infections;
  o 25% reduction by 2021-2022 and the full 50% by 2023-2024
  o Scotland focus on E. coli bacteraemia specifically (2018/19 data baseline)
UK targets

• Halve healthcare associated Gram-negative blood stream infections;
• Reduce the number of specific drug-resistant infections in people by 10% by 2025;
UK targets (main ambitions)

• Halve healthcare associated Gram-negative blood stream infections;
• Reduce the number of specific drug-resistant infections in people by 10% by 2025;
• Reduce UK antimicrobial use in humans by 15% by 2024;
  o 10% reduction of antibiotic use in Primary Care (excluding dental) by 2022 (2015/16 baseline data)
  o iv antibiotic use in secondary care will be no higher in 2022 than in 2018
  o total antibiotic use in acute hospitals ≥60% of WHO Access antibiotics (NHSE list) by 2022
UK targets (main ambitions)

• Halve healthcare associated Gram-negative blood stream infections;
• Reduce the number of specific drug-resistant infections in people by 10% by 2025;
• Reduce UK antimicrobial use in humans by 15% by 2024;
• Reduce UK antibiotic use in food-producing animals by 25% between 2016 and 2020 and define new objectives by 2021 for 2025;
UK targets (main ambitions)

• Halve healthcare associated Gram-negative blood stream infections;
• Reduce the number of specific drug-resistant infections in people by 10% by 2025;
• Reduce UK antimicrobial use in humans by 15% by 2024;
• Reduce UK antibiotic use in food-producing animals by 25% between 2016 and 2020 and define new objectives by 2021 for 2025;
• Be able to report on the percentage of prescriptions supported by a diagnostic test or decision support tool by 2024.
Taking the strategy forward

• National operational group to co-ordinate delivery of the UK AMR action plan within Scotland

• Scottish One Health National AMR Action Plan (SOHNAAP)
  – Translate UK AMR action plan, into Scottish context
  – Foster a national, collaborative, one health approach to the UK AMR action plan
  – Coordinate stakeholders and deliverables
Governance for implementation of the UK AMR NAP in Scotland

UK

UK AMR NAP delivery board

SG

Scottish CNO: CARS/SARHAI group

Scottish One Health National Action Plan Group
Governance structure for implementation of the UK AMR national action plan v2.5 (07/09/2019)

Ministers - DHSC, Defra, Scotland, Wales, Northern Ireland

CMOs, CVOs.

UK AMR NAP: Delivery Board

Programme coordination office
Supports the deliver board, coordinates information and manages interdependencies across programmes. Programme Director in DHSC

One-Health stakeholder group

APRHAI
Advisory committee on antimicrobial prescribing, resistance and healthcare associated infections.

DARC
Defra Antimicrobial Resistance Coordination Group

1: Human health
NHSE & NHI: Director General, Workstream Leads: IPC, Director of Nursing, Prescribing - Chief Pharmacist, Diagnostics - CCO, Serology - MD for Clinical Effectiveness, New Drugs - Director, Strategy & Policy, Data - Assistant Chief Clinical Information Office & Deputy Director National Infection Service (PHN)

2: Animal health, food and the environment
Defra, with VMD, EA, APHA, FSA

3: Research
UKRI, NIHR, DHSC, Defra, DFID

4: International
With DFID, DHSC, Defra, VMD, MHRA.

5. Surveillance Coordination.
PHE, Scotland, Wales, N Ireland

6. Scotland
DP SRO: Chief Nursing Officer Scot Gov

7. Wales
DP SRO: Senior Medical Officer, CD, HAI and AMR.

8. Northern Ireland
DP SRO: Director of Population Health

5 year ambitions 1.2, 3, 4 & 5
Aim for change: 1-9
The UK’s five year national action plan

15 contents areas

UK AMR National action plan

Reducing need and unintentional exposure
- Lower burden of human infection
- Lower burden of animal infection
- Minimise spread of AMR through the environment
- Greater global access to clean water and sanitation
- Better food safety

Optimise use of antimicrobials
- Optimal use of antimicrobials in humans
- Optimal use of antimicrobials in animals and agriculture
- Stronger laboratory capacity and surveillance of AMR in humans
- Stronger laboratory capacity and surveillance of AMR in animals

Innovation, supply and access
- Sustainable investment in basic research
- Development of new therapeutics
- Wider access to therapeutics for those who need them
- Development of, and access to, diagnostics
- Development of, and access to, vaccines
- Better quality assurance of AMR health products
Figure 4: The UK's nine ambitions for change

**Ambition 1:** Continue to be a good global partner

**Ambition 2:** Drive innovation

**Ambition 3:** Minimise infection

**Ambition 4:** Provide safe and effective care to patients

**Ambition 5:** Protect animal health and welfare

**Ambition 6:** Minimise environmental spread

**Ambition 7:** Support sustainable supply and access

**Ambition 8:** Demonstrate appropriate use of antimicrobials

**Ambition 9:** Engage the public on AMR