



Prof. Cheryl Jones, President, Australasian Society for Infectious Diseases (ASID)

Prof. Benjamin Howden, President, Australian Society for Antimicrobials (ASA)

REPORT FROM THE 2ND
NATIONAL AMR
SUMMIT, JUNE 29,
2017

EXECUTIVE SUMMARY

The summit, attended by >300 key human and animal health leaders, focused on the ‘four pillars of antimicrobial resistance’: infection control, antimicrobial stewardship, surveillance and outbreak response, and research & development.

It was universally agreed that Australia needed better integration and coordination in our response to AMR, both in human and animal health. Furthermore, there was general consensus that no current Australian body was suitably positioned to provide such coordination.

The summit agreed that two overarching key priority actions were required:

Key priority 1:

The Council of Australian Governments should formally designate antimicrobial resistance (AMR) as a major national human and animal safety issue.

Key priority 2:

Australia should develop a central cross-jurisdictional mechanism to coordinate and manage national AMR control activities, including: AMR surveillance (resistance rates and antimicrobial usage), key control interventions and guidelines, targeted AMR research, and to inform national AMR strategy and policies. To achieve this, the Summit consensus was that a National AMR Coordination Authority was required.

For each of the 4 “pillars of antimicrobial resistance” key priority actions were identified and timeframes suggested:

Strategic Pillar 1: Improve Infection Prevention and Control

Goal Priority Action

- 1 Facilitate national adoption of the WHO Core Components of Infection Prevention & Control (IPC) to enhance and focus national IPC initiatives as a key AMR control strategy
Timeline: 1-2 years
- 2 Establish a national coordinated hospital-acquired infection (HAI) surveillance program that allows Australia to accurately report on the epidemiology of HAI infection and associated AMR for direct action
Timeline: 1-2 years
- 3 Enhance and refocus national IPC initiatives for both human and animal health so that they become a key AMR control strategy
Timeline: 1 year

Strategic Pillar 2: Practical Antimicrobial Stewardship

Goal Priority action

- 1 Reduce antimicrobial usage in the human community to OECD average
Immediate action: Revoke repeat prescribing option for all antimicrobial prescriptions on PBS – Timeline: 1 year.
Overall timeline: 5 years
- 2 National human and animal prescribing guidelines freely available in all GP and veterinary clinics and linked to accreditation
Timeline (Guidelines): 1 year (humans); 3 years (veterinary)
Timeline (Accreditation): 2 years (humans); 3-5 years (veterinary)
- 4 Quality-based audit and feedback of appropriateness of antimicrobial use in human and animal health.
Timeline: 3 years

Strategic Pillar 3: Improving AMR surveillance and outbreak response

Goal Priority action

- 1 Human and animal AMR surveillance be integrated under a single surveillance authority and linked to an effective implementation arm
Timeline: 1-2 years

- 2 All Australian laboratories to move to a single susceptibility testing system
Timeline: 3-5 years
- 3 Strengthen processes for managing multi-facility/multi-jurisdictional/community outbreaks of multi-resistant organisms
Timeline: 2-3 years

Strategic Pillar 4: Research and Development

Goal	Priority action
1	Nominate AMR research as a high national priority for human and animal health <i>Timeline: 1 year</i>
2	Align research and development priorities to the 4 strategic pillars: <ul style="list-style-type: none"> 2.1 Improve the national definition and coordination of effective, practical, infection control strategies in human and animal health 2.2 Antibiotic preservation (decrease inappropriate use and increase stewardship, infection control measures) and maintain antibiotic supply (preventing antibiotic shortages, new models for antibiotic manufacturing and supply) 2.3 Development of antibiotic and novel diagnostic development (new agents, tests) 2.4 Link AMR Surveillance with outbreak response <i>Overall timeline: 2-3 years</i>
3	Emphasise transparency in cross-sector and cross-jurisdictional collaboration and coordination for research and development. <i>Timeline: 1 year</i>