

D5.1

Self assessment tool

WP# 5| Implementation of One Health national strategies and National Action Plans for AMR

Leader acronym | **VWS** NL

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Dissemination level |

Delivery date | 28-2-2018



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Questions in preparation of country-to-country assessments

Participants in Work Package 5 of the JAMRAI project answer questions with the counterpart at ministry level and in cooperation with your veterinary counterpart and other relevant sectors

Please send results including a SWOT analysis to Work Package 5 leader

Other documents on which the country-to-country assessments will be based:

- WHO self assessment
- EU-JAMRAI mapping questionnaire
- FVO overview fact finding missions AMR
- ECDC country visits
- EC questionnaire on prudent use in the human domain

Introduction

This self-assessment tool is different from existing questionnaires and should be seen as complementary to other questionnaires mentioned above. The tool is focusing on progress made within countries, and therefore consists of open-ended questions that can help to highlight and trigger issues for discussion during the country-to-country assessments. In preparation of the country-to-country assessment, each of the participating countries will perform the self-assessment and organise a team of policy makers from both the human and veterinary domain within the country that will take part in the country-to-country assessment.

The self-assessment tool provides information that can be used for the country-to-country assessments together with already collected information from existing closed questions/tick box questionnaires e.g. the WHO self assessment or ECDC country visit reports (see complete list in separate text box). The self-assessment and the country-to-country assessments differ from other questionnaires and visits in the sense that there is no evaluation according to a set standard. Instead, the main purpose of the Joint Action on AMR Work Package 5 is to provide a platform for discussions on policy measures from the human health perspective in the EU. A unique opportunity to visit countries and learn from experiences, on developing and implementing National Action Plans based on the One Health approach. Moreover, it is an opportunity to set the topic on the national and EU agenda.

Results of the self-assessment and the country-to-country assessments will be discussed within the Work Package 5 of the JAMRAI project and will be used as input for presentation and discussions in the EU One Health Network on AMR.

One Health: is a term used to describe a principle which recognises that human and animal health are interconnected, that diseases are transmitted from humans to animals and vice versa and must therefore be tackled in both. The One Health approach also encompasses the environment, another link between humans and animals and likewise a potential source of new resistant microorganisms. This term is globally recognised, having been widely used in the EU and in the 2016 United Nations Political Declaration on AMR.

Source: https://ec.europa.eu/health/amr/sites/amr/files/amr_action_plan_2017_en.pdf

1. Please provide a short/broad description/overview on how your health system is organized in relation to how AMR policy and measures are developed and implemented, and how is the relation with the veterinary counterpart and sector organized (and if applicable food, environment, etc.)? (e.g. how antibiotic are circulated, OTC sales?, do hospitals have infection control units, primary health care/referral system or not, how many pharmacists, stewardship, etc) (max 300 words per topic below)
 - a. Responsibilities:....
 - b. Organisation:....
 - c. Finance:...
 - d. One health mechanism:... (collaboration process e.g. do you discuss measures and priority setting together, discuss budget, measures in the same way, what works and what does not work in practice?)
2. What did you identify as your country's priorities in your NAP?
3. What are the (main) measures you have taken in each domain? And what are the main achievements (min 1, max 3) in your country during the development of the NAP/after the launch of the NAP? How would you interpret/do you classify the results in terms of resistance levels, antibiotic use, commitment, etc?

	Main measures	Achievements	Results
In health care			
In veterinary domain			
In environmental domain			
Communication (including improving awareness)			
Innovation			
International approach			
One Health			
Training and Education			

4. How do you feel about or consider your surveillance systems on resistance, consumption and infection control; what are strengths and weaknesses?
5. How do you use the [ECDC/EFSA/EMA latest resistance, consumption and infection control data](#)? How have the maps changed for your country over time – e.g. compared to ten years ago? How do you explain those results; what has happened and why?
6. Does the JIACRA report graph on human-veterinary consumption (see at the end of the document) impact AMR policy in your country? Please give details. Does reporting have an effect on your AMR policy? If so in what way? If not why?

7. What are the main (max 3 in total) challenges you encounter within your country on implementing the NAP/AMR measures, and what is your current approach or how did you solve problems/obstacles? (max 300 words per topic)

	Main obstacles	Approach or solution
Resources (human and financial)		
Responsibilities for decision making (sectors, levels, ..)		
Behavioral change		
Political support/commitment/sense of urgency		
Regulatory/bureaucratic issues		
Communicating the problem		
Infrastructural challenges		
Acting in face of uncertainties		
Other; ...		

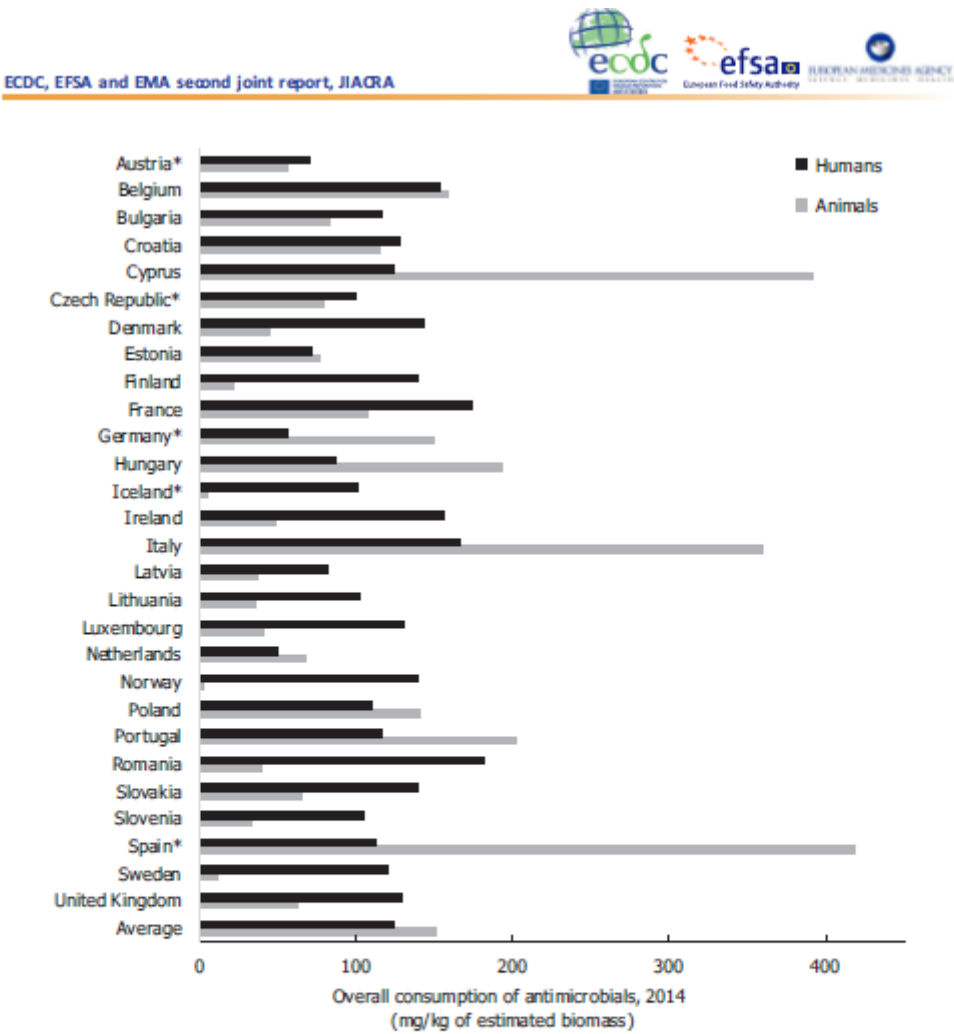
8. What could you learn from other Member States on how to tackle or deal with the identified challenges? What do you expect from a country-to-country assessment? What do you hope to achieve or learn?
9. What best practice do you have to offer to other Member States?
10. What measurable goal (e.g. reducing resistance, ensuring prudent use, improve infection prevention) have you set on tackling AMR in your country? What have you done to achieve this goal? What have you encountered as obstacles in practice? Will you achieve the goals you have set? (max 300 words per box)

Describe measurable goal in the table below only if applicable

Measurable goal as agreed upon in council conclusions:	Human	Veterinary	Actions to achieve goal?	Obstacles	Will you achieve goal as set?
1. Resistance					
2. Antibiotic use					
3. Infection prevention					

11. Other remarks..

Figure comparison of bio-mass corrected consumption of antimicrobials in humans and food producing animals in countries.



Asterisk (*) denotes that only community consumption was provided for human medicine. The population-weighted mean proportion (%) of the hospital sector AMC of the 2014 total national AMC for EU/EEA MSs that provided data for both sectors is 10%.

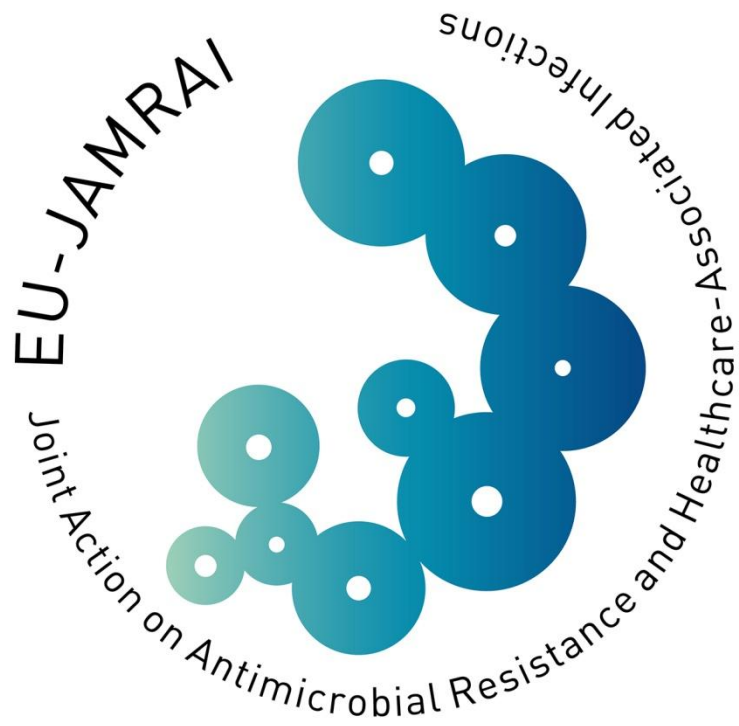
Note: 1) The estimates presented are crude and must be interpreted with caution. For limitations that hamper the comparison of consumption of antimicrobials in humans and animals, please see Section 14.

2) The average figure represents the population-weighted mean of data from included countries.

Figure 6: Comparison of biomass-corrected consumption of antimicrobials (mg/kg of estimated biomass) in humans and food-producing animals by country, EU/EEA MSs, 2014

Appendix optional tool “allocation of resources/priority setting” as used in workshop

Subject	Budget	Human resources	Subject	Budget	Human resources
Research and Development on ...			Surveillance		
New antibiotics and other therapeutics (bacteriophages, ...)			Laboratory capacity		
Prophylactic vaccines			Monitoring system human (HCAI, HRMO, antibiotic use)		
Rapid and cheap diagnostic tools			Monitoring system veterinary (HRMO, antibiotic use)		
Laboratory techniques			Monitoring environment (e.g. wastewater, manure, surface water)		
Studies on effective measures for infection prevention			Other:		
Studies on mechanisms (transmission, genetic adaptation, ...)			Organisation and management		
Other:			Enhancing/strengthening infection prevention capacity in hospitals		
Measures			Enhancing/strengthening infection prevention capacity in long term health care institutions		
Improve infection prevention and control			Enhancing/strengthening cooperation between ministries		
Improve outbreak management			Enhancing/strengthening cooperation between institutions (health care, research, governmental)		
Reduction of antibiotic use in human sector			Other:		
Reduction of antibiotic use in veterinary sector			Education and awareness		
Reduction of antibiotic residues and HRMO in environment (e.g. wastewater treatment)			Public awareness campaigns		
Implementation of professional guidelines			Professional and management (e.g. of health care institutions) awareness campaigns		
Implementation of law and enforcement			Education of health care professionals		
			Education of veterinary professionals		
Other:			Other:		



** This document arises from the Joint Action on Antimicrobial Resistance and Healthcare-Associated Infections (EU-JAMRAI), which has received funding from the European Union, in the framework of the Health Program (2014-2020) under the Grant Agreement N°761296. Sole responsibility lies with the author and the Consumers, Health, Agriculture and Food Executive Agency is not responsible for any use that may be made of in the information contained therein.*



Co-Funded by the
Health Programme
of the European Union