From: <u>Frances Clement</u>

To: Warren Hughes; jane_pryer@moh.govt.nz

Subject: New Zealand AMR Action Plan consultation. Feedback due 21 April 2017

Date: Friday, 21 April 2017 6:41:00 AM

Attachments: <u>image001.jpg</u>

image002.jpg image003.png image004.png

Dear Warren and Jane

Thank you for the opportunity to consider.

Our major comment is that the draft plan does not put enough emphasis on <u>prevention of infection</u> as a key way of limiting antibiotic use and thus the potential for the development of AMR.

In particular we believe that greater recognition should be afforded the current high health status of New Zealand's animal and plant sectors, and the criticality of maintaining this at the national level. Perhaps you are referring to this point within **Objective 3: Improve infection prevention and control measures across human health and animal care settings to prevent infection and transmission of microorganisms** as: *Similarly, in veterinary practice, infection prevention and control and detection of disease is essential for maintaining biosecurity, the health of farmed livestock and companion animals, and the health of people through the prevention of zoonotic transmission.* If so, this needs to be considerably strengthened and clarified to ensure New Zealand takes a strategic approach to AMR minimisation – infection prevention by excluding bacterial infections currently exotic to New Zealand is certainly a fundamental strategy that should be explored in depth to minimise the development of AMR within New Zealand.

So important is this objective that we believe it needs to be further developed and then elevated and presented as the first objective.

Our view is that attention also needs to be focussed on the potential entry pathway of resistant bacteria via imported foods. This should be referenced within Objective 2: **Strengthen the knowledge and evidence base through surveillance and research,** as an activity within priority action area 6: *Support AMR and antimicrobial consumption national research priorities in human and animal health and food production.*

Other points are:

• Within Objective 2: **Strengthen the knowledge and evidence base through surveillance and research**, priority action area 3, activity 10: *Consider extension of the NZVA surveillance programme on antimicrobial usage to include companion animals to inform the development of an ongoing national programme, and help determine the drivers of good and poor antimicrobial stewardship.* We believe this is appropriate, given the findings of MPI's most recent antibiotic sales report (2011-2014 Antibiotic Sales Analysis, MPI Technical Paper No: 2016/65).

As you point out the finer detail is still to be added. Maybe this is why we don't
understand, under Objective 1: Improve awareness and understanding of
antimicrobial resistance through effective communication, education and training,
activity 7: Scope projects and resources that could aid consumer demand for human
antimicrobials, including focus on expectations, reinforcing key messages for
consumers. It would certainly be useful for us if this point was clarified.

Regards

Frances



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From: stewart jessamine@moh.govt.nz [mailto:stewart jessamine@moh.govt.nz]

Sent: Friday, 31 March 2017 6:01 p.m.

Subject: New Zealand AMR Action Plan consultation. Feedback due 21 April 2017

Dear all,

We are writing to seek your review and comments on the draft New Zealand AMR Action Plan by 21 April.

Antimicrobial resistance (AMR) is a well-documented global threat to public health and animal health. Over the past year, the Ministry for Primary Industries and Ministry of Health have worked with an Antimicrobial Resistance Action Planning Group including nominated representatives from across the human health, animal health and agriculture sectors. This group developed a situational analysis and identified priority areas for action, which has now been developed into the attached draft New Zealand AMR Action Plan (note: the *Antimicrobial Resistance: New Zealand Current Situation and Identified Areas for Action* is scheduled for publication in the coming weeks).

The Action Plan has been drafted with a five year time frame in mind. It recognises a number of activities are already underway or routine (and therefore will be ongoing) and others will be prioritised in year one or in years two to five.

Implementing the activities will require multiple partners from across the human health, animal health and agriculture sectors. We have proposed some identified leads, or where relevant, multiple leads for each activity - however please feel free to provide feedback. The Ministry for Primary Industries and Ministry of Health will develop an implementation plan with the activity leads, to set out the finer details of the activities - including specifics of how they will be undertaken and resourcing.

We are seeking feedback on this draft plan to ensure that it effectively minimises antimicrobial resistance, meeting the needs of the human, animal and agricultural sectors.

Feedback would be appreciated on:

- The proposed 'lead (s)' for each activity any additions or suggested changes
- The specified activities (content and proposed timing)

If you could please consolidate to one set of feedback from each agency or organisation either as tracked changes or as clearly identifiable comments in an email.

We are working to have this completed in time for the upcoming World Health Assembly in May. <u>Please send compiled feedback to Jane Pryer (jane_pryer@moh.govt.nz and Warren Hughes (warren.hughes@mpi.govt.nz) on or before 21 April 2017</u>. If you are able to send your feedback sooner, this would help us enormously.

Kind regards,

Stewart (on behalf of colleagues from the Ministry for Primary Industries and Ministry of Health)

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