South Australian Expert Advisory Committee on Antimicrobial Resistance

Annual Report 2017 - 2018



Foreword

The South Australian expert Advisory Group on Antimicrobial Resistance (SAAGAR) was established in 2008 to champion the adoption of antimicrobial stewardship in South Australian, and advise on the types of programs and components that will be most useful for South Australian healthcare organisations.

A key function of SAAGAR is to review and promote the safe and appropriate use of antibiotics. This is achieved by fostering the development and review of antimicrobial guidelines for statewide use, as well as considering and responding to antimicrobial utilisation surveillance data provided by the SA Health Infection Control Service. SAAGAR is administered by the Infection Control Service, Department for Health and Wellbeing (DHW) and is accountable to the Minister via the South Australian Medicines Advisory Committee (SAMAC).

This is the first annual report of SAAGAR and is intended to provide an overview of the activities and achievements of the committee over the 2017-2018 financial year.

Disclaimer: While the Department uses its best endeavours to ensure the quality of the information available in this report, it cannot guarantee and assumes no legal liability or responsibility for the accuracy, currency or completeness of the information.

Table of Contents

Foreword2
Table of Contents
Executive summary4
Abbreviations / acronyms5
SAAGAR membership7
SAAGAR Outcomes and Projects7
Prescribing Guidelines7
New guidelines7
Revised guidelines8
Penicillin allergy terminology (for clinical guidelines)8
Consumer Information leaflets9
Responses to consultation / Provision of expert advice9
Antimicrobial shortages9
SA Formulary applications or amendments9
Other advice10
Antibiotic Awareness Week (AAW)10
Activities of LHN Antimicrobial Stewardship Committees
Central Adelaide Local Health Network (CALHN)10
Southern Adelaide Local Health Network (SALHN)11
Flinders Antimicrobial Stewardship Training (FAST)12
Northern Adelaide Local Health Network (NALHN)12
Women's and Children's Local Health Network (WCHN)12
Country Health South Australia Local Health Network (CHSALHN)13
Private hospitals13
Special Awards14
Discussion14
Future Direction14
Challenges14
Appendix 1: SAAGAR members and attendance 2017 – 201815

Executive summary

The 2017-2018 annual year is the tenth year of operation for SAAGAR and membership continues to be strong, as antimicrobial resistance gains increasing focus as a public health problem nationally. This is very much a working committee, with members from different sites contributing their local guidelines and collaborating on initiatives for statewide adoption. SAAGAR plays an important consultative role for other SA committees including the SA Formulary Committee. Recently the focus of the group has expanded to include more out-of-hospital areas of clinical practice. SA ambulance now have representation on the advisory group. Advocacy for resources to manage antimicrobial resistance across the state continues to be a focus of SAAGAR, with the group strongly recommending that antimicrobial stewardship be included in the new State Public Health Plan when consultation was sought. SAAGAR continues to develop statewide guidelines when the need is identified. In 2017-2018 7 new guidelines were developed and published on the SA Health Antimicrobial Guidelines webpage. A highlight of the year was reaching the finals of the SA Health awards, recognising the outstanding efforts of all members of SAAGAR.

-1/105

Dr Morgyn Warner Chair, SAAGAR

Abbreviations / acronyms

AAW	Antibiotic Awareness Week
ACHS	Australian Council on Healthcare Standards
ADC	Automated dispensing cabinet
AMS	Antimicrobial stewardship
AMU	Acute Medical Unit
ASA	Australian Society for Antimicrobials
BSAC	British Society for Antimicrobial Chemotherapy
CALHN	Central Adelaide Local Health Network
CAP	Community acquired pneumonia
CAR	Critical antimicrobial resistance
CHSALHN	Country Health South Australia Local Health Network
DHW	Department for Health and Wellbeing
DTC	Drug and Therapeutics Committee
ECCMID	European Congress of Clinical Microbiology and Infectious Diseases
EPAS	SA Health Electronic Prescribing
FAST	Flinders Antimicrobial Stewardship Training
GPs	General Practitioners
ICCU	Intensive and Critical Care Unit
ICU	Intensive Care Unit
ID	Infectious Diseases
LMH	Lyell McEwin Hospital
MPH	Modbury Hospital
NAPS	National Antimicrobial Prescribing Survey
QID	Four times daily
RAH	Royal Adelaide Hospital
RMOs	Resident Medical Officers
SAAGAR	South Australian Expert Advisory Group on Antimicrobial Resistance
SAAS	South Australian Ambulance Service
SAB	Staphylococcus Aureus bacteraemia
SALHN	Southern Adelaide Local Health Network
SAMEP	South Australian Medicines Evaluation Panel

SAS	Special Access Scheme
SNAPS	Surgical National Antimicrobial Prescribing Survey
TG:A	Therapeutic Guidelines: Antibiotic
TQEH	The Queen Elizabeth Hospital
UTI	Urinary Tract Infection
VATS	Video-assisted thoracoscopic surgery
WCH	Women's and Children's Hospital
WCHN	Women's and Children's Local Health Network

SAAGAR membership

The advisory group consists of members with infectious diseases, pharmacy and microbiology expertise, and includes representation from each of SA Health's Local Health Networks (LHN) Antimicrobial Stewardship (AMS) committees and private organisations. Other members include representatives from public health, SA ambulance service (SAAS), SA formulary committee and from community and residential care.

SAAGAR welcomed 5 new members over the 2017-2018 financial year:

- Sarah Conolan (SALHN)
- Sal Ging Vong (NALHN)
- Stephanie Flak (DHW)
- Collette Green (DHW)
- Leanne Coulson (SAAS)

Dr Morgyn Warner continues as Chairperson, and Dr Emily Rowe continues as Deputy Chair of SAAGAR.

SAAGAR met on four occasions between July 2017 and June 2018. SAAGAR membership and attendances are provided in Appendix 1.

SAAGAR Outcomes and Projects

Prescribing Guidelines

SAAGAR's key focus for the 12 month period was progression of several new statewide antimicrobial guidelines and updating of existing guidelines due for review, to ensure the widespread availability of tailored, evidence-based antibiotic prescribing guidelines for all sectors in South Australia. Endorsed prescribing guidelines developed by SAAGAR are available to all prescribers from the SA Health website. SAAGAR-developed guidelines were recognised internationally in an e-book published in 2018 by the British Society for Antimicrobial Chemotherapy (BSAC). SAAGAR guidelines are congruent with the latest version of *Therapeutic Guidelines: Antibiotic* (TG:A) wherever possible, and differ only where TG:A recommendations are not available for specific indications, or local epidemiology indicates different therapy. For example, the number of reported Critical Antimicrobial Resistance (CAR) isolates is currently lower in South Australia than the eastern states of Australia [1].

New guidelines

Newly developed guidelines, completed during 2017/2018 include:

- > Community Acquired Pneumonia (Adults) Management Clinical Guideline
- > Clinical Practice Guideline for Dosing and Monitoring of Vancomycin in Adults
- Splenectomy Vaccination and Antimicrobial Prophylaxis (Adult Asplenic and Hyposplenic Patients) Clinical Guideline
- > Empirical treatment of bacterial urinary tract infections (adults) clinical guideline
- Hospital acquired- and Ventilator-associated pneumonia (adults) clinical guideline treatment in Adults
- > Surgical Antibiotic prophylaxis guideline for Ophthalmology

> Febrile Neutropenia Clinical Guideline (Adults)

All SAAGAR guidelines are available at:

https://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/clinical+reso urces/clinical+topics/medicines+and+drugs/antimicrobial+guidelines/antimicrobial+guidelines

Revised guidelines

Guidelines that were reviewed and updated include:

- > Surgical antimicrobial prophylaxis clinical guideline
 - Breast procedures / Endocrine procedures / Abdominal procedures (including splenectomy), Herniorrhaphy, Insertion of infusaport, Clean excision procedures
 - Cardiac surgery
 - CVIU / cardiology procedures
 - o Prevention of endocarditis
 - Endoscopic gastrointestinal surgery
 - o Gastrointestinal surgery
 - Head and Neck surgery
 - Maxillofacial surgery
 - Neurosurgery
 - Obstetrics and gynaecology
 - o Orthopaedic surgery joint replacement
 - o Orthopaedic surgery not joint replacement
 - Plastic and reconstructive surgery
 - o Thoracic surgery
 - o Urology
 - Vascular surgery
- > Antimicrobial Prescribing Clinical Guideline (policy document)
- > Staphylococcus aureus bacteraemia (SAB) management in adults
- > Aminoglycosides: Recommendations for Use, Dosing and Monitoring Clinical Guideline
- > IV to Oral Switch Clinical Guideline for adult patients: Can antibiotics S.T.O.P.

Penicillin allergy terminology (for clinical guidelines)

In response to members of SAAGAR noting the wide variation in terminology used in clinical practice guidelines across South Australia, the committee consulted with immunology specialists and developed standardised penicillin allergy terminology for use in all SAAGAR-developed guidelines, and recommended that any locally (hospital based) guidelines use the same terminology.

Consumer Information leaflets

Consumer information sheets that were developed or updated include:

- Consumer advice sheet providing Information for patients and carers on antibiotic medicines used in hospital
- > Consumer information: Post-splenectomy treatment
- > Important information for patients diagnosed with Staphylococcus aureus bacteraemia

Responses to consultation / Provision of expert advice

As SAAGAR is the peak advisory committee on antimicrobial prescribing and use in South Australia, the group provides ongoing expert advice in response to consultations.

Antimicrobial shortages

Shortages of antimicrobial drugs were an ongoing challenge for prescribers over the previous year. SAAGAR disseminated information on and provided expert advice to prescribers regarding suitable alternatives when antimicrobial shortages or recalls occurred for the following antimicrobials:

- > Ceftriaxone
- > Hepatitis B vaccine
- > Metronidazole
- > Norfloxacin
- > Oseltamivir
- > Piperacillin-tazobactam

SA Formulary applications or amendments

SAAGAR was consulted for advice on formulary applications or amendments (including suggested restrictions) to the statewide Formulary, for the following medicines:

- > Amoxicillin-Clavulanic Acid injection
- > Antihelmintics
- > Antiseptic Solutions
- > Antivirals for viral hepatitis
- > Cefoxitin Injection 1g
- > Ceftriaxone restrictions
- > Clindamycin oral liquid 75mg/5mL (SAS)
- > Clofazimine 100mg capsules
- > Drugs for eye infections
- > Drugs for mouth and throat conditions
- > Drugs for skin infections
- > Emtricitabine 200 mg + rilpivirine 25 mg + tenofovir alafenamide 25 mg tablet
- > Fosfomycin oral granules 3g
- Grazoprevir 100 mg + Elbasvir 50 mg tablet (Zepatier®)

- > Imipenem cilastatin 500mg-500mg injection
- > Itraconazole 50mg Capsules (Lozanoc™)
- > Nystatin Oral Tablets 500 000units
- > Peginterferon and Ribavirin removal from SAMF of some formulations
- > Pristinamycin 500mg Tablet
- > Raltegravir 400mg Tablets (amended) & raltegravir 600mg tablets (new)
- > SA Pharmacy Manufactured Liquid Mixtures
- > Simepravir 150mg removal from formulary
- Tenofovir alafenamide 10 mg + emtricitabine 200 mg + elvitegravir 150 mg + cobicistat 150 mg tablet (Genvoya ®)

Other advice

Other expert advice provided by SAAGAR in response to consultation included:

- Ongoing consultation regarding SA Health electronic prescribing (EPAS), including antimicrobial indications and approvals, drug and therapeutic monitoring orders and antimicrobial order sets
 - Order sets for Emergency Departments
 - Electronic Medication Management Consultation Preoperative Surgical Prophylaxis
 - o SAAGAR Recommendations for Anti-Infectives in EPAS Order Sets
 - Options for 'amoxicillin clavulanic acid injection' quick pick dosing interval either every 6 hours or every 8 hours
- > NAUSP SA Annual report
- SA Medicines Evaluation Panel (SAMEP) consultation regarding a formulary application for the high cost medicine, Harvoni® for children and adolescents aged 12-17 years infected with chronic hepatitis C virus (genotypes 1,4,5 and 6)

Antibiotic Awareness Week (AAW)

Antibiotic Awareness Week is an initiative led by the World Health Organization in November each year to highlight the global problem of antimicrobial resistance. SAAGAR, in collaboration with Antimicrobial Stewardship committees in the LHNs, coordinated activities across SA Health to promote the safe and judicious use of antibiotics in hospitals and in the community. Posters, PowerPoint presentations, pocket cards, screensavers were some of the resources disseminated, in addition to other activities such as sharing of results from annual NAPS and Aged Care NAPS surveys.

Activities of LHN Antimicrobial Stewardship Committees

Central Adelaide Local Health Network (CALHN)

> With the move to the new RAH antimicrobials are readily available on the wards in automated dispensing cabinets (ADC), Processes are now in place to monitor usage. All clinical pharmacists or pharmacy technicians review ADC usage reports of restricted antimicrobials daily and prioritise these patients for follow up. Meropenem and vancomycin use is also regularly audited by ID/pharmacy.

- > AMS rounds with a focus on vancomycin and piperacillin/tazobactam prescribing are performed three times a week. All meropenem use is followed up daily (Mon-Fri) by an Infectious Diseases Physician Trainee to ensure use is appropriate and ID approval has been sought.
- > Audited cardiothoracic surgical antibiotic prophylaxis (VATS, lobectomy, thoracotomy) in September / October, followed by meeting with surgeons in late November.
- National Antimicrobial Prescribing Survey (NAPS) were completed for RAH, TQEH and Hampstead. Data analysed and summary reports prepared.
- CALHN-wide memo distributed regarding the increased dosing (QID) of intravenous amoxicillin/clavulanate for diabetic foot, intra-abdominal infections, bites/clenched fist and severe infections (ICU)
- Pancreas transplants commenced at the RAH in February AMS Committee involved with writing the new guideline.
- A new initiative was implemented to provide the influenza vaccine to all eligible inpatients at the RAH, Hampstead Rehabilitation Centre, Glenside hospital, St Margaret's hospital and TQEH, which received support from Executive through the Winter Bed Management Committee. Pharmacists to be the key initiators through identifying patients as part of taking a medication history.
- New guidelines were developed for immunisation recommendations in solid organ transplant recipients and haematopoietic stem cell transplant recipients and 13 pre-existing CALHN guidelines were revised and updated.
- Prepared two fact sheets providing succinct and up to date information on current antimicrobial topics. These are published on the CALHN AMS intranet page, distributed to pharmacists, medical interns and RMOs, and also published with permission on the SAAGAR Antimicrobial Guidelines website. Planning to publish approximately 4 fact sheets per year.
- Presented to medical interns, nurses and pharmacists at TQEH and RAH sites. Topics included antimicrobial stewardship and guidelines, vancomycin and gentamicin monitoring, and sepsis management.

Southern Adelaide Local Health Network (SALHN)

- The appointment of a full-time pharmacist to the ID/AMS role at SALHN, following a recent vacancy, has allowed regular AMS rounds within the Intensive & Critical Care Unit (ICCU) and the Acute Medical Unit (AMU) to recommence. Details of recommendations and interventions made were recorded and filed for potential audits going forward. Regular AMS ward rounds occurred three times per week in ICCU and once weekly in the Orthopaedic and Plastic Surgery ward. During both ward rounds recommendations have been recorded and followed up to see how regularly interventions have been made.
- Data from the 2017 NAPS report was assessed by the AMS committee in order to provide feedback to specialty areas where antimicrobial use could potentially be improved or optimised. The NAPS Executive Report was distributed to the SALHN Clinical Council
- Provision of regular tutorials with each term of surgical interns to discuss surgical prophylaxis and a refresher on gentamicin. These have been successful so far with a lot of interaction and discussion about particular scenarios the interns have seen throughout their surgical rotations
- > Organised activities for Antimicrobial Awareness Week: Video for SA Health website, poster, display in courtyard manned on one day, presentations for computer screens, ebanner, Chief Medical Officer email distribution
- > Review of many local prescribing guidelines

- > Provision of AMS talk for Interns in the orientation week
- > Designated AMS lecture for first year Medical students
- Ongoing pharmacy audit looking at barriers to dispensary receiving approval codes for restricted antibiotics.
- > Advanced MD project audit into adverse effects of antibiotics by medical students
- > Role of drainage and antibiotics in the management of abdominal collection audit.

Flinders Antimicrobial Stewardship Training (FAST)

- SALHN hosted a one day antimicrobial stewardship training symposium (the FAST symposium), which was facilitated by SALHN infectious diseases doctors and aimed at providing a background in AMS and antimicrobial use to community GPs, junior medical officers and pharmacists.
- Seven members of SAAGAR presented at, or had key roles in delivering, the FAST symposium, which was held on the 16th June 2018.

Northern Adelaide Local Health Network (NALHN)

- Strong advocacy from the ID team in NALHN resulted in the appointment of an AMS pharmacist, as until this point there was no AMS pharmacy positions across NALHN. The 0.5FTE position has been approved for 12 months.
- Setting up 'AMS Updates' as part of our AMS intranet page to improve communication about AMS issues within the region.
- > The NALHN Drug and Therapeutics Committee (DTC) produced a smartphone app, "Pocket DTC", to support medication use including links to SAAGAR antimicrobial guidelines.
- Relaunch of SPOT Campaign within NALHN during 2017 AAW with specific focus on documentation of indication for antimicrobials (75% documented at LMH, 67% documented at MPH)
- Responding to shortages enhanced communication with standard report tabled monthly at AMS on stock levels and supply issues
- > AMS ward rounds to review vancomycin and meropenem use are conducted on a weekly basis
- National Antimicrobial Prescribing Survey (NAPS) were completed for LMH and MPH. Data analysed and reports prepared
- > Planned to complete Surgical National Antimicrobial Prescribing Survey (SNAPS) in 2019
- Regular in-service sessions to medical interns regarding antimicrobial guidelines, including SAAGAR developed guidelines
- > Provision of AMS and antimicrobial resistance education session to Infection Control Link Nurses

Women's and Children's Local Health Network (WCHN)

- > Audit and feedback to Plastics/Burns unit and the Obstetric unit on empiric prescribing of antimicrobials using the 5x5 antimicrobial audit tool developed by the Clinical Excellence Commission.
- National Antimicrobial Prescribing Survey (NAPS) were completed for WCH. Data analysed and summary reports prepared.
- > Paediatric empirical antibiotic quick reference card updated

- > Neonatal empiric antimicrobial quick reference card produced
- > Maternal and adult (Think Sepsis) antimicrobial quick reference card produced
- > AMS membership on WCHN Sepsis committee
- Sepsis antimicrobial boxes" produced for key wards and reviewed regularly to identify cases for ongoing audit of patients managed on sepsis pathway
- > Two AMS posters (Uncomplicated appendicitis pathway and Antibiotic allergy review) presented at ASA 2018
- > Two posters (Complicated appendicitis pathway and sustained impact of uncomplicated appendicitis pathway) accepted for ECCMID 2019
- > Ongoing review of AMS impact of uncomplicated appendicitis pathway
- > Development and implementation of complicated appendicitis pathway
- > Development of empyema pathway
- > Revision of Cystic Fibrosis Antibiotic Management Guidelines
- > Development of Chronic Wet Cough Antibiotic Management Guidelines
- > Revision of Non-Tuberculous Mycobacterium in Cystic Fibrosis Management Guidelines
- > Panel representation on FMC FAST symposium

Country Health South Australia Local Health Network (CHSALHN)

- > Successful ACHS accreditation across all regions and corporate office for AMS standards
- > Updated Country Health South Australia (CHSA) and regional AMS action plans
- > Updated AMS Advisory Committee Terms of Reference
- > Evaluation of AMS Advisory Committee undertaken
- > Delivery of an AMS capacity Building meeting to assist with the transition of CHSA into six regional Local Health Networks
- > Ongoing AMS audits in priority areas including surgical prophylaxis, UTI, pneumonia and cellulitis
- > Audit of clinician use and awareness of the Therapeutic Guidelines: Antibiotic®

Private hospitals

- Continued monitoring at Ashford and Flinders Private Hospitals of surgical antibiotic prophylaxis in the most common surgical types with most being repeated two to three times over the past 3 years.
- Pharmacy audit of empiric treatment of community acquired pneumonia (CAP) as a follow up to reviews in 2013 and 2015. Although the patients who were being admitted/treated were often more complex and their CAP symptoms more severe than previous years, the trend to prescribing ceftriaxone and azithromycin for all patients has increased back to the 2013 levels. This may be as a result of the antibiotic shortages (amoxicillin/benzylpenicillin) last year as well as guideline fatigue.
- St Andrews is reviewing surgical antibiotic prophylaxis prospectively each month using the NAPS surgical tool.
- > New CAP survey and surgical prophylaxis survey at ACHA hospital/s.

Special Awards

SAAGAR was one of three finalists for the SA Health awards in 2017 in the category of Improving Safety and Quality, an award recognising outstanding achievement in education and improvements in patient safety and quality of care. A video outlining SAAGAR's role and aims can be viewed on the <u>SA</u> <u>Health Awards webpage</u>

Discussion

Future Direction

SAAGAR will continue to promote antimicrobial stewardship practices in South Australia in an effort to minimise development of antimicrobial resistant organisms. SAAGAR guidelines are continually reviewed as new evidence arises or local epidemiology changes. The next version of Therapeutic Guidelines: Antibiotic will be published in 2019, and SAAGAR guidelines may need to be updated to align with TG:A if appropriate within the South Australian context. Consultations will continue with the SA Formulary Committee and guideline-writing groups. With the changes to the governance of SA Health expected in 2019 and the establishment of 10 Local Health Networks, SAAGAR will engage with of the respective Governing Boards to determine the requirements of each LHN with regards to AMS, and will continue to provide statewide guidance on the management of antimicrobial resistance.

Challenges

SAAGAR members provide their expertise on a voluntary basis, in addition to other work commitments and without remuneration. The Infection Control Service of the Communicable Disease Control Branch, SA Department for Health and Wellbeing, provide executive support to SAAGAR, but there currently is not a dedicated statewide coordinator for AMS in South Australia.

Guideline development involves a rigorous process of evaluating available evidence, consultation, feedback and reviews by several statewide committees before final endorsement and upload to a publically available website. Reducing the time taken from initial endorsement by SAAGAR to website publication is an ongoing challenge.

SAAGAR will continue to advocate for heightened awareness of the importance of AMS in reducing the public health risk associated with multi-resistant organisms, but needs ongoing support from executive levels of governance within SA Health.

Appendix 1: SAAGAR members and attendance 2017 – 2018

NAME	22/08/2017	14/11/2017	13/02/2018	08/05/2018
BUXTON, Michael	✓	✓		А
CHSALHN - Corporate Office	v	v		A
CONNOR, Erin	А	✓		
DHA - Infection Control Service	A	v		
CONOLAN, Sarah			√	✓
SALHN - Flinders Medical Centre			•	•
COOPER, Dr Celia		✓	Λ	Δ
WCHLN - Women's & Children's Hospital		v	A	A
COULSON, Leanne		✓	✓	✓
SAAS - SA Ambulance Service		v	v	v
DANIEL, Dr Santhosh	✓	۸	×	✓
SALHN - Flinders Medical Centre	v	A	v	v
FLAK, Stephanie		✓	×	✓
DHA - Infection Control Service		v	v	v
FLOOD, Louise		1		^
DHA – Communicable Disease Control Branch		\checkmark	✓	A
GORDON, Prof David		•		
SALHN - Flinders Medical Centre	A	A	A	A
GREEN, Collette				
DHA - Infection Control Service			A	\checkmark
HANNAH, Dr Rory	1.	,		-
NALHN - Lyell McEwin Hospital	A	\checkmark	✓	A
HILLOCK, Nadine				
DHA - Infection Control Service	\checkmark	\checkmark	\checkmark	\checkmark
JU, Dr Oui				
NALHN - Lyell McEwin Hospital		A		A
KENNEDY, Dr Brendan				
DHA - Communicable Disease Control Branch	A	\checkmark	A	A
KOEHLER, Dr Ann				
DHA - Communicable Disease Control Branch	A	A	\checkmark	A
LARCOMBE, Rebecca				
SALHN - Flinders Medical Centre	\checkmark	\checkmark	\checkmark	\checkmark
PARADISO, Lisa				
CALHN - Royal Adelaide Hospital	\checkmark	\checkmark	\checkmark	\checkmark
LEE, Dr PC				
Private, Clinpath Laboratories	\checkmark	A	\checkmark	\checkmark
LORENZEN, Ulrik				
	✓	A	\checkmark	A
WCHLN - Women's & Children's Hospital				
MARTIN, Tim	\checkmark	\checkmark	Α	A
NALHN - Lyell McEwin Hospital		-		
MCCONNELL, Dr Matthew	\checkmark	\checkmark	\checkmark	\checkmark
CHSALHN - Corporate Office		-		
MCNEIL,Vicki	\checkmark	\checkmark	\checkmark	А
DHA - Infection Control Service				
PHILPOT, A/Prof Ross	А	\checkmark	\checkmark	A
CALHN - Queen Elizabeth Hospital				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
QUIRK, Hannah		\checkmark	\checkmark	\checkmark
DHA - Infection Control Service, minute taker		•	•	· ·
ROBERTSON, Ms Lisa	\checkmark	A	\checkmark	\checkmark
SA Health, Formulary Pharmacist		~	· ·	
ROWE, Dr Emily	✓	✓	✓	✓
CALHN - Royal Adelaide Hospital	v	v	↓ v	v
SCANDRETT-SMITH, Daniel	✓	^	1	✓
ACHA - Ashford Hospital	v	A	×	v
TUCKER, Dr Emily	/	1		•
SALHN - Flinders Medical Centre	\checkmark	✓		A
WARNER, Dr Morgyn (CHAIR)	✓	1	1	✓
	· · · · · · · · · · · · · · · · · · ·	\checkmark	\checkmark	



WILKINSON, Ms Irene DHA - Infection Control Service	А	А	~	А			
ADDITIONAL ATTENDANCE							
Harch, Dr Susan DHA - Communicable Disease Control Branch				~			
Noble, Mr Andrew South Australian Ambulance Service		~					
Ritchie, Dr Brett WCHN - Women's & Children's Hospital			~				
Tink, Michelle DHA - Infection Control Service, secretariat	\checkmark						

 1.
 Australian Commission on Safety and Quality in Health Care, CARAlert data update 8: 1 July 2018 - 31 August 2018 2018: Sydney

 [https://www.safetyandquality.gov.au/wp-content/uploads/2018/10/Report-CARAlert-Update-8-1-July-to-31-August-2018.pdf].

For more information

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Confidentiality (caveat if required)-I#-A#





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