

## Policy Dialogue

# Developing the national AMR action plan for Belgium

### 22-23 November 2018, Brussels,

Room Galilei, 6<sup>th</sup> floor, Eurostation (Office 06C133)  
Place Victor Horta/Victor Hortaplein, 40/10 - 1060 Brussels

## Scope and purpose

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### Background

Antimicrobial resistance (AMR) threatens the effective prevention and treatment of an ever-increasing range of infections caused by bacteria, parasites, viruses and fungi. Although it is a natural process, as pathogens evolve in response to their environment, the current problem of AMR has been accelerated by the overuse and misuse of antibiotics in people and animals. As the microbes that cause infections become resistant to the antibiotics used to cure them, a wide range of modern medical treatment options become much more risky and limited. Without effective antibiotics, the success of major surgery and cancer chemotherapy, for example, would be compromised. The cost of health care for patients with resistant infections is also higher because of the longer duration of ill-health, the additional tests needed, and the use of more expensive medicines.

AMR is an increasingly serious threat to global public health that requires action across all government sectors and society. As a response, many countries have developed national action plans and work on their implementation through legislation, regulation, and other mechanisms. The European Commission published its One Health Action Plan against AMR (29 June 2017), and used 'One Health' 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, as it provides another link between humans and animals and is therefore also a potential source of new resistant microorganisms.

Belgium is addressing AMR for several decades now and is reconfirming its commitment. The government is proposing a modernized vision and a roadmap to develop and adopt a new One Health AMR Action Plan. This work can build on several important international AMR action plans (Box 1).

#### Box 1: international AMR actions plans and strategies

- WHO: Global Action Plan on Antimicrobial Resistance (2015)
- The OIE Strategy on Antimicrobial Resistance and the Prudent Use of Antimicrobials (2016)
- The FAO Action Plan on Antimicrobial Resistance 2016-2020 (2016)
- FAO/OIE/WHO: A Manual for developing National Action Plans (2016)
- EU: A European One Health Action Plan against Antimicrobial Resistance (2017)

Specific recommendations for Belgium have been published by ECDC and DG SANTE following a country visit (Box 2). In addition, the Knowledge Centre KCE is preparing a report on antibiotic use in Belgium. There is also forthcoming an Observatory Study entitled Antimicrobial Resistance: Economic and Policy Challenges.

**Box 2: Recommendations issued by the European Centre for Disease Control (ECDC July 2018) on the basis of the ECDC country visit Nov 2017**

- Update the national intersectoral coordinating commission
- Develop a national action plan based on the Belgian Antibiotic Policy Coordination Commission (BAPCOC) policy paper
- Implement a national CRE control strategy
- Strengthen infection prevention and control policies
- Promote compliance with evidence-based prescription guidelines
- Reinforcement of infectious disease clinicians' status and activity
- Medical microbiology (increased daily input by clinical microbiologists to improve management of infections)
- Awareness campaigns
- Compulsory education on AMR and antibiotic stewardship
- Strengthen the role of the coordinating physician in nursing homes

**Recommendations issued by DG SANTE on the basis of the country visit Nov 2017:**

- Develop a truly One Health National Action Plan on AMR
- Greater and more effective collaboration and cooperation between the human health, veterinary and also environmental sectors
- Develop sector-specific antibiotic use reduction targets,
- Additional attention to AMR surveillance and prudent use in companion animals (pets and horses),
- Further develop supporting tools to farmers, veterinarians and other stakeholders (benchmarking, more emphasis on alternatives to antibiotics, ...),
- Additional support or control to high antibiotic using farmers and high prescribing veterinarians,
- Explore the possibility of harnessing the influence of food retailers and processors,
- Improve trainings on AMR, prudent use and infection prevention and control

## Aim and Objectives

The overall aim of this policy dialogue is to support the development of the national AMR action plan for Belgium. One step towards this aim is to advance a common understanding among key stakeholders on the evidence and governance relating to building a 'One Health' approach. To this end we want to explore the following:

- Developing a common understanding on the AMR challenge in Belgium including the vision, roadmap and problem statement
- Reviewing One Health AMR action plans and policies to understand what elements and governance are necessary
- Assessing the effectiveness and economics of AMR actions
- Identifying strategic objectives and options for priority actions for combatting AMR in Belgium
- Discuss tools to Implement the AMR action plan

## Target audience

Participants to the policy dialogue will include senior policy makers and stakeholders from different departments, sectors and political-administrative levels to capture both the multi-sectoral quality of a One Health AMR approach and the political institutional set up of Belgium.

Experts from the Observatory, WHO/Europe, OECD, ECDS as well as invited officials from the European Commission and other organizations and countries will provide an international

perspective to this topic and join in the discussion as to how this evidence and experience of other countries is relevant and useful for pushing further developments in Belgium.

The policy dialogue will bring together approximately 35 policy-makers and stakeholders from both the regional and national level. Including the international experts we are expecting a group of ca. 45 persons.

## **Format**

The European Observatory on Health Systems and Policies as a knowledge broker facilitates knowledge transfer and sharing of relevance experience. Policy dialogues constitute a particular type of sharing knowledge and bringing evidence to practice. They are typically highly focused, targeting senior policy-makers and their top advisers, and marshalling support for key decision points.

A policy dialogue offers policy-makers in a country or a group of countries a neutral platform to discuss under Chatham House rules a particular key policy issue on the basis of comparative evidence and shared experience. Their role is non-prescriptive: address real policy questions, bring up the existing evidence on alternative options, and facilitate discussion on options, but always from a neutral perspective. They are likely to come at the beginning or end of a decision-making process and may include other interested stakeholders.

Policy dialogues are co-facilitated by international experts (Observatory and WHO staff as well as invited partners, academics or policy makers from other countries) who have particular experience with the implementation of the particular policy area under discussion.

The Observatory has worked with this model for a number of years on a wide range of topics and with various countries. The feedback from Member States has been very positive. The policy dialogue model has proven to be particularly useful in times of transition when policy-makers take stock of past achievements and explore strategic options for further health system reform.

## **International Experts:**

### **Speakers and panellists**

- Karin Carlin, Public Health Agency, Sweden
- Alexandra Clarici, Federal Ministry of Health, Germany
- Charles Clift, Chatham House
- Jeroen Dewulf, University of Ghent, Belgium
- Marcel de Kort, Ministry of Health, Welfare & Sport, the Netherlands
- Dominique Monnet, ECDC
- Saskia Nahrgang, WHO Regional Office for Europe
- Driss ait Ouakrim, OECD
- Charles Price, DG SANTE European Commission

### **Chair**

- Tom Auwers, FPS Health, Food Chain Safety & Environment

### **Facilitator**

- Josep Figueras European Observatory on Health Systems and Policies

### **Rapporteur and report lead-author**

- Erica Richardson, European Observatory on Health Systems and Policies



## Programme Policy Dialogue

# Developing the national AMR action plan for Belgium

## Brussels, 22-23 November 2018

**Day 1, 22 November 2018**

**12.00–13.00 Registration at venue + lunch (room Fleming - 06C272)**

**13.00–15.00 Session 1: Vision, roadmap and situation analysis for addressing AMR in Belgium**

In this session we want to ensure 1) a common understanding on the vision and road map for developing an Action Plan on AMR for Belgium; 2) a good understanding of the Belgian situation, based on the KCE antibiotic use report and on antibiotic resistance data; and 3) we also want to understand where Belgium stands in international comparison both with regards to the challenge and the ambition.

Lead questions:

- What is the schedule of the roadmap? What are the individual steps? What organizations and stakeholders will be involved?
- What is the situation in Belgium?
- How ambitious is the vision vis-à-vis the challenge? How ambitious is it vis-à-vis other countries efforts?

Agenda:

- Welcome, objectives of the Policy Dialogue, introduction of participants (10min)  
*Tom Auwers, Federal Public Service Health, Food Chain Safety and Environment*
- Explaining the programme and the rules of the game (5min)  
*Josep Figueras, European Observatory on Health Systems and Policies*
- A renewed vision and roadmap for tackling AMR in Belgium (10min)  
*Martine Delanoy, Federal Public Service Health, Food Chain Safety and Environment*

Situation analysis:

- The draft KCE-report on antibiotic-use in humans and animals (25 min)  
*Roos Leroy, KCE (Belgian Health Care Knowledge centre)*
- Resistance to antibiotics in Belgium: situation (15 min)  
*Boudewijn Catry, Sciensano*

Facilitated general discussion will start with short feedback from panellists and international agencies followed by Q&A.

**15.00–15.15 Short break- coffee and biscuits / water and fruit**

### 15.15–16.45 **Session 2: One Health AMR action plans: recipes for success from international experience**

In this session we want to establish a common understanding on an AMR Actions plan that really translates into practice.

- What are the elements? What sectors are included? What targets are set and are they quantified? Are non-health co-benefits and costs for other sectors spelled out?
- What works? What actions have proven to be effective? What actions have been proven to be cost-effective? What actions are 'low-hanging-fruits'?
- Are there good actions for all sectors and problems?
- What is the governance? Which organization takes the lead? Who should participate in the drafting? How to ensure transparency and accountability? Are co-benefits and costs to other sectors addressed? Is there a budget assigned to the development of the policy?
- What are the politics? What is needed to create sufficient ownership of all actors involved?
- What are the incentives? What are the non-health co-benefits for other sectors and organizations?
- What are the budgetary implication for creating and running a One Health AMR action plan?

Agenda:

- International One Health AMR action plans  
*Saskia Nahrgang, WHO Regional Office for Europe (10 min)*
- AMR Action Plan in Sweden  
*Karin Carlin, Public Health Agency, Sweden (10 min)*
- AMR Action Plan in Germany getting cross sectoral collaboration  
*Alexandra Clarici, Federal Ministry of Health, Germany (10 min)*
- AMR Action Plan in the Netherlands  
*Marcel de Kort, Ministry of Health, Welfare & Sport, the Netherlands (10 min)*

This is followed by a facilitated discussion. The international experts are encouraged to participate and bring in their country experience.

**16.45–17.00 Wrapping up the first day – Tom Auwers, Federal Public Service Health, Food Chain Safety and Environment; Erica Richardson, European Observatory on Health Systems and Policies**

**Day 2, 23 November 2018****9.00–9.30 Coffee and biscuits****09.30–11.00 Session 3: AMR actions: assessing the evidence on effectiveness and economics**

In this session we want to take stock of what actions work and what are the economic implications of these actions. We want to critically assess the international evidence to develop a realistic understanding what could be done and what could work. To this end, we would also need to address the transferability of AMR action that proved to be successful elsewhere

Lead questions:

- Are there good actions for all sectors and problems?
- What actions are 'low-hanging-fruits'?
- What actions have proven to be effective?
- What actions have been proven to be cost-effective?

Agenda:

- The DG-SANTE-OECD-OBS Study: AMR economic and policy challenges (15min)  
*Charles Clift, Chatham House*
- Estimating the Cost-effectiveness of AMR actions (15 min)  
*Driss ait Ouakrim, OECD*

This is followed by a facilitated discussion. The international experts are encouraged to participate and bring in their country experience.

**11.00–11.30 Short break- coffee and biscuits / water and fruit****11.30–13.00 Session 4: Priorities for combating AMR in Belgium: options for actions**

In the light of the recommendations from ECDC, DG SANTE (European Commission) and KCE we will discuss options for action for Belgium. Over the previous sessions we have developed a good understanding of the key problems, of effective interventions and now we can discuss what would fit in a Belgian One Health AMR action plan.

Lead questions:

- What are good recommendation for action for Belgium
- What are transferable actions?

Agenda:

- Recommendations for action for Belgium (20 min)  
*Dominique Monnet, ECDC*
- Recommendations for actions to improve the antibiotic use in Belgium (20min), *Roos Leroy, KCE (Belgian Health Care Knowledge centre)*

This is followed by a facilitated discussion. The international experts are encouraged to participate and bring in their country experience.

**13.00–14.00 Lunch (room Fleming - 06C272)**

**14.00–15.30 Session 5: Implementing the AMR action plan: Monitoring as a key governance tool**

Once the action plan is finalized, the actions need to be implemented. Actors need to be encouraged and efforts need to be sustained. Personalized feedback to professionals and organizations (doctors, veterinarians, hospitals, farmers) is a key instrument to motivate them to continuously improve and falls within the remit of policy makers. During this session we will explore how monitoring & feedback, possibly in combination with other instruments, can be better applied.

Lead questions:

- How do we create sufficient transparency?
- What is useful feedback information?
- How can we strengthen existing mechanisms?

Agenda:

- Surveillance systems for human and animal health in Belgium (15min),  
*Pieter-Jan Ceyssens, Sciensano*
- Monitoring and reporting of antibiotic use in livestock in Belgium and international perspective (15 min)  
*Jeroen Dewulf, University of Ghent*
- Surveillance and reporting of antibiotic use in human health in Belgium (15 min)  
*Pascal Meeus, INAMI (National Institute for Health and Disability Insurance)*

Facilitated discussion

**15.30–16.00 Wrapping up and closing the Policy Dialogue**

**Tom Auwers, Federal Public Service Health, Food Chain Safety and Environment;**

**Maggie De Block, federal Minister of Social Affairs and Public Health.**