

CORHA Investigation and Control Workgroup Charge

Updated October 2016

Workgroup purpose:

An Investigation and Control Workgroup of CORHA is developed for the purpose of identifying consistent and coordinated approaches to investigation and control of infectious disease outbreaks and exposure events within healthcare facilities and in various ambulatory settings. Settings of interest include the following: acute care hospitals, long term care facilities, dialysis, ambulatory surgery centers, long term acute care hospitals, and provider clinical offices. Outbreaks of interest *for 2016-2017* includes those resulting from the following pathogens or infection types:

Antimicrobial Resistant Pathogens

- CRE
- MDR Gram-negatives
- Clostridium difficile
- Bacterial/other (e.g., *Staphylococcus aureus*)
- Nontuberculosis Mycobacteria (extrapulmonary)
- Candida auris

The workgroup is tasked with the following activities:

1. Define appropriate levels of response. The workgroup will:

- 1.1. Evaluate existing standards and best practices in place from across the country with regard to the levels of response needed for infection and exposure events for each pathogen or infection type, by setting.
- 1.2. Articulate recommended thresholds: number of cases (by setting) that warrant investigation and control for a suspected outbreak.
- 1.3. Identify a standard set of qualitative and quantitative data elements to be assessed in the investigation and control of a suspected outbreak.

2. Improve response to investigation and control of outbreaks to public health. The workgroup will:

- 2.1. Evaluate existing best practices in place throughout the country which lead to thorough, timely, and accurate investigation and control of outbreaks from various clinical settings to public health agencies.
- 2.2. Understand clearly the qualitative and quantitative information requirements of public health agencies necessary to investigate and control outbreaks for each pathogen or infection type, by setting.
- 2.3. Understand clearly the resource and informational limitations in each healthcare setting, for each infection type, which affect the thorough, timely and accurate investigation of suspected outbreaks.
- 2.4. Articulate recommended standards to guide the thorough, timely and accurate investigation and control reporting of outbreaks from various healthcare settings.
- 2.5. Evaluate, identify, or develop if necessary, resources and training materials aimed at improving the practice of healthcare settings for the thorough, timely and accurate investigation and control of suspected outbreaks.



- 3. Improve data management for outbreak investigation and tracking. The workgroup will:
 - 3.1. Identify and evaluate existing data management systems in use which are intended to facilitate the management of outbreak investigation and tracking.
 - 3.2. Understand clearly and evaluate the workflow processes and performance of public health agencies' use of data management systems for outbreak investigation and control. From this, identify best practices in use of these systems which ensure timely and accurate investigation of suspected outbreaks in response to information these surveillance systems provide.
 - 3.3. Evaluate, identify, or develop if necessary, training materials aimed at improving public health agencies' use of surveillance systems to ensure timely and accurate response to information provided through existing systems.

Additional pathogens for future consideration:

- Emerging infectious diseases
- MRSA
- Bloodborne pathogens
- Group A Streptococcus
- Device-associated infections
 - o CLABSI
 - o CAUTI
 - o SSI
 - o VAP
- Respiratory
 - Influenza
 - Legionella
 - o Tuberculosis
- Mycotics (non-Candida auris)
- Enterics
 - Norovirus
- Events
 - Infection control breaches
 - Drug diversion
 - o Drug contamination
 - Product contamination
- Toxic Anterior Segment Syndrome
 - Other non-infectious outbreaks