



CORHA Detection and Reporting Workgroup Charge

Updated October 2016

A Detection and Reporting Workgroup of CORHA is developed for the purpose of identifying standardized approaches to detection and reporting 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* include 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. Create standard definitions for outbreaks and exposure events and thresholds for reporting.** The workgroup will:
 - 1.1. Evaluate existing standards and best practices in place from across the country with regard to the number of cases needed to constitute an outbreak for each pathogen or infection type, by setting.
 - 1.2. Articulate recommended thresholds: number of cases (by setting) that constitute an outbreak.
- 2. Improve reporting of outbreaks and exposure events to public health.** The workgroup will:
 - 2.1. Identify a standard set of qualitative and quantitative data elements to be included in the reporting response to the public health agency of jurisdiction to facilitate timely and accurate response to the outbreak.
 - 2.2. Evaluate existing best practices in place throughout the country which lead to thorough, timely, and accurate reporting of outbreaks from various clinical settings to public health agencies.
 - 2.3. Understand clearly the qualitative and quantitative reporting requirements of public health agencies necessary to evaluate and respond to each pathogen or infection type, by setting.
 - 2.4. Understand clearly the resource and informational limitations in each healthcare setting, for each infection type, which affect the thorough, timely and accurate reporting of outbreaks.
 - 2.5. Articulate recommended standards to guide the thorough, timely and accurate reporting of outbreaks from various healthcare settings and provider types to public health agencies.
 - 2.6. Evaluate, identify, or develop if necessary, training materials aimed at improving the practice of healthcare settings/providers to the thorough, timely and accurate reporting of outbreaks to public health agencies.
- 3. Improve the use of existing surveillance systems to detect outbreaks.** The workgroup will:
 - 3.1. Identify and evaluate existing reporting systems in use which are intended to facilitate the exchange of thorough, timely and accurate information for purpose of reporting outbreaks.



- 3.2. Understand clearly and evaluate the workflow processes and performance of public health agencies' use of these systems for outbreak identification. From this, identify best practices in use of these systems which ensure timely and accurate 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
 - CLABSI
 - CAUTI
 - SSI
 - VAP
- Respiratory
 - Influenza
 - Legionella
 - Tuberculosis
- Mycotics (non- *Candida auris*)
- Enterics
 - Norovirus
- Events
 - Infection control breaches
 - Drug diversion
 - Drug contamination
 - Product contamination
- Toxic Anterior Segment Syndrome
 - Other non-infectious outbreaks