



CORHA Laboratory Workgroup Charge

Workgroup Mission:

The Council for Outbreak Response for Healthcare-Associated Infections & Antibimicrobial-Resistant Pathogens (CORHA) Laboratory Workgroup seeks to describe and promote public health, clinical, and commercial laboratory best practices to support healthcare-associated infection/antibiotic resistance (HAI/AR) outbreak detection and response. The workgroup will assist laboratorians as well as public health and clinical partners by developing guidance, identifying best practices, and improving laboratory partner collaborations with healthcare facilities and state/local public health departments.

To achieve its mission, the Laboratory Workgroup is tasked with addressing the following high-level objectives:

- 1. Contribute knowledge and support activities to optimize laboratory practices in support of identifying and investigating possible HAI/AR outbreaks.** The workgroup will:
 - 1.1 Select target organisms/conditions, beginning with AR and non-AR examples already under the consideration of the Identification & Reporting Workgroup and the Investigation & Control Workgroup.
 - 1.2 For each targeted organism/condition, describe the laboratory practices that best support outbreak identification/investigation, including activities such as case finding, environmental assessments and relatedness testing.
 - 1.3 Promote best practices for environmental assessments, including when it is appropriate, techniques in sample collection and processing, and expertise required.
 - 1.4 As deemed appropriate, promote implementation of techniques to detect specific pathogen strains (e.g. CP-CRE) helpful for outbreak detection and response.
 - 1.5 Identify and promote best practices for laboratory data collection and data sharing in relation to HAI/AR outbreak response.

- 2. Support effective interactions among laboratory partners and between laboratories, healthcare facilities, and state/local health departments in the context of HAI/AR response activities.** The workgroup will:
 - 2.1 Make recommendations on reporting roles and methods for different types of laboratories, including clinical, commercial, research, and public health laboratories, to relevant stakeholders.
 - 2.2 Identify best practices for how laboratories can assist epidemiologists and other partners with identifying potential outbreaks and investigating routes of transmission.
 - 2.3 Identify best practices for outbreak response from a laboratory perspective and describe the roles of each stakeholder during an investigation.
 - 2.4 Foster relationships with laboratory stakeholders.
 - 2.5 Provide consultation to other CORHA workgroups on projects related to the laboratory aspects of outbreak detection and response.



Coordination and Consultation. All Laboratory Workgroup activities will occur in coordination with other CORHA workgroups and activities focused on promoting standardized approaches on outbreak detection and reporting, and investigation and control. The Laboratory Workgroup will be available to provide consultation for issues that intersect with its scope and objectives (e.g., automated cluster detections; data management; medical product investigations).

Priority Pathogens/Conditions for the Laboratory Workgroup may include (living document):

- *Candida auris* (AR)
 - [Echinocandins: Anidulafungin, Caspofungin, Micafungin](#)
- Carbapenem Resistant Enterobacteriaeaceae (CRE) (AR)
 - Carbapenemase producing (CP-CRE)
 - [Polymyxins, Fosfomycin, and Aminoglycosides](#)
- *Clostridium difficile* (CDI) (AR)
- Nontuberculous mycobacteria (NTM) (non-AR)
- Multidrug-resistant Gram-negative bacteria including *Acinetobacter*

Laboratory Workgroup Structure and Support. The Workgroup will be comprised of a combination of qualified individuals with either long-term or short-term appointments. Leadership will be provided by a CORHA-appointed chairperson or co-chairs, with assistance from CORHA staff and the Governance Committee, especially during the initial phases of Workgroup activity. Long term members should be limited in number (less than or equal to ten individuals including the chairperson[s]) and function as a steering group, helping to guide the workgroup activities and product development. On-boarding of long-term members should occur in a phased manner to help provide a stable launch. Short-term members will be engaged on an ad hoc basis, to bring expertise to the development of specific workgroup products.

Consider long-term workgroup representation from the following perspectives:

1) State Public Health Laboratory (to include a chairperson representing APHL), 2) Commercial, Clinical, Hospital, and/or Academic Laboratories (e.g., via ASM, ACLA), State/Local health departments (e.g., via CSTE, NACCHO) 3) federal public health agency (e.g., CDC), 4) hospital-based infection control and/or epidemiology experts (e.g., via SHEA or APIC).

Workgroup Products and Activities may include:

- Pathogen/condition-specific products summarizing laboratory roles in outbreak detection (initial identification and reporting) and outbreak investigation
- General guidance for labs and stakeholders (e.g., state health department)