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Preventing MDRO Transmission

Multidrug resistant organisms are an increasing problem in healthcare settings. Infection prevention efforts are being undertaken to control these organisms and prevent their spread.

Partners for Patient Safety

Partners for Patient Safety: Early Detection and Infection Prevention



Partners for Patient Safety: Early Detection and Infection Prevention is a public-private partnership involving Centers for Disease Control and Prevention, Washington State Department of Health, the state's local health jurisdictions, and participating healthcare facilities. The goal of the partnership is to identify patients who are unknowingly colonized with targeted multidrug resistant organisms (MDRO) so that prompt public health response can occur.

Multidrug resistant organisms are bacteria resistant to several classes of antimicrobial medications. These organisms have been increasing in prevalence and present a risk to patients because the organisms do not respond to common antibiotics and the infections tend to occur in persons with existing serious health conditions. Several "targeted MDROs" are reportable in Washington and, when identified, prompt a public health response. MDROs in this category include:

- *Candida auris*, an emerging fungal pathogen
- Carbapenemase producing organisms including carbapenemase producing *Acinetobacter baumannii*, Enterobacterales (such as *E. coli*, *Klebsiella pneumoniae*, or *Enterobacter cloacae*), or *Pseudomonas*
- Pan-resistant Gram-negative organisms including *Pseudomonas aeruginosa*

Washington is a low incidence state for the targeted MDROs compared to many other parts of the country. Unfortunately, *Candida auris* has recently been reported in Washington. There is also



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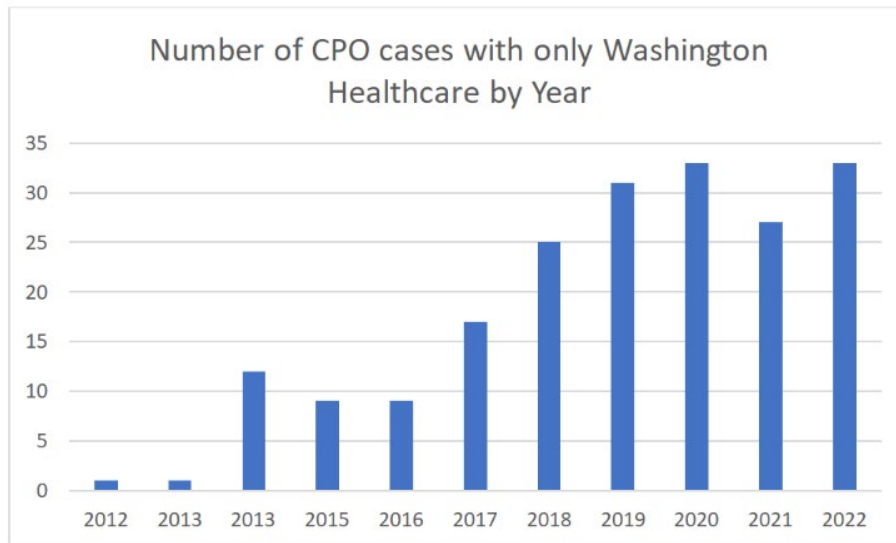
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concern about silent transmission, MDRO infections being spread among patients without being recognized.

While infections with MDROs can occur due to exposures in other states or countries, receiving health care within Washington has been increasingly associated with infections. A growing number of carbapenemase producing organisms have been identified in persons who had healthcare only within Washington.



Through efforts such as Partners for Patient Safety, actions can be taken to prevent the targeted MDROs from becoming endemic in Washington.

Participating in Partners for Patient Safety

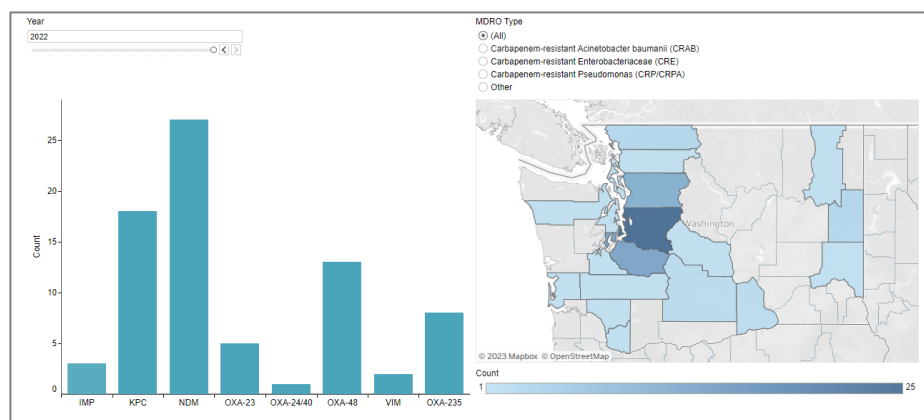
Partners for Patient Safety has two parts, one focused on regularly scheduled point prevalence screening in certain long term care facilities, and the other focused on hospital admission screening for select patients. Based on epidemiologic data showing that most *C. auris* cases are associated with long term acute care hospitals and ventilator-capable skilled nursing facilities, the partnership is recruiting these types of facilities to become participants. Facilities are invited to receive an onsite infection prevention assessment in order to identify any areas for improvement, and then conduct screening of all residents/patients for the targeted MDROs every six months. Hospitals are also invited to participate in the partnership by performing admission screening for the targeted MDROs in patients who have any of the following identified risk factors:

- Close contact in a healthcare setting to someone diagnosed with and colonization or infection with either *C. auris* or with a carbapenemase producing organisms, where close contact is: known epi link to a case in a healthcare facility **or** an overnight stay in the prior year in a healthcare facility either outside the United State or in a region of the country with a high burden of *C. auris* cases (see Resources)
- Direct admission to the hospital from a ventilator-capable skilled nursing facility or a long term acute care hospital
- Known colonization or infection with a carbapenemase-producing organism

Because hospitals cannot predict in advance when a patient with such risk factors will be admitted, participation requires advance planning with the local health jurisdiction in order to pre-position screening kits on site. Screening test collection is performed by healthcare facility staff, but all of the test kits, shipping, and testing are provided free of charge. If any patient tests positive, public health agencies work with the facility to ensure that infection prevention measures are adequate to avoid transmission. The case is entered in the state’s electronic Antibiotic Resistance Information Exchange so that if the patient presents in the future at a hospital or skilled nursing facility, both the facility and public health are alerted so infection prevention can be initiated promptly.

Taking Action to Control MDROs

Washington State Department of Health summarizes MDRO surveillance in an interactive dashboard (see Resources) as a reference for healthcare providers and laboratories.



Local health jurisdictions can encourage their local healthcare facilities to participate in the Partners for Patient Safety. Interested hospitals should contact their local health jurisdiction to learn how they can start performing admission screening for targeted MDROs.

As a reminder, WAC 246-101 mandates that carbapenem resistant Enterobacteriales (limited to *E. coli*, *Klebsiella* species, and *Enterobacter* species) and *C. auris* be reported to the local health jurisdiction by healthcare providers and that isolates be submitted to Washington State Public Health Laboratories by clinical laboratories. Provisional reporting requests reporting and submission of all carbapenem resistant organisms (see Resources).

Resources

Partners for Patient Safety and MDRO toolkit: <https://doh.wa.gov/public-health-healthcare-providers/healthcare-professions-and-facilities/healthcare-associated-infections/antibiotic-resistance>

Washington MDRO dashboard: <https://doh.wa.gov/data-statistical-reports/washington-tracking-network-wtn/mdro/dashboard>

Washington Administrative Code: <https://app.leg.wa.gov/WAC/default.aspx?cite=246-101>

Provisional reporting request: <https://doh.wa.gov/sites/default/files/2023-01/ProvisionalReportingCPO.pdf>

National *C. auris* surveillance: <https://www.cdc.gov/fungal/candida-auris/tracking-c-auris.html>