

## Infection Rates and Outbreak Management

Since 2006, the WRHA has tracked and calculated hospital-related case rates of *C. difficile* and multidrug resistant organisms (MDROs), (formerly known as antibiotic resistant organism [AROs]). Currently the MDRO the WRHA is collecting data on is methicillin resistant *Staphylococcus aureus* (MRSA), Carbapenemase-producing Enterobacterales (CPE), Vancomycin Resistant Enterobacter blood stream infections (VRE BSIs) and Antimicrobial resistant gram-negative bacilli (AMR-GNB).

An outbreak is a sudden rise in the number of cases of a disease, beyond what might be expected. It may last for a few days or weeks, or even for several years. An outbreak is the spread of the same illness among a group of people living or working in the same place at the same time. Infectious disease outbreaks occur year-round and in different settings including hospitals, long term care facilities, and the community. There are many types of outbreaks that might occur in healthcare facilities (e.g., respiratory, gastrointestinal, MRSA, scabies) and some are expected every year (e.g., influenza).

The number of cases of illness required to call an outbreak may be different between the different types of disease. There are times when outbreaks can impact the health of people receiving care and even be life threatening. Early recognition of outbreaks and prompt response are essential for effective management of outbreaks. When illness and its source is identified early and appropriate control measures are implemented in a timely manner, outbreaks are generally quickly controlled.

### Required Organizational Practices (ROP) Tests for Compliance

- ✓ Health care associated infections are tracked, information is analyzed to identify outbreaks and trends, and this information is shared throughout the organization. NOTE: the ROP only applies to organizations that have beds and provide nursing care.
- ✓ There is a coordinated approach for responding to outbreaks

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## Tracking Infection Rates

Teams that are well informed about health care associated infection rates are better equipped to prevent and manage them. IP&C is responsible for identifying, collecting, analyzing and reporting on specific HAIs. Reports and other associated information on infection rates are disseminated/made available to:

- Staff
- Volunteers
- Senior Leadership
- The general public

Currently IP&C is tracking and reporting on:

- *Clostridioides difficile* (*C. difficile*) – rates publicly reported
- *Methicillin Resistant Staphylococcus Aureus* (MRSA) – rates publicly reported
- Carbapenemase-producing Enterobacterales (CPE)
- Vancomycin Resistant Enterobacter blood stream infections (VRE BSIs)
- Antimicrobial resistant gram-negative bacilli (AMR-GNB)

[Antibiotic Resistant Organisms and \*C. difficile\* Infection Rates: March 2024 \(wrha.mb.ca\)](https://www.wrha.mb.ca/antibiotic-resistant-organisms-and-c-difficile-infection-rates-march-2024)

Depending on your area/unit, program or facility, IP&C also tracks and reports HAIs related to:

- Specific Surgical Site Infections (SSI)
- Central Line Associated Blood Stream Infections (CLABSIs)
- Hip and Knee Replacements
- Cerebral Spinal Fluid Shunts (CFS)
- Hemodialysis (HD) Line Infections

### Things to Think About...

1. What is C. difficile and MRSA rates for your facility?
  2. Is your area involved in the collecting and reporting of HAIs related to:
    - a. Surgical Site Infections (SSIs)
    - b. Central Line Associated Blood Stream Infections (CLABSIs)
    - c. Hip and Knee Replacements
    - d. Cerebral Spinal Fluids Shunts (CFS)
    - e. Hemodialysis (HD) Line Infections
  3. If the answer is **yes**, what are the infection rates for the specific HAI(s) being tracked in your area?
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### Outbreak Management

IP&C has developed an Operational Directive and tools to identify outbreaks. These documents also outline roles and responsibilities when responding to outbreaks. They are available on the webpage:

<https://professionals.wrha.mb.ca/files/ipc-Outbreak-Management-OD-Final-April-24.pdf>  
<https://professionals.wrha.mb.ca/old/extranet/ipc/files/Tools/respiratory-toolkit.pdf>

Current outbreaks are shared with staff, volunteers and leadership as well as posted on our public facing webpage: <https://wrha.mb.ca/infection-prevention-control/outbreaks/>

IP&C is involved with the identification, analysis and tracking of outbreaks. IP&C provides recommendations on management and education.

*On the IP&C webpage, it states:*

*(IP&C and WRHA) have strict infection control protocols that are immediately put in place when an outbreak is declared. Our goal is to prevent further spread of the infection through:*

- Careful monitoring
- Increased environmental cleaning
- Educating staff, persons who receive care, friends and family about the outbreak measures
- Reducing patient/resident/client movement on the until and between units
- Restricted visitation

### Things to Think About...

1. Who identifies outbreaks in your area/unit?
2. Who makes recommendations to control and prevent spread?
3. Who is responsible in your area/unit to ensure recommended IP&C measures are put in place?

### Sample Surveyor Questions

- What types of healthcare acquired infections (HAIs) commonly occur at your site? In your program? Organization?
- How are the hospitals acquired infections monitored?
- Who is responsible for managing this process?
- What are your infection rates?
- What mechanisms/processes are in place to review outbreaks?
- Who is involved in analyzing the data? What is their responsibility?
- Tell me about the recommendation process. Who is involved?
- How are the recommendations agreed upon?
- How are the recommendations implemented? Who leads this work?

If you have questions, please contact the Infection Prevention and Control Professional for your organization/facility/program. <https://professionals.wrha.mb.ca/infection-prevention-control/contact/>