



Third *Candida auris* Workgroup Meeting Summary Report

October 23, 2024

Ron DeSantis
Governor

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THIRD CANDIDA AURIS WORKGROUP MEETING

Virtual
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MEETING PURPOSE:

To present regional data and updated regulatory guidance regarding *Candida auris* (*C. auris*) and to provide progress updates on implementation of the Action Plan to key health care stakeholders and workgroup members.

OBJECTIVES:

1. Present regional *C. auris* data to state partners.
2. Review regulatory updates related to *C. auris*.
3. Present updates to Action Plan objectives.

MEETING SUMMARY:

Deputy Secretary for Health, Florida Department of Health (DOH), Dr. Kenneth Schepke, welcomed all workgroup members and reviewed the meeting purpose and objectives which emphasized collaboration and partnerships in creating a successful statewide *C. auris* Action Plan.

Deputy Secretary, State Survey Agency Director, Florida Agency for Health Care Administration (AHCA), Kimberly Smoak, presented an overview of prior *C. auris* Workgroup meetings and provided a regulatory update for nursing homes on the utilization of Enhanced Barrier Precautions (EBP). The presentation described the appropriate use of EBP for residents known to be colonized or infected with a multidrug-resistant organism (MDRO) as well as those at increased risk of MDRO acquisition (e.g., residents with wounds or indwelling medical devices). The appropriate use of personal protective equipment (e.g., gown and gloves) during high-contact resident activities was also discussed.

Dialysis Infection Prevention Lead, DOH, Chantel Emery, provided an overview of regional *C. auris* data throughout Florida. Please see the following key points:

- The aim of the third workgroup meeting is to provide progress updates on goals and objectives from workgroup Co-leads to implement the Action Plan to support public health efforts that reduce statewide *C. auris* transmission.
- As of October 2024, DOH has received reports of 5,943 *C. auris* cases within Florida, with 4,065 colonized cases detected from axilla/groin swabs, and 1,878 clinical cases. A total of 43 out of 67 counties within Florida have reported one or more cases.
- Florida has a large population of residents ages 65 and older, who may be at increased risk of acquiring *C. auris*. Those most at risk for *C. auris* colonization and/or infection are individuals who:
 - Suffer from chronic medical conditions.
 - Have frequent, extended health care stays.
 - Have chronic invasive devices such as tracheostomy tubes or mechanical ventilators.
 - Have a history of colonization and/or infection of other MDROs and antimicrobial use.

THIRD CANDIDA AURIS WORKGROUP MEETING

Central and West Florida Clinical and Regulatory Manager for American Renal Associates, Kristen Munsell, presented an update to Goal 1 and associated objectives:

- Goal 1: Improve communication and collaboration within health care facilities, between health care facilities, and among health care providers.
 - **Objective 1.1:** By December 2024, disseminate and analyze a voluntary learning needs assessment (LNA) for health care staff in at least 80% of health care settings within Florida including acute care hospitals, long-term care facilities, and dialysis facilities. The LNA results will be shared with stakeholders to address communication needs and barriers and improve current communication tools.
 - **Objective 1.2:** By December 2024, develop and implement a standardized communication tool to improve intra-facility communication, based on facility survey results.
- The following updates were provided:
 - The Goal 1 subgroup has begun creating a repository of previously successful tools that aid in inter- and intra-facility communication from various setting types (e.g., acute care, long-term care, outpatient hemodialysis clinics, etc.).
 - An LNA is in the process of being created for health care staff from various setting types. The LNA will be disseminated in January 2025. The preliminary results will be provided at the next workgroup meeting.

Director of Infection Control, Kindred/Scion Health, Laura Velasco, presented an update to Goal 2 and associated objectives. Please see below:

- Goal 2: Improve knowledge and training in appropriate infection control practices for *C. auris*.
 - **Objective 2.1:** By June 2024, develop a *C. auris* training and education toolkit to distribute to facilities based on care setting type. The toolkit will include educational tools (e.g., one-pagers, quick references), infection prevention recommendations tailored to specific setting types, and regional data trends of novel and targeted MDROs.
 - **Objective 2.2:** By March 2025, develop and disseminate infection prevention and control training resources for facility employees to be integrated into existing orientation for completion within three months of hire and annually thereafter.
- The following updates were provided:
 - The Goal 2 subgroup has created and disseminated the *C. auris* Toolkit in collaboration with DOH and AHCA. The toolkit is an educational resource intended to provide a summary of infection prevention recommendations in various setting types and aid in outbreak investigations.
 - Educational resources for infection preventionists and frontline staff members within various setting types (e.g. acute care, long-term care, outpatient dialysis settings, etc.) are being created. These resources will assist with toolkit dissemination, and increased awareness and understanding of *C. auris* best practices.

Director of Infection Prevention, Jackson Health System, Gemma Rosello, presented an update to Goal 3 and associated objectives. Please see below:

- Goal 3: Expand laboratory and facility capacity for *C. auris* testing.
 - **Objective 3.1:** By January 2025, disseminate an LNA to assess available capacity for screening and follow-up testing offered by DOH, Bureau of Public Health Laboratories (BPHL), and facility laboratories in Florida (e.g., commercial laboratories, hospital on-site laboratories). Utilize LNA results to develop and distribute an inventory of laboratories that perform *C. auris* testing including estimated turnaround time.
 - **Objective 3.2:** By March 2025, analyze the *C. auris* case report form using Florida's surveillance system to identify risk factors and create recommendations regarding screening protocols per health care setting type (e.g., acute care hospitals, long-term acute care hospitals, rehabilitation facilities, skilled nursing facilities, dialysis clinics).

THIRD CANDIDA AURIS WORKGROUP MEETING

- The following updates were provided:
 - The Goal 3 subgroup drafted an LNA regarding laboratory capacity within clinical and other health care facility laboratories. The goal of the LNA was to determine in-house testing capabilities throughout Florida. The LNA will be distributed in January 2025. The preliminary results will be discussed at the next workgroup meeting.

Infection Control Manager for University of Miami Health System, Dr. Adriana Jimenez, presented an update to Goal 4 and associated objectives:

- Goal 4: Reduce barriers to *C. auris* case management across health care settings.
 - **Objective 4.1:** By October 2024, the *C. auris* workgroup co-leads will facilitate the development of local networks for roundtable discussions to identify barriers and resources across the continuum of care. DOH and AHCA will meet with co-leads on a biannual basis to integrate best practices from these discussions into training and educational materials.
 - **Objective 4.2:** By February 2025, identify Florida facilities that routinely accept and manage *C. auris* patients to develop a regional-specific collaborative network aimed to assist facilities in strategizing solutions to implement within their infection control programs. Establish or maintain partnerships with national service providers for these settings as appropriate.
- The following updates were provided:
 - In October 2024, the Goal 4 subgroup conducted a survey among skilled nursing facilities to identify the challenges faced when accepting and managing residents with *C. auris*. Based on survey results, the subgroup plans to facilitate a roundtable discussion across regions in person and in a virtual platform. Facilities will be matched based on their experience levels with *C. auris* management (e.g. matching a facility with experience with a facility that does not have experience). To date, 16 skilled nursing facilities have responded to the survey. Two facilities reported routinely accepting and managing *C. auris* patients. The remaining 14 facilities reported barriers to accepting *C. auris* patients including: staffing, isolation requirements, and an increased need for additional education.

Director of Epidemiology and Infection Prevention for Memorial Healthcare System, Rachel Guran, presented an update to Goal 5 and associated objectives:

- Goal 5: Standardize policies in collaboration with regulatory agencies and partners to support best practices.
 - **Objective 5.1:** By August 2024, facilitate the implementation of the *C. auris* action plan.
 - **Objective 5.2:** By July 2025, establish standardized guidance and recommendations for best infection control practices in each setting type, aligned with established national guidelines.
- The following updates were provided:
 - The Goal 5 subgroup has collected a repository of policies that are in compliance with state and federal regulations. The goal of the repository is to create an example template policy for various setting types, incorporating recommendations from evidence-based infection prevention recommendations, within compliance of state and federal regulatory agencies.

Executive Medical Director, Infection Control, AdventHealth, Dr. Vincent Hsu, recommended simplifying the dissemination process of the materials within the *C. auris* workgroup.

Chief, Bureau of Epidemiology, Thomas Troelstrup, provided closing remarks and thanked everyone for their attendance and dedication to the successful implementation of the *C. auris* plan.

THIRD CANDIDA AURIS WORKGROUP MEETING

ATTENDANCE:

Name	Affiliation/Title
Dr. Kenneth Scheppke	DOH, Deputy Secretary for Health
Thomas Troelstrup	DOH, Chief, Bureau of Epidemiology
Megan Gumke	DOH, Infectious Disease Investigation and Prevention Section Administrator
Argentina Charles	DOH, Health Care-Associated Infection Prevention Program Manager
Chantel Emery	DOH, Dialysis Infection Preventionist
Gregory Champlin	DOH, Infection Prevention Lead
Alina Corral	DOH, Health Care-Associated Infection Prevention Program Coordinator
Jalysa Erskine	DOH, MDRO Prevention Epidemiologist
Evelyn Bula	DOH, MDRO Prevention Coordinator
Mary Sylva	DOH, Bureau of Public Health Laboratories
Justa Ewalu	DOH, Bureau of Public Health Laboratories
Kimberly R. Smoak	AHCA, Deputy Secretary, State Survey Agency Director
Michelle Dillehay	AHCA, Consultant
Stephanie Holley	Association for Professionals in Infection Control and Epidemiology, Director Infection Prevention and Control Education and Professional Development
Kim Broom	Florida Health Care Association, Director of Clinical and Risk Management
Dr. Ken Nanni	Florida Professionals in Infection Control, Administrator
Dr. Vincent Hsu	AdventHealth, Executive Medical Director, Infection Prevention
Kristen Munsell	American Renal Associates, Clinical and Regulatory Manager
William (Russ) Lee	Baycare, Case Management Manager
Dr. Katie Saunders	Centers for Disease Control and Prevention, Nurse Epidemiologist
Lori Floyd	DaVita Dialysis, Infection Preventionist
Chaz Rhone	Florida HCA Healthcare, Vice President North Florida Division
Gemma Rosello	Jackson Health System, Director of Infection Prevention
Laura Velasco	Kindred/Scion Health, Director of Infection Control
Rachel Guran	Memorial Healthcare System, Infection Control Director
AC Burke	RB Health Partners, Infection Preventionist
Donna Spangler	Southern Healthcare Management, Director of Infection Prevention and Control
Brad Shapiro	Sunshine Health, Vice President of Long-Term Care
Dr. Bhavarth Shukla	University of Miami Health System, Clinical Associate Professor of Medicine
Dr. Adriana Jimenez	University of Miami Health System, Infection Control Manager