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# Infection Control Micro-Learns User Guide

## ABOUT THE MICRO-LEARNS

The Project Firstline Infection Control Micro-Learns are a series of guided infection control discussions that provide brief, on-the-job educational opportunities. Each micro-learn focuses on a single infection control topic and connects infection control concepts to immediate, practical value. Health care workers can easily apply the key points to their daily work and perform the recommended actions to keep germs from spreading.

## USING THE MICRO-LEARNS

The micro-learns can be incorporated into existing opportunities where groups of health care workers gather, such as pre-shift “huddles” or team meetings. The sessions should be led or facilitated by an experienced team member with infection control expertise.

### Each micro-learn package includes:

- **An adaptable discussion guide for the facilitator:** The discussion guide is not a script. Facilitators are encouraged to adapt the guide for their audience by including relevant and practical questions and ideas.
- **A job aid for the facilitator:** The visual job aid helps to reinforce the key messages of the micro-learn. Facilitators are encouraged to make the job aid available after the micro-learn session, such as in digital or hard copy form.

**Notes for Facilitators**

- Before presenting a micro-learn, check the policies and protocols at your facility and adapt the content accordingly.
- Build on your knowledge, experience, and awareness to connect the content to local context or relevant recent events so your audience can apply the concepts confidently.
- The micro-learns reinforce infection control concepts when risks are observed in patients or in the patient environment, not necessarily in visitors or other staff members.

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# *Candida auris* Micro-Learn Discussion Guide

**Use the talking points below and accompanying job aid to engage your team in short, focused discussion. Adapt to meet your needs.**

## INTRODUCE THE TOPIC

### Share information about the topic that your audience should know:

- *Candida auris (C. auris)* is a fungus that can cause serious infections.
- *C. auris* was detected in the U.S. in 2013, with a rise from 2020 to 2021.
- *C. auris* can cause infections in the blood, wounds, or ears.
- Patients may experience fever or chills with active *C. auris* infection.
- *C. auris* primarily colonizes the skin.
- **Colonization -** patients can carry *C. auris* on their body and do not show signs or symptoms of illness or infection.
- Patients in healthcare facilities often remain colonized with *C. auris* for many months, perhaps indefinitely, even after an active infection has been treated and resolves.

## EXPAND THE TOPIC

### Share additional information about what your audience should know on the job:

- Patients infected or colonized with *C. auris* can shed the germs in skin cells and in bodily fluids through contact with contaminated surfaces, objects, and/or medical equipment in healthcare facilities.
- *C. auris* can persist on surfaces for a long time.
- *C. auris* is resistant to multiple antifungal medications commonly used to treat fungal infections. **Resistant -** means the germs are not killed by the medication and the infection continues.
- *C. auris* is resistant to many commonly used disinfectant products.
- To prevent *C. auris* transmission in healthcare settings remember to:
  - Follow proper hand hygiene protocols
  - Adhere to proper transmission-based precautions
  - Thoroughly clean and disinfect patient room and equipment
  - Communicate prevention methods to staff, patient and visitors

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## DISCUSS WITH YOUR TEAM

### Find out how your audience feels about the topic:

- Are you familiar with the transmission-based precautions required for a patient with *C. auris* colonization or infection?
- Do you know what specific cleaning product in your facility is effective against *C. auris*?
- Can you list a few ways *C. auris* can spread in your facility?
- Do you understand why *C. auris* is a threat in healthcare facilities?
- What ways can you prevent the spread of *C. auris*?

## WRAP UP AND REINFORCE

### Reinforce key takeaways:

- At this time, there is no known way to remove the germ once a person is colonized with *C. auris* and the Centers for Disease Control & Prevention (CDC) does not recommend treatment for patients colonized with *C. auris*.
- Patients with invasive medical devices (breathing tubes, feeding tubes, catheters, etc.) are at higher risk for *C. auris* infection.
- Patients who have long-term, serious medical problems and spend a lot of time in healthcare facilities are at the highest risk of becoming colonized with *C. auris*.
- Patients should be screened for *C. auris* colonization by swabbing the nares, groin and armpit if they have been exposed to another person with *C. auris* colonization or infection.
- Remember to thoroughly clean and disinfect any shared or reusable equipment.
- Ensure that an appropriate sign is present on the patient's door to alert HCWs and visitors of recommended precautions.

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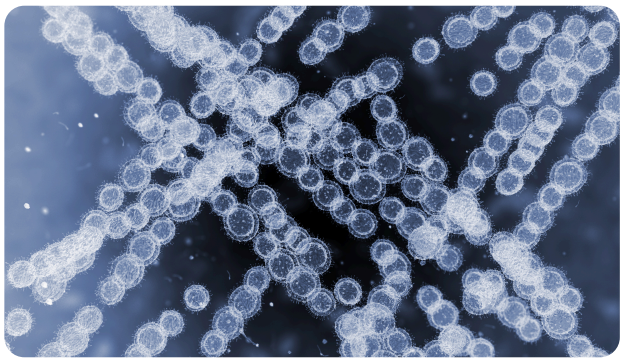
# *Candida auris* at a Glance



*Candida auris* (*C. auris*) is a type of fungus that can cause severe illness and spread among patients in healthcare facilities.

## How Does it Spread?

Directly and indirectly through contaminated surfaces, objects, and/or medical equipment in healthcare facilities:

- Doorknobs, bedrails
- Blood pressure cuffs
- Glucometers
- Nursing carts / crash carts
- Missed hand hygiene moments
- Inappropriate use or not wearing PPE when indicated

## Patient Risk Factors

- Breathing Tubes
- Feeding Tubes
- Catheters in a Vein
- Urinary Catheters
- Wounds

**Invasive medical devices are often necessary but create pathways for *C. auris* to get into the body.**

## Colonization

People can have *C. auris* on their skin and other body sites without having symptoms. Healthcare providers refer to this as '**colonization**.'

**People who are colonized can spread *C. auris* onto surfaces and objects around them and to other patients.**

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# Infection Control Practices for Reducing *Candida auris* in Healthcare Settings

Healthcare workers should always practice proper hand hygiene

Patient care environment should be properly cleaned using products from EPA-registered List “P”

Use transmission-based precautions for suspected and confirmed infections


Clean all mobile and reusable equipment after patient use


Healthcare providers can screen patients for colonization by collecting a screening swab


Family members and patients should be encouraged to perform hand hygiene often

Patients should be placed in a single-room or cohorted according to facility policy and procedure

Provide ongoing education and observation-based audits