

POSITION STATEMENT - VRE SCREENING AND CONTACT PRECAUTIONS

In the past year, some Canadian healthcare facilities have decided to reduce or stop the screening for Vancomycin Resistant Enterococci (VRE) as well as the use of contact precautions as a VRE control strategy, while others continue to support current guideline recommendations for VRE surveillance and the use of additional precautions.¹

Recognizing that there are two bodies of expert opinion on VRE control, CHICA Canada takes no position on the specific strategy of decreasing or stopping screening or contact precautions for VRE. However, any changes to practice should be implemented to improve patient care and not be used as a cost-cutting measure. These changes should only be considered in the context of an infection prevention and control program already meeting or exceeding best practices (i.e. hand hygiene, environmental cleaning, routine practices and additional precautions etc.).

For those healthcare facilities that are considering a change in VRE control strategy, CHICA Canada recommends a considered approach including:

- epidemiologic investigation and risk assessment for VRE infections
- consultation with staff and client groups including high risk wards/clinics;
- discussion with risk management and bioethics;
- consultation with patient relations and public affairs;
- consideration of legal consultation and review of existing practice guidelines;
- discussion with external stakeholders including the health region;
- an enhanced communication strategy addressing multiple contingencies (e.g. that continued surveillance will show a need to return to previous practices)

Further, CHICA Canada recommends that any savings incurred from decreased screening and contact precautions should be reinvested in the following activities (as determined by the risk assessment above):

- environmental cleaning;
- hand hygiene;
- antimicrobial stewardship;
- monitoring of healthcare acquired infections (HAIs);
- other activities deemed important for infection control and prevention.

Finally, any such changes should be accompanied by close monitoring of VRE culture-positive HAIs following the changes to assure that undue harm is not incurred as a result of any changes in policy. In the event that harm is found, institutions should be prepared to return to previous policies. It is also highly recommended that those institutions that choose to change their strategy. communicate their experiences to other members of the infection control community for future policy making.

¹ PIDAC. "Statement on Screening and Containment of Vancomycin-resistant Enterococci (VRE)." http://www.oahpp.ca/about/whatsnew/statement-on-vre-screening-and-containment.html. accessed June 22, 2012.