Infection prevention and control recommendations for *Candida auris*

in skilled nursing and subacute rehabilitation facilities

New Jersey Department of Health

The Centers for Disease Control and Prevention (CDC) recommends nursing home and subacute rehabilitation facilities utilize basic infection prevention measures for when caring for residents with *Candida auris (C. auris)*. These recommendations are similar to recommendations for other multidrug-resistant organisms.

CDC’s most up-to-date recommendations are available at: [www.cdc.gov/fungal/candida-auris/c-auris-infection-control.html](http://www.cdc.gov/fungal/candida-auris/c-auris-infection-control.html). Facilities should contact their local health department or the Communicable Disease Service (609-826-5964) with any questions.

**Transmission Based Precautions**

- In general, nursing home residents with *C. auris* should be placed on Standard and Enhanced Barrier Precautions. Healthcare personnel should always use gowns and gloves, at a minimum, during high-contact resident care activities including:
  - Dressing
  - Bathing/showering
  - Transferring
  - Providing hygiene
  - Changing linens
  - Changing briefs or assisting with toileting
  - Device care or use: central line, urinary catheter, feeding tube, tracheostomy/ventilator
  - Wound care: any skin opening requiring a dressing

- Nursing home residents on Enhanced Barrier Precautions can leave their rooms as long as secretions, excretions, and bodily fluids are contained and the resident can perform hand hygiene when appropriate, e.g., prior to leaving their room.

- Contact Precautions should be used for residents with acute diarrhea, draining wounds, or other sites of secretions or excretions that are unable to be covered or contained.

**Environmental Cleaning and Disinfection**

- CDC recommends use of Environmental Protection Agency (EPA)-registered hospital-grade disinfectant effective against *C. auris* or *C. difficile* spores ([List K](http://www.cdc.gov/fungal/candida-auris/c-auris-infection-control.html)) when disinfecting resident care areas and mobile medical equipment. Consider use of these products throughout the facility if multiple residents screen positive for *C. auris*.
  - It is important to follow all manufacturers’ instructions for use of the surface disinfectant, including applying the product for the correct contact time.

- Ensure that both environmental services and clinical care staff understand and use the appropriate disinfectants.

**Rehabilitation and Shared Services**

- Staff providing physical therapy and other rehabilitation services to residents with *C. auris* should not work simultaneously with other residents. Staff should use a gown and gloves when they anticipate high-contact with the resident or any potentially contaminated equipment.

- Whenever possible, schedule resident with *C. auris* for therapy services at the end of any given day. Shared equipment should be thoroughly cleaned and disinfected after use, as described above.

**Hand Hygiene**

- When caring for resident with *C. auris*, healthcare personnel should follow standard hand hygiene practices, which includes preferential use of alcohol-based hand rub in most clinical situations.

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