

Guidance on Preventing *C. auris* Transmission in Nursing Facilities

The Centers for Disease Control and Prevention (CDC) has identified antifungal-resistant cases of *Candida auris* (*C. auris*) yeast infections in some U.S. nursing facility residents. To help prevent *C. auris* infections, CDC has posted infection control recommendations for healthcare settings. These include:

✓ **Adhere to hand hygiene and increase this on units where residents with *C. auris* reside**

- When caring for residents with *C. auris*, healthcare personnel should follow standard hand hygiene practices, ie, cleaning hands by handwashing, antiseptic hand wash, antiseptic hand rub, or surgical hand antisepsis.
- Alcohol-based hand sanitizer is effective against *C. auris* and is the preferred method for cleaning hands.
- When visible soil is present, washing with soap and water is advised.
- Wearing gloves is not a substitute for hand hygiene.

✓ **Practice transmission-based precautions and room placement.**

- Manage residents with *C. auris* using either contact precautions or enhanced barrier precautions, depending on the situation.
- Place residents on contact precautions in a single room whenever possible. If a limited number of single rooms are available, prioritize for people at higher risk for pathogen transmission.
- If it is necessary to place residents on contact precautions in a shared room, strategies to reduce transmission include:
 - Maintain spatial separation of at least three feet between roommates,
 - Use privacy curtains,
 - Clean and disinfect any shared reusable equipment and environmental surfaces, and
 - Have healthcare personnel change personal protective equipment and perform hand hygiene when moving between roommates.
- If multiple residents with *C. auris* are present in the same facility, consider cohorting them together in one wing or unit.
- Continue to set appropriate transmission-based precautions for the entire duration of the resident's stay in the facility. CDC does not recommend routine reassessment for *C. auris* colonization.



- ✓ **Ensure environmental disinfection. As *C. auris* can persist on surfaces in healthcare environments, it is important to:**
 - Perform thorough daily cleaning and disinfection of residents' rooms and other areas where they receive care. Clean and disinfect shared equipment before use with another resident.
 - Follow all manufacturers' directions for use of surface disinfectants, including maintaining contact during application for the correct amount of time.
 - Use products of an Environmental Protection Agency (EPA)-registered hospital grade disinfectant effective against *C. auris*.

- ✓ **When transferring a resident with *C. auris* colonization or infection to another healthcare facility, make sure to notify the receiving facility of the person's infection or colonization status,** including recommended infection control precautions.

- ✓ **Ensure that all healthcare personnel adhere to infection control recommendations:**
 - Educate all healthcare personnel, including those who work with environmental cleaning services, about *C. auris* and the need for appropriate precautions.
 - Ensure adequate supplies are available to implement infection control measures.
 - Monitor adherence to infection control practices and implement supervised cleaning of resident care areas.
 - Flag the resident's record to alert healthcare personnel to institute recommended infection control measures in cases of readmission.

- ✓ **Conduct screenings** to identify *C. auris* colonization.

- ✓ **In facilities that have had new cases identified or have seen *C. auris* transmission, prospective laboratory surveillance can help identify other *C. auris* cases.** For facilities or units where *C. auris* was detected, identify the species of all *Candida* isolates from any specimen source for at least one month until there is no evidence of transmission.

- ✓ **Identify prior healthcare exposure** for residents with newly identified infection or colonization.

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