

# Candida auris Toolkit: Skilled-Nursing Facilities

*Candida auris* (*C. auris*) is an emerging, often multi-drug resistant organism. It is a type of fungus or yeast. It can cause severe infections and outbreaks in healthcare facilities. Public Health has developed this toolkit to provide Skilled Nursing Facilities (SNF), including Ventilator-Capable Skilled Nursing Facilities (vSNF) with guidance and resources to prepare and care for patients with *C. auris* in your facility.

## CONTENTS

Prepare for *Candida auris*----- 2

- Proactive steps to plan and prepare your facility to accept and care for patients with *C. auris*. Prepared facilities can identify *C. auris* early and begin infection control measures quickly to reduce risk of transmission.

Caring for Patients with *Candida auris* ----- 5

- Initial public health recommendations to support the care of patients with *C. auris* and reduce transmission.

Appendix A: Infection Prevention and Training Resources----- 8

- Resources and tools to support infection prevention activities such as staff education, training, and conducting staff compliance audits.

Appendix B: Communication Resources----- 9

- Resources and tools to support communication within your facility and inter-facility during patient transfers.

Appendix C: *Candida* Species Identification and Screening Resources----- 9

- Resources and tools to support your facility and laboratory in early identification of *C. auris* and conducting patient screening activities such as specimen collection, handling, and shipping.

## PREPARE for *Candida auris*

### CREATE A *CANDIDA AURIS* (C. AURIS) ACTION PLAN



#### **Conduct Staff Education and Training- Start NOW.**

Having trained and knowledgeable staff is one of the best protections against *C. auris* transmission. Everyone in a healthcare setting plays an important role in implementing and sustaining infection control practices.

Education topics to include:

- 1) What is *Candida auris*?
- 2) Hand Hygiene
- 3) Transmission-based Precautions and Appropriate PPE Use
- 4) Environmental Cleaning and Disinfection for *C. auris*. Include training on use of [EPA list P](#) disinfectants effective against *C. auris*.

**Review Appendix A** for materials to help with the development of your *C. auris* staff education and training plan. Public Health is available to support your facility in a variety of ways including providing onsite staff education and training, creation of resources or materials, and conducting onsite staff audits to inform your staff training needs.



#### **Plan for patient placement with your infection prevention team.**

Plan for *C. auris* [patient placement](#) and conduct dedicated *C. auris* training on selected units to allow for rapid implementation of infection control measures in the event of transmission.

Your *C. auris* patient placement plan should include:

- Placement in a private room on [Contact Precautions](#). Please consult with Public Health about implementation of [Enhanced-Barrier Precautions](#).
- Consider a room large enough to support in-room treatment/therapy (RT/OT/PT) to reduce patient movement within the unit/facility unless medically essential.
- Use dedicated or disposable equipment where possible. Label and store dedicated equipment and supplies in the patient room.

**Review Appendix A** for resources to support your patient placement plan.



#### **Establish a C. auris communication plan.**

Communication is essential for effective infection prevention and response work. A new case of *C. auris* requires clear, concise, and rapid communication within the facility and across health systems. Review your current communication plan, and ensure the following are included:

- A list of key partners and stakeholders to aid in rapid notification.
- Clearly identified key staff roles, responsibilities, and expected communication pathways (IP, Leadership, EVS, Nursing, Lab).
- Action steps to report new *C. auris* cases to Public Health within 24 hours as required per [WAC 246-101-101](#).

	<p><b><u>Admission planning:</u></b></p> <ul style="list-style-type: none"><li>• Review your admission workflow to ensure diagnosis, exposures, recent screening, and transmission-based precautions are collected and documented accurately. These should be communicated to leadership, clinical staff, and infection prevention.</li><li>• Provide training for admission staff to ensure patients with <i>C. auris</i> are:<ol style="list-style-type: none"><li>1. Placed in a private room when possible, AND</li><li>2. Placed on contact precautions immediately</li><li>3. When admitting patients from a facility with known <i>C. auris</i> transmission, ensure admission staff ask about possible <i>C. auris</i> exposure and recent screening results. Document these details. This information will help inform your facility of appropriate precautions and if <i>C. auris</i> screening should occur upon admission.</li></ol></li></ul> <p>If you have additional questions about admission planning, please contact Public Health for assistance. WA DOH has an <a href="#">admission job aid</a> to help with admission planning and training.</p> <p><b><u>Discharge planning:</u></b></p> <ul style="list-style-type: none"><li>• Review your inter-facility transfer notification workflow.<ul style="list-style-type: none"><li>○ Identify who is responsible for communicating with the receiving facility.</li><li>○ Provide training to those on your discharge planning team to ensure they understand the importance of communicating key discharge information such as diagnosis, treatment, transmission-based precautions and known exposures.</li><li>○ Public Health recommends use of CDC's <a href="#">inter-facility transfer form</a>, or other facility transfer forms, to standardize your approach to facility transfer notification and documentation. Be sure to notify the transport company of precautions required during patient transport.</li></ul></li><li>• Consider reaching out to facilities you frequently transfer patients to and from, and discuss inter-facility transfer notification expectations for exposed or confirmed patients with <i>C. auris</i>.</li></ul> <p><b><u>Review Appendix B</u></b> for communication resources and tools to aid in the development of your <i>C. auris</i> communication plan.</p>
<input type="checkbox"/>	<p><b><u>Create a <i>C. auris</i> patient screening plan.</u></b> Establishing a patient screening plan provides staff with clear expectations of when to screen patients for <i>C. auris</i>. It ensures a proactive approach to identifying <i>C. auris</i>. Your screening plan should include:</p> <ul style="list-style-type: none"><li>• Details for when patient screening should occur, including:<ul style="list-style-type: none"><li>○ Screening patients who had close contact to someone diagnosed with <i>C. auris</i>. This may be determined during admission, or upon notification by another healthcare facility, or by Public Health.</li><li>○ If you accept a patient with <i>C. auris</i>, contact Public Health for additional screening guidance.</li><li>○ If transmission of <i>C. auris</i> is identified in your facility, contact Public Health for outbreak screening recommendations. Screening activities may include close contacts, unit, or facility-wide screening.</li></ul></li><li>• Reviewing the screening <a href="#">consent script</a>.</li></ul>

	<ul style="list-style-type: none"><li>• Educating staff on <i>C. auris</i> <a href="#">specimen collection and handling</a>.</li><li>• Obtaining Public Health pre-approval for all <i>C. auris</i> screening. Call Public Health to obtain <i>C. auris</i> screening approval. Once approved, specimen collection kits will be delivered to your facility from the Washington State Antimicrobial Resistance (AR) Lab.</li></ul> <p><b><u>Review Appendix C</u></b> for specimen collection, handling and transport resources, and materials to support your <i>C. auris</i> screening plan.</p>
<input type="checkbox"/>	<p><b><u>Develop a <i>C. auris</i> species identification protocol with your lab.</u></b></p> <p><i>C. auris</i> is difficult to identify using standard lab methods and can be misidentified as other <i>Candida</i> species. This can lead to inappropriate treatment and precautions. Create a species identification plan with your lab and Infection Preventionist to allow rapid identification and management of <i>C. auris</i> patients.</p> <p>Public Health recommends:</p> <ul style="list-style-type: none"><li>• Understanding your lab's <i>Candida</i> testing capabilities and methods.</li><li>• Reviewing of <a href="#">CDC's Identification of <i>C. auris</i></a> identify commonly misidentified <i>Candida</i> species based on your labs testing method.</li><li>• Establishing a plan with your lab and Infection Preventionist to:<ul style="list-style-type: none"><li>○ Outline when the lab should notify Infection Prevention with a suspect <i>C. auris</i> result.</li><li>○ When specimens (from sterile and non-sterile sites) should be sent to the Washington State AR Lab for further speciation.</li></ul></li></ul> <p>Note: specimen species identification does NOT require Public Health approval.</p> <p><b><u>Review Appendix C</u></b> for specimen collection, handling, transport resources, and materials to support your <i>Candida</i> species identification protocol creation.</p>

## Caring for Patients with *Candida auris*

ACTION	RECOMMENDATIONS
<p>Initiate patient placement plan</p> <p>See <b>Appendix A</b> for resources.</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> <b>Patients with <i>C. auris</i> should be in a private room and placed on <a href="#">Contact Precautions</a> (<a href="#">Enhanced-Barrier Precautions</a> should <u>only</u> be implemented in consultation with Public Health).</b> If needed, you may cohort patients with <i>C. auris</i> together in a shared room; however, ensure staff always change gloves and gown, and perform hand hygiene between care for different patients.</li> <li><input type="checkbox"/> <b>Dedicate staff to care for patients with <i>C. auris</i></b> (direct and non-direct), when possible. If unable to dedicate staff, encourage staff to cluster care for <i>C. auris</i> patients.</li> <li><input type="checkbox"/> <b>Dedicate equipment and supplies when possible.</b> Label and store dedicated supplies and equipment in the patient's room. Consider using disposable equipment when possible. Equipment that can't be dedicated or disposed of must be thoroughly disinfected using a <a href="#">EPA List P</a> disinfectant.</li> </ul>
<p>Reinforce staff education and training</p> <p>See <b>Appendix A</b> for resources</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> <b>Educate staff on appropriate selection and use of disinfectants for <i>C. auris</i>.</b> Refer to <a href="#">EPA List P</a> to identify disinfectants effective against <i>C. auris</i>. If disinfectants on List P are unavailable, you may use disinfectants on <a href="#">EPA List K</a> (for <i>C. difficile</i>). Train staff on the use of any new disinfectants, ensuring they review and follow the manufacturer's instructions with special attention to the manufacturer's listed contact times. <u>Best practice</u>: competency-based training with return demonstration.</li> <li><input type="checkbox"/> <b>Educate staff, volunteers, and visitors on appropriate use, technique and order of <a href="#">putting on and taking off</a> PPE.</b> <u>Best practice</u>: competency-based training with return demonstration.</li> <li><input type="checkbox"/> <b>Educate staff (direct and non-direct) on <a href="#">Contact Precaution</a> signs and <a href="#">Enhanced-Barrier Precaution</a> signs</b>, ensuring understanding of the PPE indicated and when it should be used.</li> <li><input type="checkbox"/> <b>Educate staff (direct and non-direct) on the appropriate technique and <a href="#">moments</a> for effective hand hygiene</b> for both alcohol-based hand rub, and soap and water methods. <u>Best practice</u>: Alcohol-based hand rub is the preferred method for hand hygiene for <i>C. auris</i>, if hands are not visibly soiled. Staff should complete competency-based training on effective hand hygiene.</li> </ul>
<p>Strengthen environmental cleaning and disinfection activities</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> <b>Perform routine (at least once daily) cleaning and disinfection of <i>C. auris</i> patient rooms using appropriate <a href="#">EPA List P</a> (or <a href="#">List K</a>) products and contact times.</b> Ensure staff move from clean areas to dirty areas and change cloths frequently. Avoid reintroducing a used cloth into a clean wash basin. Immediately place used cloths in the laundry or discard.</li> <li><input type="checkbox"/> <b>Perform thorough terminal cleaning of <i>C. auris</i> patient rooms using <a href="#">EPA List P</a> (or <a href="#">List K</a>) products.</b> Evaluate cleaning methods used for all surfaces and equipment in the patient room—special consideration to equipment such as bed frames, fans, O2 compressors, and therapy equipment.</li> </ul>

See <b>Appendix A</b> for resources.		Infection prevention should review terminal cleaning plans with the EVS manager as EPA List P products are effective on non-porous surfaces only.
	<input type="checkbox"/>	<b>Increase frequency of routine staff compliance audits for both daily cleaning and terminal cleaning.</b> Consider Adenosine triphosphate (ATP), florescent markers, or other tools to assess thoroughness. See audit tracking tools in <b>Appendix A</b> . <u>Best practice</u> : use audit outcomes to inform staff training needs.
	<input type="checkbox"/>	<b>Perform thorough disinfection of shared equipment/supplies</b> using effective <a href="#">EPA List P</a> (or <a href="#">List K</a> ) products. <u>Best practice</u> : dedicate, label and store equipment/supplies in the patient room when possible.
	<input type="checkbox"/>	<b>Increase frequency of environmental cleaning to high-touch surfaces on the unit using <a href="#">EPA List P</a> (or <a href="#">List K</a>) products.</b>
	<input type="checkbox"/>	<b>Be sure all staff know <u>WHO</u> is responsible for cleaning and disinfecting <u>WHICH</u> surfaces/equipment and <u>WHEN</u>.</b> Public Health recommends listing common surfaces and equipment used on the unit/facility. Assign staff/teams to be responsible for cleaning and disinfecting each item on the list, indicate the frequency and product to be used. This will ensure all surfaces in the patient room, on the unit and in the facility are disinfected routinely. See <b>Appendix A</b> for a template document.
Reinforce hand hygiene activities	<input type="checkbox"/>	<b>Increase frequency of routine staff compliance audits of hand hygiene practices.</b> See audit tracking tool in <b>Appendix A</b> . <u>Best practice</u> : use audit outcomes to inform staff training needs.
See <b>Appendix A</b> for resources.	<input type="checkbox"/>	<b>Ensure locations for hand hygiene activities are clean and well stocked:</b> <ul style="list-style-type: none"> <li>• Soap, paper towels, and alcohol-based hand rub should be well stocked.</li> <li>• Sinks should be clear of clutter, with no patient or personal care items in the splash zone or three feet from the sink.</li> </ul>
Ensure appropriate PPE Use	<input type="checkbox"/>	<b>Increase frequency of routine staff compliance audits of donning and doffing PPE.</b> See audit tracking tool in <b>Appendix A</b> . <u>Best practice</u> : use audit outcomes to inform staff training needs.
See <b>Appendix A</b> for resources.	<input type="checkbox"/>	<b>Ensure PPE supplies (gown, gloves, masks, eye protection) are well stocked.</b> <ul style="list-style-type: none"> <li>• Each room with transmission-based precautions should be well stocked with PPE.</li> <li>• Include a garbage container right outside the patient door to allow staff to doff PPE before leaving the room.</li> </ul>
	<input type="checkbox"/>	<b>Be sure <a href="#">Enhanced-Barrier Precautions</a> are initiated and consistent for each patient in your facility if indicated.</b> <a href="#">Indication for Enhanced-Barrier Precautions</a> include patients known to be infected or colonized with an <a href="#">MDRO</a> or who have wounds, or indwelling devices, even if not colonized or infected with an MDRO.

**Communicable Disease Epidemiology  
and Immunization Section**

401 5th Avenue, Suite 1250  
Seattle, WA 98104

**206-296-4774** Fax 206-296-4803

TTY Relay: 711

www.kingcounty.gov/health

Last Updated 7/16/2025

<p>Initiate Your communication plan</p> <p>See <b>Appendix B</b> for resources.</p>	<input type="checkbox"/>	<b>Notify internal partners and key stakeholders</b> of the patient with <i>C. auris</i> .
	<input type="checkbox"/>	<p><b>Initiate your discharge plan.</b> When discharging a patient with <i>C. auris</i>, be sure to:</p> <ul style="list-style-type: none"> <li>• Inform the receiving facility of the diagnosis and clearly communicate that contact precautions are required. If transmission is identified in your facility, Public Health recommends notifying receiving facilities for <u>all</u> discharges. Public Health will offer further guidance on facility notification at that time.</li> <li>• Notify the transport company of precautions required during patient transport. Implement use of CDC's <a href="#">inter-facility transfer form</a>, or other facility transfer forms, to standardize your approach to facility transfer notification and documentation. See <b>Appendix C</b> for additional discharge resources.</li> </ul>
	<input type="checkbox"/>	<b>Report suspected or confirmed <i>C. auris</i> cases to Public Health – Seattle &amp; King County within 24 hours at 206-296-4774.</b>
<p>Prepare for additional screening</p> <p>See <b>Appendix C</b> for resources</p>	<input type="checkbox"/>	<b>Public Health may recommend screening activities to assess for transmission.</b> Public Health will work closely with your facility to assess risks of transmission and make recommendations.
	<input type="checkbox"/>	<b>Educate staff on <i>C. auris</i> specimen <a href="#">collection, handling, storage, and transport</a>.</b>
	<input type="checkbox"/>	<b>Provide education to patients <a href="#">about <i>C. auris</i></a> and communicate your facilities screening plan.</b> Consent or assent can be used.
	<input type="checkbox"/>	<b>Notify your facility lab of the increase in screening activity.</b> <i>C. auris</i> confirmation testing is conducted at the Washington State Antimicrobial Resistance Lab; however, facility labs may support electronic ordering submission, specimen packaging and shipping.
	<input type="checkbox"/>	<b>If additional patients with <i>C. auris</i> are identified during screening activities, ensure contact precautions are initiated immediately, and report to Public Health. Initiate contact tracing to identify high-risk contacts (including roommates).</b> Consider placing high-risk contacts on contact precautions and initiate <i>C. auris</i> screening in consultation with Public Health.

## Appendices

Appendix A: Infection Prevention and Training Resources	
Topic	Resources and Tools
What is <i>Candida auris</i>	<ul style="list-style-type: none"> <li>• <a href="#">About C. auris (for patients) (CDC)</a></li> <li>• <a href="#">Washington State DOH Recorded C. auris Webinar</a></li> <li>• <a href="#">Preventing the Spread of C auris (for patients/the public) (CDC)</a></li> </ul>
Hand hygiene	<ul style="list-style-type: none"> <li>• <a href="#">Hand Hygiene in Healthcare Settings (CDC)</a></li> <li>• <a href="#">Hand Hygiene Basics PowerPoint (WADOH)</a></li> <li>• <a href="#">Clean Hands in Healthcare Training and Video (CDC)</a></li> <li>• <a href="#">5 moments of Hand Hygiene (WHO)</a></li> </ul>
Summary of infection control measures	<ul style="list-style-type: none"> <li>• <a href="#">Infection Prevention Guidance (CDC)</a></li> </ul>
PPE use	<ul style="list-style-type: none"> <li>• <a href="#">Sequence for Putting on and Removing PPE (CDC)</a> <ul style="list-style-type: none"> <li>○ Specific to gown, mask/respirator, goggles/face shield, and gloves. Does not apply for all patient care scenarios.</li> </ul> </li> <li>• <a href="#">PPE Training PowerPoint (CDC)</a></li> </ul>
Transmission precautions	<ul style="list-style-type: none"> <li>• <a href="#">Isolation Guidelines (CDC)</a></li> <li>• <a href="#">Transmission-Based Precautions (Isolation) Suite of Quick Observation Infection Prevention Tools (CDC)</a></li> <li>• <a href="#">Contact Precaution Sign (WHSA)</a></li> <li>• <a href="#">Contact Precautions Sign (CDC)</a></li> <li>• <a href="#">Enhanced-Barrier Precaution Sign (CDC)</a></li> <li>• <a href="#">Enhanced-Barrier Precautions F&amp;Q (CDC)</a></li> </ul>
Environmental cleaning and disinfection	<ul style="list-style-type: none"> <li>• <a href="#">EVS Infection Prevention – Basic Principles for EVS Staff (APIC)</a> <ul style="list-style-type: none"> <li>○ <a href="#">Narrated version</a></li> </ul> </li> <li>• <a href="#">EVS Infection Prevention – Chemical Safety and Use PowerPoint (APIC)</a></li> <li>• <a href="#">Unit-Cleaning-Checklist.docx (APIC)</a></li> <li>• <a href="#">EPA List P: Disinfectants against C. auris</a></li> <li>• <a href="#">EPA List K: Disinfectants against C. Diff</a></li> <li>• <a href="#">Unit Cleaning Template (SPICE)</a></li> </ul>
Staff audit tools	<ul style="list-style-type: none"> <li>• <a href="#">Hand Hygiene Staff Audit Tool (CDC)</a></li> <li>• <a href="#">Hand Hygiene Supply Audit Tool (CDC)</a></li> <li>• <a href="#">PPE Staff Audit Tool (CDC)</a></li> <li>• <a href="#">Transmission-based Precaution Set-up Audit (CDC)</a></li> <li>• <a href="#">Environmental Cleaning and Disinfection Staff Audit Tool (CDC)</a></li> <li>• <a href="#">Healthcare Laundry Audit Tool (CDC)</a></li> <li>• <a href="#">Wound Care Audit Tool (CDC)</a></li> <li>• <a href="#">Point-of-Care Audit Tool (CDC)</a></li> <li>• <a href="#">Injection Safety Audit Tool (CDC)</a></li> <li>• <a href="#">High-level Disinfection and Sterilization Audit Tool (CDC)</a></li> <li>• <a href="#">Other Observation Tools for Infection Prevention (CDC)</a></li> </ul>



**Communicable Disease Epidemiology and Immunization Section**

401 5th Avenue, Suite 1250  
Seattle, WA 98104

**206-296-4774** Fax 206-296-4803

TTY Relay: 711

[www.kingcounty.gov/health](http://www.kingcounty.gov/health)

Last Updated 7/16/2025

Patient placement resources	<ul style="list-style-type: none"> <li>• <a href="#">Infection Control Guidance   Candida auris   (CDC)</a></li> </ul>
Resources for facility leadership and infection prevention	<ul style="list-style-type: none"> <li>• <a href="#">July 2024 Health Alert (WADOH)</a></li> <li>• <a href="#">Implementation of PPE use in Nursing Homes to prevent MDRO Transmission (CDC)</a></li> <li>• <a href="#">MDRO Facility Outbreak Response Worksheet (WADOH)</a></li> <li>• <a href="#">Competency-based Training, Audits and Feedback Overview (CDC)</a></li> <li>• IPC Program Development template: <a href="#">LTC-IC-program-policy-sample-5_20.doc (live.com)</a></li> <li>• <a href="#">What to expect during an ICAR (WADOH)</a></li> <li>• </li> <li>• <a href="#">MDRO Toolkit (WADOH)</a></li> <li>• <a href="#">Considerations for Use of Enhanced Barrier Precautions (CDC)</a></li> </ul>

#### Appendix B: Communication Resources

Topic	Resource
CDC's Inter-Facility Transfer Form – Sample	<ul style="list-style-type: none"> <li>• <a href="#">Inter-Facility Infection Control Transfer Form for States Establishing HAI Prevention Collaboratives (CDC)</a></li> </ul>
Patient Colonization Factsheet	<ul style="list-style-type: none"> <li>• <a href="#">Candida auris Colonization - Information for Patients (CDC)</a></li> </ul>
Family and Patient <i>C. auris</i> Factsheet	<ul style="list-style-type: none"> <li>• <a href="#">About Candida Auris (CDC)</a></li> </ul>

#### Appendix C: Candida Species Identification and Screening Resources

Topic	Resource
Indicators to send specimen to ARLN for <i>Candida</i> Speciation	<ul style="list-style-type: none"> <li>• <a href="#">Commonly Misidentified Candida Species (CDC)</a></li> </ul>
Instructions for sending specimens to Washington State ARLN Lab for speciation and susceptibility	<ul style="list-style-type: none"> <li>• <a href="#">AR Lab Network C. aur screening instructions – sample collection and shipment</a></li> </ul>
Screening: specimen collection Procedure	<ul style="list-style-type: none"> <li>• <a href="#">Procedure for collection of patient swabs for Candida auris (CDC)</a></li> <li>• <a href="#">Collection with Pictures (MLDOH)</a></li> </ul>
Laboratory: <i>C. auris</i> Factsheet	<ul style="list-style-type: none"> <li>• <a href="#">Candida auris: A drug-resistant fungus that spreads in healthcare facilities - A CDC message to laboratory staff (CDC)</a></li> </ul>
CDC's antifungal susceptibility testing and interpretation guidance	<ul style="list-style-type: none"> <li>• <a href="#">Antifungal Susceptibility Testing and Interpretation   Candida auris   Fungal Diseases   (CDC)</a></li> </ul>
Family and patient <i>C. auris</i> frequently asked questions	<ul style="list-style-type: none"> <li>• <a href="#">Candida auris FAQ (DOH)</a></li> </ul>