



Managing Residents with Targeted Multidrug-Resistant Organisms (MDROs) in Licensed Family Homes

Guidance for Facility Owners and Staff

This guide provides general infection prevention information for licensed family homes. Family homes may use this guidance to create or update policies specific to their facility based on their individual risk assessment and following local public health guidance and nationally recognized guidelines and standards.

The resources and information in this document are not regulatory in nature except when required by a regulatory agency such as Washington State Department of Labor & Industries (L&I), Washington State Department of Social and Health Services (DSHS), DOH-Health Systems Quality Assurance (HSQA), and Centers for Medicaid and Medicare Services (CMS). When creating policy and procedures, healthcare settings should ensure they meet regulatory requirements.

Background

Targeted multidrug-resistant organisms such as *Candida auris* (*C. auris*) and carbapenemase-producing organisms (CPO) are germs that are very resistant to the medicines used to treat them. These germs can cause serious infections, especially in people with health problems, such as open wounds or medical tubes (like a catheter, feeding tube, or breathing tube). *C. auris* and CPOs can spread through close contact between residents and on caregivers' hands and clothes. They can also transfer between residents on surfaces and equipment, like bedside tables and blood pressure cuffs, if these shared items have not been disinfected.

Some people with these germs get sick (infected) and have symptoms, while others carry the germs without feeling sick (colonized). Both infected and colonized people can spread the germs to others.

For more detailed information about these germs, see:

- [Candida auris FAQ](#)
- [Candida Auris Fact Sheet \(PDF\)](#)
- [Carbapenem-Resistant Acinetobacter baumannii \(CRAB\) Fact Sheet \(PDF\)](#)
- [Carbapenem Resistant Enterobacterales \(CRE\) Fact Sheet \(PDF\)](#)
- [Carbapenem-Resistant Pseudomonas aeruginosa \(CRPA\) \(PDF\)](#)

Public health encourages licensed family home operators to take these steps before admitting a new resident with a targeted MDRO:

- Contact your [local health jurisdiction](#) (LHJ) for guidance on infection control practices to keep residents safe.
 - If needed, ask your LHJ for infection prevention training resources.
- Invite your LHJ to come to your home to offer suggestions and advice about best practices to control infections. These assessments (sometimes called Infection Control Assessment and Response or "ICARs") are non-regulatory and the purpose is to help you keep your residents safe.
- Make sure everyone who helps with the care of residents (such as staff, volunteers, therapists, and contractors) gets infection control training as soon as possible. They should learn how to prevent the spread of infections using [Standard Precautions](#) practices, including when and how to use protective equipment (PPE), hand washing/sanitizing practices, and environmental cleaning.

Public health encourages licensed family home operators to follow these steps when caring for a resident with a targeted MDRO:

- Give the resident their own bedroom and bathroom, if possible.
 - If the resident cannot have their own bedroom and bathroom, it is best that they share with someone who can take care of themselves and does not have medical tubes (like a catheter, feeding tube, or breathing tube), open wounds, or a weak immune system. This is because they are less likely to get sick from the germs.
- Use basic safety steps ([Standard Precautions](#)) if the resident can do most things on their own, has no medical tubes (like catheters), open wounds, and does not have any uncontrolled secretions.
- Wear a gown and gloves during high contact care. This includes:
 - Helping with dressing, bathing, or showering
 - Helping move or reposition the resident when close body contact is needed
 - Helping with hygiene, like shaving or brushing teeth
 - Changing briefs or helping the resident use the toilet
 - Using or caring for medical devices like catheters, feeding tubes, or breathing tubes
 - Treating wounds
- Check that the resident has clean hands, clothes, and equipment, wounds are covered, and drainage is contained before they leave their room.
- Clean and disinfect all shared spaces used by the resident at least once a day. When cleaning these areas, staff should wear a gown and gloves to protect their clothing from splashes or sprays.
- Use furniture with wipeable, waterproof material like vinyl. If furniture is not waterproof, cover fabric furniture with washable sheets and change them daily.

- Clean and disinfect all hard surfaces the resident touches, like medical equipment, bathroom fixtures, and shared furniture. Be sure to allow the disinfectant to stay wet for the recommended time.
 - Any healthcare-grade disinfectant is effective against drug-resistant bacteria like CPOs.
 - For *C. auris*, use a product from the following list of effective disinfectants:
 - [EPA's Registered Antimicrobial Products Effective Against *Candida auris* \[List P\]](#)
 - If you cannot find a product from EPA's List P, use a product from EPA's List K: [EPA's Registered Antimicrobial Products Effective Against *Clostridium difficile* Spores \[List K\]](#) which are also effective against *C. auris*.
 - Ask your LHJ for advice if you are unsure what cleaning or disinfecting products to use.
- Wear a gown and gloves when handling used bed linens or clothes. Wash linens and clothing with detergent in hot water and dry on the hottest setting.
- Tell all healthcare providers and caregivers outside the home (like doctors, hospitals, emergency departments, dialysis staff, or physical therapists) that the resident has *C. auris* or a CPO. This form can be helpful to share this information: [standardized infection communication form](#).
- When other residents in the home are transferred to healthcare settings outside of the home, such as a hospital or another long-term care setting, let that setting know the resident being transferred may have been exposed to *C. auris* or CPO.
 - The facility admitting the resident may opt to screen them for colonization.
 - For any questions about *C. auris* or CPO screening, contact the [local public health department](#).
- Public health workers may recommend screening other residents in the home to see if the germ has spread. In general, public health does not recommend screening caregivers.
 - Your LHJ will provide more information and assistance if screening is recommended.

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