

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

Home and Community Living Administration P.O. Box 45600 • Olympia, Washington 98504

October 20, 2025

HCLA: NH #2025-054

TIMELY, IMPARTIAL, & ACCURATE ADMISSION DECISION MAKING – MULTIDRUG-RESISTANT ORGANISM (MDRO) CANDIDA AURIS (C. AURIS)

Dear Nursing Facility/Home Administrator:

Timely admission decisions, informed by comprehensive evaluation of resident care and acuity needs against available facility resources, play an important role in ensuring that individuals receive care in the most appropriate setting.

Facilities must ensure that admission decisions comply with requirements at <u>WAC 388-97-0040(6)</u> which prohibits discrimination and provides the following regulatory guidance to govern the admission of potential residents. Facilities must:

- Maintain one list of individuals seeking admission to the facility that is ordered by the date of request for admission.
- Admission must be offered to individuals in the order they appear on the list, as long as
 the facility can meet the needs of the individual with available staff or through the
 provision of reasonable accommodation required by state or federal laws.

Federal regulation <u>42 CFR 483.71</u> requires that facilities complete and maintain a comprehensive facility-wide assessment to evaluate the resources necessary to care for its residents competently during both day-to-day operations and emergencies.

Facilities demonstrate impartial admission decision making by utilizing the updated facility-wide assessment to objectively determine whether the care and acuity needs of each potential resident can be met with available staffing or through reasonable accommodation.

<u>Please note</u>: Potential residents who have been exposed to, or diagnosed with, a multidrug resistant organism (MDRO) like Candida auris (C. auris) can be safely admitted when facilities ensure accurate, consistent implementation of enhanced barrier precautions (EBP) and other recommended infection prevention and control (IPC) procedures. These measures help prevent the spread of C. auris and other MDROs. Nursing homes that use EBP for residents with wounds, indwelling devices, and other MDROs should be able to use EBP for residents with C. auris.

Facilities are encouraged to work with their local health jurisdiction and the Department of Health (DOH) Healthcare-Associated Infections (HAI) Program to assess IPC readiness and to obtain guidance on managing residents with MDROs like C. auris.

Thank you for your continued commitment to residents' health and safety. If you have any questions or need assistance, please contact the RCS IPC Specialist Jamie Ford at iamie.ford1@dshs.wa.gov.

ALTSA Provider Letter: TIMELY, IMPARTIAL, & ACCURATE ASSESSMENT & ADMISSION DECISION MAKING – MULTIDRUG-RESISTANT ORGANISM (MDRO) CANDIDA AURIS (C. AURIS)

October 20, 2025

Page 2

Sincerely,

Comy albert

Amy Abbott, Director Residential Care Services

DSHS: "Partnering with People"

Regulatory Guidance:

- WAC 388-97-0040 Discrimination prohibited,
- 42 CFR 483.71 Facility Assessment,
- NH #2024-039 Enhanced facility-wide assessment,
- 42 CFR 483.80 Infection control,
- WAC 388-97-1320 Infection control,
- QSO-24-08-NH Enhanced Barrier Precautions in nursing homes.

Resources:

- CDC Enhanced Barrier Precautions,
- Frequently Asked Questions about EBP in Nursing Homes,
- DOH HAI Program
- Local Health Jurisdiction Contacts,
- Residential Care Services Infection Prevention and Control (IPC) Assessment Forms and Resources,
- Implementation of Personal Protective Equipment (PPE) Use in Nursing Homes to Prevent Spread of Multidrug-resistant Organisms (MDROs) | LTCFs | CDC,
- CMS Mandates Use of Enhanced Barrier Precautions (EBP) | CMS Compliance Group.
- 420-536-Multi-DrugResistantOrganismGuideJobAid.pdf
- 420-593-EnhancedBarrierPrecautionsSkilledNursingFacilities.pdf