

**Ministry of Health**

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**Ministère de la Santé**

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Date: June 8, 2026

**MEMORANDUM**

**TO:** Health System Partners

**FROM:** Dr. Kate Bingham (Associate Chief Medical Officer of Health)

**RE:** Surveillance of *Candida auris* Colonization

Dear Colleagues,

I am writing to inform all health system partners that the Ministry of Health (“ministry”) is enhancing provincial surveillance for *Candida auris* (*C. auris*). From July 1, 2026 to December 31, 2026, public health units will be required to report all *C. auris* colonization cases to the ministry and Public Health Ontario (PHO).

While *C. auris* infection is currently designated as a disease of public health significance under the *Health Protection and Promotion Act*, expanding surveillance to include *C. auris* colonization will support a more comprehensive understanding of the burden of *C. auris* in Ontario and help strengthen protection of the healthcare system. Preventing the emergence of multidrug resistant organisms within health care facilities requires an integrated approach to surveillance and infection prevention and control among health system partners. As key partners in supporting comprehensive surveillance, **I am asking health system partners to voluntarily report newly identified *C. auris* colonization cases to their local public health unit.** Such reporting, including the disclosure of personal health information, would be authorized under section 39(2)(a) of the *Personal Health Information Protection Act* as it is made for a purpose of the *Health Protection and Promotion Act*.

Additional key considerations for health system partners are outlined below:

## Hospitals

- In addition to voluntary reporting of *C. auris* colonization cases, hospitals may consider implementing a *C. auris* screening program, where feasible, to support early identification and contribute to a more comprehensive understanding of *C. auris* in Ontario.
- For best practices related to *C. auris* screening and infection prevention and control (IPAC) precautions, please refer to the [Provincial Infectious Diseases Advisory Committee's \(PIDAC\) Interim Guide for Infection Prevention and Control of Candida auris](#), and [Public Health Ontario's C. auris resources](#).

## Health Care Providers

- Implement appropriate IPAC practices when providing care for patients colonized with *C. auris*.
- For best practices related to IPAC precautions, please refer to the [Provincial Infectious Diseases Advisory Committee's \(PIDAC\) Interim Guide for Infection Prevention and Control of Candida auris](#), and [Public Health Ontario's C. auris resources](#).

## Laboratories

- As part of provincial and national surveillance of emerging infectious diseases, all laboratories that have identified, or are querying, *C. auris* in clinical specimens or environmental samples linked to patient cases (colonization or infection) are encouraged to submit those isolates to PHO.

For any questions related to disease reporting, please contact [your local Public Health Unit](#).

Thank you for your continued collaboration and your ongoing contributions to the health of Ontarians.

Sincerely,



Dr. Kate Bingham, M.D., M. Sc., CCFP-EM, FRCPC  
Associate Chief Medical Officer of Health, Ontario

C: Dr. Kieran Michael Moore, Chief Medical Officer of Health and Assistant Deputy Minister, Public Health  
Liz Walker, Executive Lead, Office of the Chief Medical Officer of Health, Public Health  
Jodi Melnychuk, Director, Health Protection, Policy and Partnerships Branch  
Michael Sherar, President and Chief Executive Office, Public Health Ontario  
Dr. Sarah Wilson, Deputy Chief, Medical and Systems Support, Communicable Disease Control, Public Health Ontario  
Catherine Wang, Associate Deputy Minister, Clinical Care and Delivery  
Matthew Anderson, President and Chief Executive Officer, Ontario Health