States Targeting Reduction in Infections via Engagement



Question 10. Do you currently place patients colonized or infected with MRSA into Contact Precautions?

You indicated that your hospital does not use Contact Precautions, or does not effectively use Contact Precautions for patients colonized or infected with MRSA. A key aspect of preventing MRSA bacteremia is preventing MRSA transmission. MRSA from colonized and infected patients can be spread by both direct and indirect contact. Current guidelines from the Society for Healthcare Epidemiology of America and the Infectious Diseases Society of America recommend that both patients with active MRSA infections and those colonized with MRSA should be placed into Contact Precautions.

A. Contact Precaution Essentials for Patients with MRSA

- Implement a process for early detection of MRSA to promptly place patients into Contact Precautions. Strict glove use should be promoted and gloves should be changed immediately if soiled and when leaving the patient room.
- Emphasize that glove use is not a replacement for hand hygiene. Hand hygiene should be performed prior to donning (putting on) gloves and after doffing (removing) gloves.
- When possible, patients colonized or infected with MRSA should be placed in private rooms to reduce the spread of MRSA. If absolutely necessary, they may be cohorted or placed in shared rooms with other patients with confirmed MRSA.
- Hospitals should have routine, competency-based training for staff covering Contact
 Precautions procedures and technique. Regular audits should be performed to ensure staff
 are correctly choosing, donning (putting on) and doffing (removing) personal protective
 equipment.
- Investigate whether roles and responsibilities for cleaning and disinfection of equipment are clear and in place. Hospitals should have a process for monitoring the quality and effectiveness of cleaning and disinfection of the patient care environment.

B. Strategies for Overcoming Barriers to the Use of Contact Precautions

- Promote a culture of safety by:
 - o Empowering staff to remind their colleagues about Contact Precaution use
 - Using a hospital- or unit-wide communication strategy to provide feedback
 - Creating a mutual understanding around how to give and receive feedback
 - Providing staff with the tools to help them speak up when Contact Precaution procedures are not being followed: The TeamSTEPPS Module 3 Communication and Module 6 Mutual Support can assist you in devising a strategy that will work for your hospital.
- Conduct regular audits to monitor and assess staff compliance with Contact Precautions.
 When conducted successfully, using a frequent and recurring approach, audits provide valuable information that can identify opportunities for improvement and track progress

- over time. And remember, like feedback, audits should be seen as and used as an opportunity for improvement, not for punishment.
- Consider universal glove use for all patients in high-risk units to overcome challenges with staff adherence to Contact Precaution procedures.
- Hold team meetings or huddles to engage frontline staff on what they believe are the
 barriers to consistently using Contact Precaution with patients infected and colonized with
 MRSA. By engaging staff and gathering their input and feedback you will help create staff
 ownership of the policy, which strengthens behavior change and leads to sustainability.
- Nominate champions across various units to help engage staff on a daily basis with Contact Precaution use for patients infected and colonized with MRSA.

Tools, Resources and Further Reading

- STRIVE Content:
 - o Personal Protective Equipment Use (PPE 101, PPE 102, PPE 103, PPE 104)
 - MRSA Tier 1 Course (<u>MRSA 101</u>, <u>MRSA 103</u>)
- Sequence for Putting On and Removing Personal Protective Equipment
- Donning and Doffing PPE for Contact Precautions Skills Competency Checklist
- Use of Personal Protective Equipment for Contact Precautions Audit Tool
- Calfee DP, Salgado CD, Milstone AM, et al. Strategies to prevent methicillin-resistant Staphylococcus aureus transmission and infection in acute care hospitals: 2014 Update. Infect Control Hosp Epidemiol. 2014; 35:772-96.
- Siegel JD, Rhinehart E, Jackson M, Chiarello L, HICPAC. Management of multidrug-resistant organisms in healthcare settings, 2006. Available at https://www.cdc.gov/hicpac/pdf/MDRO/MDROGuideline2006.pdf

