

UNIVERSAL MRSA SURVEILLANCE. THE LOUISVILLE VA HOSPITAL EXPERIENCE

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DISCLOSURES

- I have no actual or potential conflict of interest in relation to this presentation.
- I will not be discussing “off label” uses of medications in this presentation.

OBJECTIVES

- The attendee will be able to describe the bundle for MRSA prevention which has been implemented at the Louisville VA hospital.
- The attendee will understand the importance of surveillance in preventing MRSA infections.

MRSA

- MRSA (Methicillin Resistant Staphylococcus Aureus) is a bacteria that is resistant to multiple antibiotics, causes serious diseases and is often difficult to treat.
- It can be transmitted by the hands of patients, health care workers or by contact with inanimate objects contaminated with MRSA.

MRSA

- Increased lengths of stay, morbidity and mortality, and costs have been associated with multidrug-resistant organisms, including MRSA.

MRSA

- MRSA colonization: Presence of MRSA on tissue without the presence of symptoms of clinical manifestations of illness or infection. A carrier is colonized with MRSA.
- MRSA infection: Invasion and multiplication of MRSA in tissue with the manifestation of clinical symptoms of infections such as increased white blood cell counts, fever, lesions, furuncles, drainage from a break in skin continuity and erythema.

MRSA Bundle

- In 2001, the Veterans Affairs (VA) Pittsburgh Healthcare System began working with the Pittsburgh Regional Healthcare Initiative and the Centers for Disease Control and Prevention (CDC) to eliminate health care–associated MRSA infections with the use of a “MRSA bundle.”
- “MRSA bundle” was implemented in acute care VA hospitals nationwide in 2007.

MRSA Bundle

The MRSA bundle comprised:

- Active surveillance/screening.
- Contact precautions.
- Hand hygiene.
- Culture change

MRSA Bundle

Universal nasal surveillance for MRSA colonization detection.

- Active surveillance perform to identify carriers in an attempt to prevent person-to-person transmission.
- Performed on admissions, discharges and transfers from different units.
- After education and non-signature consent, patients will have nares swab performed.



MRSA Bundle

Contact precautions

- If there is evidence that the patient is colonized or infected with MRSA, they will be placed in contact precautions

MRSA Bundle

Hand hygiene.

- Single most important measure to prevent transmission of infection.
- Healthcare workers expected to comply with Hand hygiene policies.
- Patients and visitors should be engaged in hand hygiene education and encouraged to practice.

MRSA Bundle

Culture change

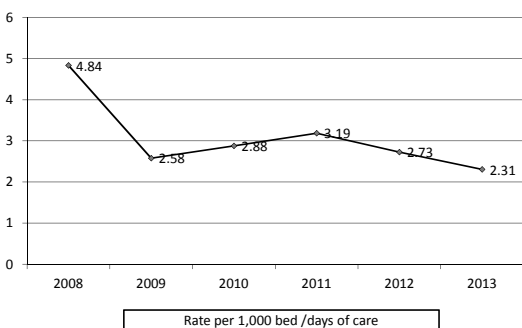
- An institutional culture change whereby infection control became the responsibility of everyone who had contact with patients.
- Staff actively engaged in and work with facility leadership, MRSA prevention coordinator and other staff to implement changes that prevent MRSA transmission.

MRSA Bundle

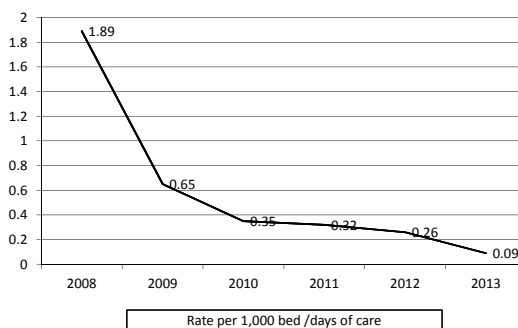
MRSA Prevention Coordinator duties:

- Overseeing implementation and compliance with the components of the MRSA Prevention Initiative.
- Collaborating with Leadership on local implementation issues.
- Collecting and reporting data related to the MRSA Prevention Initiative.
- Developing and evaluating policies and procedures related to the MRSA Prevention Initiative.
- Engaging and educating front-line health care workers about MRSA and the MRSA Prevention Initiative.
- Supporting front-line workers in the education of patients, families or visitors.

MRSA Colonization Rates at the Louisville, KY VA Medical Center

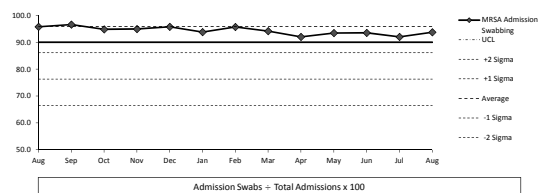


MRSA Infection Rates at the Louisville, KY VA Medical Center



MRSA Monthly Reports

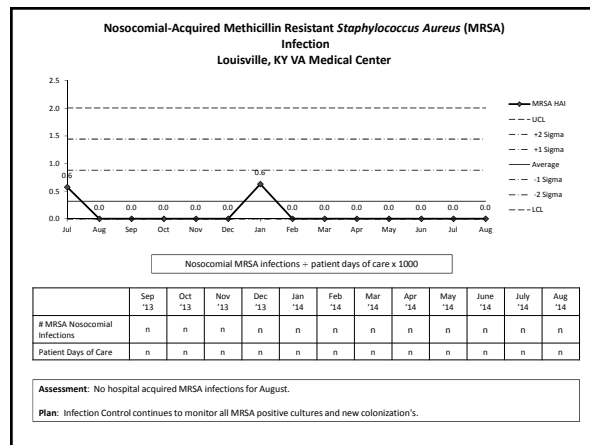
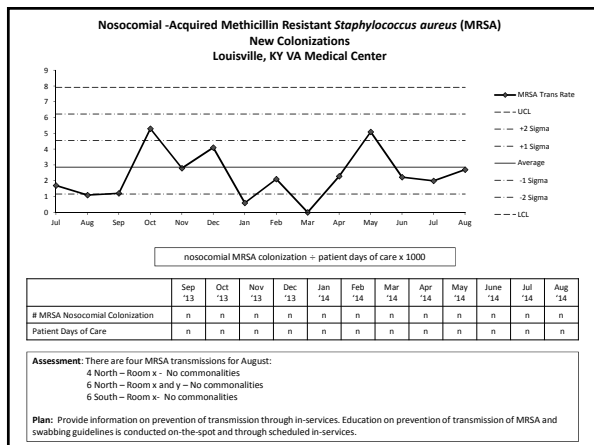
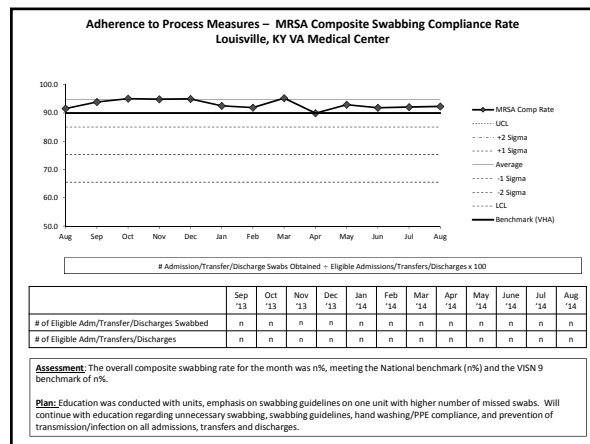
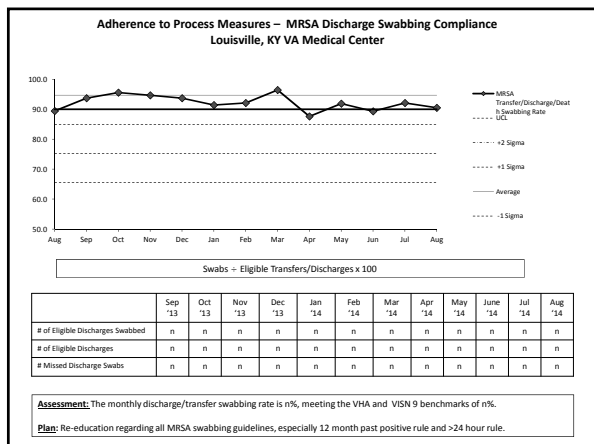
Adherence to Process Measures – MRSA Admission Swabbing Compliance
Louisville, KY VA Medical Center



	Sep '13	Oct '13	Nov '13	Dec '13	Jan '14	Feb '14	Mar '14	Apr '14	May '14	June '14	Jul '14	Aug '14
# of Eligible Adm's Swabbed	n	n	n	n	n	n	n	n	n	n	n	n
# of Eligible Admissions	n	n	n	n	n	n	n	n	n	n	n	n

Assessment: Admission swabbing rate for the month was n%, above the VHA and the VSN 9 benchmark of n%.

Plan: Re-education regarding swabbing guidelines, hand washing/PPE compliance, and prevention of transmission/infection is on-going.



CONCLUSIONS

The MRSA bundle decreased MRSA colonization and MRSA infection rates at the Louisville, KY VA Medical Center between 2008 and 2013.

The MRSA bundle is a continuing process.