

Westminster Health Forum Keynote Seminar:

Healthcare Associated Infections: from
hospitals to beyond an acute care setting and
the future of regulation and assessment

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Some key lessons from the Improvement Foundation Workshops

- Care Homes are people's homes and not institutions, as they are so often referred to
- Residents need the same access to clean, safe care as patients in hospitals do
- Staff need to be empowered to make changes and drive improvement





Clean, safe care

Four key things:

- A clean environment
- Attention to hand hygiene
- Antibiotic prescribing

.... and





Information and Communication

- Ensures resident is well informed about what care they are receiving and why
- Increases confidence that they will be receiving planned, safe quality care

Good hand hygiene



RIGHT PLACE: RIGHT TIME
HAND HYGIENE



Soap & water



Gel

| | | | |
|-------------------|--|---|---|
| Toilet | | ✓ | ✗ |
| Eating | | ✓ | ✗ |
| Visiting patients | | ✓ | ✓ |
| Medical visits | | ✓ | ✓ |
| Coughs & sneezes | | ✓ | ✗ |

Good hand hygiene



- Good hand hygiene should be a process of excellence that is the cornerstone of good infection prevention and control
- “We are what we repeatedly do. Excellence, then, is not an act but a habit.” - Aristotle

PICTORIAL CARE PATHWAY FOR PEOPLE WITH MRSA

IDENTIFYING MRSA



MRSA has been identified from swabs taken from your nose or skin.



Source Isolation/Blood Precautions
 Visitors must report to the Nurses' Station **BEFORE** entering a patient's room

You may be cared for in a single room.

Further swabs will be taken during your stay to establish if the MRSA has gone.



TREATING



If you are a skin carrier you will be advised to bathe or shower for 5 days using an antiseptic wash. Hair should be washed twice in this period with the same solution.

To treat MRSA in your nose a nasal ointment will be applied 3 times a day for 5 days.



You may be given antibiotics either orally or through a drip.

REDUCING THE SPREAD OF GERMS



Clean hands can reduce the spread of germs. Use the hand rub solution at your bedside. Rub into hands as you would when normal hand washing. There is no need to rinse off with water.

The doctors and nurses will be available to answer questions. A leaflet about MRSA is also available.



VISITORS



Visitors should wash their hands or use the available hand rub on entering your room and before leaving.



Please ask visitors not to sit on your bed.



Keep your belongings to a minimum. This makes general cleaning easier.

DISCHARGE HOME

You may be asked to continue with treatment at home.



This Pathway has been developed to give you a guideline of what to expect during your hospital stay. Variations may occur based on your individual situation.

This pictorial pathway supports the MRSA ICP
 ULHT Infection Control Team April 2005



You can't measure without recording

- In care homes
- In the community
- On the hospital ward
- Communication and information is key in working to reduce infections and save lives



In conclusion.....

- Policy makers and regulators should make good use of Health Protection Agency data to identify localised problems
- Intelligence from patient groups and staff in care homes can be gleaned to help assess whether policies are being implemented, and whether they are working

- Thank you for listening, please contact us if you would like to hold an infection awareness event, or a service for those who have been affected by MRSA

